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ROLE PLAYING SKILL AND SOCIOMETRIC PEER STATUS

JANE SRYGLEY MOUTON, ROBERT L. BELL, JR., AND ROBERT R. BLAKE*

The University of Texas

In this experiment the hypothesis tested is that children of high peer status differ from those of low peer status in role playing ability, with the former having greater skill than the latter in enacting assigned roles in standardized role playing situations. Although peer status often has been regarded as directly and positively associated with role taking ability, there has been little previous experimental work on this problem (5, 6, 8, 9, 10). Validation of the hypothesis under systematic conditions would demonstrate that one of the correlates of sociometric position is the ability to portray social roles effectively in "as if" situations.

EXPERIMENTAL DESIGN

The general plan was for three observers to evaluate the behavior of each of twenty-six negro preadolescent subjects who enacted three different role situations opposite the same adult collaborator. Since subjects, of whom 15 were boys and 11 girls, were all the students in the high sixth grade at the Blackshear Elementary School, Austin, Texas, the range of talent is inclusive of a class group and is only subject to whatever restrictions limit participation in school.

THE THREE ROLE PLAYING SITUATIONS

All subjects enacted three different scenes with the adult collaborator, a 21 year old male negro graduate student, who had no previous acquaintanceship with any of the children. For one role playing situation (mischievous student) a table and some chairs were in the room, but in the other two scenes both the subject and the collaborator took standing positions. Each subject entered the room alone. None had the opportunity of seeing any of the others enacting the situation. The subject was told the particular role to be enacted during that session, with each scene introduced by the adult collaborator through a standard statement designed to prompt the subject to begin his enactment of the situation. Throughout the enactment the collaborator made only such remarks as were necessary in order to re-

* "Appreciation is expressed to Dr. Edgar F. Borgatta of the Russell Sage Foundation for suggestions given with respect to the interpretation of the findings of this study."

spond appropriately to the subject's role behavior. Five minutes were allowed for enacting a role. The child then returned to class, and the next child was brought to the role playing room and so on until all 26 children had been in the role playing situation once. The sequence was then repeated for each of the other two roles.

To minimize order effects the experimental design employed provided for the systematic counter-balancing of the three situations as shown in Table 1. For one third of the children the first enactment portrayed an

TABLE 1
ORDER OF ROLE PRESENTATION

Subject	First	Second	Third
	1, 2, 3,	Observers 4, 5, 6	7, 8, 9
1	Sad Friend	Angry Playmate	Mischievous Student
2	Sad Friend	Mischievous Student	Angry Playmate
3	Angry Playmate	Sad Friend	Mischievous Student
4	Angry Playmate	Mischievous Student	Sad Friend
5	Mischievous Student	Sad Friend	Angry Playmate
6	Mischievous Student	Angry Playmate	Sad Friend
.	.	.	.
.	.	.	.
.	.	.	.
26	Sad Friend	Mischievous Student	Angry Playmate

unhappy friend who is sad. For another third of the total group the second scene involved the sadness role, and for the remaining one third the last enactment concerned sadness. The two other role enactments were ordered in the same way so that each role preceded and followed the other roles an equivalent number of times.

Sad Friend. The first role, referred to as A, is that of a young elementary school student who is sad because he (she) has not been invited

to a party given by his (her) best friend. The following instructions introduced role A:

"I would like for you to act out a little scene with me, like in a play or in the movies. Instead of giving you a lot of words to memorize, I want you to make up the words as we go along. Here is the way we will do it: You are to play the role of a person who is very sad because he (she) was not invited to a party given by his (her) best friend. I am an adult friend and I will start the scene by asking you why you are so sad. Then you will start playing your part. You may tell me all about how you feel about your friend for leaving you out. You may play the part in any way that you feel like. Do you understand?"

Angry Playmate. The second role, referred to as B, is that of a student who is extremely angry with a fellow playmate. The following instructions were given:

"I would like for you to act out a little scene with me, like in a play or in the movies. Instead of giving you a lot of words to memorize, I want you to make up the words to the play as we go along. Here is the way we will do it: You are to play the role of a person who is very angry with me. Think of me as a fellow playmate. I want you to come up to me and start arguing about why you are mad at me. You may argue with me about anything you feel like. Please forget that I am older than you and say anything to me that you would to anyone else your own age. I want you to be so *angry* that I will hardly be able to get a word in edgewise. Do you understand?"

If the subject hesitated instead of beginning an argument, the collaborator said:

"Hello, John. I saw Jack the other day and he said that you were very angry with me. Why? I can't remember having ever done anything to you."

Mischievous Student. The third role, role C, is that of a student who is called into the principal's office for being mischievous. The following instructions were used:

"I would like for you to act out a little scene with me, like in a play or in the movies. Instead of giving you a lot of words to memorize, I want you to make up the words to the play as we go along. Here is the way we will do it: You are to play the role of a person who has been sent to the principal's office for 'cutting up' in class. I will play the part of the principal. I will start by asking you what you were doing in class to cause the teacher to send you to the office. You may be sorry for what you did, you may be a smart alec, or you may act in any other way that you want. Do you understand?"

Rating Scales

The behavior elicited in each role playing enactment was evaluated on 10 seven-category rating scales comparable with those employed successfully in an earlier study (1). Each item assessed a significant personal, social, or situational characteristic to be observed in the role playing enactment. Emphasis in the selection of items was placed on evaluating characteristics of the performance as contrasted with assessing personality characteristics as such. The categories on each scale ranged from an extremely positive aspect of the behavior through neutral or moderate categories to an extremely negative aspect of the behavior. Scales with abbreviations are shown in Table 2.

TABLE 2
RATING SCALES USED IN EVALUATING THE ROLE PLAYING ENACTMENTS

Item	Abbreviation Used in Text
1. Rate the subject in terms of the extent to which he showed signs of being frustrated.	Frustration
2. Rate the subject in terms of the extent to which he seemed shy about playing the scene.	Shyness
3. Rate the subject in terms of the difficulty he had in expressing himself.	Difficulty
4. Rate the subject in terms of the clarity with which he expressed himself.	Clarity
5. Rate the subject in terms of the extent to which he showed interest in the task.	Interest
6. Rate the subject in terms of the extent to which he seemed anxious for the scene to end.	Anxiousness
7. Rate the subject in terms of how satisfied he seemed with the way he played the scene.	Satisfaction
8. Rate the subject to the extent to which he seemed hesitant (paused) in making up his mind to speak.	Hesitancy
9. Rate the subject in terms of the extent to which he wanted to give a good performance.	Good Performance
10. Rate the subject in terms of the extent to which he seemed effective in playing the role (in terms of how "real" he seemed in the role).	Effectiveness

Observers

Nine members of a Social Research Class at Huston-Tillotson College acted as observers. Prior to the experiment they were familiarized with

the rating scales to be used but they had had no prior experience with role playing situations and were unacquainted with the children. To insure unbiased ratings they judged in complete independence of one another and were informed neither of the technical problems being investigated nor of the specific contents of the roles being enacted. As shown in Table 1, each observer rated the behavior of the same child in one role only. This arrangement resulted in each child being evaluated in three different roles and by three different observers for each role. Through employing this design, it is possible to eliminate systematically any bias that might arise if the same observer were to evaluate the performance of any child in two or more different roles.

Determination of Peer Status

Peer status was determined before the role playing situations were enacted. Students were told that the sociometric information was confidential and that it would in no way affect grades or class standings. The following positive and negative sociometric items were administered by the class instructor: (1) name the three persons in the class whom you like the most; (2) name the three persons in the class whom you like the least. The "liking" criterion was selected for use on the assumption that the popular child is more adaptable in his peer relations and, therefore, more capable of flexibility in playing roles in a range of interpersonal situations. Two different indices of peer status were employed in conducting the analyses, one involving a simple frequency distribution of number of choices received and the other based on McGuire's formula for determining peer status (7).

RESULTS

Reliability of Scales

Inter-observer product-moment reliability coefficients were computed for each scale, for each role, and for each of the three pairs of observers. Average correlations also were computed by z transformation for the three observer pairs combined for each role as well as for the three roles taken together.

Eight of the ten rating scales yielded significant reliability coefficients for each of the combinations of raters and roles. The three scales with reliability coefficients above .80 are "showed signs of frustration," (1); "difficulty in expression," (3); and "effectiveness in playing the role," (10). Five additional significant scales, all with average coefficients above .60 are "seemed shy in playing the scene," (2); "degree of clarity in expressing

himself," (4); "interest in the task," (5); "anxious for scene to end," (6); and "hesitancy in deciding to speak," (8). Two of the scales, "satisfaction with the scene," (7) and "desire to give a good performance," (9), are not significant at the 1 per cent level, though the latter scale is significant beyond the 5 per cent level of confidence.

Comparable results are obtained when reliability coefficients for each role are considered separately. Only the latter two items (7 and 9) failed to yield significant consistency between observers for each role evaluation. Similar results also are obtained in the comparison of raters. For the eight scales which have significant reliability on a combined rater and combined role basis, 70 of the 72 possible comparisons of ratings between observer pairs are significantly reliable beyond the 1 per cent level.

Conspicuous is the fact that the eight scales that yield a significant degree of reliability for any one role yield significant reliability coefficients on the two other roles as well and that the two which fail to approach significance are unsatisfactory for all three roles. Since no observer rated the same child in more than one role and since the order in which children played the various roles was systematically varied, so that no one role appeared more frequently at the beginning, in the middle or as the final role in the sequence than any other, the findings take on added significance. They indicate that when the sample represents an essentially unrestricted range of talent reliable judgments of role playing performance can be made even by observers with a minimum of psychological training.

Taken with the investigation by Stanton and Litwak (11), in which the reliability of judgments was determined in a different way than used here, both studies agree by demonstrating that role playing behavior is subject to reliable assessment under a range of conditions, with different types of judgments and with judges with different degrees of training. Borgatta and Bale's (3) evaluation of the reliability of role playing behavior also is consistent with the findings reported above.

Intercorrelation of Scales

With the exception of items 7 and 9, intercorrelations between rating scales are sufficiently high to suggest that the different scales did not differentiate between specific characteristics of role playing behavior. Since individuals rated low on one performance characteristic of role playing behavior also were rated low on others, effectiveness in the role playing situation employed is apparently more or less global in nature. The intercorrelations indicate further that scale 10, "effectiveness in playing the

role," is probably as satisfactory as any of the scales as a single basis for assessing overall aspects of role playing behavior. Additional research is needed, however, in order to determine which particular scales are most useful in discriminating specific aspects of performance for designated types of role playing situations and with different types of subjects.

Intercorrelation of Roles

Even though no observer evaluated the performance of any child in two different role situations, the consistency of the same subject's behavior, as judged by different observers, is unusually high. With the exception of items 7 and 9 inter-role correlations all are significant and range from .70 to .97. That is to say, children who were judged to be effective in the enactment of role A, for example, also were seen to be effective in their enactments of roles B and C. The finding that role playing ability is individually consistent throughout the three different role playing situations that were employed suggests that role playing skill may be relatively independent of the specific role requirements of concrete situations, particularly when subjects represent an essentially unrestricted talent range as they did in this study. This finding has important theoretical implications. If borne out in further research it would indicate that role playing effectiveness within a single role constitutes a basis for evaluating general adaptability to the requirements of different role playing situations. Also consistent with this point of view are findings by Borgatta (2) who has reported relatively high consistency in behavior for individuals from role playing to actual situations, with somewhat less consistency to projective situations. Taken together, both sets of results indicate that social behavior with interpersonal components is sufficiently stable and self-consistent that differences among individuals are preserved through changes in roles and from role playing to actual and projective types of situations.

Peer Status and Role Playing Skill

Findings already presented demonstrate that individual differences in role playing performance can reliably be judged and that differences between individuals seem to be general rather than specific to the role playing situation. Therefore, since skill in role playing can be regarded as general and since it distinguishes one individual from another, the significant next step is that of identifying other characteristics of the person which are associated with role playing skill. The analysis which follows tests the hypothesis that sociometric position is a critical factor associated with role playing skill.

Since the sociometric distribution was somewhat skewed, with fewer subjects at the high end of the distribution, the most appropriate test of the hypothesis is through the use of X^2 . The X^2 's shown in Table 3 were computed from 3×3 tables. The sociometric distribution was divided into approximately equal groups of high, middle, and low peer status. Rating scales also were collapsed into three categories to avoid low theoretical frequencies in any of the cells.

Inspection of Table 3 shows a clear, definite and consistent relationship between sociometrically measured peer status, computed by McGuire's formula, and ratings of role playing effectiveness. Children with high sociometric status positions received the largest number of positive scale ratings on their role playing enactments, those of low sociometric status

TABLE 3
RELATIONSHIP BETWEEN PEER STATUS AND ROLE TAKING ABILITY

Item	Role A		Role B		Role C		r	P
	X^2	P	X^2	P	X^2	P		
1. Frustration	42.19	.01	68.99	.01	55.92	.01	— .78	.01
2. Shyness-Assurance	49.20	.01	47.36	.01	33.16	.01	— .70	.01
3. Difficulty	52.80	.01	38.04	.01	56.29	.01	— .71	.01
4. Clarity	30.13	.01	33.97	.01	40.26	.01	— .73	.01
5. Interest	10.09	—	15.83	.01	31.46	.01	.55	.01
6. Anxiousness	58.18	.01	35.09	.01	47.50	.01	— .63	.01
7. Satisfaction	2.53	—	6.45	—	2.53	—	— .34	—
8. Hesitancy	34.19	.01	25.60	.01	54.43	.01	— .73	.01
9. Good Performance	3.36	—	2.26	—	5.66	—	.19	—
10. Effectiveness	46.40	.01	29.29	.01	64.61	.01	.70	.01

positions received the least favorable ratings, while middle status children received ratings of intermediate values. The relationship between peer status and role taking effectiveness is significant for the eight scales with significantly high reliabilities and for the three role situations employed to evaluate it. Furthermore, since the three roles were highly inter-correlated, they were combined into a single role playing score based on the average of the nine judgments in order to obtain a single estimate of role playing skill. The role playing score was then correlated with the McGuire peer status index to determine the strength of association between sociometric position and role playing skill. Correlations by items are —.78 (frustration), —.70 (shyness), —.71 (difficulty), .73 (clarity), .55 (interest), —.63 (anxiousness), —.34 (satisfaction), —.73 (hesitancy), .19

(good performance), and .70 (effectiveness). All of the reliable scales are, therefore, significantly associated with sociometric position with the relationship between the two variables being in the predicted direction. Similar results were obtained when the raw frequency of positive choices received constituted the sociometric variable.

Children of high peer status were judged in the role playing situations as showing less frustration, acting with more assurance, having less difficulty and showing greater clarity in expression than were children of low status. Furthermore they were seen as neither anxious nor hesitant and finally as manifesting interest and as being more effective in enacting the requirements of the role situations. These are types of characteristics which commonly are employed in describing socially effective children. One interpretation based on the summary report by Carter (4) is that peer status appears to covary with a cluster of factors that can be designated as individual prominence and achievement. This cluster includes the idea of noticeability and competence of the individual in social affairs. If peer status is regarded as representative of this cluster of social characteristics, the strong association between peer status and role taking skill in the situations described should not be surprising since observations of the role playing situation were in terms of characteristics commonly related to social competence, *i.e.*, frustration, assurance, clarity of expression, hesitancy, and overall effectiveness. The suggested interpretation of the relatively close association between peer status and role taking ability, therefore, is that the social skills underlying peer status are ones which are accentuated in the enactment of social roles of the kind employed in this study. Additional research to provide a definitive basis to account for the association between sociometric peer status is needed now that the presence of such a fundamental relation has been established.

SUMMARY

The hypothesis tested in the present investigation is that children of high peer status differ from those of low peer status in role playing ability, with the former having greater skill than the latter in enacting assigned roles in standard role playing situations. Nine observers evaluated the behavior of each of 26 negro preadolescent children who enacted three different roles opposite the same adult collaborator. Experimental arrangements were such that no child was observed enacting two different roles by the same observer. The order in which the roles were enacted also was varied so that each role occurred in each position in the sequence equally often.

Ten seven-category rating scales were employed by observers who independently judged the role playing performance. Three-choice limit sociometric responses on the criteria "like most" and "like least" were used as the basis for determining peer status position for each child. McGuire's formula was employed as the index of peer status.

The several analyses reported are internally consistent and lead to four general conclusions. The first is that independent observers achieve substantial agreement with one another in rating the same role playing enactment. The second is that rating scales are highly intercorrelated, indicating that at least for the scales and testing conditions employed, it is difficult to distinguish specific individual differences in the effectiveness with which a role is portrayed. The third conclusion is that role playing behavior is judged consistently, independently of the particular content of the role being enacted. The final conclusion is that the sociometric status position of a child among his peers is significantly associated with ability to enact a role effectively, with high status children receiving significantly more favorable observer ratings of their performance than those that are received by low status children. The interpretation of the association offered is that since the significant components involved in peer status appear to be individual prominence and achievement as described by Carter (4) in such terms as confidence, striving for recognition, bold, forceful, and not timid, the same or similar factors are present in the behavior of those who are able to enact roles effectively. Children who were effective in role playing were described as low in frustration, clear in expression, assured, and unhesitant. Having established a fundamental link between sociometric peer status and role playing skill, further research now is required to determine the causative basis of the association.

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CLIENT REACTIONS TO THERAPIST OPERATING IN CONTROLLED GROUP SITUATIONS*

W. LYNN SMITH AND DONALD D. GLAD

University of North Dakota and University of Colorado

THE PROBLEM

Information about psychotherapy has come primarily from the empirical level. Perhaps the richest source of observation and theory in the development of psychotherapy is that provided by Freud and his colleagues, both protagonist and antagonist. While the contribution of Freud and other investigators is tremendous, their theory and techniques have been founded almost entirely on clinical observations with little interest in systematic research. Considering the nature of the data, ethical restrictions with human subjects, the paucity of therapists and the incessant demands made upon their service, research in this area has lagged, and consequently, relevant knowledge concerning therapeutic techniques has not developed. One factor also to be considered is the rather uninviting complexity of human interaction as a field of inquiry to the investigator. Many interested scientists have by-passed this complex area in favor of problems more readily adaptable to current methodology. The researcher in psychotherapy is concerned with the personality organization of the individual and the process of therapy as designed to improve that organization. As McQuitty (21) comments, however:

Our knowledge of individual personality organization and the concept of improvement in relation to it is limited because of the lack of statistical methods specifically designed to study the interrelationships within the individual. (McQuitty, p. 414.)

Every science, in order to pursue its chosen objective, develops specialized techniques and methodology which will permit relevant observation. By limiting the scope to certain aspects of the problem, other aspects are necessarily neglected. Also, the examination of the data requires a certain amount of isolation, and this process of isolation, or compartmentalization, tends to divorce one part of the data from its relatedness with other parts in such a fashion as to defy reintegration into a more meaningful config-

* Based on the doctoral dissertation of W. Lynn Smith at the University of Denver, 1954. The contribution of the junior author has been primarily consultative and editorial.

uration. Factor analysis, however, is a wholistic method which singles out nodal points or molar aspects from the array of molecules and gives evidence for the proper relation of atomistic-wholistic compatibility. Cattell (9) views the process as:

Factor analysis might therefore almost as well be called factor synthesis, for although it analyzes out the distinct factors at work among the variables, it also groups the variables together in ways which permit one to synthesize a new entity. (Cattell, p. 15.)

In a broad sense, scientific method employs two approaches, experiment and statistical analysis. The objective of experimentation is to define functional dependencies by holding all conditions constant except an independent variable (9). In its extreme form, experimentation is characterized by manipulation and control in order to specify particular relations. Conversely, the statistical procedure may operate with less vigorous interference and control.

To examine operationally the functional interaction of therapist method and subject personality, it is first necessary to provide operational definitions of therapist behavior in such a form that these behaviors may either be applied systematically in an interview situation and the results observed, or that in "live" therapy, functional categories of therapist behavior may be abstracted out in their relation to behavioral reactions.

In the research here, it was considered most efficient to provide a systematic presentation of therapist methods in otherwise comparable circumstances. To anticipate, the variables employed were 1) therapist reference to feelings about the therapist or other people in the group, in contrast with 2) therapist reference to the subject's social behavior toward the therapist or other people in the group. For convenience these will be referred to as 1) *Relationship Feeling*, illustrated by "You're angry at me," and 2) *Relationship Role*, illustrated by "You're criticizing me".

Previous studies (1, 3) have demonstrated that the differential employment of a variety of therapist behaviors provokes characteristic reactions in both patients and clinically normal persons. The statistical methods in these studies were employed mainly to discover whether differences between variables were significantly beyond chance, but were not designed to answer such questions as the number of factors operating in the defined situation, the quality of those factors, their degree of interaction, or the magnitude of their influence. Further, the design of these previous studies examined only the question of significant differences between methods without considering what kinds of people were reacting, the quality of these

people in relation to the variables, nor the functional interactions and influences of therapist variable versus kind of person. In the present research the functional interaction of therapist method and subject's personality is examined by inverse factor analysis.

When a therapist responds to a client in any particular way, he predicts implicitly that his own behavior will in some way affect the behavior of the patient. The activity of the therapist, then, may be an important variable as stimulus to the patient and should provide a basis for understanding therapy process. Data on the relationships among therapist method, patient personality, and behavioral consequences should contribute much toward the understanding of the total therapeutic process. The greater understanding of the underlying variables of different therapeutic techniques would lend much toward their clarification and usefulness. The challenge and urgency of psychotherapy research was dramatically summarized by Shaffer (33) when he said:

The need to improve on psychotherapy is so great that ultimate gain probably would accrue if all psychologists stopped the practice of therapeutic counseling for the next two years and devoted their entire energies to research designed to increase the value of the process. (Shaffer, pp. 461-62.)

The purpose of this study is to investigate the differential changes in the subjects' behavior following specific therapist's references to relationship feeling and relationship role in a controlled group therapy situation.

PROCEDURE

Subjects

Twelve males from the University of North Dakota were selected on a volunteer basis; six were upperclassmen and six were graduates, all of whom were psychology majors. None of the subjects had any previous experience in group or individual psychotherapy. The individuals were divided into two groups of six subjects. The basis for the member's inclusion in a group was determined by whether or not he could meet with the time schedule of the sessions. The first group was composed of four upperclassmen and two graduate students, and the second group of four graduate students and two upperclassmen.

Therapist

Since this study is a controlled investigation of the effects of therapist references, the word "therapist" is used throughout the study in a limited sense. In this study, the "therapist" was not endeavoring to improve per-

sonality adjustment in the subjects. Further, there was no attempt to duplicate an actual psychotherapeutic relationship, which contains many features outside the realm of this study. However, since this investigation involves therapist operations, or what therapists do, the term "therapist" seems to fit best the role of the leader. It might also be stated that the groups did react to the sessions immediately with discussions of their personal problems and continued similarly throughout. The extent to which this study actually resembles or does not resemble a group therapy situation appears to be a moot question.

All sessions were conducted by the same therapist, who had considerable experience in the use of the therapy variables employed in this study. In an earlier study (35), the therapist demonstrated a high degree of reliability in adhering to the preconceived therapy operations. The earlier study investigated systematic variation in the effective role of the therapist. The several judges who rated the therapist's behavior reported high agreement as to his role playing of warm, neutral, and hostile behavior. In the present study, the therapist assumed an affectively neutral role while responding with the referential operations of relationship feeling and relationship role.

Definition of Variables

As proposed by Glad (13), the focus of the therapist's verbal expression can be referred to as behavioral dimension; that is, whatever aspects of the subject's total responsiveness the therapist selects to refer to is one dimension of the subject's expressive behavior; e.g., perception, desires, affect, or activity. Thus, the therapist can focus successively on the dimensions of feelings, ideas, activity, or objects of the subject's behavior. Furthermore, any dimension may be differentiated into several sub-dimensions. For example, in the feeling dimension, the therapist can respond to the verbalized feelings of the subject in terms of his feelings about himself, his desires, his feelings about others; or he may respond to the non-verbalized feelings which are communicated by facial expression, gesture, vocal qualities, or shifted accentuation. A reference to self-focussed feeling could be: "You're angry with yourself". In this study, however, the references to feeling were systematically in terms of a relationship focus; that is, the therapist's verbalizations were about the feelings toward someone other than the subject himself. Compared with the self-focussed reference, already illustrated, the relationship focussed feeling might be phrased by the therapist as follows: "You're angry with me". The *relationship feeling*

reference in this study included any kind of feeling that could be responded to in terms of relationship to either the therapist or to another group member.

The references to relationship role describes the subject's social functioning in the group. The subject, in interacting with the therapist or with another member of the therapy group, behaves in some socially definable manner. As in the feeling dimension, the social activity dimension includes a variety of sub-dimensions. These sub-categories include self-oriented personal activity, striving behavior, environment, oriented behavior toward the present or referred to environment and toward people or events. "You're criticizing John", is one example of this reference type. References to *relationship role* in this study included only the social activity or role in relation to other members of the group or to the therapist. For a more complete exposition of these interviewer operations, see Glad (15).

Thus, the two independent variables employed in this research were therapist references to relationship-feeling and therapist references to relationship-role. The dependent variable was the codings of the subjects' behavior in terms of an interpersonality notational system developed by Glad, et al. (14), which is outlined below.

Order of Presentation

Both groups were presented the variables in what may be called a double counterbalance order. The first group, subjects one through six, were given an FRRF presentation throughout their twenty sessions; while group two, subjects seven through twelve, were given a RFFR presentation throughout (F representing feeling and R representing role). This method utilized all twelve subjects under each variable condition and these subjects served as their own control.

Instructions

The subjects were notified that all sessions were to be held in the same room at regularly scheduled hours and that each group would meet three times per week for twenty meetings. Total time for the study, then, was six and one-half weeks.

The following instructions were given to each group at the beginning of their initial session: "You are taking part in a study of interview techniques. Your role is to talk, and you may talk about anything you want. All of our meetings will be recorded on this tape-recorder in order that the material received here can be analyzed. Anything said here will be held

confidential. Because of the nature of the study, no more explanation can be given as to its purpose just now, but after our last meeting the whole process will be explained to you".

TABLE I
ORDER OF PRESENTATION

<i>Group One</i> Subjects 1, 2, 3, 4, 5, and 6 Sessions			<i>Group Two</i> Subjects 7, 8, 9, 10, 11, and 12 Sessions		
1	F	* **		R	1
2	R			F	2
3	R			F	3
4	F			R	4
5	F			R	5
6	R			F	6
7	R			F	7
8	F			R	8
9	F			R	9
10	R			F	10
11	R			F	11
12	F			R	12
13	F			R	13
14	R			F	14
15	R			F	15
16	F			R	16
17	F			R	17
18	R			F	18
19	R			F	19
20	F			R	20

* F indicates relationship feeling.

** R indicates relationship role.

Measuring Instrument

The interpersonal notational system used in this study was developed by Glad et al. (13). In a reliability study by Roosa (31), it was demonstrated that this notational system could be reliably applied to the synopsis of interviews from wire recordings.

Because of the almost astronomical permutations involved should the complete system be utilized, codings had to be limited to only one in each dimension. This method of limitation reduced the number of coding combinations and admittedly eliminated the possibility for richer protocols, but only by such limitation were the two factor analyses made possible. Those aspects of the notational system utilized are listed in Figure I.

Two graduate students in psychology at the University of North Dakota were trained in the use of the notational system and acted as coders for the social behavior. Twelve of the twenty interviews were tape recorded in

each group. The study was divided into three phases: the first, middle, and last. Each phase was composed of four sessions. The total codings were almost equally distributed among the phases; each session contained an average of 162 codings.

Statistics

Pearson r 's were calculated; the correlations were made between each individual ("Q" technique) on the basis of the frequencies in each cell. The notational system adapted for this study was comprised of eighty cate-

FIGURE I
ABBREVIATED CODINGS

ADAPTED FROM GLAD'S NOTATIONAL SYSTEM

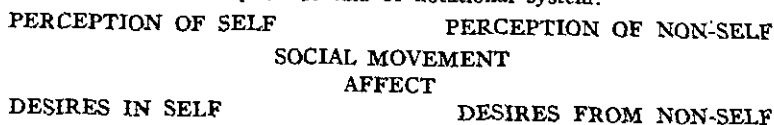
In the dimensions of Perception of Self, Perception of Non-Self, Social Movement, Desires in the Self, Desires from the Non-Self, the following codings were used:

*	 positive movement toward non-self	 playfulness toward self	=	equality
*	 positive movement toward self	 negative superiority	—	neutrality
**	 negative movement toward non-self	 negative inferiority	* 	flight
**	 negative movement toward self	 positive superiority		ideas
	 playfulness toward non-self	 positive inferiority		confused ideation

Affect dimension:

neutral		aggression	
anxious		laughter	
warm			

Conceptual schema of notational system:



The above codings are from the subject's frame of reference.

* The open end determines the direction.

** The apex determines the direction.

gories, or eighty tests. The complete centroid method of factor extraction was used; the method of rotation was the single plane method (39).

RESULTS

Seven factors were observed in this study, four following the role reference and three after the feeling reference. The factors, or coding constellations, were determined by inspecting the codings of the subjects representing the respective factors.

The subjects' differential reactions, reflected in the quantitative and qualitative aspects of the factor constellations following the formulation types, are explained as follows:

1. The relationship role reference produced more diverse reactions than the relationship feeling reference.
2. The relationship feeling formulation was more anxiety producing; relationship role provided for a diminution of anxiety and expression aggression.
3. Relationship feeling affected ambivalence in self desires, relationship role resolved this ambivalence.
4. Relationship feeling was responded to by desire for withdrawal by some of the subjects. These same subjects under relationship role desired increased status in the group.
5. Relationship role indicated ambivalence in the areas of self perception, perception of others, and desires for future behavior from others. Relationship feeling resulted in more static, non-ambivalent perception in these same areas by the same subjects.

The subjects' differential reactions, reflected in the quantitative and qualitative aspects of the factor constellations following the therapist reference to relationship feeling and relationship role, may be explained in the following statements:

1. The relationship role reference produced more diverse reactions than the relationship feeling formulation.

A greater variety of significant behavior alternatives, or the number and arrangement of factor constellations, resulted from the relationship role formulation. The diversity of response to this type of formulation was revealed in the four distinct behavioral structures in which the individuals combined in such a way as to result in six unique types of response; the relationship feeling formulation produced three factors and four unique response types.

2. The relationship feeling reference was more anxiety producing and more inhibiting. Relationship role provided for a diminution of anxiety, more neutral adjustive affect, and a liberation of aggression.

The greater abundance of anxiety following relationship feeling suggests the inhibiting influence of this formulation type. Anxiety following the relationship role, in comparison with relationship feeling, diminished through (a) the process of dropping out in certain cases, and (b) was displaced by more neutral behavior in others, or (c) anxious behavior continued from the feeling type to the role type but was accompanied by hostility in the role type. The acting out process of expressing hostility suggests a quality of spontaneity, the polar extreme of inhibition. This behavior of inhibition under one condition and acting out in the other situation was demonstrated by the same individuals.

3. The ambivalence in the subjects' self desires created by the relationship feeling reference was resolved to one distinct reaction in response to the relationship role reference.

This ambivalent desire for negative superiority and positive congeniality under the relationship feeling condition was replaced by a single desire for negative superiority. This resolution of ambivalent wishes occurred in one-half (six) of the subjects.

4. Relationship feeling effected a desire for withdrawal or flight in some (two) of the subjects. These same subjects, in the relationship role formulation, reacted with a desire for negative superiority in the self and positive movement from others.

It appears that the anxiety and inhibition produced by the relationship feeling formulation (statement 2) was sufficiently traumatic to produce a longing for escape from the group with a desire for others to permit their peripheral relationship. The relationship role situation, where the diametrically opposed desire for status in the group is produced, seemed to reflect a more permissive atmosphere and a desire for group belonging.

5a. Relationship role initiated ambivalence in the areas of self perception, perception of others, and desires for future behavior from others. Relationship feeling resulted in more static, non-ambivalent perceptions and desires in these same areas by the same subjects.

The above statement holds for one-third of the subjects (4, 5, 6, 8).

5b. Part of statement 5a, the ambivalent perceptions of others, is true of an additional one-fourth (7, 9, 10).

In statement 5a, the perceptual confusion as a response to the rela-

tionship role reference suggests a re-examination of the preceptual field; that is, an evaluation of wider scope was brought into focus which initiated a finer differentiation by the self of others' behavior resulting in a modification of self perception and a loss of anxiety in each case. It is reasonable to assume that the loss of constrictive anxiety enabled these persons to increase the scope of their perceptions; it is also plausible that once perceptual clarity and understanding was realized, anxiety was no longer a necessary function. Statement 5b concerns the three individuals (7, 9, 10) who perceived others as being confused, but had no accompanying confusion in self perception. These subjects, interestingly enough, were the only subjects in which hostility was a significant coding in their behavior. The frustration in their inability to understand others gave rise to aggression under the role condition, yet was endured in the feeling condition. The expression of aggression could possibly be explained as an ego defense mechanism since the Perception of Self remained unchanged; " 'Acting out' . . . impedes the ego from being confronted with an unconscious material . . ." (Fenichel, p. 571). Following Fenichel's (10) viewpoint, it would appear that relationship role reaction for these persons was therapeutically undesirable. Besides the expression of hostility, the only other changes in these individuals from one variable condition to the other were in the Perception of the Non-Self area. Under the feeling condition, the perception of others as being confused changed to an ambivalent perception of others as being both accepting and confused under the role condition. With the changed perception of others as being accepting, or at least less threatening, it was safe to express aggression. Since anxiety is experienced under both conditions, it may be that the aggression was not completely discharged, or perhaps the aggression gave rise to renewed concern in that the hostility was unacceptable.

The five summarizing statements listed above appear to have relevancy to psychotherapy process, especially some of the theoretical arguments proposed by Mowrer (25) and Rogers (28). As previously discussed, a relationship or parallel exists between Two-Factor theory of sign learning and the respective references to relationship feeling and relationship role. Mowrer views the most effective form of therapy as that which is made in the area of problem-solving. His position regarding the therapy process is:

. . . The fundamental task of psychology is not that of emotionally re-educating the patient but of helping establish problem-solving habits, habits, which will enable emotions to operate as they are normally intended to. (Mowrer, 25, p. 49.)

The relationship role formulation produced more diverse expressions of affect, less inhibition and anxiety, and induced finer discriminating processes in the subjects' perceptual awareness. Rogers, who stresses feeling-formulations, used the "S" sort in the course of client-centered therapy and concluded that the greatest changes which occur in the patient are in the perceived-self rather than in the ideal-self (in this study, cognate constructs are respectively Perception of Self and Desires in Self areas). The resultant factor structures following relationship role formulations, it is interesting to note, are in agreement with Rogers' viewpoint, while the relationship feeling formulation produced diametrically opposed results; that is, many behavioral shifts were effected in the ideal-self area.

In accordance with the views of both Mowrer and Rogers, then, the relationship role reference employed in this study could be termed "therapeutic", while the relationship feeling reference would be regarded as having questionable value from a therapy "out-come" criterion. The value judgments in terms of therapy "process" may be somewhat different.

The results of this study, as is true with most research, while providing some answers to the problem expressly studied, give rise to new questions. These questions, especially those surrounding the initiation and control of contact operations which can be influenced by the therapist, offer new areas for systematic experimentation. Factor analysis has proved a valuable tool for synthesizing the coded behavior and lending meaning to the multiplicity of variables which are in operation during a complex interpersonal relationship. A suggested change in the design for future studies, in the light of the existing knowledge gleaned from this study, should be made in the types of factor analysis employed. To effectively study the adaptive processes of group behavior, an "O" technique should provide a framework from which the "Q" data could be studied more intensively. A longer study where the variable conditions were continued without shift would seem to provide more stable data; however, the problem of an adequate control should not be overlooked.

DISCUSSION OF RESULTS

An exhaustive analysis of the mechanisms involved in these behavioral constellations would entail an unrealistically detailed discussion, for the possibilities for explanation are as varied as the systematic approaches in viewing any psychological phenomena. What requires special attention is the level of analysis or extent of reduction necessary in the selection of appropriate explanatory concepts. In order to approximate a behavior-research

isomorphism, a macro-statistical analysis was deliberately employed in the search for functional unities which would express specific behavioral processes in the unique wholes of factor structure. It is these wholes which require our selective attention. It is also understood that the behavior not represented in the factors is not regarded as being any less genuine nor necessarily less important, but is looked upon as not being exclusively involved in maintaining the unique structures.

The properties of the constituents of each structure contain relevancy to their structure only in providing some complex feature which assumes a characteristic of the whole. The structures, however, are not completely analyzable in terms of their component parts since each constituent contributes its relevancy within the context in which it occurs. Since processes are generally regarded as having no inherent termini, it is questionable whether these factors reflect or contribute exclusively to the maintenance of a stabilized behavior structure (26).*

A prominent and fundamental descriptive feature of behavior is its characteristic "goal-striving" quality. Living organisms, being "goal-directed", exhibit in varying degrees adaptive and self-regulative activities. The resultant factors may be viewed as hierarchies in the subjects' behavior in the sense that some of the behavior alternatives were found more useful or effective with some in dealing with others ("mediate", or depending on others); or, that the behavior alternatives were better established in certain persons than in others ("immediate", or independent of others) (6). The same behavior contained in the factor structures may be identified in either fashion; that is, the selected approach depends on the perspective chosen and the antecedent assumptions which are adopted for analyzing its structure.

The relevancy to psychotherapy process contained in these structures should help determine which of these alternatives to select as figure in a figure-ground descriptive approach. Within the framework of individual psychotherapy, as originally viewed by Freud, the "immediate" assumes greater importance, while in the Moreno system of sociometry (23) the "mediate" is foremost. The two systems can be contrasted further in temporal features; where Freud's perspective was more or less static (past-present), Moreno's conceptualization involves primarily "here and now" (present-future) encapsulations. Although it is recognized that the individual is motivated to re-experience or master previously internalized ex-

* The developmental characteristics of these data are presently being studied through use of an "O" type factor analysis.

periences (repetition-compulsion), this particular motivational structure can not be assumed here as being the major one. Further, the explanatory concepts of transference and counter-transference, although more appropriate to individual therapy, severely limit the recognition and interpretation of a richer variety of interpersonal dynamics operating within the group medium. This conceptual controversy has been effectively discussed by Moreno (23) where he proposed the more comprehensive concept "tele". The preference for Moreno's conceptual framework, especially the applicability to the present type of research, has been elaborated on by one of the present authors (24).

The general framework of contact psychology appears to provide a generic model from which pertinent theoretical points of departure can be made. According to Bach (4), "The viewpoint of contact psychology focuses attention on the processes by which the inner anxiety and tension problems of the patient are aggravated or alleviated through effective or ineffective functioning in contact with others." The contact frame of reference is not a unified theoretical system of personality development or function; instead, its value is determined by its pragmatic and flexible applicability in which various systematic viewpoints can be applied to lend nuances to the same data.

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SUMMARY

This research was concerned with changes in subjects' social behavior following specific therapist's references in an experimental group therapy type atmosphere.

Twelve males from the University of North Dakota were selected on a volunteer basis; six were upperclassmen and six were graduates, all of whom were psychology majors. The individuals were divided into two groups of six subjects. Each group had twenty sessions. All sessions were conducted by the same therapist, who had considerable experience in the use of the reference types employed in this study. The two therapist reference types as independent variables were relationship feeling and relationship role. The feeling reference is a response to subjects' feelings, the role reference to the subjects' social role or social activity. The relationship focus refers to the object toward which the feelings or social activity is directed; self, non-self, self perceptions, etc.

The two groups were presented the variables in counterbalance; one group was presented with an FRRF sequence, the other with an RFFR. This method utilized all twelve subjects under each variable condition and these subjects served as their own control.

CONCLUSIONS

It appears that the relationship role reference enhances the resolution of the inhibiting influences by providing a less threatening atmosphere. These results indicate that this reference provided an incentive for more critical evaluation of their on-going behavior. This heightened motivation for

self-realization, or gaining of insight, could be termed "therapeutic", while the relationship feeling formulation seems to arrest behavioral changes by maintaining a state of inhibition and anxiety to facilitate repression and would be regarded as having questionable value from a therapy "out-come" criterion. The value judgments in terms of therapy "process" may be somewhat different.

Factor analysis has proved a valuable tool for synthesizing the coded behavior and lending meaning to the multiplicity of complex interpersonal reactions which are in operation in group behavior.

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AN INVESTIGATION OF THE EFFECTS OF GROUP PSYCHOTHERAPY ON CHRONIC SCHIZOPHRENIC PATIENTS¹

D. A. R. PEYMAN

University of Alabama and Bryce Hospital

There is relatively little material in the literature concerning controlled evaluations of psychotherapy, particularly in a hospital setting, and with psychotic patients. The present study investigates the value for hospitalized chronic schizophrenic patients of group psychotherapy, and to evaluate this therapy against and in conjunction with electroshock therapy.

METHOD

The subjects were 32 white female patients in the state mental hospital. All had been diagnosed as having chronic schizophrenic reactions, and all had had considerable prior treatment, including electroshock treatment. The main criteria for admissibility of a patient to the study were that she be between 21 and 39 years, diagnosed as a chronic schizophrenic reaction, been hospitalized for at least one year, not mentally defective (defined here as having a Wechsler-Bellevue Full Scale IQ less than 70), and able to cooperate in psychological testing. These requirements resulted in excluding a remarkably large number of potential subjects. The patients used in the study constituted nearly the eligible population of female patients in the hospital. (The hospital is the largest one in the state, and has approximately 6000 patients, about one-half of whom are female.) (Table 1 shows a summary of the composition of the four groups.)

At the beginning of the study, the 36 eligible patients were ranked in order of over-all adequacy of present adjustment by the ward physician in collaboration with one of the staff psychologists, neither of whom participated in the group therapy sessions but were well acquainted with the patients. The names of the 36 patients were then arranged in successive groups of four, and the names in each set of four were assigned at random to one of the four treatment groups. Thus, there were nine patients in

¹ Appreciation is expressed to the many who were involved in the study, but especially to Dr. S. J. Tarwater, Superintendent of the Alabama State Hospitals, who made the project possible; to Dr. W. Tragle, Staff Physician; and to Messrs. G. M. Middleton and W. C. Paul, Staff Psychologists; and to Drs. O. L. Lacey and P. S. Siegel of the University of Alabama for their guidance in setting up the project.

each treatment group with reasonable assurance that the groups would be about equivalent in terms of their general adjustment, mean age, education, and intelligence, because these were among the factors which were taken into consideration in the original rating of the patient's over-all adjustment.

TABLE 1
COMPOSITION OF GROUPS

Groups	n	Mean Age (in years)	Mean education (in years)
Group Psychotherapy plus Shock	8	32.6	10.9
Group Psychotherapy	9	30.1	10.4
Control	7	33.4	10.4
Shock	8	29.2	10.3

Each of the two groups receiving group psychotherapy met twice a week with the writer for one hour sessions over a six-month period. The techniques used in the sessions were group discussion and role playing, with an emphasis on group discussion. In approximately one-half of the sessions a female assistant participated in the sessions. She actively entered into the discussions and role playing, and contributed significantly to the progress of the therapy. The two groups receiving electroshock treatment were treated at the discretion of the ward physician, who gave such treatment as he considered advisable. All members in these two groups received at least ten electroshock treatments during the six-month period of the study. The members of the Control Group continued their usual hospital activities, but were not given any special treatment such as electroshock.

The patients were given a battery of tests before and after the period of time under investigation including the Wechsler-Bellevue, Form I; the Bender-Gestalt; and the Rorschach. The use of MMPI was also attempted but too many of the subjects could not or would not follow the directions and were answering at random, thus it was dropped from the battery. The differences in test performances before and after the experimental period were obtained, and the four groups were compared. For quantification, on the Wechsler-Bellevue, the Full Scale IQ's were used; on the Bender-Gestalt, Pascal and Suttell's scoring was followed; and on the Rorschach, Klopfer's Prognostic Rating Scale was applied.

In the comparison of the four groups, only 32 of the original 36 subjects were used. This was because two of the patients were so uncooperative that they refused testing, and two improved significantly enough to

be furloughed home (it was not considered in the best interests of the patients to detain them in the hospital until the completion of the study). One of those furloughed home had been assigned to the Psychotherapy plus Shock Group, but had not received any electroshock treatment during the time the study was in progress; the other patient came from the Control Group. Of the two who were uncooperative, one came from the Shock Group, and the other from the Control Group.

The H test of Kruskal and Wallis (1) and White's test (1) were used to test significance of differences between the groups.

RESULTS AND DISCUSSION

No significant changes in the Wechsler-Bellevue Full Scale IQ's were observed. The four groups were equivalent in their intellectual ability with a mean IQ of the patients in the study of 88. Considering the long standing psychotic condition of these patients, it appears probable that the measured IQ's reflect their present intellectual functioning level rather than their potential ability.

TABLE 2
MEAN WECHSLER-BELLEVUE FULL SCALE IQs

	First Testing	Second Testing	Difference
Group Psychotherapy plus Shock	88	88	0
Group Psychotherapy	88	86	-2
Shock	87	89	+2
Control	88	88	0

H = 1.1 (not significant).

The findings on both the Bender-Gestalt and the Rorschach are in agreement and indicate significant differences from chance expectancy. The Psychotherapy plus Shock Group showed the greatest improvement, followed by the Psychotherapy Group; then, a poor third, the Shock Group; and finally the Control Group, which showed no improvement, but a decline. These findings are summarized in Tables 3 and 4.

When the four groups are compared in Table 5 White's test shows that both with the Bender-Gestalt and with the Rorschach, there are significant differences in the results of the Psychotherapy plus Shock and the Control Groups, and the results of the Psychotherapy and the Control Groups. On both the Bender-Gestalt and the Rorschach, the significance is beyond the 1% level. None of the other comparisons proved significant at the 5% level.

Concerning the superiority of the Psychotherapy plus Shock Group over the others, we might speculate that shock treatment itself was sufficient to make the patients more amenable to group psychotherapy, but notice that straight shock alone did not seem to produce changes much greater than would be expected from chance. However, it is important to note that group psychotherapy alone produces results significantly greater than obtained in the Control Group.

TABLE 3
MEAN BENDER-GESTALT SCORES (PASCAL AND SUTTELL'S SCORING)

	First Testing	Second Testing	Difference
Group Psychotherapy plus Shock	88	65	-23
Group Psychotherapy	89	71	-18
Shock	88	83	-5
Control	88	105	17
H = 16.4 (significant beyond 1% level).		Low scores are more favorable than high scores.	

TABLE 4
MEAN RORSCHACH SCORES (KLOPFER'S PROGNOSTIC RATING SCALE)

	First Testing	Second Testing	Difference
Group Psychotherapy plus Shock	2.7	4.8	2.1
Group Psychotherapy	2.8	4.0	1.2
Shock	2.8	3.0	.2
Control	2.9	1.7	-1.2
H = 24.3 (significant beyond 1% level).		High scores are more favorable than low scores.	

TABLE 5
COMPARISON OF DIFFERENCES BETWEEN FIRST AND SECOND TESTING ON BENDER-GESTALT AND RORSCHACH TESTS

Groups	Bender-Gestalt	Rorschach
Group Psychotherapy plus Shock x Psychotherapy	T = 67	T = 67.5
Group Psychotherapy plus Shock x Shock	T ¹ = 52.5	T = 53
Group Psychotherapy plus Shock x Control	T ¹ = 31 **	T = 30 **
Group Psychotherapy x Shock	T = 62	T = 52
Group Psychotherapy x Control	T = 34 **	T = 28 **
Shock x Control	T = 42	T = 40

** = significant beyond 1% level.

The patients did not volunteer for admission to the study; and in the two psychotherapy groups, all were not in favor of attending. Several of the patients expressed considerable hostility toward the therapist throughout the sessions and repeatedly pointed out their desire not to attend; however, in general the patients expressed approval and appreciation of the sessions, and there was marked diminution of hostility as the sessions continued. One problem for which no satisfactory solution was found lay in the tendency of some of the patients in the psychotherapy groups to listen attentively to some of the more intimate revelations of the other patients and to scurry back to the wards and broadcast them to other patients not in the study. This at times led to some embarrassment, and encouraged some of the members of the two psychotherapy groups to deal with only superficial issues, or else to become significantly less talkative during later sessions. Perhaps if only volunteers had been used this would not constitute a serious problem. (In other group therapy sessions in the same hospital, using less chronically ill schizophrenic patients, these violations of confidence have not been observed. Rather there has been ample evidence of the development of strong group loyalty).

Despite the difficulties and shortcomings, there were a good many positive signs. Some of the patients became able to express some emotional reactions that they had probably been unable to express for many years. One of them, after a session in which she was acting out aggression, reported that she had "never spoken to a man like that before", and appeared to obtain great satisfaction from it. Her test results showed she had made marked progress. Many of the patients in the psychotherapy groups expressed their appreciation for the sessions and stated that they had proven valuable. Other patients not in the study (including male patients who had heard of the sessions) have often approached the writer with the request that they be allowed to attend the groups, or to suggest that new groups be organized so they could attend.

The over-all picture, then, offers support for the use of group psychotherapy and role playing techniques for chronic schizophrenic patients in a hospital setting.

REFERENCE

1. Edwards, A. L. Statistical methods for the behavioral sciences. New York: Rinehart, 1954.

LETTER READING IN GROUP PSYCHOTHERAPY

ART A. KRAMISH

VA Hospital, Lincoln, Nebraska

During the past ten to fifteen years various methods have been attempted, developed, and put to research in order to find stimuli to arouse response and interest in those patients experiencing a group psychotherapy program. The results have been receiving an increasing amount of recognition, and have proven outstanding, in spite of the variety of techniques and procedures instituted to encourage therapeutic movement and patient participation.

If we succeed in holding to the basic principles and objectives which underlie psychotherapy, there appear to be no contraindications to using a number of techniques to stimulate patient response, group interaction, and communication. The average patient enters group psychotherapy with hesitancy, questioning the reasons and the advantages of such treatment. Often the patient accepts the treatment with doubt, skepticism, and with a certain degree of defensiveness. He is apprehensive to exposing his thoughts and experiences to others in a group. He may feel embarrassed, uncomfortable, and he often replies with a typical statement, "My personal problems are just that—personal. I can't talk about those things when there are several others here!" He may actually feel a need to ventilate, but because he is in a group his attitude is a cautious one. He is reluctant to take others into his intimate life, even though a non-threatening and accepting atmosphere is provided for him.

As a group therapist it is necessary that patients become able to relate to those around them in such a way that they can gain therapeutic effects from the socialization, communication, and free exchange of feelings and attitudes. Many experienced therapists often remark that this is a tremendous task at times. Certainly, we need to always reassure and structure with the goal of establishing a healthy patient-to-patient and patient-to-therapist relationship. In other words, the situation should be similarly that of a family environment. As soon as patients give and take, grapple with personal issues, express anger, hostility as well as consideration for each other, then therapeutic movement will take place. Until this time, not much can be expected, and most likely there will be unrest and sudden requests to drop from group psychotherapy with comments of dissatisfaction. When the latter happens a serious problem occurs as to where

the fault lies. This may involve at least four major possibilities: (1) the technique, (2) selection of patients, (3) therapist, (4) lack of stimulation. Perhaps the most important factor is the latter.

Stimulation cannot be brought about through coercion or by complete permissiveness. Groups will express negativism and resentment when pressure is applied. Some therapists seem to feel that pressure or direction should be instituted to secure participation. This can only set the stage for a sudden disintegration of the group and instill additional blocks to therapeutic benefits. Certainly, group spirit will bog down without something to talk about, and the selection or topic to discuss cannot always be left up to the patient or the group to decide upon. At times one or two will dominate the group. Some patients may feel a lack of opportunity to express themselves. Some will show no desire or interest. There needs to be a technique to assist everyone toward some participation, some interaction. Therefore, an indirect, positive, and non-threatening method of stimulating group activity seems necessary, but keeping in mind that ". . . group psychotherapy should be natural in its form. That is to say, any particular method should mirror the world of reality, and should draw on natural forces. It must flow; it cannot be forced, or be artificial or unreal."¹

THE TECHNIQUE

One technique which was introduced by this writer and which has proven quite successful at this hospital has been the use of personal letters clipped from various newspapers and magazines written to editors, counselors, and guidance people requesting help with problems. All identifying information is deleted and only the content of the letter used. Letters are carefully screened and only those letters that point out certain areas of difficulty as seen in the background histories of patients in the group are used. A letter is handed to one of the patients to read aloud to the rest of the group. An effort is made by the therapist to avoid having a patient read a letter that specifically refers to his own problem. The patient is unaware that this is being done by the therapist. In this respect he does not feel that he alone is on the proverbial spot. Subsequent to reading a letter, the contents are opened for discussion. As soon as all discussion has ceased on the material read, another letter is handed to the next patient to read. Every patient is given the opportunity to read letters and they

¹ Corsini, Raymond J., "The 'behind your back' technique in group psychotherapy and psychodrama," *GROUP PSYCHOTHERAPY*, Vol. VI, No. 1-2, May-Aug., 1953, p. 102.

generally accept this obligation as long as others are in favor of it. The letters are interesting and patients are quite anxious to read them.

When this technique was introduced, there was surprisingly sudden action. Remarks were made, "Well, that's pretty much what my situation has been." "Some of these people are worse off than we are." One patient, who was having considerable marital difficulty and denied any concern over an unhappy first marriage, almost immediately exploded his feelings and attitudes about a marital problem mentioned in one of the letters read by another patient. For several sessions prior to the introduction of the letter reading method, even though one or two others had talked of marital problems, this patient denied any concern over his first marriage, and always remarked that nothing bothered him since he had accepted the first marriage as a failure. One patient remarked, "My gosh, what are we doing here! It looks as if this person has worse problems than I have. It certainly shows that there are a lot of people with problems and they aren't all in the hospital." Withdrawn patients, who had only spoken very few words were handed letters to read. They felt obligated to read since the others were accepting this. The reading seemed to give them some voice in the group. For the first time, there was a speaking experience, even though it was only on a letter reading basis. After a few sessions they responded more freely. Social resistance was broken. At no time does anyone refuse to read a letter. Once, a withdrawn, self-preoccupied patient *could only read a letter partly through*. He turned to the next patient to finish the reading. The turning around and making the contact, being reassured and encouraged by the other patient that he could finish the reading, was enough to stimulate participation in later group discussions.

Subsequent group sessions utilizing this technique have provided very interesting discussions and certainly movement into more intensive areas for analysis. Patients seem to anticipate the group meetings. They often carry the discussions to the ward and have been found rehashing letters and contents. At times they will return to the next group session expressing a desire to re-discuss a certain problem or to offer another angle or insight into the problem. Familiar emotional problems are touched upon and the patient responds according to his own particular pattern. At the same time a group attitude is apparent which reacts to the problem. Questions are asked about a variety of incidents that do not always appear or are unmentioned in the letters. These situations bring out practically all of the things that one would read between the lines. Despite the incompleteness of many letters and the problems expressed in the letters, there is enough emotionally toned material to stimulate heated discussions, and above all an

awareness of the patient's own difficulty and a realization of the important factors seen in his experience as relating to his specific problem. Perhaps the major value in this group approach is from comparison of a patient's problem with others in the non-hospital society as well as those in the immediate group. Most important is the arousal of patient interest and active participation. When this occurs the patient is able to test and evaluate, gain insight and introspection into his real life problems.

Value during brief periods of hospitalization: The technique would seem to be an asset in general medical and surgical hospitals where a limitation is imposed upon the group psychotherapy program due to the patient's relatively short stay in the hospital. It becomes important to stimulate patient and group movement as soon as possible. The method assists those patients who seem to find difficulty in relating and can be used to influence patients in a more positive direction where this is possible. The patient does not feel that he is being probed or that he is being pressured to discuss his problems. Experience with this technique has shown that the most inhibited patient contributes at least something of his feelings and attitudes.

CONCLUSIONS

The letter reading technique is one of perhaps many in order to find ways around defensive barriers. All of the defensive forces of the patient's personality are constantly mobilized against efforts to penetrate into the areas of the mind and experience. Ofttimes, only in indirect, unobtrusive ways can these barriers be relaxed so as to pave the way for expression.

It appears essential in the group psychotherapy program as well as other psychological treatments that the patient be kept in contact with the problems experienced by other individuals in the non-hospital environment. Too often the patient is divorced from these experiences, attitudes, and feelings, and only comprehends a hospital adjustment. The patient must be moved in the direction of facing and sensing the situations as they present themselves outside the hospital. The technique seems to bring on a broad and realistic program of discussion geared to greater patient and group interaction.

Experience with the letter reading technique thus far has shown that such a stimulus causes therapeutic movement. This can be observed in a number of ways analytically; however, the most encouraging factor is the reaction from patients themselves. Additional studies and investigations are in the planning stage to evaluate the therapeutic movement and long range effects of this treatment procedure.

TEST FLIGHT: A GROUP DREAM

A contribution to sociodramatic research

HERBERT A. SHEPARD

*Massachusetts Institute of Technology**

Whether groups can truly dream depends upon one's definitions. If the group is defined as an entity whose parts are human and in communication, the line between analogy and identity becomes hazy. If a more synthetic definition seems appropriate, we may still distinguish between the psychology of the component individuals as group members, and their psychology as "pure individuals."

Under either definition, it is not merely metaphorical to refer to a group's history and myths, plans and dreams. Nor is it surprising to find that groups use their images of past and future to much the same ends as do individuals. The recollection of the past in either myths or history—a distinction of which more is made in Western society than elsewhere—is used to justify, explain, make livable or even enviable, the present. Similarly, dreams and plans—again a distinction with culturally limited meaning—are used to make the present livable, full of potential.

Willingness to regard the group as a psychological entity and to follow out the implications of that view in research and application, has been demonstrated by relatively few students. Lewin,¹ with his topological approach to the dynamics of individual and group, went far in the direction of producing a true group psychology. Moreno's² insights led him to do pioneering work and to produce new methods of research and application. His concern with the development of a therapy for the group, distinct from a therapy for the individual in a group setting, led him to the characterizations of sociodrama and psychodrama. In that sense, the following account is intended as a contribution to sociodramatic research.

This paper records a fantasy spontaneously acted out by a group of three. Like a person's dreams, this drama compresses a great deal of significant experience into a few cryptic phrases, permits expression of destructive desires held in check by social sanctions in the real world, satisfies frustrated needs by providing a fantasy solution, preserves the integrity of the dreamer

* This paper reports one of a series of studies made with the support of the Social Science Research Council and the Sloan Research Fund of the M.I.T. School of Industrial Management.

¹ Kurt Lewin, *Field Theory in Social Science*, Dorwin Cartwright, ed. (N. Y., Harper), 1951.

² J. L. Moreno, *Psychodrama*, (N. Y., Beacon House), 1946.

(in this case, a group) through a period when facing reality incurs severe anxiety.

The setting of the dream is a large coastal military base. It is 3:30 on the afternoon of September 1st. The players are three engineers, the leader of a flight-test group and two of his assistants. They have worked together for three years. The military contract on which they are employed terminated yesterday—but an extra day has been granted for them to complete the project's mission. The project has lasted seven years and cost over fifty million dollars. If success cannot be demonstrated in a trial today, a large part of the project's results may be shelved permanently. The reputations of the three engineers, and of the rest of the project group back at headquarters, will be gravely affected.

Three months ago the sponsoring military agency gave notice that the contract would be terminated August 31st. Before that, project plans had called for completion by December. These plans were immediately revised, and an all-out effort to finish by August 31st was begun. The project involved the design and testing of a new type of air-to-air guided missile. Tests conducted on the early experimental models had led to extensive redesign, and two completed models of the final design were ready shortly after June 1st. It was anticipated that firing the first of these would provide the information necessary for final adjustments to the second. Firing the second would then be a complete demonstration of the potential of the weapon.

Firing a missile for test purposes is no simple exercise. Several hundred steps have to be taken in preparing the missile for flying, difficulties may be encountered at any of the steps, and at best six to twelve hours work are necessary. The flight of the missile must be scheduled on a busy air-base timetable, with only a short period of air-time allowed to any program. Once in the air, a variety of things can go wrong: communications among the various stations involved may break down, aircraft trouble may develop, especially with the radio-controlled target plane, and other interferences are common.

After half a dozen fruitless attempts the first missile was fired. Adjustment and preparation of the second missile then required numerous tests of its radar system, autopilot, telemetering equipment, and other components before firing. Time was growing short when, on its last dry run before launching, it was accidentally jettisoned from the plane and crashed ingloriously in a beanfield.

With less than three weeks to go, the project sought permission to prepare a third missile for flight. On August 15th, it was ready to fly.

By August 15th, the members of the test-flight group had begun to lose faith in the project and in themselves. The approaching end of the contract had led most of them to seek other jobs; no bonds but personal involvement and a sense of loyalty bound them to the project. From the original test group of twenty-five, three or four had already left.

On August 15th, the weather closed in. The radio-controlled target plane cannot be taken aloft on cloudy days; hence it was impossible to carry out the firing mission that day. But August 15th was only the first of a succession of cloudy days. Each day the missile had to be prepared for flight, each evening it had to be taken down, rechecked, its batteries charged, and so forth. Preparations for the day began at 2 or 3 a.m.; putting it away for the night would be completed by 10 p.m., if no special troubles developed. Since the experimental missile contained much delicate equipment for communication information about its path of flight, etc., to ground stations, it required continuous maintenance, and many members of the crew worked fifty-hour stretches during the period of bad weather.

There was no break in the weather between August 15th and August 31st. Every day the missile was readied for flight, then taken down. On August 31st, an extra day was granted by the military sponsor, but September 1st was still cloudy with no change expected.

By September 1st group morale was almost completely destroyed. About a third of the crew did not come to work at all during the last week of August; another third reported in but were unable to do any effective work. The rest were suffering from severe fatigue. A long-standing custom of breakfasting together at 2 a.m. on flight days broke down, and at the end of the month only one or two showed up for breakfasts. A member of the group whose jokes had always provided good humor and smoothed over tension found his wit resented. The pilot, who had served as a skillful buffer between the project personnel and service personnel, became hostile towards the service personnel and had a violent argument with them.

By the first of September, only four members of the group had sufficient spiritual and physical strength to carry on: the pilot, the group leader, and two engineers. At noon on September 1st, the group leader and pilot had a long talk assessing the chances of flying. The meteorologists reported the weather hopeless, but there was always a chance. Even if additional time could be obtained from the sponsor, the leader and pilot did not believe the group could rally for another day. If by chance the weather cleared today, it was doubtful whether their project would be allowed to fly, since it had lower priority than some other programs which had also been waiting two

weeks. Even if it flew, there was only a fifty-fifty chance of a successful flight, since the number of trivial things that can go wrong during an operation is very large. They concluded that the chances were "one in twenty," but in fact both knew that all hope was gone.

Two hours later, when the group leader was killing time with his assistants, they decided to act out a parody of the launching flight. It was their custom to tape-record the radio communications among the various stations involved in a flight, and the skit takes the form of radioed communications. Before beginning, they agreed on assignment of the most active roles, and on the goal of the flight—to shoot down Flight 20, a luxury commercial airliner. As in an actual flight test, the communications were tape-recorded. The transcript is presented below. The specialized terminology and richness of allusion to the group's experience make the skit almost unintelligible in its original form. Explanations are therefore given alongside the transcript, in which certain designations have been altered slightly to protect identities. The participants are labelled "Leader," "Engineer A," "Engineer B," and "Engineer C." Engineer C, a passerby, made only one contribution. There was no audience; the "dream" was acted out quickly and spontaneously.

Buckle 92: (leader)	Generator 34. This is Buckle 92. Over.	"Buckle 92" is the customary designation of the launching plane. "Generator 34" is a ground station for receiving coded information from the missile.
Generator 34: (Eng. A)	Buckle 92. Buckle 92. I read you loud and garbled. I read you loud and garbled.	Conventional military communication equipment has to be used. This equipment uses a 400-cycle band pass, often breaks down, and transmits badly over the large distances among stations.
Buckle 92: (leader)	Roger, Generator 34. I will try to . . . [taps transmitter]. Now do you read me better? Over.	
Generator 34: (Eng. A.)	Uncle 14. Uncle 14. Do you read Girdle 82 on Opposite How?	"Uncle 14" is Engineer A's invention, has no group meaning. Hence, it is not picked up by the

other players. He probably intended this label for one of the drone group—the target plane and its escort of two military planes. The controlling drone is usually designated “Jackson”. On one flight it was designated “Opposite How How.” On that flight a plane belonging to another military service happened to be on the same radio frequency. By coincidence, its name was “Opposite Opposite How,” and it kept cutting in on the project’s communications. The leader says, “And communication was so lousy you could scarcely hear enough to know which was which. The names themselves were rather humorous. This became a standing joke.”

- | | | |
|-----------------------------------|---|---|
| Monitor 6:
(leader) | Buckle 92. Buckle 92. This is Monitor 6 calling Buckle 92. Over. | “Monitor 6” is the designation of the project’s advisory ground station during flight. It had not been assigned before the skit. The leader decided to play it at this point. |
| Opposite
How How:
(Eng. B.) | Buckle 92. Buckle 92. This is Opposite How How. Do you read me? Over. | Engineer B picks up the play on Opposite How How. The role had not been assigned to anyone. |
| Monitor 6:
(leader) | Buckle 92. Buckle 92. This is Monitor 6. Monitor 6 calling Buckle 92. Over. | The sequence of communication difficulties builds up to a climax of noise and confusion. In actual flights, it often happens that a station will have a disorder which permits it to receive from or send |

to some stations, and not others, so that messages have to be routed in curious ways.

Generator 34: Buckle 92. Buckle 92.
(Eng. A.) This is Generator 34.
Communications check.
How do you read—

Opposite Generator 34. This is
How How: Opposite How How. I
(Eng. B.) do not read you.

All: Hello. Hello Opposite
How How Buckle 92.
Hello. Calling Genera-
tor. Hello.
34. Hello. I Monitor
6. Mon-read you loud
and itor 6. Over. clear.
Hello. Communica-
tions check. Point
DOG.
Dit-dit-dit-DAH HH!

Windsor 9: This is Windsor. Gen-
(Eng. C) erator 34. We under-
stand you are having
communications trou-
ble with Opposite How
How How. Would you
give us a reading on
that please?

Generator 34: This is Generator 34.
(Eng. A) I do not read Windsor

The "Dit-dit-dit-DAH" at the end of this sequence is a vocal imitation of an interference experienced during one flight test. A weather balloon transmitting loud blasts of noise according to this pattern was on the same frequency as the project, and drowned out communication.

"Point Dog" is an appropriate contribution by an over-enthusiastic player. The expression will appear again in the "count-down" preceding firing.

Engineer C paused for a moment while crossing the hangar, to listen to the group, then made this contribution, and moved on. "Windsor 9" is the military control tower which controls the test flight. The officer at the tower is regarded by the group as a dull, uncooperative and overbearing person, who carries out his job of flight control in a monotonous, rather stupid way, using a heavy manner of speech and proper-service phraseology.

It is difficult to convey the quality of this statement in words.

9. I do not read Windsor 9. Hear him over the land line. The mode of expression and tone of voice are, for the group concerned, "classical." The voice is somehow both monotonous and hysterical.
- Generator 34: Buckle 92, are you
(Eng. A) reading Windsor 9? The "land line" is a direct telephonic connection between the ground stations.
- Buckle 92: Windsor 9. This is
(leader) Buckle 92. Do not read Opposite How How. Over.
- Flight 20: This is Longwood
(Eng. A) Flight 20 calling the tower. Longwood Flight 20 calling the tower. Do you read, Longwood tower? This statement marks the entrance of the fated commercial plane. Longwood Flight 20 is a luxurious plane on one of the champagne flights. Project members always try to travel on this flight when they have occasion to visit project headquarters. The voice affected by Engineer A for this role is nasal, whining, with the suggestion of a speech impediment. The image is created of a nervous, frightened, little man.
- Buckle 92: Roger, Flight 20. This
(leader) is Buckle 92. Over. Flight 20 had never in fact crossed the path of a test flight, or operated on the same radio frequency. If it happened, however, Buckle 92 would signal in this way.
- Windsor 9: Buckle 92. Have you
(Eng. B) spotted the drone group yet? Have you spotted the drone group yet? We do not have you in the crystal ball. Engineer B takes the role of Windsor 9 as originally planned. He is skilled at imitating the accent of the real Windsor 9, who is the target of a good deal of hostility from the test group.

- Buckle 92: (leader) Buckle 92 to Windsor 9. No we have not spotted the drone group yet. We are running short on fuel. The instruments are not working and I notice the fog coming in. And my left wing looks a little loose. I wish you would expedite vectoring of drone group into vicinity. Please.
- Flight 20: (Eng. A) Longwood Tower. Longwood Tower.
- Windsor 9: (Eng. B) This is Longwood Flight 20. Hello, Buckle 92. This is Windsor 9. Roger. Will attempt to vector to target. Have the target on the crystal ball. Make standard 90° turn to the right. Over.
- Buckle 92: (leader) Windsor 9. Windsor 9. This is Buckle 92. I did not hear your last transmission. Try that over again, please. Over.
- Generator 34: (Eng. A) Errr, Buckle 92. This is Generator 34. Generator 34. Communications check.
- Here are represented some of the difficulties the launching aircraft may experience. Synchronization problems often cause one of the planes to be in the air too long, and run short of fuel. The weather is changeable in the flight area. The reference is to a loose wing is unusual, but refers to the only test flight in which the leader had flown, in a plane with a badly wrinkled wing. Buckle 92's voice expresses anxiety. He wants to get on with the operation immediately, or go home.
- Longwood Flight 20 makes another fruitless attempt to contact Longwood Tower.
- Windsor 9 tells Buckle 92 to make a right turn which will bring him into the line of flight required for chasing the target plane.
- Generator 34, whose concern is reception from the missile, is forever requesting communications checks.

Will you please switch
your tear mike signals?

Windsor 9: Buckle 92. This is
(Eng. B) Windsor 9. Make a
standard 90° turn to
port. Over.

Buckle 92: This is Buckle 92 to
(leader) Windsor 9. I under-
stand you request me
to make a standard
180° turn to the left.
Is that correct? Over.

Generator 34: Will you please—. Errr, Buckle 92. This
(Eng. A) is Generator 34. Will
you please have my
wife call, please?

This peculiar request refers to a very broad category of the group's experience. When a flight is scheduled for the late afternoon period, and threatens to continue beyond normal hours, there is a flurry of requests for ground stations to phone wives that husbands will be late for dinner, and other such messages. This led the test group to invent a code of "personal requests" by which they concealed technical messages they did not wish service personnel to understand.

Windsor 9: Buckle 92. This is
(Eng. B) Windsor 9. Go ahead
and make your hun-
dred and eighty degree
standard turn. Then
make a standard nine-
ty degree turn to port.
Over.

In a tone of habitual exasperation, Windsor 9 gets Buckle 92 on the course he would have taken had he heard Windsor 9's first order to turn.

Buckle 92: Windsor 9. Windsor 9.
(leader) This is Buckle 92. I

Buckle 92's masterpiece of under-
statement about the state of com-

am not reading you very well, but will you please give me a report on the status of the drone group? Are the drones aloft yet? Over.

munication is followed by an anxious question. On some flights Windsor 9 is said to have claimed that the drones were in the test area before they had left the ground.

Windsor 9:
(Eng. B)

That is affirmative. This is Windsor 9. The drones are aloft. And we have them in the crystal ball. However, we have some difficulty controlling them. Over.

Trouble with the radio controlled equipment in the target plane is not unusual. For this reason one of the accompanying military planes is equipped to deal with the target plane should it escape.

Buckle 92:
(leader)

Windsor 9. From Buckle 92. Approximately how soon can we expect a rendezvous with the drones? Over.

The news that the drones are out of control does not cheer the pilot, whose difficulties with his aircraft have already been listed.

Windsor 9:
(Eng. B)

Hello, Buckle 92. This is Windsor 9. You should be rendezvousing in a very few minutes. Approximately 5 minutes. If we can control the drones. Over.

Buckle 92:
(leader)

Buckle 92 to Windsor 9. Please keep us informed as to the status of the drones.

Flight 20:
(Eng. A)

Longwood Tower from Flight 20. Longwood Tower from Flight 20. Over.

(Said in an exasperated, whining voice.)

Longwood
Tower:
(leader)

Hello Flight 20. This is Longwood Tower.

At long last, Longwood Tower responds, in a cheery voice.

- Flight 20:
(Eng. A) I believe I am over your sea-test range. Will you please give instructions?
- Longwood Tower:
(leader) Hello, Flight 20. This is Longwood Tower. We are having weather difficulties here. Vector on a holding pattern at 12,000 feet. Over. This is an important contribution to the plot. The leader uses the weather difficulties mentioned earlier in the skit to justify leaving Flight 20 in the target area. Moreover, he tells him to stay at 12,000 feet, the height at which the group's launching attack is to be carried out.
- Flight 20:
(Eng. A) R o g e r , Longwood Flight 20. Over.
- Buckle 92:
(leader) Buckle 92 to Windsor 9. Buckle 92 to Windsor 9. Please, we are running out of gas. Give us the status and vector to the drone group, please. If there is any possibility of getting this operation off. Over. Buckle 92 is getting very anxious indeed.
- Windsor 9:
(Eng. B) Hello, Buckle 92. This is Windsor 9. Apparently have control of the drones. They are making a race-track pattern about fifteen degrees to starboard. Over. Windsor 9 lets the plot move ahead.
- Flight 20:
(Eng. A) Windsor 9. Windsor 9. This is Longwood Flight 20. I'm on your vector pattern. Over. Flight 20 is alarmed by all the communication, and is beginning to believe that he is in the midst of something.

Buckle 92:
(leader) Windsor 9 from
Buckle 92. I believe I
have spotted the drone
group. However,
there's only one air-
craft in the group. I
have spotted a group
consisting of one air-
craft. I am proceeding
to get into the pattern
behind the aircraft.
Buckle 92 over.

Windsor 9:
(Eng. B) The charlie planes
must be above and to
the right and so you
cannot see them. This
is Windsor 9. Con-
tinue with the count
down. Over.

Flight 20:
(Eng. A) Windsor 9 from Long-
wood Flight 20. There
is a service plane be-
hind me and to the
left. Do you know
who this is?

Buckle 92:
(leader) Windsor 9 from
Buckle 92. Requesting
hot run.

Windsor 9:
(Eng. B) Roger, Buckle 92. This
is Windsor 9. Ten de-

In fact, Buckle 92 would never
chase an aircraft if he could not
see the "charlie" (i.e., controlling)
planes. This sequence is based on
a test flight in which there was in-
credible confusion among the vari-
ous stations as to how many
planes had been seen in the test
area. Longwood Flight 20 is be-
coming alarmed.

The hot run is the chase preced-
ing firing, and involves the "count-
down," which consists of a se-
quence of "Mark Point Dog"
"Mark Point Charlie," etc., at
thirty-second intervals, then
counting from ten to zero for the
last ten seconds before the com-
mand to fire.

grees to port. MARK!
Point DOG!

Flight 20:
(Eng. A)

Windsor 9 — I mean,
Buckle 92! Is that
you behind me? With
that big red thing under
your wing?

Receiving no reply from Windsor
9, Flight 20 tries to contact
Buckle 92. The missile is painted
a fiery luminous red. The phrase
"big red thing" is based on an incident
involving a large mobile
tent used as a shelter for working
on the plane in the field. On one
occasion a squall sent the tent
rolling down the runway, and one
member of the group tried to contact
it by radio as follows: "Tower
to big white thing. Tower to
big white thing."

Windsor 9:
(Eng. B)

MARK! Point
CHARLIE!

Flight 20:
(Eng. A)

To Buckle 92. This is
Longwood Flight 20.
It seems to me you're
awfully close. It seems
to me you're awfully
close. Only a few
thousand yards. You
wish to be this close?
And by the way,
what's that big red
thing under your wing?

Windsor 9:
(Eng. B)

MARK: BAKER!

Flight 20:
(Eng. A)

Buckle 92. Buckle 92.
This is Flight 20. Do
you wish to be this
close for this sort of
run?

Windsor 9: MARK: Point ABLE.
(Eng. B)

Buckle 92: Buckle 92 to Windsor
(leader) 9. Roger. Point Able.

Flight 20: Longwood Tower.
(Eng. A) Longwood Tower! (His voice rings with anguish.)
Longwood Flight 20.
Am having communication trouble.

Windsor 9: Thirty seconds.
(Eng. B)

Flight 20: Having communication trouble. There . . .
(Eng. A) errr . . . an aircraft following me. With a big red thing under its wing. Cannot establish communication.

Generator 34: Buckle 92 from Gen-
(leader) erator 34. Your TM signals are fading a bit.

At the last moment before completing an operation, something can be relied upon to go wrong. Here the leader plays the role of Generator 34, formerly held by Eng. A. The leader's motivation is probably to keep the skit moving until the count-down is finished.

Windsor 9: Twenty seconds.
(Eng. B)

Flight 20: Longwood Tower from
(Eng. A) Flight 20. There's an aircraft following me —with a big red thing under its wing. Can you give me instructions?

Generator 34: (leader)	Buckle 92 from Generator 34. Your TM signals are coming back in.	The threat to a successful operation is removed.
Windsor 9: (Eng. B)	TEN! NINE! EIGHT! SEVEN! SIX! FIVE! FOUR! THREE! TWO! ONE! PICKLE! OP AWAY!	Flight 20: (Eng. A) Buckle 92. Buckle 92. You seem to be accelerating towards me. What is the big red thing under your wing? What's the big red thing under your wing? ("Pickle" and "Operation Away" are the final commands.)
	Flight 20: (Eng. A)	Smoke on your right wing!
		Flight 20 sees the missile leave the other plane. There is the sound of an explosion, followed by the sound of a male falsetto voice singing—the swan song.
Longwood Tower: (leader)	Longwood Tower to Flight 20. Longwood Tower to Flight 20. Longwood Tower to Flight 20. Longwood Tower to Flight 20. Calling Flight 20.	

So ends the dream. The transcript cannot produce in the reader quite the quality of emotion that is aroused by the sound recording: an odd mixture of amusement and horror. Perhaps this is because it shares so much in common with anxiety dreams and classical tragedy. The players are helpless; forces beyond their control are at work, and their roles are merely the vehicle by which the plot moves to its predestined and tragic end. The disavowal of responsibility is a necessary protection against anxiety; more-

over, in real life an uncontrollable force, the weather, was bringing about the destruction of the group and its project.

One is tempted to look somewhat more deeply into the meaning of this dream. Obviously it has arisen out of frustration, and there is no socially acceptable way of expressing the feelings of aggression aroused. The dream involved the destruction of a commercial passenger plane. This fantasy is not unusual among personnel employed in the development, testing and operation of weapons. The big helpless passenger plane provides an ideal fantasy target for forbidden sadistic drives.

But this dream took place at a time when destruction of the group itself was imminent. The dream contains a wealth of allusions to the group's past: it is almost a review of its history. Is the process of development of the dream an explanation of the group's history, which forms so much of the explicit content of the dream? That is, was the group's history a series of events produced by forces beyond human control and ending in catastrophe, just as the destruction of Flight 20 was the product of forces beyond human control? In fact, did the destruction of Flight 20 symbolize destruction of the group itself? Four considerations point in this direction. First, as has already been noted, one uncontrollable force, the weather, is in fact bringing about the group's destruction. Second, the airliner chosen for destruction was the one that members of the group customarily used for trips to headquarters. Their next trip would be their last as members of the project or group. Third, the group made a significant slip of the tongue throughout the dream. Flight 20 is the flight that travels from Longwood airfield to a project headquarters. In reality, the flight arriving at Longwood airfield would be numbered 21. Hence the group shot down the plane in which they usually leave the base, even though the dream's plot required it to be arriving at the base. The third consideration is more complicated. Recall that the test-group had been in effect reduced to four members, only three of whom took part in the skit. The fourth was the pilot. The pilot was in one of the military services, attached to the group for duty. He would not suffer the same kinds of losses as the rest of the group through its failure to complete its mission. The pilot usually takes the part of Buckle 92 in test-flights. This means that of the three major roles in the skit, only that of Flight 20 was a civilian role, Windsor 9 and Buckle 92 both being service roles. This points again to the possibility that destroying Flight 20 symbolized the destruction of the group.

But shooting down Flight 20 might also be interpreted as a reaffirmation of the solidarity of the group. It symbolized completion of their mis-

sion, which would also mean return to headquarters, and breaking up the group. Was the destruction of Flight 20 then a way of preventing the group from breaking up, by making it impossible for them to leave the base? Perhaps both these themes were present in the dream. Or perhaps group dreams are not subject to so deep an interpretation as either of the above.

Just as, in the Freudian system, the dream might be expected to tell us something of the relations among id, ego and superego in the dreamer, the group dream may be expected to tell us something about the relations among the members of the group. Looking back at the transcript there is no question about the leadership role: the final, destructive act is committed by Buckle 92. In interview, the leader commented, "I elected Buckle 92 position in the beginning, and I think maybe when I elected it I had the idea I was being the hero." It is also noteworthy that he took a leadership role in moving the plot forward at several points. Yet as Buckle 92 he did not have control over the total situation; he was acting under instructions from Windsor 9. In fact, the leader did not have complete authority over either Engineer A or Engineer B. Both were in the employ of a cooperating organization, which had assigned them to him. The project was a joint one, however, and in this respect they were all in the same boat.

Now the actual relations between the leader and Engineer B were such that there was a great deal of mutual trust. The leader said of him: "[After a most distressing experience under a previous supervisor], 'B' became apprenticed to me. He accepted this completely, and opened up one hundred percent. There was nothing I could ask that he wouldn't give. . . . From the initial stage of being a real scared kid who didn't know what he was there for, he developed into a really competent engineer." B was ostensibly fitted for the role of Windsor 9 because he was an excellent mimic of Windsor's speech mannerisms, but he was also well fitted as a teammate of the leader's to carry out the mission, whether it be regarded as an act of heroism or an act of destruction. "There was nothing I could ask that he wouldn't give."

The role of Engineer A is the most complicated to explore. Of him the leader says: "I had been at sword's point with 'A'. He was an arrogant son-of-a-gun. His parents were German immigrants. He was unwilling to admit there was anything he didn't know. . . . His attitude was that his job and his associates—including me—were beneath him. I tolerated him, occasionally slapped him down, especially when he was creating a disturbance. . . . He was very arrogant with the people working with him, would bawl them out for doing anything without consulting him. One day he came in

when I was taking out a subassembly to help the chap responsible for it. 'A' came in and began bitching at me for doing it. This was at a time of tension and I had received that day about three complaints about 'A'. I'm a little ashamed of myself for my performance—I lost my temper. I had been trying to smooth things over by telling the complainers that 'A' was young, doing a job, and so on. But I really cussed him out and told him if he didn't like how things were being done he could resign, and ended by sarcastically saying, 'Now just what *is* your problem?' He said feebly, 'I guess I don't have any problem,' and turned around and walked away. This actually was the last trouble I ever had with "A", although some others continued to have trouble with him."

"In the last six weeks, and especially the last two, he stood up as well or better than most. He stuck with me, and really developed. Yet I was suspicious—and a little ashamed of it—that he felt I might be of some help to him in getting the next job he was after. . . . The voice in the skit is very much put on. This is completely out of character for him, and surprised the hell out of everybody who knows him. . . . The significant point was his behavior in sticking with the job during the last two weeks when a lot of the guys dropped out."

Although the leader says that Engineer A's role and voice are "completely out of character," the reader is unlikely to be surprised by his assumption of a masochistic role after the demonstration of arrogance to others in the project, and submission to the leader. His behavior as a member of the test group is sufficient evidence of the interpersonal difficulties within the group, though we receive no hint of this in the actual content of the dream. In the dream, all aggression is directed outward from the group. Yet the relations of other group members with "A," are symbolized by "B's" role in his destruction, and the masochistic nature of his relationship with the leader is dramatized in his acceptance of destruction by the leader.

The validity of the above interpretations is questionable; presentation of background data about the group makes them plausible rather than certain. However, it is clear that the skit reflects shared group experiences and emotions. Moreover, it has little meaning apart from the group enacting it; indeed, it is as idiosyncratic as an individual's dream. But the meaning of individual dreams is discoverable; the laws of dream construction are understood. We do not yet possess such orderly knowledge of group dreams; however, it appears that they may have comparable value for the diagnosis of intergroup and intragroup problems. A collection of cases in which the contents of spontaneous dramas are presented along with background ob-

servations of the group would provide the basis for a more systematic understanding.*

* The reader deserves to know the end of the story of the test-flight group. At 4:30 that afternoon, a hole in the clouds 200 miles away was discovered by one of the project personnel who was flying in to the base. He radioed his discovery, and a successful launching mission was carried out at 5 o'clock.

TRAINING EXECUTIVES IN ACTION

MALCOLM E. SHAW

American Management Association, New York

Role playing has become an established technique for training industrial supervisors. Many practitioners, however, have been hesitant in applying role playing methods to executive training. A survey conducted by FACTORY Management and Maintenance* showed that of 107 companies using role playing, 72% used it for line supervisors. The survey showed that only 16% of the companies used it for training higher plant management. It follows that even a smaller percentage utilize the technique for training executive personnel. Many industrial training people feel that top management personnel will not respond to the technique. This attitude is not justified by experience and, in fact, the FACTORY survey indicated that role playing had not truly been tested as an executive training tool.

Since January 1955, the American Management Association-Executive Communication Course has been conducting training sessions for top and upper middle management which shed a new light on the receptivity of executives to role playing and other action techniques. The Course comprises three weeks of intensive training in executive action. Participants study group problem solving, communication networks, appraisal interviewing, and other aspects of both organizational and inter-personal relationships in management enterprises. The primary focus of the Course is on development and practice of communication skills. As the Course has grown and developed, an increasing emphasis has been placed on the use of action methods. This has been particularly true of the third unit of the Course which is concerned with motivation and measurement in communicating with others. Data has now been collected which makes it possible to draw some tentative conclusions regarding the feelings and responses of executives who have been exposed to action methods. In reviewing this data it is necessary to keep in mind that the majority of participants have line functions and that only a small percentage of the responses represents feelings and attitudes of personnel or staff executives. Secondly, it is significant that the majority of participants hold top level positions such as: president, vice president, general manager and division manager.

During the period from October 1955, to January 1956, seventy-three

* Role Playing in Training Supervisors, FACTORY Management and Maintenance, McGraw-Hill, January 1954, Vol. 112, No. 1, page 102.

executives completed the third week of the Executive Communication Course. Each participant completed a "Feedback Sheet" which included questions concerning the participant's reactions to the Course. These survey sheets have been analyzed to obtain data regarding the participant's reaction to role playing and action methods. The questionnaire was anonymous and respondents were asked to express "your frank reactions to the work in this unit". Responses to the following five questions were analyzed:

1. What did you like about this unit?
2. What didn't you like?
3. How could the subject matter be improved?
4. How could the instructional methods be improved?
5. Other comments and suggestions:

Before presenting an analysis of the responses some additional background information is necessary to appreciate the significance of the group's reactions. Data presented was gathered only from questionnaires administered following the third week of work (Unit III). This was done because role playing was used more extensively in the third unit than in any previous session. Secondly, it is important to note that the week's work is divided into "General" and "Project" sessions. General sessions comprise lectures, demonstrations, films and other didactic presentations conducted by staff members and guest speakers. Project sessions consist of action training methods with about 50% of project time spent on role playing and the balance of project time on group discussion and measurement of inter-personal responses in conference and other face-to-face situations. Project sessions account for approximately 75% of the total week's work. Thus, the bulk of the week's work involves action training.

In classifying the questionnaire responses, four criteria were used:

1. Responses in which role playing was specifically mentioned.

Any statement which a participant made in response to any of the five questionnaire items which specifically mentioned role playing was extracted and classified.

2. Responses in which project sessions were specifically mentioned.

Statements which specifically mentioned project sessions were classified. 50% of the project session time was devoted to role playing and the balance of time was often utilized for other action techniques and measurement. Therefore, it was felt that any responses regarding project sessions would be indicative of attitudes toward action methods.

3. Responses regarding instructional methods.

Responses to question regarding instructional methods were examined and classified.

4. Responses to learning atmosphere.

All comments related to the atmosphere created throughout the week were classified.

SUMMARY OF RESULTS

Responses Mentioning Role Playing

21% (15 responses) of the participants specifically mentioned role playing. The significant fact here is that 79% of the participants accepted role playing as part of the instructional process and made no particular comment either negative or positive.

15% (11 responses) of the participants made definitely positive statements about the technique.

3% (2 responses) of the participants made definitely negative comments about the technique.

3% (2 responses) of the participants criticised some part of the role playing process. In both of these instances the criticism had to do with the way in which a particular role playing enactment was structured and was not a criticism of the process.

Here are the responses in which role playing was mentioned.

Liked

Role playing

Projects—role playing

Project sessions were the best of the three units—use of role playing and the ability of the group to work together

Role playing and problem solving

I liked role playing—his (director's) approach was good and I learned a lot from it

Would like pamphlet on role playing

Action training and role playing

Session on role playing

Participation in role playing

Didn't Like

Too much role playing

In use of role playing, the technique of giving one participant information not known to other

General

More emphasis on role playing
More role playing procedures

Methods

A little fuzziness on the usefulness of role playing as a device to use outside the schoolroom

Role playing as presented in this class—switching of roles, lack of understanding of role to be played did not contribute as much as role playing where participants are prepared and know the specific problem

Responses Mentioning Project Sessions

13% (9 responses) of the participants made definitely positive comments about project sessions.

No specific negative comments were made about project work. Here are a few typical responses to project sessions:

"I liked the terrific participation obtained in project sessions by the conference directors."

"I liked project sessions on problems of motivation. Project sessions were excellent."

Responses to Methods

16% (12 responses) of the participants made comments about teaching methods.

6% (4 responses) of the participants made definitely positive statements about teaching methods.

10% (8 responses) of the participants made statements which indicated a desire for more directive leadership. Most of these comments indicated acceptance of the methods in general but a desire for slightly more autocratic methods.

Here are a few typical examples of statements concerning methods:

"Could be improved by being slightly more autocratic."

"In some sessions the atmosphere was too permissive, needed pick-up in tempo."

"Methods sound but project sessions easy to divert from primary subject."

"I believe both instructors and methods were excellent."

Responses to Learning Atmosphere

55% (40 responses) of the participants made positive statements about the group atmosphere. No negative comments were made.

Here are some examples:

I Liked

Emphasis on attitudes and feeling

Warm and cooperative spirit

Good spirit and tone

Smallness

Togetherness

The "lift" or vote of confidence obtained from others who have problems similar to mine. . . .

CONCLUSIONS

The majority of participants (79%) accepted role playing and action methods as a part of the Course and made no specific comment about these techniques. The majority of comments which were made were of a positive nature. There were requests for "more role playing", "more practice", and quite a few participants felt that the Course should be extended in time to provide for additional training. Specific comments about project sessions, which were conducted basically along action lines, were all positive. Comments which were directed toward training methods showed an acceptance of the basic approach and a desire for more of the same. There were 8 responses which indicated a desire for more "directiveness", more "structuring", and "staying on the subject". On the other hand there were 40 statements which showed an appreciation of the action atmosphere. A subjective examination of all questionnaires showed general acceptance of the basic instructional approach. With very few exceptions, this general acceptance included acceptance of action training methods.

Role playing has received wide acceptance as a supervisory training tool. It has long been accepted as a method for increasing understanding of interpersonal relations. However, comments from many quarters have indicated a reticence on the part of training people to utilize the technique in executive development and training. The executive's status, broad educational and work background, and his busy schedule all seem to be deterrents in applying this technique to his development. Actually it is these factors which make action training a necessary and valuable approach. The responses of top level management people participating in the Executive Communication Course show that they accept rather than reject the tech-

nique. In fact, for many, it is the highlight of the entire training experience.

It should not be surprising that executives respond to action methods.

*Business Is Action**. The real challenge for industrial training personnel is to spontaneously administer and adjust to the needs of executives in dynamic learning situations.

* From an unpublished address by Dr. J. L. Moreno, Hotel New Yorker, New York, New York.

A CRITICAL APPRAISAL OF "THE PRACTICE OF DYNAMIC
PSYCHIATRY" BY JULES H. MASSERMAN*

WALTER BROMBERG
Sacramento, California

The topography of the psychological sciences changes so rapidly that it requires alert cartographers to keep our store of blueprints up to date. Beyond map-making there is a need for a synthesis, a re-evaluation and a sifting of all that psychoanalytic theory, clinical psychiatry, clinical psychology, neuro-physiology and common sense psychotherapy have contributed to modern psychiatric practice. Masserman's present volume is more than a blueprint: it is a re-assessment of the vast quantity of material which the modern psychiatrist should have absorbed in applying his art. Although definitely colored by the particular abilities and distinguishing characteristics of the writer, the disciplines which build up to a clinical psychiatry of 1956 are clearly presented. The student and practitioner of psychiatry would be provided, on reading this book, with a full conceptual background for understanding the practical handling of problems that are presented to him.

This orientation has altered the format of the book somewhat so that the traditional sequence of etiology, symptoms, treatment, etc., of psychoses and neuroses as set down in the usual textbook of psychiatry is not necessarily followed. The accent is on the *use* of psychiatry. Thus, of the total volume covering 712 pages, 14 pages are devoted categorically to psychosis, about 80 to neurosis, a like number to biodynamics and about 180 to psychotherapy. In this accent, disturbances in the adaptation process which involves physical, neurological, semantic and cultural elements are carefully discussed.

One of the interesting emphases is the accent on the psychiatrist as essentially a medical man. The author insists on "the necessity of a sound medical orientation in dealing with all problems of behavior" (p. 169). This viewpoint reappears in his discussion of practical handling of patients in hospitals, in making records and consultations with medical men in which he gives full weight to the medical work-up of cases with apparently purely psychiatric symptoms. This pluralistic approach, wherein nothing which concerns the patient is neglected, is a praiseworthy and

* Published by W. B. Saunders Co., 1955, Philadelphia and London, 790 pp. with index.

therapeutically essential attitude for the modern psychiatrist to assume. It serves to explicate the modern movement of bringing psychiatry back to biology, or to psychobiology.

The mass of material which the author presents illustrates the main thesis of the book, namely, the need for the clinician to understand his patient's semantic, neurologic, psychologic and biologic struggles to adapt himself to a complicated environment without succumbing to disorganized, regressive mental function. The same feeling of struggle with a living psycho-physical organism in the midst of a complex milieu is given by the numerous illustrative cases throughout the volume. Here the varied form, the confusing and topsy-turvy clinical pictures from which one must eke out a dynamic formulation in everyday practice, are presented sometimes in detail and sometimes briefly. It is a clinical axiom that "No case follows the textbook", and no case follows any given theory of psychic malfunctioning. And between the lines Masserman exhorts his reader and presumably the student reader of his book to follow Agassiz' dictum, "Study nature, not books". Along this line the chapters on "Strategy of Therapy" and "Tactics of Therapy" are of great value since they touch on the actual relationship between patient and therapist including obvious methods of communication, feelings of therapist and patient, use of imagery and metaphor by both and a myriad of elements entering into the therapeutic relationships.

The background for discussion of psychotherapy is detailed and complete. Into the presentation of the case studies and their method of handling, is woven the author's extensive work in experimental biodynamics as well as his considerable thinking about the validity of some psychoanalytic formulations. The author's analysis of *Ur-defenses*, the total psychologic mechanisms with which human beings handle their immediate environment and their place in the world, becomes a base-line for application of psychoanalytic principles to patients. This is in contrast to the blunt superimposition of psycho-analytic theory on individual cases, which is still in fashion in some quarters. The author's personal philosophy, his penetrating view of human beings, his sometimes sardonic reaction to the psychiatrist's occupational hazard of omnipotence and his realistic view of the psychiatrist's place in the patient's world, are spelled out in detail. Perhaps the phrase in the chapter, "The Functions of the Psychiatrist" will illustrate Masserman's rounded perception of a psychiatrist in action (p. 502):

"In fact, it may half-seriously be contended that a psychiatrist

should be barred from practicing in an office that does not have picture windows through which he can contemplate distant hills, marine horizons, panoramas of a teeming city or other dynamic vistas of the vast physical and complex social realities of life away from his padded couch and outside his sound-proofed doors."

The volume is thorough from a practical and theoretical point of view: the author makes the proviso in his handling of material that (p. vi): "psychiatric rationale is regarded as worthy of discussion only if it makes a difference in practice". So much makes a "difference" that a book of this sort could easily suffer from excessive detail, almost as if Masserman's students were over-taught.

The essential accent on therapy sometimes acts to the detriment of description of more formal subjects. For example, in the chapter "Personality Pattern Disturbances", there is scant attention given to the important clinical problem of narcotic drugs and the everyday consequence of neuroses following trauma, and perhaps an excessive attention to social issues (Chapt. 39). This attempt to relate psychological causes for such multi-determined things as war, economic struggles, scientific dislocations, the flux of social movements and political ideologies is, as the author points out, the psychiatrist's occupational neurosis. He may be excused for trying to invade life in the world as confidentially as the psychiatrist invades the life of a patient in his office. But though Masserman perceives the fact of psychiatric indulgence in omnipotence fantasies (p. 636):

"What cosmic insights can be acquired by, say, tracing the neural connections of the uncinate gyrus, or observing the salivary droolings of a frustrated dog, or tube-feeding or electroshocking institutionalized catatonics, or, for that matter, listening eight hours a day to the fantasies of psychoanalytic patients in an office doubly sound-proofed so that (as some have seriously pretended) no inkling of disturbing reality could filter in or out?",

he succumbs as any thinking man would to the wish to understand his place in the world in its broadest sense.

Masserman has written an erudite, personalistic, frankly spoken book concerning modern psychiatry. It is recommended to everyone in the field.

MORENO'S CONCEPT OF "THE CO-UNCONSCIOUS" AND THE THERAPEUTIC TRIAD*

A DISCUSSION

LOUIS CHOLDEN**

University of California

The concept of the therapeutic triad is very useful and stimulating. I wonder however, inasmuch as the term interpersonal is becoming such a multi-faceted term, whether this is the best descriptive word for this kind of therapy. It is possibly confusing to some in terms of the present Sullivanian idea of interpersonal therapy which is actually somewhat different in tone and concept than Moreno's. However, in another sense Moreno is hoping to effect the two people in this triad in such a manner as to effect the interpersonal bond or relationship between them. Of course, this may also be accomplished if only one person is changed, and in this way the bond becomes different. However, it is certainly more useful to see a change in *both* parties, for then there is a readjustment of the total situation that has deeper meaning than for a single individual.

The interesting question that I have never heard posed before which Moreno presents concerning the unconscious of A finding a path to the unconscious B holds many possibilities. I think first, of the literature concerning the unconscious of the patient being connected in some way with the unconscious of the therapist. Here we have an A and a B who are trying to reach each other in some manner. Of late, the concept of listening with a third ear, or utilizing intuitive hunches in the therapeutic process, and especially some of Ehrenwald's recent works, point up the increase in recognition of the unconscious awareness of another person which has thus far only been applied to the therapist.

I am not sure I know just why Moreno says we must modify the meaning of unconscious by looking for a counterpoint which will relate every event in the unconscious of A to every event in the unconscious of B. If we think of the unconscious as that aspect of the individual which is beyond his awareness, we see this body of data which is unavailable to him as a unitary and integral function of the organism. Certainly it is

* See J. L. Moreno, "Interpersonal Therapy, Group Psychotherapy and the Function of the Unconscious," *GROUP PSYCHOTHERAPY*, Vol. VIII, 1954, p. 191-204.

** Published posthumously.

more private than common. In the Freudian definitions, it is a functioning organ occupied with primary process organization, that effects the actions and motivations of the individual. I am not sure I understand the concept of "co-unconscious", as applied to this type of definition.

I agree strongly that the distinction between unconscious and pre-conscious has not proved productive. As a matter of fact the newer school of ego psychoanalysts have tended to simply make the preconscious concepts a sphere of the unconscious.

I must apologize for my ignorance of Jung. While I have read extensively on this school of psychology, I cannot say that as yet I have a clear concept of the racial or collective unconscious. Maybe what I am saying is that I don't believe that the data he has justifies the conclusion.

I think Moreno states the Adlerian idea quite clearly. Where the goal of superiority is the basic drive, that might be considered the unconscious drive. However, I don't believe Adler phrases it as an unconscious conceptualization. But rather he phrased it in terms of the life-style or life patterns. The thought has come to me in reading Moreno's analysis, that rather than phrasing it in terms of "unconscious", we should speak of mechanisms of operation of the individual. And that there is a tremendous problem raised when we try to make clear to one person, the mechanisms of operation of the second person, for the basic processes are so different in each of us.

The first paragraph in section 3 of Moreno's article I think is brilliantly written. The sentence "They live simultaneously in different worlds which communicate only at times and even then only incompletely. The Psyche is not transparent" (a quotation from his "Psychopathology of Interpersonal Relations", 1937), is masterful.

I find the methods of building a bridge between A and B interesting and undoubtedly very useful. However, on the seventh point I again found myself stopped when I tried to understand what is meant by the phrase "amplifies" the unconscious processes of A. I wonder if the conceptualization of the unconscious here is not the accepted Freudian idea of unconscious. For as I read this on it strikes me what Moreno is dealing with is not the unconscious as a whole, but that aspect of the person which is hidden to himself but which is later available to conscious awareness, and that is essentially pointed at the living relationship with another person.

I don't agree that all of the interactional techniques can be used in all forms of psychotherapy. First, there's no Freudian concept of the

"co-unconscious". Second, the Adlerian group does not conceive of the unconscious factor with any clarity. (Although there is an article by Schulman about 2 years ago that points to an unconscious.) The non-directive interview methods would not do anything so directive as manipulate the situation in this manner. However, it would seem to me that people who have these orientations might utilize their conceptual frameworks and this methodology to attain a wider area of understanding awareness of the other person by these methods.

BOOK REVIEW

A guide to psychiatric books. Karl A. Menninger. New York: Grune & Stratton, 1956. xvi, 157. \$4.75.

This volume is perhaps mis-titled. It actually consists of a list of some 3000 books in a variety of fields, divided by the editor in five large divisions: Basic and related disciplines (logic, biology and physiology, psychology, communication, anthropology and ethnology, sociology, cultural history, religion, psychiatric social work); Specialized psychiatry (child, geriatrics, psychosomatic medicine, administrative psychiatry, industrial applications, military applications, legal, criminological and penal, and psychiatric training); Psychiatric Therapies (general treatises, hospitalization, psychiatric nursing, adjunctive therapies, physical therapy, electric and surgical therapies, psychotherapy); Preventive psychiatry and mental hygiene (general personal histories, biography and fictional accounts). There is a section of bibliographies, and suggested reading lists for physicians, and for those interested in the inter-relationships of religion and psychiatry.

Fourteen books in group psychotherapy are listed. Missing are the excellent accounts of Foulkes, Bierer and Konopka.

Perhaps the major value of such a volume lies in the list of recommended books. It appears improbable that any one person can have a good enough knowledge of the 3000 to be able to make worthwhile suggestions. Nevertheless, this little volume should be useful for practitioners in providing a handy, although not complete compendium of material in the field of psychiatry and ancillary disciplines.

RAYMOND J. CORSINI
Book Review Editor

AMERICAN SOCIETY OF GROUP PSYCHOTHERAPY AND PSYCHODRAMA

1957 Annual Meeting of the Society

The meeting is to be held at the Morrison Hotel, Chicago, Illinois, May 11 and 12, 1957. President: Dr. Jules H. Masserman; Program Chairman: Adaline Starr, Suite 1700, 6 No. Michigan Avenue, Chicago 2, Ill.

1956 Annual Meeting

This meeting had many features worth recording. The new president, Dr. Jules Masserman, was inducted Friday, May 4th and Dr. Raymond Corsini became President-Elect of the Society.

The Illinois chapter of the ASGP had arranged for a demonstration and conference on psychodrama under the direction of Dr. J. L. Moreno, following an informal dinner. Six hundred and thirty-five persons registered for the psychodrama demonstration.

New York Chapter

President: Lewis Yablonsky; Secretary: Hannah B. Weiner. The annual meeting of the chapter will take place at the Commodore Hotel, January 3rd and 4th, 1957. Members of the society in adjoining states, such as Connecticut, New Jersey, Pennsylvania, Delaware, Maryland, are welcome to attend. A demonstration of psychodrama, directed by Dr. J. L. Moreno, will be one of the features of the program. To participate in the program, write to: Hannah B. Weiner, Moreno Institute, Room 327, 101 Park Avenue, New York 17, N. Y.

Illinois Chapter

President: Adaline Starr; Secretary: Margaret Goldman; for information in regard to meetings and workshops of this chapter, write to: Margaret Goldman, Suite 1700, 6 No. Michigan Avenue, Chicago 2, Ill.

Michigan Chapter

President: Dr. Rosemary Lippitt; Treasurer: Inez Silk; Secretary: Sonia Rogolsky; Dr. Robert Drews, Psychiatric Consultant. The annual meeting of the Michigan chapter took place in Ann Arbor on February 17th, 1956. Its central feature was a demonstration of psychodrama by J. L. Moreno. Because of the great interest and large attendance, a second meeting is planned for Friday, September 8th, 1956, at the Hotel Statler, Detroit, Michigan, at 8:00 p.m. For further information as to local arrangements,

write to Dr. Robert Drews, 12500 Broadstreet Blvd., Detroit 4, Michigan. For information on the activities of this chapter, write to Sonia Rogolsky, 19450 Cranbrook, Detroit 21, Michigan.

Wisconsin Chapter

President: Dr. Glenn Bacon; Secretary: Jean York. For information on activities of this chapter write to Jean York, 1334 Wisconsin Avenue, Racine, Wisconsin.

District of Columbia Chapter

President: Dr. Michael Miller, Boy's Village, Cheltenham, Maryland. For information on activities of this chapter write to Dr. Miller.

Ohio Chapter

President: Dr. Wm. E. Moore. Write to Dr. Moore for information on activities of this chapter, 312 Ohio Building, Akron 8, Ohio.

California Chapter

President: Dr. Robert A. Haas; Secretary: Dr. Gertrude Harrow. For information on activities of this chapter write to Gertrude Harrow, 14256 Ventura Boulevard, Sherman Oaks, California.

ANNOUNCEMENTS

Editorial Committee of Group Psychotherapy

Dr. Jiri Nehnevajsa, Columbia University, Department of Sociology, has been appointed Associate Editor.

New Contributing Editors

Dr. Robert Blake, University of Texas, Austin; Dr. George Bach, Institute of Group Psychotherapy, Beverly Hills, California; Dr. Wladimir G. Eliasberg, New York; Dr. Serge Lebovici, Paris, France; Dr. Arthur Lerner, Los Angeles, California; Dr. Rosemary Lippitt, Ann Arbor, Michigan; Dr. Wm. Lundin, Chicago State Hospital. Dr. Raymond Corsini continues as Book Review Editor.

A New Institute of Group Psychotherapy

Under the direction of Dr. George Bach an Institute of Group Psychotherapy has been opened in Beverly Hills. Inquiries should be addressed to Dr. George Bach, 450 North Bedford Drive, Beverly Hills, California, or to Dr. Goodwin Watson, Teachers College, Columbia University, New York 27, N. Y.

International Rorschach Society

The Third International Rorschach Congress will take place in Rome, September 13-16, 1956. Applications for enrollment for the lectures should be made by July 10th, 1956, to the international secretary, Dr. A. Friedemann, Fischerweg 6, Bienne, Switzerland.

Psychotherapy in Germany

The Annual Congress of the General Medical Society of Psychotherapy, conducted by Prof. E. Kretschmer, took place at Freudstadt, Black Forest, at the end of April, 1956. This conference was proof of the slow but steadily increasing spread of Moreno's psychotherapeutic methods in Germany. A lecture on sociometry, especially dealing with the development of a group of children, reflecting itself in the change of sociometric structures, given by Dr. Elfriede Höhn of the University of Tübingen, met with great interest. Dr. Hildebrand Teirich of Freiburg demonstrated sociograms of a group of students. (He is treating a great number of neurotic students who have difficulties in examination situations). Dr. Teirich showed and explained the extraordinary sociometric status of the visitor in this group and gave reports of his experiences with group psychotherapy applied to various medi-

cal conferences. He demonstrated structure analysis of groups sociometrized and analyzed at the beginning and end of those meetings.

An entire evening was devoted to the subject of group psychotherapy. The lecturers—Dr. Raoul Schindler of Vienna and Dr. Teirich—described their experiences in this field. Dr. Schindler emphasized the hierarchy within the group. The discussion, which lasted until late at night, was an expression of the great interest in these methods and their constant increase in Germany in the last two years. The application of psychodramatic methods, however, is at the moment confined to only a few hospitals. Within the General Medical Society of Psychotherapy a section on Group Psychotherapy was founded. This result of the congress certainly represents a fine fulfillment of its program: "Sociology and Psychotherapy".

THE LOUIS CHOLDEN MEMORIAL FUND

*To the Fellows and Members of the American Society of
Group Psychotherapy and Psychodrama:*

Our colleague, and member of the Society, Dr. Louis Cholden was killed suddenly in an automobile accident on April 26, on his way to the airport in Los Angeles as he was about to leave for our Annual Meeting in Chicago. He is survived by his wife and three children.

In response to requests from many members who feel his loss deeply, a Louis Cholden Memorial Fund has been established.

Contributions to the fund will be transferred to his surviving family.

Checks should be made payable to the "Louis Cholden Memorial Fund". A report on the Fund and its disposition will be sent to all contributors after an appropriate period.

J. L. MORENO, M.D.
Secretary-Treasurer

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