

take any more . . . too giddy. I recover and break my way out of the circle into space . . . I'm sobbing and I don't know what to do with myself but it's a relief to be out there. I am told to lie on the floor and feel the space . . . It feels good - I'm aware of the texture of the carpet beneath my hands and of the floor supporting me and the feeling of space around me. I want to stay there a while . . . Now I'm meeting my partner in this space . . . I want to discuss something with him . . . I take a long time to go about it . . . a very long time - I'm not sure whether I can take the risk of asking him for what I want: so I tell him what it's about (and hope that he will do it for me) . . . He won't. I carry on that way for a long time, going nowhere and I'm really stuck again. Sue suggests that I become the director of a film called "Stuck" and someone stands in for me. I am to give the orders for how this scene is to be . . . I can't. I'm stuck.

There seem to be two couples on stage, I throw one couple off but what to do with the other? I try shouting orders at them but they won't take much notice . . . nothing changes . . . I don't know what to do next and I'm still stuck with two people on the stage who won't make up their minds what to do . . . well "Jenny" won't say what she really wants and he isn't going to do it for her! Somebody suggests that maybe he's not the right actor for the part . . . I'm not sure what they mean . . . I'm aware of the frustration in the group . . . something's **got** to happen . . . I throw him off the stage and am not sure what that means. I don't feel finished but somebody else is warmed up to work and time is short - The group agree to go straight on with the next protagonist. I'm sad, lost, not sure and I sit and try and watch the new action . . . my eyes keep turning to the person who represented Hugh in my psychodrama.

I know that I have to phone him and get together to discuss this. I also know that I will have to be clear in what I am asking of him and to make sure that he hears me. He does hear me.

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### **AN ACCOUNT OF A BRIEF PIECE OF WORK DONE BY A PATIENT IN A HOSPITAL GROUP.**

*For the purposes of this article I have changed the Patient's name and will call him Sam.*

Sam had been in an acute psychotic state for about eight weeks, and was just coming out of his psychosis when this work was done.

We had begun with a short warm up and then gone fairly quickly into a guided fantasy. People imagined going on a journey to an old house which had a picture gallery. I described the setting, and then asked people if they wanted to, to go into the picture gallery and look for their own picture on the wall. I asked them to take time to see their picture. Who was it? What the colours were? Which kind of frame? Was there a date and so on. I then asked them to choose whether they wanted to bring it down from the wall and bring it back with them into the group, or if they wanted to leave it where it was.

I want to describe Sam's picture and what he did with it.

His picture, unexpectedly, was the whole of the picture window with all the moving traffic, people and so on. (His real world outside). He had to take it down by climbing onto and balancing on the window sill. He turned slowly round with the picture in his outstretched arms, and projected the picture of the outside onto the screen which was on the wall at the far end of the room. The projection, he said, was his reality in the hospital. Then, he asked a very sturdy, tall Irish boy to help support him, and coming down from the sill, sat on the boy's shoulders with his hands on the ceiling. The two proceeded in a very slow, balanced walk across the room from the outside reality to where his reality in the hospital was, talking as he went about how he was balancing. I said that I felt that that was exactly where he was at that moment, in a finely balanced state, and just at the point where he was trying to connect his outside world with his 'in the hospital' reality. In the community meeting that morning he had been talking about wanting to bring the outside to the inside, and I felt good that he was trying it out.

He had all the group's attention and support, and I pointed this out to him. People seemed to trust what he was doing and gave him space, even though a week or two before he had been so disorientated and wild in his behaviour. He had their respect. He then asked the group's help to lower him slowly down onto a pile of cushions and the group were very loving in their support. He ended up as part of the group. During feedback we talked about how important the group had been to him. I felt it was a significant piece of work for Sam to get a sense of his balancing and his grounding, and the place of the group in that.

It was powerful though simple, and important for me because I too had had to do some fine balancing, judging whether I felt I was helping Sam find his reality or risking tipping his balance into fantasy.

**Ann McEwan**

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**Elizabeth Cracknell**

### **PSYCHODRAMA OR PSYCHOTECHNIQUES?**

I have a problem. Three years ago I took up the post of Psychology tutor at a School of Occupational Therapy and one of the topics that constantly arose from third year students, as they shared their experiences of hospital practice with fellow students and my colleagues, was that of "psychodrama". A number of students said that they had experienced "Psychodrama" during their year of clinical practice; so I asked them to describe what they meant by it. They told us of a number of exercises in which they had participated with groups of patients, activities such as "group sculptures" were mentioned. They knew the foundation of these from their study of sociograms, as a means of looking