



IAGP  
International Association  
for Group Psychotherapy  
and Group Processes

# FORUM

Journal of the International Association for Group Psychotherapy and Group Processes

**VOLUME 9**  
July 2021

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Journal of the International Association  
for Group Psychotherapy and Group Processes



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is IAGP's annual journal, which presents articles of scientific and professional interest throughout the world of group psychotherapy and group processes.

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# President's Welcome

## Bienvenida del Presidente

**Allow me to welcome everyone to our latest issue of the IAGP Forum.**

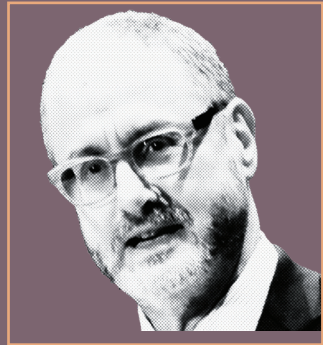
In the times of uncertainty that evolved and developed during the coronavirus pandemic, having the consistency of receiving our IAGP journal has never been more timely and important than before. We are all grateful for everyone involved in the publication of this version, Kaoru Nishimura from Japan, Camino Urrutia from Spain and Roberta Mineo from Italy. Many thanks also to all of our dedicated reviewers, now that our journal has become peer reviewed. We are all grateful to the editors that have come before, including Kate Bradshaw Tavon, Lars Tavon and Teresa von Sommaruga Howard. The epigenetic nature of publishing our Forum is such that we learn from those who came before us.

IAGP is also grateful to Dr. Dominick Grundy, who along with Frashia Ndungu from Kenya but currently living in Japan, and Dr. Asmaa Abdel Fattah, Chair of the IAGP Young Professional Section, who have recently organized a series of professional writing groups for our members. Hopefully the fruit of their labor will include future articles published in our Forum. Like any skill, writing needs to be cultivated with interest, desire and practice.

The coronavirus pandemic has affected humanity for over one year now. This pandemic has created much sadness, loss and loneliness among everyone around the world, including our IAGP members.

The pandemic has also created opportunities and has demonstrated the resiliency of our organization and our members.

We are grateful to Dr. Mimmo Agresta, head of our Webinar Committee, for organizing meaningful and timely programs for our members. Never before has it been more important to feel the sense of community and connection that these webinars and workshops are offering our members. We are grateful for our Education Committee, headed up by Drs. Maurizio Gasseau and Cristina Martínez-Taboada, for the outstanding online programs that they are offering our members now. Our intervention groups have become a support network for our members who have interest in particular areas of group therapy and group processes. Our social dreaming matrix groups, also headed up by Dr. Maurizio Gasseau, offer our members a safe space, 'perchance to dream'. Our Globeletter, headed up by Drs. Thor Kristian Island and Luis Palacios Araus offers us current and interesting articles that our members have composed. Their new addition of photographs taken by our members is but another way to help connect us, contain our loneliness and fill us with news from members around the world.



Richard Beck  
IAGP President

**Permítame dar la bienvenida a todos a nuestro último número de la revista de la IAGP, Forum.**

En los tiempos de incertidumbre que ha supuesto la pandemia de coronavirus, mantener la regularidad de recibir nuestra revista ha sido más oportuno e importante que nunca. Estamos muy agradecidos a quienes han participado en la publicación de esta versión, Kaoru Nishimura de Japón, Camino Urrutia de España, y Roberta Mineo de Italia. Muchas gracias también a todos nuestros dedicados revisores, ahora que Forum se ha convertido en una revista revisada por pares.

Estamos igualmente agradecidos a los editores precedentes, como Kate Bradshaw Tavon, Lars Tavon y Teresa von Sommaruga Howard. La naturaleza epigenética de la publicación de Forum es tal que aprendemos de los que nos precedieron.

La IAGP también está agradecida al Dr. Dominick Grundy, quien junto con Frashia Ndungu de Kenia, que actualmente vive en Japón, y la Dra. Asmaa Abdel Fattah, presidente de la Sección de Jóvenes Profesionales de la IAGP, han organizado recientemente una serie de grupos de escritura en el ámbito profesional para nuestros socios. Esperemos que el fruto de su trabajo incluya futuros artículos publicados en Forum. Como cualquier habilidad, la escritura debe cultivarse con interés, deseo y práctica.

La pandemia de coronavirus afecta a la humanidad desde hace más de un año. La tristeza, pérdidas y soledad que dicha pandemia ha provocado entre los habitantes de todo el mundo, incluidos los miembros de la IAGP, son grandes.

La pandemia también ha creado oportunidades y ha demostrado la resiliencia de nuestra organización y nuestros miembros.

Estamos agradecidos al Dr. Mimmo Agresta, presidente del Comité de "Webinars", por organizar programas significativos y oportunos para nuestros miembros. Nunca antes había sido tan importante la sensación de comunidad y conexión que estos "webinars" y talleres ofrecen a los socios. Estamos agradecidos a nuestro Comité de Educación, encabezado por los doctores Maurizio Gasseau y Cristina Martínez-Taboada, por los excelentes programas, ahora en línea, que están ofreciendo a nuestros miembros. Los grupos de intervención se han convertido en una red de apoyo para los socios que tienen interés en áreas particulares de la terapia de grupo y los procesos de grupo. Nuestros grupos de matriz de sueño social, también dirigidos por el Dr. Maurizio Gasseau, ofrecen a nuestros miembros un espacio seguro, 'por ventura para soñar'\*

The work of IAGP in responding to the traumatic impact of the pandemic has been nothing short of spectacular. Drs. Caner Bingöl and Eva Fahlstrom Borg are to be congratulated as we all acknowledge the remarkable webinars and workshops that they have organized for IAGP. The pandemic isolates us and connects us all at the same time. The webinars that we have put on to deal with these traumas have helped connect us in meaningful ways at the very most important time in our history.

Our new website, our 'professional window to the world', is evolving beautifully. Please remember to update your information on our website. It's simple to do and important.

Allow me to encourage all of us to plan ahead for our 2022 IAGP Congress. Originally scheduled to be held in Vancouver in 2021, our Board put the safety and well-being of everyone first as we decided to postpone our Congress for one year. Our 2022 Congress will be a hybrid, pandemic allowing, meaning that we will meet both online and in Pescara, Italy.

Many thanks to the Chair of our Scientific Program, Dr. Mona Rakhawy from Egypt and the Chair of our Pre-congress, Dr. Cristina Martínez-Taboada. Special thanks to our Treasurer, Dr. Heloisa Fleury, for assisting with all the little details that are essential to attend to before any Congress can develop. Special thanks also to Dr. Mimmo Agresta for his assistance on the ground in Italy to help coordinate the onsite component of our Congress.

IAGP is not rich, but we are not poor either. We do have bills to pay and are looking to find ways to raise funds to offset some of these expenses. If you have any ideas, please don't hesitate to reach out to me or anyone on our Board. We want to raise funds to support scholarships for people to attend our Congress. Dr. Asmaa Abd El Fattah will assist in our fundraising efforts that started during an online board meeting and will work with our board and all of our members to help raise funds to offset the expenses IAGP has.

Now, the next edition of our Forum is ready. Please enjoy the extraordinary peer reviewed chapters that our editors have cultivated for each and every one of us.

We hope you enjoy reading this edition of our Forum. Please know how hard everyone has worked behind the scenes to offer this edition to you. Allow me to invite all of you to consider submitting something for publication in our Forum.

With sincere appreciation to all those involved in developing this issue, especially during this ongoing pandemic. May each and every one of our readers remain safe and healthy, and always find ways to take good care of themselves.

\*Referencia a Hamlet, de W. Shakespeare, en una comparación entre la muerte y el sueño.

Nuestro Globeletter, dirigido por los doctores Thor Kristian Island y Luis Palacios Araus, nos ofrece artículos actuales e interesantes compuestos por nuestros miembros. La reciente incorporación de fotografías tomadas por los socios no es más que otra forma de ayudar a conectarnos, contener nuestra soledad y llenarnos de noticias de miembros de todo el mundo.

El trabajo de la IAGP para responder al impacto traumático de la pandemia ha sido nada menos que espectacular. Hay que felicitar y reconocer a los doctores Caner Bingöl y Eva Fahlstrom Borg, por los notables seminarios y talleres en línea que han organizado para la IAGP. La pandemia nos aísla y nos conecta al mismo tiempo. Los "webinar" que hemos organizado para hacer frente a estos traumas han ayudado a conectarnos de forma significativa en el momento más importante de nuestra historia.

Nuestro nuevo sitio web, nuestra "ventana profesional al mundo", está evolucionando maravillosamente. Por favor, recuerden actualizar su información en nuestra página web. Es sencillo e importante.

Permítanme animarnos a todos a planificar con antelación el congreso de 2022. Originalmente programado para celebrarse en Vancouver en 2021, el Board antepuso la seguridad y el bienestar de todos y decidimos posponer un año dicho congreso. El Congreso de 2022 será híbrido, lo que significa que nos reuniremos tanto en línea como presencialmente en Pescara, Italia.

Muchas gracias a la presidenta de nuestro Programa Científico, la Dra. Mona Rakhawy de Egipto, y a la presidenta del Pre-congreso, la Dra. Cristina Martínez-Taboada. Un agradecimiento especial a nuestra Tesorera, la Dra. Heloisa Fleury, por ayudarnos con todos los pequeños detalles que son esenciales para el desarrollo de cualquier Congreso. Un agradecimiento especial también al Dr. Mimmo Agresta por su asistencia sobre el terreno en Italia para ayudar a coordinar el Congreso.

La IAGP no es rica, pero tampoco es pobre. Tenemos facturas que pagar y estamos buscando formas de recaudar fondos para compensar algunos de estos gastos. Si tienen alguna idea, no duden en ponerse en contacto conmigo o con cualquier miembro de nuestra Junta. Queremos recaudar fondos para becas que ayuden a algunas personas a asistir a nuestro Congreso. La Dra. Asmaa Abd El Fattah ayudará en nuestros esfuerzos de recaudación de fondos que comenzaron durante una reunión de la Junta en línea, y trabajará con ésta y todos los socios con el fin de ayudar a recaudar fondos para compensar los gastos que tiene la IAGP.

Ahora la nueva edición de Forum está lista. Por favor, disfruten de los extraordinarios capítulos revisados por pares que nuestros editores han desarrollado para todos y cada uno de nosotros.

Esperamos que disfruten de la lectura de esta edición de Forum. Por favor, consideren lo mucho que se ha trabajado entre bastidores para ofrecerles esta edición. Permítanme invitarles a considerar la posibilidad de presentar algo para publicarse en Forum.

Con sincero aprecio por las personas implicadas en hacer este número, especialmente durante la pandemia actual. Deseo que todos y cada uno de los lectores continúen seguros y sanos, y encuentren siempre el modo de cuidarse a sí mismos.

## EDITORIAL

This is the second Forum volume for the current Editorial Board. We hope that you have become familiar with the peer review system, although it is not yet common throughout IAGP.

COVID-19 has claimed many lives around the world and enormously changed people's way of life (and the IAGP Congress scheduled for 2021 has been postponed). It is a great tragedy.

In this volume we have Special Focus on COVID-19. It includes the keynote address by Christer Sandahl at the IAGP International Online Research Symposium on COVID-19, which took place from October 30 to November 2, 2020.

Also, new topics have come up, such as the development of online tools and possibilities of video games. Nevertheless, COVID-19 is such a big topic that we can't discuss it enough, and we'll have to do the same for the next issue.

On the other hand, this volume also contains Regular Articles.

"Coping with crises", "Finding new ways" and "Doing things as usual"... these three things that the Editorial Board has been working on are, in a way, symbolic of the "job of living" that COVID-19 has put before us. In spite of the unusual circumstances, the Editorial Committee worked as usual, tackled new things and published. We are delighted about that.

Of course, this was possible only with the help of many people.

Este es el segundo volumen del Forum para el actual Consejo Editorial. Esperamos que se vayan familiarizando con el sistema de revisión por pares, aunque todavía no sea común para toda la IAGP.

El COVID-19 se ha cobrado muchas vidas en todo el mundo y ha cambiado enormemente el modo de vida de todos nosotros (y el Congreso de la IAGP previsto para 2021 ha sido pospuesto). Es una gran tragedia.

En este volumen hemos puesto el foco especialmente sobre el COVID-19. Se incluye el discurso de Christer Sandahl en el Simposio Internacional de Investigación en Línea de la IAGP sobre COVID-19, que tuvo lugar del 30 de octubre al 2 de noviembre de 2020.

Además, han surgido nuevos temas, como el desarrollo de herramientas online y las posibilidades de los videojuegos. No obstante, el COVID-19 es un tema tan importante que no hemos podido abarcarlo suficientemente, y tenemos que continuar dedicándole el próximo número.

Por otra parte, este volumen también contiene artículos regulares.

"Hacer frente a las crisis", "Encontrar nuevos caminos" y "Hacer las cosas como siempre"... Estos tres puntos en los que ha trabajado el Consejo de Redacción son, en cierto modo, el símbolo del "trabajo de vivir" que el COVID-19 ha puesto ante nosotros. A pesar de las circunstancias inusuales, el Comité Editorial ha trabajado como siempre, abordando cosas nuevas y publicando. Estamos encantados de ello.

Por supuesto, esto sólo ha sido posible con la ayuda de muchas personas.



Kaoru Nishimura (Japan)



Camino Urrutia (Spain)



Roberta Mineo (Italy)

In addition to the contributors, we are very grateful, for their sincere peer-reviewing, to Conchi Oneca, Marcia Almeida Batista, Ray Haddock, Maite Pi, Roberto de Inocencio, Ivan Padilla, Ekaterina Mikhailova, Stephen Durost, Gabi Tarashoeva, Jochen Becker-Eb, Frances Bonds-White, Kate Hudgins, Ruben Estandía, Shira Marin, Mimmo Agresta, Gabriel Roldan, Enrique Negueruela, Mercedes Lezaun, Magdalene Jeyarathnam, Jun Maeda, Tajen Chang, Simon McLellan, and Regine Scholz.

They not only assessed the submitted papers, but also contributed to their improvement on several occasions. Their contributions are invisible, but enhance the value of IAGP.

We would encourage young people in particular to try peer review. To have your work reviewed in detail and to receive feedback is a good exercise in writing. Advice from experts may deepen your clinical perspective.

When this volume of Forum will be published the IAGP will have started the Free One Year Trial program (FOYT). Such program allows any group professional that can get a sponsorship by a paid-up member of IAGP to have her or his one year for free as a IAGP member. This also means the possibility for FOYT members to submit their articles to Forum. We really hope you newbies in IAGP will take a chance to share your scientific papers or case studies with the community of colleagues, through regular articles or special issues contribution. Start submitting and enjoy being part of our professional community!

Finally, we pray for the day when the world can regain a sense of security and free exchange.

Además de los colaboradores, estamos muy agradecidos por su sincera revisión a Conchi Oneca, Marcia Almeida Batista, Ray Haddock, Maite Pi, Roberto de Inocencio, Ivan Padilla, Ekaterina Mikhailova, Stephen Durost, Gabi Tarashoeva, Jochen Becker-Eb, Frances Bonds-White, Kate Hudgins, Rubén Estandía, Shira Marín, Mimmo Agresta, Gabriel Roldán, Enrique Negueruela, Mercedes Lezaun, Magdalene Jeyarathnam, Jun Maeda, Tajen Chang, Simon McLellan y Regine Scholz.

No sólo han evaluado los trabajos presentados, sino que han contribuido a mejorarlos en varias ocasiones. Sus contribuciones son invisibles, pero aumentan el valor de la IAGP.

Animamos especialmente a los jóvenes a que prueben la revisión por pares. Es un buen ejercicio de escritura para que su trabajo sea revisado al detalle y para recibir sugerencias. El consejo de los expertos puede profundizar la perspectiva clínica.

Para cuando se publique este volumen del Foro, la IAGP habrá puesto en marcha el programa "Free One Year Trial" (FOYT) (Prueba de un año). Este programa permite a cualquier profesional que trabaje con grupos, y que cuente con el patrocinio de un miembro pagado de la IAGP, disfrutar de un año gratis como miembro de la IAGP. Esto supone la posibilidad de que los miembros de FOYT envíen artículos a Forum. Esperamos que los nuevos miembros de la IAGP tengan la oportunidad de compartir con la comunidad de colegas sus artículos científicos o estudios de casos, a través de artículos regulares o contribuciones a ediciones especiales. Empiecen a enviar sus artículos y disfruten formando parte de nuestra comunidad profesional.

Por último, oramos para que llegue el día en que el mundo pueda recuperar el sentido de la seguridad y el libre intercambio.

# EDITORIAL



## Social threats to human nature during the pandemic

### Amenazas sociales a la naturaleza humana durante la pandemia



Christer Sandahl (Sweden)

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#### Abstract

Social pain is discussed from different angles and is related to primal emotions, the experience of exclusion, unconscious response patterns, attachment, evolutionary psychology, interpersonal neurobiology, and social neuroscience. The internet and online solutions developed during the pandemic are problematized. Such discussion fora offer many useful solutions for problem solving and communication. However, they might cause new problems in the long run, not least reinforcing authoritarian solutions. It is concluded that social isolation and the accompanying pain of not being part of a Group is real and against human nature. Other aspects of human needs that are threatened during the pandemic are Rightmindedness, Autonomy, Status, and Security. They can be summarized in the acronym GRASS. To prevent health problems in the population all these needs, including human's dependency on experiencing greenery, must be taken into consideration.

#### Keywords

social pain, social neuroscience, online communication, social needs, pandemic

#### Resumen

Se trata el dolor social desde diferentes ángulos y se relaciona con las emociones primarias, la experiencia de la exclusión, los patrones de respuesta inconscientes, el apego, la psicología evolutiva, la neurobiología interpersonal y la neurociencia social. Internet y las soluciones en línea desarrolladas durante la pandemia son problemáticas. Estos foros de debate ofrecen muchas soluciones útiles para la resolución de problemas y la comunicación. Sin embargo, podrían causar nuevos problemas a largo plazo, sobre todo reforzando soluciones autoritarias. Se concluye que el aislamiento social y el dolor que conlleva no formar parte de un grupo es real y va en contra de la naturaleza humana. Otros aspectos de las necesidades humanas que se ven amenazados durante la pandemia son la Rectitud, la Autonomía, el Estatus y la Seguridad. Pueden resumirse en el acrónimo GRASS\*. Para prevenir los problemas de salud de la población hay que tener en cuenta todas estas necesidades, incluida la dependencia del ser humano de experimentar la vegetación.

#### Palabras clave

dolor social, neurociencia social, comunicación en línea, necesidades sociales, pandemia

\*Hierba en inglés

The future of professional group psychotherapy and group process work must rely on science. Our professions will be marginalised without high quality empirical research, be it quantitative or qualitative. To my surprise it seems that also neuroscience has important knowledge to contribute to our field.

All over the years I rejected the idea that brain research would have anything of value to contribute to psychology or social science. In my opinion neuroscience represented a completely different paradigm and I could not see how it would be possible for a biological reductionist approach to fertilize psychology and social science. However, science sometimes moves in unexpected directions. Not least due to the development of sophisticated research methods such as brain imaging, neuroscience is currently exploring similar questions as those we struggle with in psychology. Even such an unexpected thing as neuro-psychoanalysis has become an established branch of neuroscience. I have changed my mind. It seems to me that brain research can become a fruitful way to validate some findings from psychological and social research. And it is hard to argue that findings from neurosciences are social constructs. I prefer to see it as a reflection of human nature.

However, our interpretations of the findings belong to the world of socially shared conceptualizations. The brain is not equivalent to the mind.

Dr Catherina Mela, the initiator of the IAGP research symposia, herself a neuroscientist and a group analyst, has long since understood the value of combining the two perspectives. Thanks to her courage and persistence IAGP has now organized the third symposium of this kind. I find it hopeful that IAGP thereby is demonstrating that it puts empirical research at the front.

### PLAY AND UNCONSCIOUS RESPONSE PATTERNS

The theme of my contribution is social pain. The pain associated with the feeling of being excluded belongs to human existence. We all know how it is. From my own childhood I have vivid memories of being scoffed at and ridiculed by my older brothers. They ganged up against me – at least that is what I felt. We often had fights. In fact, our father had instructed us in wrestling so that we would be able to defend ourselves in the schoolyard. The experience of wrestling and fighting with my brothers was not exclusively negative. It made me strong. I was not the typical fighter in school. However, if challenged, I could defend myself.

On the basis of “affective neuroscience”, a term coined by the Estonian/North American neuroscientist Jaak Panksepp, one could argue that my brothers and I were exploring one of the primal emotions, namely play, which serves the function of defending territory, establishing hierarchy, pecking order, in or out, status and such things (Panksepp & Davis, 2018). According to Panksepp the seven primal emotions are 1. Seeking (accompanying feeling: Enthusiastic), 2. Rage (“Pissed off”), 3. Fear (Anxious), 4. Lust (Horny), 5. Care (Tender & Loving), 6. Panic (Lonely, sad), 7. Play (Joyous).

In our play my brothers and I learned our lessons, which developed into personal response patterns. In the language of Daniel Stern (1995) response patterns might be equated to “ways of being with the other”, i.e., a few typical response patterns to emotional activation. If we want to believe current neuroscience, these patterns become automatic and part of procedural long-term memory, that is, they become unconscious (Leuzinger-Bohleber et al., 2018) and will be repeated endlessly. If the ways of being which we have developed do not create problems, we have no reason to change. Unfortunately, they often do create problems in adult life, and we do not understand why, simply because of just that, i.e., the response patterns are unconscious. However, in psychotherapy we can learn to identify

what is causing the problems, find the meaning and try out alternative ways of being. Group psychotherapy with a here-and-now focus is ideal for this kind of work. Transference reactions are acted out and reacted to by the others. New response patterns can be gradually tested and worked through.

I have a memory from school where I was the bad guy, 12 years old. One of my friends had ganged up with somebody. They teased and laughed at me. It made me angry and I started to fight with one of my friends. When I was a child the rule was that the fight was over when one of the two combatants found himself on his back with shoulders on the ground. Then it was over. There was a winner, and the pecking order was re-established. I practiced what my brothers had taught me.

In this case I got him, Olle, easily on the ground with my knees on his shoulders. I was still upset and slapped him on his face. I did not play according to the rule. However, it helped me to reduce my primal emotion, rage. But he started to weep. In this case my anger was a threat to our friendship, and he “panicked”, another primal emotion, and felt lonely and sad when the attachment was broken. This came unexpectedly to me and it made me confused. I regretted what I had done, and suddenly I shifted from rage to the primal emotion “care”, but I did not say anything to Olle (my response pattern of keeping feelings to myself). I went away with some other boys who told me that he got what he deserved (back to “play”). I was part of the in-group and now he was on the margin. Our friendship was never repaired. Later, I heard that Olle, my old school friend, lived an isolated and lonely life and had all kinds of difficulties.

When I was a young psychologist, I told this story to my psychoanalyst. She suggested that I get in touch with him to apologise (an effort for me to develop new response patterns). We both realised that I was not the cause of his difficulties. However, she thought it would be good for me, and for him, to understand that I still was sorry, so many years later. And yes, I still am. Sadly, I never got in touch with him. Now, it is too late, since he is dead.

In this sense the psychoanalysis failed. However, I learned something else that is valuable. There is pain both in the process of being excluded and to belong to the excluding side. However, there is an important difference. The reactions to the experience of being excluded are immediate and strong. Often the feelings of sadness and loneliness are accompanied by shame, adding to the pain. Guilt, which is related to the primal emotion fear, gives rise to low intensity anxiety, and can only be resolved through reconciliation and penance.

Most of the time play is joyous, but sometimes it is not. Play is a serious thing. In adult life we experience exclusion and loss of status at work, in family life and other group settings. Unfortunately, I know many former and current members who have experienced such things within IAGP. Maybe, it is especially difficult to play with joy in international work, with its many cultural clashes. I have experienced it myself. In fact, I have not participated in the life of IAGP since shortly after the IAGP 1st research symposium six years ago. There was a crisis in 2015. It was a traumatic experience for all involved. Some of us, who were at the centre of the conflict, felt that we were made into scapegoats. According to the story from the Old Testament of the Bible/the Torah, the scapegoat is sent out in the desert to die. We did not die in the desert, but we left and made ourselves dead in relation to the organisation. Maybe this was the only solution then. I do not know.

Such things happen in all organisations, it is part of organisational life, and it is painful. Those of us who left then have coped with it differently. In my case I have had the belief that I carry a part of the IAGP organisational memory. One day, I have thought, when the organisation is ready, this missing piece of information will be integrated into its life.

It is painful to exclude and to feel excluded, but this pain is easier to endure if one can find meaning in it. This also applies to the Pandemic. The burden of social isolation is easier to carry when the reasons are understandable, for example not to risk others or one's own life and as an act of solidarity with hospital staff. When we feel connected to other people, human beings can suffer being separated from each other, but it comes at a cost.

## GROUP EXPERIENCES

For those of us working with group psychotherapy and group processes, the importance of relationships is obvious and self-evident. I do not think we need to be convinced by arguments from neurobiology. However, when we approach the authorities for disease control and public health it might help. In a pandemic, we cannot focus only on suppressing the disease and short-term economic factors. Loneliness and poor relations have a high long-term price.

In the book "Why group therapy works and how to do it", Sandahl et al. (2021) we elaborate on the significance of the group for human beings, the social animal as already Aristotle expressed it. Findings from evolutionary psychology and attachment theory are discussed in the

book. It is concluded that the fundamental importance of groups for human beings is often denied in the world of today where either individualism or authoritarian collectivism rule. Traces from human beings' life as a flock on the savannah are imprinted in the genes. To be sent out in the desert back then and thereby losing the protection of the group was likely to end one's life shortly. Deep down we humans know that lone wolves live dangerously and that the group is essential for survival. The family is our first group. In the family, school and in groups of friends we create our identity as we receive support, comfort, and encouragement. The group provides experiences of relationships.

Dan Siegel, a clinical professor of psychiatry at UCLA School of Medicine, is a well-known researcher and educator within the field of interpersonal neurobiology (<https://www.drdansiegel.com/>). He argues that integration is the key to wellbeing, i.e., acknowledging differences and linking relationships inside oneself and in relation to others. He is only one among many who have demonstrated that the development of neural connections in the brain are influenced by children's attachment to caregivers. We know that difficult early relationships can result in problems with memory and emotional regulation. This is known from studies of child development. Some people find it even more convincing if this can be illustrated by neurobiological studies of the brain, which has been demonstrated in research (Siegel, 2012).

However, and perhaps more importantly, studies of adults are showing that relationships and time for reflection on relationships, - the kind of things we do in groups - stimulate the integration of cells in the pre-frontal cortex. Integration of cells means that they become more stable, and the connections more complex. Increased complexity in the brain is related to increased complexity of the mind which in turn increases the persons

- capacity to adapt to difficult situations,
- resilience,
- emotional competence
- compassion,
- ability to cope with stress,
- general health.

According to interpersonal neurobiology, relationships, time for inner world reflection, and verbalizing emotions promotes healing and integration as the mind continues to develop through life (Siegel, 2012). In the group psychotherapy world, there is nothing new about this. What is new is the amount of support we have, not only from our own discipline, but also from neuroscience.



## SOCIAL DISTANCING

During the pandemic most of us have been instructed to avoid relationships outside the family as much as is possible. In the beginning I wanted to change the concept of “social distancing”. No, I said they mean physical distancing, not social, that would be a catastrophe. Now, I have realised that what is meant is not only physical distancing but also social. What is the price?

As always, those with less resources pay the highest price. To be stuck in a dark flat, no access to nature, worries about economy, having to risk security on one's way to work, because one cannot work from home, or maybe one has lost work - etcetera. But we are all affected one way or the other. At the 3<sup>rd</sup> IAGP research symposium many examples were given of the social and personal suffering caused by the measures taken to suppress the pandemic, and suggestions as how to deal with it.

Has social neuroscience anything to say about the suffering in a pandemic? In the research group led by Dr Matthew Lieberman threats to social connectedness have been studied mainly with different methods for brain imaging (Lieberman, 2015). Is it more convincing to believe that there is real pain associated with threats to connectedness and exclusion, when it is demonstrated with activities in the brain, i.e. not only subjective reports?

Social neuroscientists have shown that the parts of the brain associated with social activities are on constant alert. The sensitivity to social cues is extremely high and sophisticated. It has been compared to the highly developed and sensitive smell organs in dogs. And the sensitivity to threats are several times larger than the sensitivity to rewards. Humans are constantly scanning the environment, other peoples' movements, facial expressions etcetera, unless attention must be given to a cognitive problem. Then social activity of the brain decreases, and the part of the cortex that is needed for problem solving is activated. When the problem is solved, the normal state is returned. It is like a seesaw. When one is up the other is down.

A fascinating experiment illustrated some of the pain related to the experience of being excluded. The research subjects were put in an MRI scan. They were told that two other persons also participated in the experiment, and that the three of them were going to interact. However, there was only one research subject at a time. This person was instructed to play a video game with what this person believed were two other guys. On the screen one could see three cartoon type of figures

throwing a ball to each other. One of them was controlled by the subject, who could respond and throw the ball to the other two players. After a while, the figures were programmed to stop throwing the ball to the subject. They only played with each other. The subject was excluded from the game.

When this happened the brain-image showed an activation in the same part of the brain known to be activated by physical pain. When the subject rated the intensity of feelings during the experiment, there was a direct relationship between the subjective feeling and the degree of activation in the pain area of the brain. Furthermore, when the subjects were given a painkiller, Paracetamol, the activation in the “pain centre” decreased. Social pain and physical pain are experienced similarly by the brain.

Other types of “painkillers” like drugs, alcohol and junk food obviously have the same effect. When humans feel isolated or excluded it is easy to use some sort of “painkiller” to reduce the suffering. We know that all kinds of public health problems have increased during the pandemic. Apart from the primal emotion panic, i.e. a threat to attachment and connectedness accompanied by feelings of loneliness and sadness, social pain is most certainly part of the explanation.

## ONLINE COMMUNICATION

During the pandemic different online resources such as Zoom and Teams have come into frequent use. Many colleagues have come to practice online psychotherapy, in groups and individually. Families can meet online, even if they are not allowed to meet in person. One might wonder if the social isolation during the pandemic really is such a big problem.

It was mentioned above that the social parts of the human brain are always active when not more urgent problems need to be solved. It is like a radar scanning the environment. What is this radar especially sensitive to? The answer is: The area around the eyes and the mouth of other people. The reason for this is that there is where affects are expressed, in the facial muscles.

Affects are the physiological responses to stimulus in the environment, such as fear, rage, joy, sadness, shame etcetera. The same muscles in the face are activated for each basic affect, and it is the same muscles for all human beings. However, culture and upbringing can modify the intensity of the affects. It has been discussed how many they are, seven, nine or something else. However, it has been agreed upon since Darwin that affects

have had survival value in the evolution of the species. This topic will not be further developed here. However, the main point is that eye contact face to face, in person, is essential for humans to be able to read the affects of other people, which in turn is necessary for trust and cohesiveness to develop. In a group where we are present with our bodies in the room, we can take a quick look around and discover if somebody is sad, angry, absent minded, neutral or whatever.

The North American psychologist Victor Schermer discussed in a recent article four modalities of the experience of others in groups (Schermer, 2018). Based on philosophers like Kant, Merleau-Ponty, Foucault and Levinas he arrives at four aspects of human interaction and experiencing of each other: Mind, Body, Gaze and Face. Among other things he argues that the way we understand others is based on the embodied perceptions. The human body is used to attune to the feelings of others. Intuition and gut-feelings provide a lot of reliable information. Through sight, the Gaze, humans become aware that their behaviour is observed. When one experiences this, it might be difficult to avoid pressure to conform. Through the Face humans become aware of others before they know anything about them, which according to Levinas presents us with a demand to take responsibility for them. "The destiny of the other lies in your hands" (Lögstrup, 1994). All these aspects of our experience of others are circumscribed in the online session, except possibly Gaze which might be more pronounced. There might be a risk that the conformity pressure is stronger online compared to encounters in the real world.

Online, we cannot have eye-contact. It is difficult to get an overview of the screen. The experience of seeing one's own image is also disturbing for relations to develop. Online encounters are certainly useful in many ways. Information can be shared, and discussions can develop, but dialogue in its deeper meaning is a real challenge online. Person to person meetings cannot be replaced by online meetings but can be a substitute in certain situations.

We need to learn more about when the internet can be used and when it cannot. Psychotherapy on the internet has a rather long history by now, not least among CBT therapists. Research shows promising results for many patient categories. It is a less expensive alternative for many and if you live in part of the country where it is difficult to find a psychotherapist it can be an alternative to get help. If you are in pain it is a good thing that relief is available, even if it does not solve the underlying cause.

There is also quite a lot of experience from Online group therapy. Knowledge of this subject has been collected in a book co-edited by the Israeli/North American psychologists Haim Weinberg and Arnon Rolnick (2019). In a recent article Haim Weinberg (2020) describes the limited research on online group therapy and draws conclusions regarding challenges and possibilities during Covid 19. He concludes that a good enough quality of relationships is difficult to establish, that the absence of body-to-body interaction and absence of eye contact is problematic, and that presence is difficult to achieve. His recommendation is that therapists should be more active online and increase the degree of self-disclosure compared to ordinary group therapy. If these things are difficult to deal with for group psychotherapists, how will eye-contact be compensated for in social, often leaderless, online groups?

## HUMAN NATURE

How can findings from social neuroscience about the human nature be summarized? As mentioned above, the social brain is constantly scanning the environment for cues of threat or reward, except when a cognitive problem is encountered and must be solved. If somebody tends to use a large part of the time for intellectual problem solving, the social and relational skills will be underdeveloped for the simple reason that one cannot use both functions of the brain at the same time. However, the suppression of feelings keeps the brain on alert and takes energy from thinking. And suppressed feelings constitute a threat for others because the affects expressed in the face, beyond conscious awareness, are picked up consciously or unconsciously.

The social cues that the brain is sensitive to have been categorised into five factors by Dr David Rock and his team at the NeuroLeadership institute (<https://neuroleadership.com/>) in New York. They are: Status, Certainty, Autonomy, Relatedness, and Fairness (SCARF). In a current project at the Swedish Royal Academy of Engineering Sciences (IVA), a group, of which I am part, of researchers and former CEOs have modified the model somewhat. We arrived at basically the same five social rewards or threats, depending on their presence or absence, that are fundamental to the brain, and added one environmental factor that is often overlooked.

- *Group belonging* is an expansion of the factor Relatedness in the SCARF model. Individual relations can certainly give rise to both threat and reward responses. However, we argue that group belonging is the main social factor

of which individual relationships are a part. People need a group to belong to, be it family, at work or in other settings. When the group is functioning well it implies reward responses in the brain, and the system arrives in a kind of homeostasis. If not, threat responses result in an increase of stress hormones. Similarly, if one feels excluded from a group, pain is activated. During the pandemic people need a group more than ever. We can promote online groups, but we need to learn more about how to compensate for their problematic sides. People can meet in parks and exercise together keeping the distance, they can walk and talk etcetera. There is plenty of room for creativity.

- *Rightmindedness* (or Fairness). Its presence triggers reward responses in the brain and stress if absent. The measures taken in any situation must be fair and just. It is not fair that the pandemic hits hardest those who already have a difficult life situation. How can they be compensated? Also, for those of us who are privileged it is important that other people are not exploited. Guilt and shame undermine health.
- *Autonomy*. From stress research it has been known for a long time that lack of control or limited decisional latitude at work give rise to stress reactions in the brain. Adult people perceive it as a social threat when they are treated as children. Human beings want to be in control of their lives, and they do not want to feel stupid. In authoritarian environments it is surprising to experience how some people with power tend to treat other people in a way that they would never accept to be treated themselves. During a pandemic we need to create a situation where people feel they can oversee things they have to cope with. That would be rewarding and relax the stress system and thereby contribute to health. Loss of autonomy has the opposite effect.
- *Status*. It is important for humans to know their place in society and at work. Anything that is experienced as an indication that there might be a negative change of status will result in a threat response. Being publicly criticized by a person in authority might be such a situation, or not being greeted by somebody. It also has to do with role and task clarity, to know who has the power and to be able to establish one's own authority. In the end it is about personal dignity. During the pandemic there are several serious threats to status, not least

the risk of becoming seriously ill, but also loss of or reduction in income. During online meetings, which tend to become heavily focused on task and provide few opportunities to explore relational issues, there is also an implicit threat to status.

- *Security* (or Certainty). If there is a perceived threat the survival systems fight, flight, freeze will be activated, which in turn affect perception and cognition. Humans need to feel safe to think clearly and to be able to express their opinion. Personal safety is the highest priority and is taken very seriously by sincere politicians and health authorities. That is good. However, one must also include social, economic, and psychological safety.

Instead of SCARF, we have now arrived at another acronym: GRASS. These are the five most important social factors which can become both a reward and a threat for the brain. Naturally, we want to avoid the threat response.

The acronym GRASS is also to remind of the sixth factor: Grass is part of Nature. There is a lot of research evidence for the positive impact of nature on mental and physical health (e.g. Grahn & Stigsdotter, 2003; Lottrup et al. 2012). The human eye can see green better than any other colour. On the savanna it was obviously an advantage to be able to identify different shades of green which served survival. Exposure to nature has been shown to increase length of life expectancy, decrease physical and psychological health risks, reduce stress level, recover concentration, motivate physical activities (which has positive health effects), increase work capacity, and contribute to higher job satisfaction and compassion. Finally having a view of nature, instead of a blank wall, after surgery, has positive impact for recovery.

Nature is an important resource for health among the population. Is it possible to combine social restrictions during the pandemic with instructions on how to get out into natural surroundings?

In summary, I argue that social isolation and the pain of not being part of a group is real and contrary to human nature. Other aspects of human needs that are threatened during the pandemic are fairness, autonomy, safety, and status. If these human needs are not considered during the pandemic, they will most likely contribute to health problems. The internet and online discussion fora offer many useful solutions for problem solving and communication. However, they might cause new problems in the long run, not least reinforcing

authoritarian solutions.

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## REFERENCES

- Grahn, P., & Stigsdotter, U. A. (2003). Landscape planning and stress. *Urban forestry & urban greening*, 2(1), 1-18, doi:10.1078/1618-8667-00019.
- Leuzinger-Bohleber, M., Arnold, S. & Solms, M. (2018). *The unconscious. A bridge between psychoanalysis and cognitive neuroscience*. London: Routledge.
- Lieberman, M.D. (2015). *Social. Why our brains are wired to connect*. Oxford: Oxford University Press.
- Lottrup, L., Stigsdotter, U. K., Meilby, H., & Corazon, S. S. (2012). Associations between use, activities, and characteristics of the outdoor environment at workplaces. *Urban Forestry & Urban Greening*, 11, 2, 159-168.
- Løgstrup, K. E. (1994). *Det etiske kravet* (The ethical demand). Uddevalla: Daidalos.
- Panksepp, J., and Davis, K. (2018). *The Emotional Foundations of Personality: A Neurobiological and Evolutionary Approach*. New York: W. W. Norton & Company.
- Schermer, V. (2018). Four modalities of the experience of others in groups. *Group Analysis*, 51, 2, 175-196.
- Siegel, D.J. (2012). *The Developing Mind: How Relationships and the Brain Interact to Shape Who We Are*, (2<sup>nd</sup> Ed.). New York: Guilford Press
- Stoltz, J. (2020). *Perceived Sensory Dimensions. A Human-Centred Approach to Environmental Design and Planning*. Dissertation. Stockholm: Department of Physical Geography, Stockholm University.
- Weinberg, H. & Rolnick, A. (2019). *Theory and Practice of Online Therapy Internet-delivered Interventions for Individuals, Groups, Families, and Organizations*. London: Routledge
- Weinberg, H. (2020). Online group psychotherapy: Challenges and possibilities during COVID-19 — A practice review. *Group Dynamics: Theory, Research, and Practice*, 24, 3, 201–211.





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## Cultura, duelo, procesos grupales y esperanza en tiempos de pandemia

### Culture, grief, group processes and hope in times of pandemic



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#### Resumen

Este artículo pretende reflexionar sobre el duelo en tiempos de la Covid 19, su proyección desde una perspectiva colectiva y cultural específica, como es la española, así como su impacto en los procesos grupales y afectivos de los individuos. Consideramos que analizar los sentimientos y emociones de sujetos o grupos con alto riesgo de duelo complicado puede favorecer el diseño posterior de intervenciones especializadas y preventivas. Este supuesto surge a partir de la participación en un interesante Simposio virtual denominado The International Day of Hope and Healing After Loss (June, 2020) en plena pandemia. La experiencia reunió a organizaciones y líderes en el campo que consideraron los procesos terapéuticos, especialmente los grupales, sustentados en los rasgos culturales y en los rituales que distinguen a cada sociedad. Este artículo muestra cómo la esperanza y el bienestar en tiempos de pandemia, puede considerarse como un camino tanto colectivo como individual entroncado en la cultura.

#### Palabras clave

Covid, Cultura, Duelo, Esperanza

#### Abstract

This article aims to reflect on the grief in times of Covid 19 as well as its projection in a specific cultural perspective, such as the Spanish one, and its impact on the group and affective processes of individuals.

We consider that analyzing the feelings and emotions of subjects or groups at high risk of complicated grief can favor the subsequent design of specialized and preventive interventions.

This assumption arises from the participation in a virtual Symposium on The International Day of Hope and Healing After Loss (June, 2020) in the midst of the pandemic.

The experience brought together organizations and leaders in the field. There was a convergence in which therapeutic processes, especially group ones, were nourished by the cultural traits and rituals that distinguish each society. Therefore, we can think that finding hope and well-being in times of pandemic is both a collective and individual path rooted in culture.

#### Key words

Covid19, Culture, Grief, Hope

## INTRODUCCIÓN

Como apunta la revista de Bioética 2020 (Consuegra-Fernández y Fernández-Trujillo, 2020), a lo largo del progreso de la pandemia en España el riesgo de colapso sanitario ha estado presente de manera constante, lo que infunde el temor de no poder tener la atención sanitaria que se necesita. La primera fase fue la más aguda y junto al desconocimiento por parte de la población que impelía a la aceptación de las condiciones de ingreso hospitalario de modo incondicional, el paciente era internado mientras la familia debía continuar confinada en sus casas. Ante estas circunstancias, el aislamiento del paciente así como el de las familias incrementó la confusión y el desconcierto ocasionando ansiedad y miedo que se incorporaron a la incomunicación y al temor del impacto de la Covid19.

La impotencia ante un proceso desconocido llevó a la falta de control sobre la situación y a medidas restrictivas ante el aumento de fallecidos alejados de su contexto familiar y social. El sufrimiento generado incrementó entonces las sensaciones de angustia enfrentando a las personas a un duelo difícil de elaborar para aquellos que quedaron separados de su ser querido.

## DUELO Y EXPRESIÓN CULTURAL

El duelo es una respuesta natural a la desaparición de un ser querido. Es un sentimiento universal de extrema tristeza. Sin embargo, el duelo tiene manifestaciones emocionales diferentes según las personas y según la cultura. Un ejemplo es el uso de símbolos como los colores, que ayudan a expresar diferenciadamente las emociones de las personas más allá de las palabras. Las diversas culturas los utilizan colectivamente como un modo de exteriorizar los sentimientos ante la muerte en el momento que esta acontece. Hay claros matices en la manifestación del pesar en función de las culturas. Es habitual encontrar el uso del negro para demostrar la solemnidad y el padecimiento en comunidades occidentales, concretamente en muchos países europeos. Un gran número de países asiáticos utilizan el blanco como color de luto ya que simboliza la creencia de un renacimiento a algo mejor. También el púrpura o el dorado pueden vincularse a la espiritualidad, al viaje al más allá, como en el caso de Egipto. Con el tiempo, los colores se han convertido en alegorías de respeto y manifestación de dolor, que va de lo individual a lo social pasando por el grupo referente y las personas que lo conforman.

La necesidad de exteriorizar el duelo puede explicar por qué muchas pacientes eligieron vestir de oscuro, incluso asistidas online, para poder hablar de sus familiares fallecidos. La regulación del impacto emocional de los viudos, viudas, hermanos, padres y huérfanos (Moreno, 2020) confusos ante circunstancias amenazantes y desconocidas como ha sucedido y sucede con la Covid19, supone transitar en la oscura *soledad* como describió una persona afectada.

España, es una de las Culturas más Colectivistas de los países europeos junto con Portugal, Italia y Grecia (Hofstede, 2020). Esto quiere decir que priorizan la familia y la comunidad sobre los individuos. Las personas se definen a sí mismas a partir de su pertenencia a diversos grupos como son la familia, los amigos, o los colegas. La unidad entre los miembros se aprecia más que el espíritu crítico. La defensa de la pertenencia es motivo de alegría y el sentimiento de interdependencia promueve relaciones estables y duraderas. Se espera que las personas se cuiden unas a otras a cambio de cierto grado de lealtad, de acatamiento de ciertas normas muchas veces de carácter informal a cambio de afecto, de compromiso mutuo y de estar ahí para el otro. Socialmente, se considera que los buenos hijos deban cuidar a los padres mayores en sus necesidades si enferman, aunque siempre depende de la disponibilidad y posibilidades reales.

De igual forma, hay una clara tendencia a celebrar colectivamente el nacimiento de una nueva vida o la sanación de las personas que pasan por una situación crítica de salud aunque sólo sean vecinas. En este sentido, también se comparte el proceso de la muerte, acompañando a la familia y recordando al difunto en la historia de cada uno. La familia se integra como un lugar especial de seguridad, de reconocimiento y de calidez. La posibilidad de despedir y honrar a los fallecidos es algo inherente a la cultura española. Eliminar un acto tan significativo, representó un cambio de dirección emocional que conllevó sufrimiento intenso y duelos traumáticos. La demanda de ayuda psicológica se ha incrementado al ser un país en el que la aversión a las situaciones de incertidumbre es alta en contraposición a otros países del norte de Europa. Podemos entender como esta predisposición afecta especialmente en un contexto socio-sanitario equívoco como la pandemia, donde las indicaciones fueron excesivamente cambiantes y confusas. La consternación y el malestar se sumó a la situación de inseguridad y precariedad sanitaria.

Reconocer la presencia del coronavirus como un factor que afecta a los humanos y se transmite de persona a persona ha sido difícil de aceptar en un colectivo donde los abrazos lo curan casi todo desde la infancia. Por ello, el confinamiento y la separación forzosa dio lugar a manifestaciones colectivas de ventana a ventana en la primera ola de la enfermedad infecciosa, cantando para escuchar a los otros y sentir a los vecinos cercanos mientras aplaudían los esfuerzos de sanitarios que ponían su vida en riesgo por la comunidad.

Sin embargo, la cuarentena y el aislamiento fue tan brutal que dejó a muchas personas alejadas de sus seres queridos. Familiares y amistades separados en su domicilio, o ingresados en hospitales o residencias, pasaron a tener síntomas emocionales equiparables a los que acontecen en una situación post traumática después de una trágica realidad (Sandín, B., Valiente, M.R., García-Escalera, J., Chor, P., 2020) con pensamientos y estados de ánimo negativos asociados incluso al temor de aniquilación.

Cientos de personas mayores desaparecieron para siempre perdidas en un hospital y murieron a veces sin nombre y solas. Las familias no supieron dónde estaban durante días y en muchas ocasiones, los encontraron entre tantos otros en un ataúd en comunidades lejanas en fríos pabellones. El sentimiento de impotencia, de soledad, muchas veces asociado a la culpa, se cernió con pensamientos irracionales, angustia y ansiedad devastadores internamente. Un ejemplo puede quedar reflejado en el comentario de una mujer que perdió a su marido con la Covid19 que decía mirando a los

ojos, *¿Qué hago yo aquí? siento que se han olvidado de enterrarme* apelando a la propia desaparición. No poder cuidarle, ni besarle, ni decirle adiós convirtieron las consultas en refugios de lo que denominan *viudas del adiós y huérfanos de despedida*, con todos los indicadores posibles de un Duelo Traumático Prolongado (Moreno, 2020).

A veces, surgen conductas desadaptadas que intentan evadir una verdad ardua y variadas expresiones emocionales de tristeza, ansiedad, culpa, o enfado. En ocasiones, los síntomas físicos como la hipotonía, la falta de aire, el vacío constante en el estómago, o la falta de energía (Morales Aguilar, 2018) acompañan y normalizan las expresiones del duelo como el llanto, los silencios, la agitación o la hiperactividad.

Un proceso tan doloroso necesita de un tiempo del que muchas veces no se dispone.

### FAMILIA Y MIRADA CULTURAL ANTE LA PÉRDIDA

La mirada cultural es el resultado de la interacción social de grupos y comunidades, incluyendo los modos de vida, tradiciones y conocimiento del mundo. Ya hemos visto como la familia es valorada profundamente en culturas expresivas para el bienestar físico, espiritual o afectivo. Su función beneficiosa es especialmente importante ante situaciones con sentimientos fundamentales como el estar próximo a la persona muriente en sus momentos finales. Verla y besarla compartiendo el momento del deceso se considera parte relevante del proceso final de la vida. Posteriormente, se espera hablar de la persona fallecida con aquellos que acompañan o han acompañado en la existencia y cristaliza en el caminar juntos al cementerio. Abrazarse y compartir la pérdida, rezar, cantar, comer juntos, llevar flores, significa un cierre culminante que da sentido a la tristeza. Irrumpen necesidades espirituales de trascendencia con reflexiones sobre la muerte en la elaboración de un duelo inesperado que les deja abrazados ante un espacio vacío surgido del arrebato inopinado de la persona querida (Fonegra de Jaramillo, I., 2001).

Sentir que se hizo lo posible aceptando las limitaciones con serenidad es parte del proceso de ajuste psicológico. Por ello, se considera tan importante conmemorar con otros a la persona que se ha perdido, dar valor a lo que enseñó y transmitió sin sentir culpa por no haberla acompañado hasta el final.

Estos rituales de duelo ofrecen conexión y soporte al proceso de restablecimiento anímico y conductual. Sin embargo, durante la primera ola de la Covid19, los españoles y el sur de Europa en general, carecieron de

los rituales de ayuda para cerrar las pérdidas. Los centros de salud estaban sobrepasados por lo que el sentimiento de pánico, de aislamiento y soledad se solaparon con la socialización online que hacía posible cierta comunicación. Gracias a la telemática, la acumulación de emociones negativas tuvo sostén terapéutico ante la incertidumbre, el malestar, la soledad, y el desconsuelo.

La hospitalización por la Covid19 se ha convertido en una gran bolsa de miedo, de incomunicación y de reclusión forzosa. Los pacientes llegan y el aislamiento es una de las medidas de prevención ineludibles. La dureza del tratamiento lleva en muchas ocasiones a la víctima a enfrentar la muerte en silencio, sin derecho a despedirse ante la desolación de los familiares, agudizada sobre todo en el inicio de la pandemia. El sentir del paciente, muchos de ellos ancianos luchando contra la emergencia sin comprender bien lo que sucedía, encogió el corazón de todos y sobre todo de las familias que personificaron altos sentimientos de impotencia, tristeza y desesperación, convirtiendo el suceso en un doloroso choque traumático lleno de desconcierto y abatimiento (Moreno, 2020).

Las morgues llenas hasta la saturación, con actos fúnebres restringidos siguen dejando sin respuesta preguntas sentidas. *¿Cómo afrontar el dolor emocional en familias que vieron salir a su padre o a su madre una mañana en la ambulancia para nunca más saber de ellos?* En ocasiones, siguen buscando sus cuerpos sin descanso desde la confusión y el duelo.

La pérdida irreversible y el desconcierto incrementan la dificultad de la aceptación serena del hecho. Esa conexión íntima con el dolor y la rabia conlleva a un sentimiento de incapacidad e impotencia compartido. El grupo familiar es sometido a momentos emocionales de desconsuelo mezclado con ciertos grados de hostilidad. La valoración negativa de uno mismo y de los demás a veces persiste en el tiempo con irritación, indiferencia o ira por no poder haber podido evitar un proceso de tanto sufrimiento. El remordimiento y la angustia aparecen como sanciones internas junto con sentimientos de culpabilidad por no haber podido evitar lo inevitable, o, por haber sobrevivido. Esta carga dolosa se dirige en muchas ocasiones hacia el contexto social, negando a la autoridad, o, desatendiendo las leyes. Sólo un proceso posterior permite negociar consigo mismo los pros y contras de la situación.

### GRUPOS TERAPÉUTICOS Y DUELO

La Covid19 ha generado grandes cambios en muchas áreas de la vida incluido el modo de morir. Sin embargo,



el temor difuso de extinción, de ansiedad existencial primaria no supone renunciar al proceso vital de la despedida de las personas queridas. Muchos actos presenciales han sido postergados esperando que las restricciones sociales pasen mientras el duelo continúa.

El impulso de este artículo implica la experiencia de un grupo de seis mujeres entre 50 y 64 años, clientes anteriores de grupos de crecimiento personal que buscaban apoyo ante los efectos psicológicos derivados de la pandemia. La terapia online, les reunió a la misma hora y día, una vez por semana, con un contrato de confidencialidad, no comer, no fumar, y, estar presentes con la cámara encendida. El marco teórico fue grupo análisis desde una perspectiva de apoyo. El número de sesiones fueron ocho, duración hora y media. La evolución fue tangible, se creó una buena matriz grupal donde confiar su tristeza, pesar y desolación a causa de pérdidas de diversa índole. La valoración final fue positiva, compartieron y elaboraron el duelo. En ocasiones ha habido alguna consulta online de refuerzo.

Las familias o individuos que buscan en la terapia online una elaboración a la pérdida logran compartir el dolor amargo y el afecto del grupo favoreciendo la reparación del malestar interno. El grupo se convierte en un intercambio beneficioso donde compartir la percepción de negligencia de los ancianos de la familia que minimiza el sufrimiento psicológico. El logro del apoyo afectivo y la compasión incrementan la necesidad de promover rituales de despedida pendientes para facilitar el afrontamiento de la separación. Se exploraron grupalmente modos que permitían mostrar el agradecimiento de haber tenido a esa persona en la propia existencia.

La utilización del grupo terapéutico como lugar seguro donde recrear la posibilidad de despedirse del fallecido posibilita el perdón, aliviando el dolor emocional de las personas y de la familia. Resultaba más fácil recordar aquel día en que no fueron a visitarlo, aquel olvido, o desconsideración que hubieran querido aclarar antes de fallecer. Escribirle y compartirlo dentro del grupo ayuda a imaginar e incluir a la persona añorada en el proceso. Dirigirse a ella aporta sentimientos de conexión y esperanza sintiendo cómo respondería desde la comprensión, el afecto y la indulgencia. Los miembros de la familia pudieron escribir un mensaje o una carta con su pesar y añoranza. Ser conscientes del sentir compartido estabiliza al grupo familiar en terapia y el agradecimiento surge como resultado de la actitud de reconocimiento de la persona perdida, de su rol y afecto.

El grupo terapéutico pudo crear e instaurar nuevos ritos de despedida. Generaron pequeños mensajes donde

cada uno de los miembros se hizo consciente y expresó con generosidad el aprecio por los difuntos así como por ellos mismos como familia o pareja. Expresar lo que aprendieron de ellos, de su modo de ser, su forma de reír o de cocinar se convierte en un tesoro por siempre.

Se pudo describir el vínculo que se tuvo con la persona que ya no estaba y el deseo de su presencia en la propia vida, facilitó al grupo tomar contacto con la finitud de la existencia y la necesidad de acompañamiento sereno. Mirar atrás con serenidad y aceptación reparadora da sentido a la pérdida y al agradecido recuerdo (Odriozola, 2020).

Honrar a la persona desaparecida a través de rituales y símbolos de esperanza, como encender una vela, hacer una pintura o un dibujo que exprese reconocimiento, fidelidad y cariño son factores de acercamiento emocional y elaboración positiva del duelo tanto de aplicación individual, familiar y grupal frente a las consecuencias de la pandemia

En definitiva, el grupo puede comenzar a plantear qué vida va a llevar a partir de ese momento. La matriz grupal permitió superar los retos emocionales posibilitando definir nuevos vínculos, dignificar el proceso y la aportación de la persona ya ausente para siempre.

## ESPERANZA

Aliviar el dolor psicológico prepara hacia la esperanza de un futuro positivo y permite imaginar cómo respondería la persona extinta desde el amor. Es un camino tranquilizador en contra de la desesperación. En ocasiones, piensan en tomar una foto del grupo familiar y acompañarla con palabras emotivas surgidas del análisis grupal, recoger las cenizas o ir al cementerio con cartas de agradecimiento como un rito de despedida en el camino de la esperanza y la salvación ante la desolación de la pandemia.

Simbolizar el deseo de vida reinstala el sentido, la expectativa o la creencia en la realización (Hope, 2010). La esperanza es sin duda multidimensional, dinámica y central para la vida. Es un estado motivacional positivo que se basa en un sentido de energía tangible dirigida a itinerarios necesarios orientados al alcance de objetivos (Snyder y col, 1991), personalizada en cada individuo y relacionada con la ayuda grupal. Por ello, es un tema fundamental en el proceso de terapia además de un claro factor terapéutico (Yalom, 1995) que contribuye a los resultados positivos del grupo y al bienestar de las personas.

El duelo saneado durante la pandemia requiere sentir fe e ilusión ante el desconcierto y el sufrimiento. La esperanza se asocia al agradecimiento por la vida de los fallecidos y la compasión libera de la culpa al grupo permitiendo una actualización emocional más positiva y comprensiva.

## CONSIDERACIONES

El duelo en época de pandemia, es tanto individual como colectivo, el cual puede fomentar la desesperación o la cohesión al establecer conexiones e intercambio de experiencias en la familia y en el grupo terapéutico. Es fundamental proporcionar un entorno seguro que permita revisar las propias emociones y crear un fuerte sentido de unión y comprensión grupal.

Los valores y los rituales de una cultura colectivista tintan afectivamente una situación como la pandemia. Por ello, las tradiciones compartidas ayudan a definir comportamientos, actitudes y emociones de las personas que componen el grupo. Es necesario buscar encuentros ante la desaparición impensada y cruel de personas queridas. La identificación y el saneamiento de los

sentimientos de culpa que emergen ante la impotencia de lo que se pudo haber hecho mejor y no se hizo, no debe obviar el autocuidado y los vínculos para celebrar la vida más allá de la muerte.

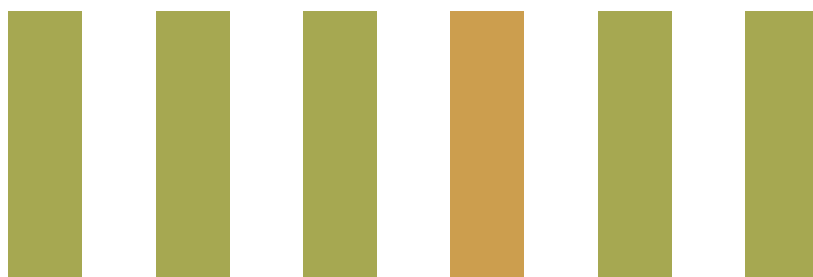
Tener en cuenta los rasgos culturales en la reparación interna del duelo, facilita el promover procesos grupales positivos y rituales compartidos, online o en presencia, que faciliten la expresión emocional colectiva y el desarrollo de mecanismos de afrontamiento en situaciones de alta incertidumbre, como en el caso de la Covid19.

La elaboración grupal posibilita el análisis y la construcción de nuevos significados, universalizar sentimientos, honrar con agradecimiento la vida de los fallecidos desde el perdón y la compasión por las adversas circunstancias asociadas a la pandemia. Al mismo tiempo, la aceptación de la pérdida y la reparación del propio dolor facilita la solidaridad, el renacer de la esperanza, y, mirar al futuro, después de la epidemia de la Covid19.

Queremos terminar haciendo mención a la frase de Desmond Tutu: la esperanza es poder ver la luz a pesar de toda la oscuridad.

## REFERENCIAS

- Cansuegra-Fernández, M., Fernández-Trujillo, A. (2020). *La soledad de los pacientes con COVID-19 al final de sus vidas*. Revista de Bioética y Derecho no. 50 versión Online Barcelona ISSN 1886-5887 Epub 23-Nov-2020
- <https://revistes.ub.edu/index.p> Morales Aguilar, D. P. (2018). *Desafíos en psicoterapia, trauma complejo, apego y disociación*. Av Psicol, 26 (2)
- Moreno, B. (2020). *Viudas del adiós*. Revista de *Psicooncología*, 17(2), 401-402. <https://doi.org/10.5209/psic.71364>.
- Sandín, B., Valiente, M.R., García-Escalera, J., Chor, P., (2020) *Impacto psicológico de la pandemia de COVID-19: Efectos negativos y positivos en población española asociados al periodo de confinamiento nacional*. Journal of Psychopathology and Clinical Psychology / Revista de Psicopatología y Psicología Clínica, 25 (1), 1-22, 2020 doi: 10.5944/rppc.27569J. Asociación Española de Psicología Clínica y Psicopatología <http://www.aepcp.net> ISSN 1136-5420 <http://revistas.uned.es/index.php/rppc>
- Snyder, C. R., Michael, S. T. & Cheavens, J. S (2006). Hope as a psychotherapeutic foundation of common factors, placebo, and expectancies. In M. A. Hubble, B. L. Duncan, & S. D. Miller (Eds.), *The heart and soul of change* (pp.179-200). Washington DC: American Psychological Association.
- Yalom, I. D. (2005). *The theory and practice of group psychotherapy* (5th ed.) New York: Basic Book



# Groups for the World Inspiration, Strength and Transformation

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- Couples and family therapy

## Game learning - Action methods and new technologies

### Aprendizaje a través del juego - Técnicas activas y nuevas tecnologías



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#### Abstract

The possibilities that the new technologies, particularly the role-playing video games, contribute to the development of the action techniques and the psychodrama are raised. As an example of these methodologies, the experience of the authors in the use of a video role-playing game, the Pace of the Waves, in the area of communication and leadership is presented to the training of public administration professionals. The advantages and limitations of this tool are discussed, as well as its applications to professional and personal development. Finally, we reflect on the encounter between the traditional and the new in action techniques and psychodrama.

#### Key words

gamification, psychodrama, leadership, training

#### Resumen

Se plantean las posibilidades que las nuevas tecnologías, en particular los videojuegos de rol, aportan al desarrollo de las técnicas activas y el psicodrama. Como ejemplo de estas metodologías, se presenta la experiencia de los autores en el uso de un videojuego de rol, El Compás de las Olas, en el ámbito de la comunicación y el liderazgo para la formación de profesionales de la administración pública. Se discuten las ventajas y limitaciones de esta herramienta, así como sus aplicaciones en el desarrollo profesional y personal. Por último, se reflexiona sobre el encuentro entre lo tradicional y lo nuevo en las técnicas activas y el psicodrama.

#### Palabras clave

gamificación, psicodrama, liderazgo, formación

## INTRODUCTION

Action techniques and psychodrama through the enacting of different situations, often associated with personal and relational conflicts, facilitate the incorporation of the emotional element in learning. In this way, they promote the incorporation of new ways of feeling, thinking and acting. Beyond the acquisition of theoretical knowledge, these methodologies are related to personal and professional development processes (Baim, Burmeister & Maciel, 2007).

Jacob Moreno developed this methodology at the beginning of the 20<sup>th</sup> century. Since then, action techniques and psychodrama have undergone a progressive evolution. Although initially associated with group therapy, over time, their use has spread to other fields such as health, education, social services and business organisations. On the other hand, different authors have contributed to the development and enrichment of their technical and methodological aspects (Blatner, 1996, 2000).

This evolution has been accelerated in recent years by the arrival of new technologies and the impetus they have received due to the lockdown and the confinements associated with the Covid-19 pandemic. In a short time, our daily lives have been invaded by mobile phones, social networks, internet search engines and, in general, the online world.



As a result, there is a two-way development of action methodologies and psychodrama. New frameworks are being explored in the context of online groups and, associated with this approach, new techniques from the world of virtual reality are being incorporated.

Until very recently, one could practically only think of working with action techniques in face-to-face groups. Today, however, online groups using action techniques and psychodrama are becoming increasingly common. For this purpose, traditional techniques for face-to-face groups are adapted to the possibilities offered by video-conference platforms, such as Zoom. These tools include the possibility of making virtual sub-groups, sharing the screen or drawing on a common blackboard.

The online group could be perceived as “colder” than the face-to-face one, but it is more convenient in the sense that you participate from home or the office. It also allows the meeting of people who live far from each other.

Furthermore, new technologies offer new tools that did not exist before or were poorly developed. Perhaps the clearest representatives of this group are the role games. Initially, they were simply regarded as a means of entertainment and over time their use has expanded into other areas such as personal growth and training (Kent, 2001).

In role-playing games, the player creates a character through which he or she is introduced to an epic adventure, a fantasy life or a professional experience, to name a few examples.

Finally, it is a different kind of role playing, as the people do not play their roles in the same physical space. Whether that is a disadvantage or an advantage is difficult to say. They are simply different. But, in any case, video games offer new development opportunities to the wide and varied range of action methodologies.

### GAME BASED LEARNING

A role-playing game is characterised by offering the opportunity to live an adventure (epic, social, work, etc.) stepping into the shoes of a character with a special personality and characteristics. In other words, it allows the player to assume a predefined role and interact with their environment based on it. To facilitate this immersion, the character often has an origin story that is told at the beginning of the game.

The beginning of this type of game can be traced back to the 1960s. In particular, when William A. Gamson,

professor of sociology at Boston College, created a board game called SimSoc, which recreated a society in which it was possible to work on aspects such as communication or politics (Attia, 2016).

But its boom came in 1974 with the famous Dungeons & Dragons. In this new board game, each player assumed an identity and skills that gave him or her access to a group of legendary heroes destined to live amazing adventures. You could play the role of a wizard, a warrior, a sorcerer or a rogue, and make your skills available to the group in order to overcome the difficult tests it had to face. This symbiosis, player-character, implies a strong bond between them.

Usually the game has a “Master” who performs the coordination tasks of the game. In this way, these games added a group component to the role-playing experience.

The transformation that computers underwent in the following years made it possible for the use of boards, dice and cards to be replaced by the creation of complex and striking computer environments. From there, an extensive typology of role-playing games emerged. Some games such as Dungeons & Dragons were adapted to new technologies and other new games appeared. Some of them, such as the Sims, raised the possibility of living an “adult” life. In this sense, the player made decisions regarding the housing, employment, social relations, etc. of his/her character (Goldberg, 2011).

In all those cases, beyond the plot, what was surely more attractive was that, in one way or another, it was possible to create a virtual identity that represented the player in a simulated environment, that is, an avatar.

Although initially video games were played on consoles and computers individually, the arrival of the internet brought the concept of online gaming and changed this situation. To some extent, online gaming replicates the concept of groupality present in board games. However, other interpretations are possible. Often, teams were made up of members without any previous relation between them who may have very different geographical and cultural backgrounds. These teams have a reference figure or leader.

The success achieved by this type of games has also inspired renowned characters in the cinema. For example, in 2009 James Cameron released the successful film Avatar (one of the highest grossing films in the history of cinema). The main character in this film is able to connect with an “alter ego”. Through him, he explores an amazing alien planet and is able to interact with its inhabitants. Other similar cases are the films The

Ender Game by Gavin Hood, released in 2013 or, the most recent one, Ready Player One directed by Steven Spielberg in 2018. However, it is important to remember that cinema remains in the world of fantasy and therefore cannot be considered on the same level as reality.

The educational world has also incorporated aspects of video games into some pedagogical approaches. Little by little, a whole methodological trend has been developed under the name of Game Based Learning. It includes teaching methodologies that incorporate the tool of play as the cornerstone of the learning process (Gómez-Martín, Gómez-Martín & González-Calero, 2012). On the other hand, a video game offers a magnificent opportunity to experiment in a safe space.

Game Based Learning probably offers the largest range of video role-playing games in the field of adult education. This methodology fits very well in the area of Human Resources to facilitate the development of relational skills. It can serve as an example, a training on customer service in which the relationship between the professional and the user is simulated (Kapp, 2012).

The use of this methodology is spreading throughout banks, large corporations, public administrations, and other organizations.

In this sense, the consulting firm Deloitte recently assured that 25% of the companies' processes will include gamification dynamics in the next few years. The IT research consultancy firm Gartner stated in another study that this percentage will rise to 50% in those processes related to innovation. According to this same source, 70% of the companies that make up the Global 2000 list are already using gamification in some of their processes (Playmotiv, 2018).

The development of a training video game poses numerous difficulties. It requires a heterogeneous team that includes scriptwriters with a high level of technical preparation, illustrators, designers, marketing experts and programmers. This collaboration makes the process complex. As a result, the video game is more expensive to produce.

Finally, some changes at neurobiological level have been observed in video game players. These studies show how video game players develop the areas of the central nervous system related to attention, visual abilities, the emotional world, memory and learning. These findings support the ability of this tool to provoke neurological changes associated with learning processes (Bavelier & Green, 2016;

Palau, Marron, Viejo-Sobera & Redolar-Ripoll, 2017).

### OUR EXPERIENCE "THE PACE OF THE WAVES"

For years, we have devoted ourselves to training professionals in the areas of leadership and communication through the company Rivendel Grupos y Organizaciones. Based on our training in group analysis and psychodrama, we decided to develop a video game aimed at training.

The aim was to offer training in the field of management skills with an experiential component that could be suitable for a wide group of professionals. Thus, "The Pace of the Waves" was born. There is a Spanish and an English version of the game. (See trailer, Palacios & Palacios, 2019).

At the beginning of the game, the player creates his or her own character by choosing the gender and name. Then, the character appears swimming in the sea and is dragged by a current to the Crystal Pearl. There, he will replace Cimódoce, the Wave Master, who is in charge of leading the team of operators responsible for producing the ocean waves by producing music.

As the new Master of the Waves, they have to lead a team and get involved in conflicting situations. In this way, they have to make difficult decisions about the process of making waves, resolve internal disputes and old rivalries, keep their boss informed and, as a final check, lead the team in its confrontation with the Leviathan, a terrible monster.

During this time, the player does not always identify with the Wave Master. Sometimes you change your character and become one of the operators. In this way, they have the opportunity to observe the team dynamics from a different perspective.

As a means of help in this difficult task, the Wave Master has the possibility to consult some specialised documents on communication and leadership, as well as to receive the advice of Mentor, a consultant specialised in team management.

The game contains an evaluation system based on practical exercises and tests. There is a forum in which the tutor or students propose discussion topics related to the game that facilitate interaction among professionals. During the course there are also two chats that allow the participants in the game to meet online.

Throughout the game, the player has a score that

changes according to the results obtained in the tests and quizzes. If at any point the score is less than 50% of the total points, the player must start the game again. At all times, there is a personalised follow-up of the player by an online tutor.

Seen from a certain perspective, this game can be described as a role-playing experience in which the player enacts the team manager role. This role allows the exercise of decision making, role reversal, monitoring and consultation of documents with theoretical information on the situations that are taking place.

Several Spanish public administrations have contracted the compass of the waves as part of the training of their professionals. There were 217 trainees registered for these courses.

175 trainees out of the 217 registered, (81.11%) completed the game.

10 registered trainees (4.61%) did not start the course. The organisation contracts the courses, so that the training has no financial cost for the students. This situation probably diminishes the commitment of the students to the training and helps to understand why some professionals do not start the game.

Finally, 30 trainees (13.82%) started the course but did not finish it. The most frequent reason for leaving the game, once started, is technical. Some trainees have got very old computers that are not able to manage the game properly. Of course, there were also people who were not interested in the experience.

The average time spent on completing the game is 6 hours and 34 minutes. Although there were considerable differences between trainees (standard deviation of 4 hours and 48 minutes), 8 trainees out of 154, 5.2% decided to replay after they had finished. They were probably interested in exploring the alternative outcomes they would have obtained if they had made different decisions. We do not have this data for a group of 63 students.

The entities with which we have worked have not yet provided us with the results of the satisfaction survey forms completed by the students. However, in the comments sent to us directly by the students at the end of the game, surprise and a favourable evaluation of the methodology predominate. The game is considered to be enjoyable and allows students to acquire useful tools for carrying out their usual work.

The classic structure of action techniques includes three phases: warming up, action and sharing. In the warm-up phase the group gets in touch with its emotional situation and prepares to carry out the exercise. The action, as its name suggests, is associated with the enacting stage. Finally, the sharing is the phase where the word is the protagonist. In it, the group members share how they have felt during the exercise and what it has evoked in their lives.

Following this scheme, we can distinguish, in a wide sense, the three stages in this video game. The warming up would be the beginning of the game, the arrival of the player at the Crystal Pearl and the conversation with Cimódoce, the Master of the Waves, in which she offers the player the possibility of succeeding her in the position. The action would be the development of the game. The sharing would be associated with the readings, the forum and the chat.

In two editions, the realization of the game was complemented by a face-to-face seminar. This session took place a few days after the end of the game and brought together the students and the tutor. There were two groups per course. This seminar was dedicated to discuss any aspect related to the game.

The face-to-face seminars were very participatory. The topics that had a greater protagonism were the fact that someone who does not previously belong to the team was chosen as the new wave master (this situation is rare in the context of these professionals), the gift that the old wave master offers to her successor (she lets him choose between an expensive pen, an amulet and a watch to arrive punctually at the meetings), the handling of a situation in which a scapegoat appears, the discussion about the degree of direction required by the leadership in some circumstances and the emotional burden of the leader.

Sometimes trainees pointed out aspects of the game that the authors had overlooked. For example, Caliope, an operator, shows jealousy of the new Master of Waves. In a way, they showed the unconsciousness of the authors and the phenomenon of countertransference, accepting a wide sense of this concept (Freud, 1910; Sandler, Dare, Dreher & Alex, 1992).

These sessions offered the group the opportunity of having a personal relationship. As a consequence, the sharing was richer and deeper. In this way, the training gained in interest and depth.

In any case, these sessions represented an interesting meeting point between traditional methodologies and those associated with new technologies. Although it may sometimes seem that there is a certain competitiveness between “the traditional” and “the modern,” in reality, it is very constructive to seek their complementarity. After all, the newest methodologies are the result of the development of traditional methodologies.

## CONCLUSIONS AND REFLECTIONS

Video role-playing games offer a “friendly” way to learn. In a way, they can be considered “gentle” experiential training. And, from this point of view, they provide more practical and internalised training than theoretical approaches.

This new methodology requires much less emotional effort than the effort associated with classic role playing or “live” psychodrama, especially when it is based on real situations. Moreover, training through a video game is totally flexible in terms of time, does not require travelling and is cheap since there is no limited number of trainees.

Logically, training based on a role-playing game poses general situations that are less intense than the scenes proposed and performed by the professional in in-presence training. For this reason, it is less in-depth and specific than training based on in-person action techniques. When the video game experience is complemented by face-to-face sessions, this difference in intensity diminishes.

In other words, if we represent learning graphically in a line diagram with one extreme being 100% theoretical and the other 100% experiential, the lectures would be near the theoretical pole, the action methodologies near the experiential pole and the video role-playing would be in the central zone, possibly closer to the experiential one.

Team leaders often need to develop their communication and leadership skills. Effective training in these areas requires a certain experiential component that brings technical knowledge closer to the everyday working reality.

However, many of these professionals are unwilling to invest a high level of emotional involvement in their training process. In this sense, the new action methodologies are especially adapted to their expectations and needs.

It is possible that this same reasoning can be generalized to other population groups interested in participating in change processes. Then, role-playing video games have a wide field of application in therapy, personal development and other training areas.

The San Junipero episode of the Netflix Black Mirror series (2016) received two Primetime Emmy Awards. It addresses the issue of virtual reality by developing the concept proposed in the film Avatar, mentioned above. In the same sense, we are invited to live an experience in a virtual world parallel to reality that we could call objective. As it has happened in other occasions, it is possible that science fiction becomes reality (Mihelj, 2016)

Perhaps we will not have to wait for a long time to see how facing situations belonging to a virtual reality are usually a part of personal development or training processes. A kind of virtual psychodrama. We could say, it would be one fantasy inside another. In fact, virtual reality is already part of the world of communication and marketing (Diamandis & Kotler, 2020). In a way it is disturbing, but it can also be considered hopeful. Who knows?

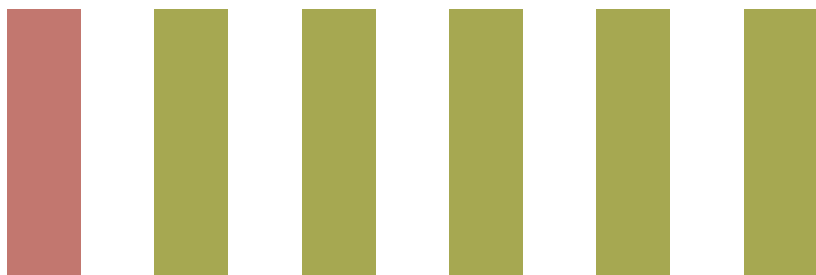
Logically, all these changes affect the general population, but particularly professionals who work with experiential groups. To what extent are we willing to incorporate tools from new technologies into our work?

This question would allow us to place ourselves in a psychodramatic line between two extremes that would represent total rejection and total acceptance of the contributions proposed by the new technologies. Where would we stand? In any case, the world is changing, or more precisely, it has already changed, and more or less, we are changing with it. Each one of us has our own pace and preferences. Moving out of the “comfort zone” is threatening, but it can represent an opportunity for growing.



## REFERENCES

- Attia, P. (2016). *The full history of board game*. Medium. <https://medium.com/@peterattia/the-full-history-of-board-games-5e622811ce89>
- Baim, C., Burmeister, J., & Maciel, M. (Eds). (2007). *Psychodrama: Advances in theory and practice*. London, UK. Ed. Routledge.
- Bavelier, D. & Green, C. S. (2016). The brain-boosting power of video games. *Scientific American*, 314 (6), 26-31.
- Bebster, R., Borg, L., Hogan, I. (producers). (2016). *Black Mirror. Episode San Junipero*. Netflix.
- Blatner, A. (1996). *Acting in practical applications of psychodrama methods*. Springer Publisher Company.
- Blatner, A. (2000). *Foundations of psychodrama: History, theory, and practice*. Springer Publisher Company.
- Cameron, J., Landau, J., Sanchini, R. (producers) & Cameron, J. (director). (2009). *Avatar*. 20th Century Fox.
- De Line, D., Farah, D., Macosko Krieger, K., Spielberg, S. (producers) & Spielberg, S. (director). (2018). *Ready Player One*. Warner Bros. Pictures.
- Diamandis, P. H. & Kotler, S. (2020). *The future is faster than you think: How converging technologies are transforming business, industries, and our lives*. Simon & Schuster.
- Freud, S. (1910/1981). El Porvenir de la Terapia Psicoanalítica. In J. N. Tognola (Ed.). *Obras Completas*. (pp. 1564-70). Biblioteca Nueva.
- Goldberg, H. (2011). *All your base are belong to us: How fifty years of videogames conquered*. Three Rivers Press.
- Gómez-Martín, M., Gómez-Martín, P. & González-Calero, P. (2012). Aprendizaje basado en juegos. *Revista ICONO14 Revista Científica De Comunicación Y Tecnologías Emergentes*. 2(2): 1-13.
- Kapp, K. M. (2012). *The gamification of learning and instruction: Game-based methods and strategies for training and education*. John Wiley & Sons Inc.
- Kent, S. L. (2001). *The ultimate history of video games: From Pong to Pokemon and beyond... the story behind the Craze that touched our lives and changed the world*. Prima Life.
- Mihelj, M. (2016). *Reality technology and applications*. Springer Publisher Company.
- Orci, R., Kurtzman, A., Pritzker, G., McDonough, L., Chartoff, R., Hendee, L., Scott Card, O., Ulbrich, E. (producers) & Hood, G. (director). (2013). *Ender's Game*. OddLot Entertainment, Chartoff Productions, Taleswapper, K/O Paper Products, Digital Domain & Sierra/Affinity.
- Palacios, A. & Palacios, L. (2019). *The Pace of the Waves*. Rivendel Grupos y Organizaciones. [https://atlantis.rivendelisl.com/promo\\_en/promoCompas\\_en.mp4](https://atlantis.rivendelisl.com/promo_en/promoCompas_en.mp4)
- Palau, M.; Marron, E. M.; Viejo-Sobera, R. & Redolar-Ripoll, D. (2017). Neural basis of video gaming: A systematic review. *Frontiers in Human Neuroscience*, 11:248. doi: 10.3389/fnhum.2017.00248
- Playmotiv. (2018). *Gamificación: cifras y casos de éxito*. <https://playmotiv.com/nada-mejor-que-una-dosis-de-datos-para-comprender-mejor-la-repercusion-de-la-gamificacion-en-los-negocios/#:~:text=Algunos%20datos%20sobre%20la%20repercusi%C3%B3n,de%20la%20gamificaci%C3%B3n%20seg%C3%BAn%20MarketandMarkets>
- Sandler, J., Dare, C., Dreher, A.U. & Alex, H. (1992). *The patient and the analyst: The basis of the psychoanalytic process*. Routledge.



## Representaciones de apego y covid-19

### Attachment representations and covid-19



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#### Resumen

En los últimos años la teoría del apego se está extendiendo en el campo de la psicología, psiquiatría infantil, pediatría y profesionales de la educación. Se la relaciona básicamente con el desarrollo infantil. En este artículo se presenta un punto de vista diferente, extendiendo su influencia a la edad adulta y especialmente a cómo nos relacionamos en los grupos a los que elegimos pertenecer. La autora reflexiona también sobre cómo las representaciones de apego que desarrollamos en la infancia influyen en la psicoterapia de grupo y en las actitudes de la población ante el COVID-19.

#### Palabras clave

Apego, modelos operativos internos, función reflexiva, COVID-19

#### Abstract

Abstract: In the last years attachment theory has been spreading in the fields of psychology, children psychiatry, pediatric and professionals of education. Usually it is related with children development. In this article, a different point of view is presented, extending its influence to adult age and especially about how we relate in groups we choose to belong. The author also reflect how attachment representations that we develop in infancy influences group psychotherapy and our attitudes facing COVID-19.

#### Keywords

Attachment, internal working models, reflective function, COVID-19

A mitad del siglo XX John Bowlby empezó a poner de manifiesto, a partir de sus investigaciones sobre el desarrollo infantil, que en la construcción del psiquismo influía algo más que las fantasías inconscientes, tal como defendía el psicoanálisis de la época. Afirmó que las experiencias reales de nuestra primera infancia eran cruciales en el desarrollo de nuestro psiquismo y nuestra visión de nosotros mismos, los otros y el mundo que nos rodea. Esto le valió el rechazo de algunos de sus compañeros psicoanalistas, pero no le impidió seguir investigando. En el momento actual, las investigaciones sobre apego continúan y sus ideas siguen desarrollándose. Desde la neurociencia se está viendo como lo que él defendía realmente tiene un paralelismo en el desarrollo y organización cerebral, así como desde el campo de la epigenética (Schoore, 2000; van IJzendoorn & Bakermans-Kranenburg, 2006).

Según esta teoría, el ser humano nace con una necesidad básica de apegarse a quien le cuida. La necesidad de apego está directamente relacionada con la supervivencia, pero no se trata únicamente de cubrir las necesidades de alimento y cuidados básicos, sino, y más importante, de tener satisfechas las necesidades relacionales que implican afecto, contacto físico, comprensión y todo lo que nos va conformando como personas humanas capaces de empatizar y comprender más adelante las necesidades relacionales de los demás. La conducta de apego va en dos direcciones, del bebé hacia el adulto cuidador, y de éste hacia el bebé. Aunque el desarrollo del apego se dé en dos direcciones, el papel del adulto es sustancialmente diferente al del bebé. El estilo de relación del adulto está influido por su propia representación de apego, y ésta generalmente está relacionada con sus experiencias de apego en la infancia.

Bowlby describió dos estilos básicos de apego: el seguro y el inseguro que más adelante se dividió en inseguro ansioso-ambivalente e inseguro evitativo. Mary Ainsworth creó un instrumento de evaluación del estilo de apego en los años 60 del siglo pasado, la “Situación extraña” en la que se evalúa en bebés de entre 10 y 18 meses el estilo de apego que han desarrollado con sus cuidadores principales, normalmente la madre y/o el padre. En 1986 Mary Main, a través de la utilización de la “Situación Extraña” y trabajando con Jude Cassidy y Judith Solomon, describió un nuevo estilo al que llamó desorganizado. A continuación unas líneas sobre las características de cada estilo de apego:

**Apego seguro:** Los bebés que desarrollan un apego seguro se desarrollan como niños/as confiados, con capacidad empática, buena autoestima, seguridad en ellos mismos, curiosidad para explorar el entorno, capacidad de autorregulación, y en situaciones de estrés buscan al adulto de referencia para ser confortados. Como adultos suelen ser personas empáticas, con capacidad para establecer relaciones de intimidad, valoran la necesidad de apego y en sus relaciones suelen generar confianza, son personas de mente abierta y flexible y respetuosas con los demás, comprenden que otras personas tengan puntos de vista diferentes y lo respetan, en general, son personas con las que resulta fácil relacionarse, la impresión que ofrecen es de poseer una identidad personal fresca y viva. Suelen tener buenas capacidades de mentalización (Bateman & Fonagy, 2016).

**Apego inseguro evitativo:** Estos bebés raramente se han sentido objeto de cuidado y empatía. Seguramente han recibido cuidados instrumentales adecuados. Esto significa que han tenido sus necesidades de alimento, higiene, abrigo, etc. cubiertas, pero ha fallado la respuesta sensible a sus necesidades de ser cogidos en brazos, consolados, abrazados, “hablados”. Eso no significa necesariamente que no hayan recibido cariño, pero generalmente éste ha respondido a las necesidades y disponibilidad de los adultos cuidadores y no a las demandas del bebé. Muy pronto “aprenden” que no pueden esperar el confort y consuelo de los adultos, sino que deben arreglárselas por sí mismos. Son niños que aprenden a no expresar emociones y eso les hace vulnerables a las enfermedades psicosomáticas. Como niños son aparentemente muy independientes, no buscan confort en el adulto cuando se lastiman o se sienten mal, ya que desconfían de su disponibilidad, se muestran afectivamente fríos y pueden ser hostiles hacia sus iguales, especialmente si los perciben vulnerables. De adultos son personas frías, poco empáticas, sus relaciones son superficiales y centradas en sus propias necesidades, rehúyen las relaciones que

impliquen compromiso, suelen mostrarse orgullosos de su independencia. Parece que los acontecimientos vitales dolorosos no les afectan, minimizándolos, tienen dificultades para articular el dolor, la aflicción y niegan la necesidad de depender de alguien, rehuyendo la intimidad. Se muestran especialmente intolerantes con las personas dependientes y vulnerables, tendiendo a menospreciarlas y suelen valorar especialmente las posesiones materiales y la diversión.

**Apego inseguro ansioso-ambivalente:** El bebé que desarrolla un apego ansioso-ambivalente ha experimentado que para ser atendido necesita exagerar su expresión emocional. Los adultos que le cuidan son poco responsivos a las necesidades del bebé, a no ser que ésta sea exagerada en su intensidad y/o duración. Seguramente estos adultos están más centrados en sus propias necesidades que en las del bebé, a veces por circunstancias sociales adversas, otras por su propia personalidad y su historia de crianza. Estos niños suelen ser muy dependientes, tienen dificultades para separarse del adulto y explorar el entorno, son miedosos, presentan dificultades de autorregulación, su autoestima es baja y su inseguridad alta, en momentos de estrés se aferran al adulto, presentando a la vez necesidad de dependencia y muestras de hostilidad. Son esos niños que, ante una situación estresante, al mismo tiempo que se aferran al adulto, le golpean con las manos o pies. Como adultos pueden presentarse de forma distinta, algunos se muestran pasivos, culpándose excesivamente por las dificultades interpersonales y de los acontecimientos negativos que ocurren a su alrededor, necesitan constantemente la aprobación de los demás para sentirse bien, presentan mucha inseguridad, son muy dependientes y tienden a estar anclados en experiencias pasadas, lo que provoca que sus estilos de relación sean repetitivos. Otro grupo puede mostrarse hostil, cuando hablan de su infancia lo hacen con enfado, culpando a sus progenitores de sus conductas actuales y sin ningún intento de superarlo. Necesitan ser el centro de atención, suelen amplificar los efectos de pequeñas ofensas con un discurso enfadado y a menudo confuso y contradictorio, reconociendo raramente su parte de responsabilidad en lo que les sucede.

Tanto en el estilo de apego seguro como en los inseguros, el patrón de relación en la primera infancia ha sido previsible. Los adultos han tendido a comportarse siempre de la misma forma en sus interacciones con el bebé, por eso a estos estilos de apego se les llama organizados. Tal como se ha señalado al principio, en 1986 se describió otro estilo que no se correspondía con los anteriores, el apego desorganizado.

Este estilo de apego aparece cuando la misma persona que se encarga de cuidar a los bebés es fuente de miedo y/o dolor. Se da en casos de maltrato, no necesariamente grave, pero sí continuado, puede aparecer también en bebés sobreprotegidos, hiperestimulados y cuando se dan en los padres episodios de disociación hacia sus hijos o comportamientos que les provocan miedo. Lo que predomina en la interacción es la impredecibilidad, el bebé no sabe cuál va a ser la conducta del adulto ante sus demandas, puede ser que reciba cuidados, muestras de afecto, o que aparezcan conductas extrañas o incluso que le grite y/o zarandee. Suelen ser niños que presentan cambios súbitos de humor, desconfianza marcada hacia el adulto, alta impulsividad, dificultades de autorregulación, conductas contradictorias y trastornos de conducta de moderados a graves. De adultos son personas básicamente desconfiadas, sus relaciones están marcadas por el todo o nada, de ahí el fracaso en mantenerlas, además les es muy difícil vincularse de forma estable ya que sienten que puede ser peligroso, se mantienen siempre alerta para defenderse de lo que para ellos puede ser un ataque. Presentan cambios súbitos de humor, son muy vulnerables a las adversidades y un número importante presenta trastornos mentales y de personalidad graves.

El estilo de apego desarrollado en la primera infancia conforma lo que se denomina Modelos Operativos Internos (MOI). Las primeras experiencias de apego quedan almacenadas en la memoria implícita como sensaciones carentes de lenguaje, de ahí que sean difíciles de cambiar, aunque no imposible. Mary Main los definió en 1985 como el conjunto de reglas conscientes o inconscientes a partir de las cuales se organiza la información relevante relacionada con el apego, obteniendo o limitando el acceso a esta información. En otras palabras, tendemos a percibir mejor lo que conocemos y esperamos que lo que contradice nuestras creencias básicas. Los MOI favorecen que seamos ciegos y sordos a las experiencias que no concuerdan con nuestras preconcepciones arcaicas y que magnifiquemos las que las confirman.

Los MOI desarrollados a partir de un apego seguro se basan en la confianza y la flexibilidad. La mayoría de las experiencias vinculares han sido gratificantes, aunque no todas, y precisamente este hecho, el que no siempre la experiencia haya sido gratificante, ha permitido la existencia de esta flexibilidad y el desarrollo de la función reflexiva. Las pequeñas frustraciones que aparecen en diferentes momentos del desarrollo y que generalmente van ligadas a las necesidades de los adultos u otros niños, les hacen ver que el mundo no gira a su alrededor.

La función reflexiva definida como los procesos psicológicos que permiten la mentalización (Fonagy, 1998) puede describirse como:

- La capacidad de reconocer y reflexionar sobre los propios estados mentales, diferenciándolos de los de los demás.
- Distinguir entre la realidad interna (lo que percibimos y sentimos) y la externa (lo que ocurre).
- Ser consciente de que lo que uno siente puede ser diferente de lo que sienten los otros.
- Ser consciente de que la percepción que tenemos de nosotros mismos puede ser diferente a la que los otros tienen de nosotros.
- Aceptar que la percepción que tenemos de los estados mentales de los demás puede estar mediatizada por nuestro estado mental.
- Tener en cuenta el contexto y la historia personal y familiar en las interacciones.

Después de leer esta introducción alguien puede preguntarse si estos estilos son determinantes y permanentes. Por suerte no, las experiencias vitales que se presentan a lo largo de la vida, pueden llegar a modificar las representaciones de apego. Un tratamiento psicoterapéutico también puede ayudar a cambiar los MOI y desarrollar las capacidades de mentalización. La teoría del apego va más allá de la clasificación de la población en diferentes estilos. Se puede tomar como base de la vida relacional de las personas, pero no se trata de casillas cerradas donde cada uno se sitúa y determina su forma de relacionarse y percibir a los demás y las relaciones con ellos. Raramente las representaciones de apego son puras. Las podríamos describir como formando parte de un continuum en el que en un extremo se hallaría el máximo de evitación, cerca del centro encontraríamos el máximo de seguridad, a continuación y cerca del otro extremo el máximo de ansiedad-ambivalencia y en el final se hallaría el máximo de desorganización. Según estudios realizados, la mayoría de adolescentes y adultos en población general presentan representaciones seguras (entre el 50-60%) y sobre el 16% manifiestan desorganización (Bakermans-Kranenburg & van IJzendoorn, 2009). En poblaciones clínicas y de riesgo sólo el 28% aparecían en este estudio como seguros y el resto como inseguros, siendo el porcentaje de desorganizados-no resueltos del 38%. El instrumento utilizado para valorar las representaciones de apego fue la Adult Attachment Interview (AAI) creada por George, Kaplan y Main en 1985. En investigaciones anteriores en población general de todas las edades, los porcentajes eran algo diferentes, alrededor del 60-70% de representaciones seguras y un 5% desorganizadas (Oliva, 2004).

Las representaciones de apego influyen en cómo nos relacionamos en los grupos, los grupos a los que nos unimos y los que creamos. Hay personas que se sienten mejor en grupos cerrados y otras están cómodas en grupos abiertos, algunos crean lazos de dependencia emocional muy fuerte y otros tienen problemas para establecer vínculos. Algunos siguen a líderes de los que puedan depender, con ideas claras de cómo deben ser las cosas, mientras otros se unen a grupos en los que se respeta la libertad individual y el liderazgo se centra en la tarea. Estas actitudes se ven reflejadas en las diferentes reacciones ante la pandemia.

En estos momentos en que la COVID-19 está provocando cambios importantes en nuestras vidas, observamos diferentes reacciones en la población. Las estrategias de apego, una vez hemos superado la infancia, suelen estar en retaguardia y aparecen únicamente en situaciones de estrés. El apego es importante, quizá más que por las relaciones vinculares, por la capacidad de exploración, curiosidad por lo desconocido y flexibilidad mental que promueve el haber desarrollado un apego seguro o por la cerrazón y rigidez mental debido a las representaciones de apego inseguras o desorganizadas. Hace meses que estamos sometidos al estrés de una pandemia y observamos como, de forma progresiva, parece que la razón pierde presencia frente a la emoción. Aparecen comportamientos de riesgo y se acusa a las medidas que imponen o recomiendan los gobiernos, de que nos privan de libertad en lugar de sentirlos como medidas de protección ante el contagio. Algunos gobiernos, que deberían estar liderando las intervenciones para minimizar los efectos de la pandemia, actúan de forma errática y a veces respondiendo a las creencias y MOI de los líderes, que pueden acabar no viendo o despreciando la realidad que se vive cada día. Ante situaciones de estrés aparecen las estrategias arcaicas relacionadas con nuestras experiencias de apego. Las representaciones de apego no se ha demostrado que tengan relación con la aparición de trastornos mentales, excepto en el caso del apego desorganizado, pero sí tienen relación con la vulnerabilidad y la resiliencia. Una representación de apego inseguro nos hace más vulnerables a los acontecimientos vitales estresantes.

¿Qué se podría esperar de alguien que en su niñez desarrolló un apego evitativo? Probablemente tienda a negar la importancia del problema y piense que básicamente hay que salvar la economía y mantener el tipo de vida anterior. La pérdida de vidas humanas, mientras no sea la suya o de algún allegado, es posible que le afecte poco. Tomará las medidas de protección

que considere necesarias y rechazará las que puedan interferir con sus proyectos. ¿Quiere eso decir que no será capaz de ver la gravedad del problema? No necesariamente, es una estrategia aprendida desde que vivió que sus necesidades de protección y afecto no serían respondidas por las personas que le cuidaban. Muy probablemente desarrollará algún trastorno psicossomático. Los bebés evitativos sometidos a la "Situación extraña" (Ainsworth, 1978) ante la ausencia de la madre o el padre no protestan, permanecen en el lugar en el que les han dejado como si no hubiera pasado nada, cuando el adulto regresa no muestran ninguna emoción. Aparentemente no han notado la ausencia, pero en los estudios realizados sobre el nivel de cortisol en la saliva, antes y después de que el adulto se ausentara, se comprueba que tardan más en recuperar los niveles normales que los bebés con apego seguro, al igual que los ansioso-ambivalentes. Han "aprendido" a no mostrar sus emociones. La expresión emocional la viven como debilidad y la rechazan y ridiculizan en los demás, pues les resulta incómoda ya que cuestiona sus MOI.

Por el contrario, las personas con representaciones de apego ansioso-ambivalente tenderán a asustarse y exacerbarán su necesidad de dependencia, buscarán respuestas que les tranquilicen en las autoridades y – si no existen respuestas claras como es el caso – se revelarán y buscarán quien se las dé. Fácilmente seguirán a quién afirme saber lo que "realmente" ocurre y cómo actuar, sean negacionistas o defensores de teorías conspiranoicas. Exigirán que se les dé pautas claras y se quejarán de que éstas cambien. Si aumentan los casos o aparece alguno en la familia, si aumentan las muertes y, con más razón, si muere alguien conocido, buscarán culpables.

Las personas con representaciones desorganizadas pueden presentar cualquiera de las estrategias anteriores, además de ponerse en riesgo de forma consciente y después asustarse y buscar culpables si se ven afectadas. Culparán al grupo de negacionistas al que creyeron anteriormente, al gobierno por no dar pautas claras y coherentes, despreciarán a los científicos por no conocer todas las respuestas, y su desorganización aumentará provocando episodios de confusión, disociación y agravando sus trastornos de personalidad o manifestaciones psicopatológicas.

Es difícil mantener la calma y la confianza en que superaremos esta etapa sin caer a veces en el desánimo. El tener una representación de apego seguro y capacidad de mentalización puede ayudar.

## REFERENCES

- Ainsworth, M., Blehar, M., Waters, E., & Wall, S. (1978). *Patterns of Attachment*. Hillsdale, NJ: Erlbaum
- Bakermans-Kranenburg, M.J. & van IJzendoorn (2009) The first 10.000 Adult Attachment Interview: distributions of adult attachment representations in clinical and non-clinical groups. *Attachment and Human Development* Vol 11 (3) 223-263
- Bateman, A. & Fonagy, P. (2016) – *Tratamiento basado en la mentalización para trastornos de la personalidad*. Bilbao. Ed. Desclée de Brouwer
- Bowlby, J. (1998) – *El apego y la pérdida*. Barcelona. Ed. Paidós
- Bowlby, J. (2014) – *Vínculos afectivos. Formación, desarrollo y pérdida*. 6ª edición. Madrid. Ed. Morata
- Cyrulnik, B. (2005) – *Bajo el signo del vínculo*. Barcelona. Ed. Gedisa
- Ezquerro, A. (2017) – *Relatos de apego. Encuentros con John Bowlby*. Madrid. Ed. Psimática
- George, C., Kaplan, N., & Main, M. (1985). The Adult Attachment Interview. Unpublished manuscript, University of California at Berkeley.
- Holmes, J. (2009) – *Teoría del apego y psicoterapia*. Bilbao. Ed. Desclée de Brouwer
- Juri, L. (2011) – *Teoría del apego para psicoterapeutas*. Madrid. Ed. Psimática
- Lyons-Ruth, K., Easterbrooks, M.A., Cibelli, C.D. (1997) Infant attachment strategies, infant mental lag, and maternal depressive symptoms; predictors of internalizing problems at age 7. *Developmental Psychology*. 33 (4), 681-692
- Main, M., & Solomon, J. (1986). Discovery of a new, insecure-disorganized/disoriented attachment pattern. In M. Yogman & T. B. Brazelton (Eds.), *Affective development in infancy* (pp. 95–124). Norwood, NJ: Ablex
- Marrone, M. (2001) – *La teoría del apego. Un enfoque actual*. Madrid. Ed. Psimática
- Oliva, A. (2004) Estado Actual de la teoría del apego. *Universidad de Sevilla*. Comunicación
- Varios autores (2017) – Disorganized attachment in infancy: a review of the phenomenon and its implications for clinicians and policy-makers. *Attachment & Human Development*. Vol. 19 (6) 534-558
- Rygaard, N.P. (2008) – *El niño abandonado*. Barcelona. Ed. Gedisa
- Schore, A.N. (2000) Attachment and the regulation of the right brain. *Attachment & Human Development*. Vol 2 (1). 23-47
- Van IJzendoorn, M.H. & Bakermans-Kranenburg, M.J. (2006) DRD4 7-repeat polymorphism moderates the association between maternal unresolved loss or trauma and infant disorganization. *Attachment & Human Development*. Vol. 8 (4). 291-308
- Wallin, D.J. (2012) – *El apego en psicoterapia*. Bilbao. Ed. Desclée de Brouwer





# TOPICS



# 2022

## Groups for the World: Inspiration, Strength and Transformation

1. Groups for inspiration, strength and transformation
2. Group processes and group dynamics
3. Groups and the multicultural world
4. Cultural and transcultural issues
5. Group therapy and global concerns
6. Transgenerational approaches in groups
7. Groups in major grief and sadness (face to face)
8. Online groups
9. Groups therapy in addiction
10. Groups for trauma and resilience
11. Couples and family therapy
12. Children and adolescences in groups
13. Youth groups
14. Group work for seniors
15. Education and training in group therapy/processes
16. Supervision in group therapy/processes
17. Research and theory on group therapy
18. Ethical and legislation issues in group therapy
19. Neurobiology of group therapy
20. Group analysis
21. Psychodynamic groups
22. Psychodrama and sociodrama
23. Expressive Arts Therapy
24. Cognitive Behavioral group therapy
25. Mindfulness-based groups
26. Support groups
27. Organization consultancy
28. Dreams in groups
29. Integrative approaches to group work
30. Medications and group therapy
31. Other topics of professional interests

## Thoughts on social work during covid 19

### Reflexiones sobre el trabajo social durante el covid 19



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#### Abstract

Social workers' role aims to support people in need for various reasons, those who are often confined to the margins of community. Covid 19 has caused many changes in our daily lives and its backlash has also affected support interventions. The social workers went through this period together with the users, trying to find new balances with respect to the practical aspects, but also to the psychological and relational fallout. The processing and adaptation work was carried out both individually and in groups. The paper summarizes a few reflections emerged in some social workers' groups held during this period in Northern Italy, highlighting specific issues and the processing paths used to address them.

#### Key words

inequalities, adaptation, health, unconscious, emotional dynamics

#### Resumen

La función de los trabajadores sociales consiste en apoyar a las personas necesitadas por diversos motivos, que a menudo están confinadas en los márgenes de la comunidad. Covid 19 ha provocado muchos cambios en nuestra vida cotidiana y su reacción también ha afectado a las intervenciones de apoyo. Los trabajadores sociales atravesaron este periodo junto con los usuarios, tratando de encontrar nuevos equilibrios con respecto a los aspectos prácticos, pero también a las secuelas psicológicas y relacionales. El trabajo de procesamiento y adaptación se lleva a cabo tanto individualmente como en grupo. El artículo resume algunas reflexiones surgidas en algunos grupos de trabajadores sociales celebrados durante este período en el norte de Italia, destacando cuestiones específicas y las vías de procesamiento utilizadas para abordarlas.

#### Palabras clave

desigualdades, adaptación, salud, inconsciente, dinámica emocional

## INTRODUCTION

The disruption caused by Covid 19 has had a huge impact on almost every level of societies. The effects of diseases are often more severe on people that suffer inequalities in their condition of life. (see Marmot, 2015).

Nowadays, social workers have an important role in dealing with different kinds of difficulties that occur in human experience and in our societies. They try to reduce social inequalities, confronting with the barriers to their clients' comprehensive wellbeing (see Payne, 2014).

In Italy, social intervention is largely delegated to private no-profit organizations that collaborate with local public institutions (see ISTAT, 2020). In general, social and health interventions are carried out by different services.



Prevention standards for Covid 19 were suddenly integrated into working practice. Their introduction did not follow a smooth and gradual path, sometimes it was not immediately clear how to implement these standards in practice. The progressive steps taken in the various phases (from the discovery of the epidemic to the various forms of containment) have had practical, relational and symbolic repercussions on the lives of careworkers, users and their interactions. How is it possible to do proximity work while maintaining distance?

I lead a number of groups for social workers of no-profit organizations in Northern Italy which are involved in different areas of intervention (minors, homeless people, migrants, people with mental health problems). They are group-analytically oriented, usually composed of 4 to 12 people, aiming to protect individuals' health, increase group cohesion and deal more effectively with the people cared for.

Right after the beginning of the lockdown the different services (when not suspended) responded in two prevailing ways: some continued their in-person work, incorporating prevention procedures into their daily life, others had to develop remote working arrangements.

In a similar way also groups subject of these reflections underwent profound changes, first undergoing periods of suspension, then through the reorganization of the setting and finally moving, in most cases, to online meetings. This changeover led to organizational difficulties. Besides, some social workers had sometimes problems or refused the use of the new media.

This paper is not the outcome of a traditional research project, but aims to share some of the thoughts that have emerged together with the people who have decided to continue the collective work. The idea of writing about this theme came to me after the groups were held, therefore, in order to respect the confidentiality of the participants, no material from the meetings will directly be used, but the main themes will be outlined. Some phenomena were more common, others were more determined by specific re-organizations of services.

### COMMON ISSUES

The intervention of social workers usually has a mediating function between people in difficulty, institutions and society.

This position generates strong expectations on the part of both users and institutions regarding the role of the care workers. Social workers find themselves on both sides pushed to achieve objectives outside their regularly foreseen tasks. Users can identify caseworkers with

institutions, and institutions tend to delegate functions in relation to the care of users.

In addition, internal expectations together with an ideal vision of one's own mission can add internal pressures in relation to the deep ethical values possessed by each individual.

During the pandemic these expectations were further put under pressure by the general situation of uncertainty, in which it was difficult to have clear and sustainable indications on the most suitable way to proceed. The special nature of human relations (due to the specific difficulties of different users) required targeted adaptations in order to be able to effectively apply the general guidelines in this area of intervention.

The relationship is one of the fundamental aspects of social work. These changes in the context of interactions made it possible to focus on several constitutive aspects. Physical presence, both in its non-verbal communicative potential and in the symbolic aspects of proximity, is a powerful medium that cannot be immediately translated into an online connection. The discovery of new ways and codes to transmit and receive this part of communication makes it, in some ways, more tiring and artificial. At the same time, it allows one to become aware of a large part of exchanges that often take place in an unconscious manner.

Another common factor was an observed change in interactions between the so called first and second wave of Covid 19. The first phase generally correlated with a sense of greater cohesion in relation to a new and upsetting experience. In that period the role that each person could play in providing a collective response to a common danger was highlighted, perhaps with the illusion that the effort would allow the eradication of the disease.

The return of restrictions, although less rigid than in the first phase, was faced with a sense of greater fatigue and a general drop in mood with depressive projections regarding the unresolvable nature of the situation. The lowering of collective attention, in some cases, made it more difficult for users to cooperate. It was possible to observe a relative drop in compliance with the prevention measures, especially those related to isolation or quarantine procedures. These effects were partly compensated for by a greater familiarity with the new ways of working on the part of both care workers and users.

These changes in interactions were probably partly influenced by the broader framework of society. In particular it is possible that an effect produced by the narratives that emerged in the different phases of this experience was felt. Differences in attitude were evident both directly in the caseworkers and in the guests.

The feeling of time also led to some interesting considerations. After the first phase between shock and novelty one passed to a sort of suspended flow. Then new forms of habit progressively took place, thus giving space to a recovery bringing the desire to start again for most part of people. This phase led also, for someone, to a certain attraction towards the sense of closure and “feeling safe in the den” experienced in the phases of restriction.

### IN-PERSON WORKING

People who kept the service in presence found themselves in an uncertain situation having to go to work despite a general lockdown. The fear of contagion (made heavier by the absence of clear guidelines) and the lack of specific social recognition of their role may have increased the feeling of being poorly considered and protected in carrying out their function.

The need to ensure that rules of prevention were maintained, especially in community and/or group contexts, undermined the achievement of the canonical goals of every educational or care intervention, in order to ensure that rules of prevention were maintained, especially in community and/or group contexts.

The normal working method in their case often consists of group or community interventions. This kind of actions are particularly recommended for the recovery from situations of discomfort, but they could determine a further risk factor in a situation where one of the rules of prevention is social distancing.

The lack of aspects of proximity and the connotation of relational openings in terms of danger, in some cases, might have contrasted a series of previous interventions oriented to the construction of trust in the users. In this way prevention rules might have interfered with clients’ potential of relationship with the caseworkers and among peers.

This change in the ways of relating to one another exacerbated feelings of exclusion and stigmatization suffered by clients. In a large number of cases clients are people on the fringes of society who often had direct experience of stigma (see Singer et al., 2019). Besides,

a lot of them previously developed a problematic internalized way of relating to one another that manifests itself in aspects of fear and reactive aggression towards this issue.

Moreover, during this pandemic, the increasing emergence and relevance of health concerns in social work produced a series of modifications in the relational field and required staff to review their competences and reshape their role.

The symptomatology ascribable to Covid 19 made it necessary to carry out instrumental investigations for the differential diagnosis from other common pathologies. This peculiarity increased the sense of unease and the modification of the relationship with one’s own and others’ bodies (i.e. generating new readings and reactions to previously considered harmless and uninteresting phenomena, such as a simple cough).

The set of organisational changes and the state of collective danger caseworkers and users were equally exposed to allowed for some modifications of the relationship and the interactive role.

The combination of these factors often promoted attitudes of greater autonomy, cooperation, respect of rules and restrictions in several people within various intervention areas (especially during the so-called first wave). Potentialities and resources, latent in the usual functional interactions related to the service, emerged during the pandemic period.

### REMOTE WORKING

One of the main novelties emerging from this period has been the very wide recourse to distance communication tools with the use of different online platforms that allowed to keep in touch with individuals and, in some contexts, also groups. In this context, caseworkers had to face the limits and the potentialities of these tools. Often social workers neither have a deep knowledge of this kind of instruments nor a specific preparation about their use in the specific context of their intervention.

The use of distance working has put further pressure on the boundary between working environment and private life. This border is often an object of reflection for people who work in the fields of care, education and nurturing, because these activities also belong, in a profound way, to human existence in the broadest sense.

The online connection, especially when operated from the domicile (both of the guest and the care workers)

solicits aspects related to the symbolic value of home. These links often implied an increased difficulty to set limits to the interactions with users. Caseworkers found themselves in a less orderly regime, less divided between work and private life. Even without direct interactions, for some people it was more difficult to disconnect from concerns and thoughts related to work, thus undermining the ability to relax. At times, this kind of difficulty outweighed the time saved by not having to travel for service.

In addition, the lack of interaction and informal moments with colleagues within the work environment deprived many care workers of an important affective point of reference and support, crucial for the management of the emotional load resulting from professional duties.

The absence of school and educational services, combined with remote working, made the caseworkers with children face the difficulty of setting limits also for them. Social workers faced the paradox and the overload of having to give up the care of their loved ones to look after their clients (who sometimes are the same age as their relatives).

For some users the change of modality entailed more difficulties and closures, compared to the previous way of interacting. This change of perspective, however, also brought about some positive aspects. For example, some other people found themselves more at ease in a less close interaction and were unexpectedly responsive to these new situations.

The loss of the usual setting also partly contributed to this effect: the connections from the private homes brought out elements in the relationship which were not always present in the exchanges in the neutral places. The access of new elements offered a potential deepening of the relationship, although presenting a series of difficulties on the level of confidentiality. Some clients developed a protective attitude towards the care workers. Users showed this frame of mind in several ways, for example, by increasing their attention and asking more frequently about them and their families' health status.

### GROUP CONTRIBUTIONS

After an initial moment of impact and adaptation, it is possible to consider the problems encountered with a broader perspective, through group processing.

From a wider point of view, specific components related to the disease might be distinguished from elements however present in social work.

The difficulty to implement prevention procedures in the working environment showed how the work with the weaker sections of society often confronts subjects with specific troubles in building compliance. Often, the same difficulties that lead people to turn to services, place them in at-risk categories, but complicate support interventions, which would require adequate resources. Groups prompted social workers to create new ways of processing these topics, bringing out even their less obvious connotations, and trying to create a broader understanding and collaboration with clients to respect the rules. However, it was also necessary to confront the aspects of transgression of these specific rules. This kind of opposition responded not only to the more common dynamics of acceptance/denial of the illness. They were also related to dynamic and relational elements linked to the role interactions between care workers and users (especially in those residential services in which the physical presence was maintained, although relational habits had to be modified).

In the first place, the rapid and unforeseen appearance and evolution of the pandemic produced numerous elements "not thought of", but received into mental life as, in themselves, potentially persecutory things. The activation of the alpha or gamma elaborative functions allows us to reinsert these phenomena into a network of more thinkable meanings (see Neri, 2008). It will be possible to ground more sensible and less acted-out interventions in this framework.

The emotional contribution to the comprehension of the different events and in the decoding of interactions and relations, can reduce the tendency to forms of isolation of affects. This awareness might reduce tendencies to strict materialistic representations, with more defensive than rational characteristics, therefore often not completely effective.

When groups take charge of death and contagion anxieties, with the related anxious or projective trigger processes, they can reduce the appearance of hypochondriacal tendencies, aggressive outbursts or the search for scapegoats.

Mixing the preventive measures with the search for evoked meanings, both at a conscious and unconscious level, might offer a deeper vision of the actions taken. Searching for adequate paths to integrate these visions into a global framework with actions can reduce the difficulties in promoting clients' adoption of appropriate behaviours. This conscious way of acting may foster a general increase in compliance.

The adoption of new working practices led, in some occasions, to the emergence of new horizons of subjectivity for the assisted people, opening up plans for greater autonomy and empowerment.

The ability to elaborate complex frames of understanding, also by means of an evaluation of the unconscious components, may open a better ability to adapt to this unforeseen situation. This kind of frameworks also enhances clients' potentialities and resources which emerged after the change of ordinary references.

The unexpected and sudden situation found most people unprepared, but in some contexts, when it was possible to offer an adequate container for anxieties (also thanks to the group support), it allowed a more cooperative and less hierarchical construction of communicative modes. Even if online, the group offered a safe space to share individual difficulties, feelings and experiences, making it easier to overcome moments of crisis and address difficult topics.

The presence of colleagues, in a situation of active listening during group meetings, partly made up for the lack of informal relations and contributed to the support function.

During these sessions specific attention was given to the issues related to the body, its vulnerability to diseases and absence in remote working.

Also in the current pandemic situation, the role of collective narratives seems to contribute, in a positive or negative way, to the consolidation of the sense of identity

of the caseworkers and it influences the effectiveness of the interventions towards the clients.

The group proved to be a "good enough" place to investigate different collective narratives and progressively develop ways of constructive interaction with them.

## CONCLUSIONS

The phenomena related to Covid 19 and their health, cultural, economic, and social implications are extremely complex and are likely to take years to be fully understood. However, the observation of phenomena and processes that occur in social work draws attention to some issues that already deserve our focus.

Paying attention to the affective and emotional dynamics, together with the analysis of technical and organizational data, could facilitate the adaptation transition even to sudden crises.

Systematic research with standardised tools could help to focus on risk and protection factors and to draw attention to good practices. This knowledge might help to improve social caseworkers' work capacity and quality of life in both acute crises and in the constant adaptation to changing contexts, users and social needs.

\*Acknowledgment: Several people play a decisive role in supporting other people and daily fighting inequalities in our communities. This paper wishes to offer a small tribute to their fundamental work.

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## REFERENCES

- Italy. ISTAT (Istituto nazionale di Statistica). (2020). Struttura e profili del settore non profit Anno 2018. [https://www.istat.it/it/files/2020/10/REPORT\\_ISTITUZIONI\\_NONPROFIT\\_2018.pdf](https://www.istat.it/it/files/2020/10/REPORT_ISTITUZIONI_NONPROFIT_2018.pdf)
- Marmot, M. (2015). *The Health Gap: The Challenge of an Unequal World*. Bloomsbury Publishing PLC
- Neri, C. (2008). *Group*. Jessica Kingsley Pub
- Payne, M. (2014). *Modern Social Work Theory*. (Fourth edition). Palgrave Macmillan
- Singer, M., Baer, H., Long, D., Pavlotski, A. (2019). *Introducing Medical Anthropology A Discipline in Action*. (Third Edition). Rowman & Littlefield Publishers

# Call for Papers for Forum 10

## Llamamiento

Dear IAGP Members,

We are very excited to initiate our first Call for Papers for the IAGP Journal **Forum Number 10** to be published in June 2022.

In the next volume, we focus on **"Tools of Change during/after the COVID-19 Crisis."**

We are also seeking to publish regular articles of "Scientific Papers" and "Case Studies".

"Instructions for Authors" is attached so that we will be using it for peer review, so that authors can know the parameters we will be using for this volume.

All the papers are to be sent to Forum Editorial Committee (**Forumeditors@iagp.com**).

The due date for submission is **November 20, 2021**.

Please note that the first author should be an IAGP member and that all the papers will be peer-reviewed (except Invited Articles). In addition, proofreading by native speaker is essential. Otherwise, we cannot start the peer-review process.

Estimados miembros del IAGP,

Nos emociona iniciar la convocatoria de artículos que compondrán el **número 10 de Forum**, la revista de la IAGP que se publicará en junio de 2022.

En dicho volumen nos centraremos en **"Herramientas de cambio durante/después de la crisis del covid-19."**

También se incluirán artículos regulares: "Artículos Científicos" y "Estudios de Caso".

Se adjuntan las normas de publicación, que serán utilizadas en la revisión por pares, para que los autores puedan conocer los parámetros que vamos a utilizar para este volumen.

Todos los documentos se enviarán al Comité Editorial de Forum (**Forumeditors@iagp.com**).

La fecha límite para la presentación es el 20 de **noviembre de 2021**.

Téngase en cuenta que el primer autor debe ser miembro del IAGP y que todos los documentos serán revisados por pares (excepto los artículos invitados). Además, la corrección a cargo de un hablante nativo es esencial. De lo contrario, no se iniciará el proceso de revisión por pares.



## Posibilidades y límites de las intervenciones y psicoterapias online en tiempos de pandemia del covid-19. Entrenamiento para profesionales de la salud mental.

### Possibilities and limits of online interventions and psychotherapies in times of the covid-19 pandemic. Training for mental health professionals.



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#### Published books:

Technologically mediated psychotherapies (PMT). Study of processes and microprocesses from online participation (Doctoral thesis-2010).  
Group Psychotherapy.  
Online Group Psychotherapy (2012).  
Group Psychotherapy and Psychodrama (2015).

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#### Resumen

Realizamos un recorrido por diferentes investigaciones y estudios en los últimos 15 años acerca de las psicoterapias e intervenciones online, para concluir con la descripción de una experiencia de formación online llevada a cabo durante el año de pandemia COVID-19. Durante el período de confinamiento realizamos diversas formaciones en las que participaron 400 profesionales de la Salud Mental pública y privada de países de habla hispana y portuguesa. Durante el tiempo de formación se llevaron a cabo intervenciones y psicoterapias online, observándose diferentes posibilidades y dificultades relacionadas con las características personales de los profesionales y las características de las estructuras psicopatológicas de los pacientes. Fueron significativas las observaciones acerca de las modalidades de intervención online utilizadas (textual, videoconferencia, telefónica, plataformas de creación colectiva y videojuegos) y del tipo de intervención (individual, familiar y grupal). Las formaciones online tuvieron una duración de 25h. en grupos que trabajaron con multivideoconferencia por Zoom combinada con un campus virtual textual, a través de foros, artículos aportados y trabajos escritos realizados por los participantes de forma anónima. Se registraron 1500 páginas de texto producidas por alumnos y profesores participantes en la experiencia. Se presentan conclusiones de diversas investigaciones y experiencias de formación desarrolladas.

#### Palabras clave

COVID-19. Online interventions. Online processes. Investigation. Online training.

#### Summary

We carry out a trajectory for different investigations and studies carried out in the last 15 years about psychotherapies and online interventions to conclude with the description of an online training experience developed during the year of the COVID-19 pandemic. We conducted various trainings in which 400 public and private Mental Health professionals participated in Spanish and Portuguese speaking countries. The observations about the online intervention modalities used (textual, videoconference, telephone, collective creation platforms and video games) and the type of intervention (individual, family and group) were significant. The online trainings lasted 25 hours, in groups that worked with multivideoconference by Zoom combined with a textual virtual campus, through forums, contributed articles and written work carried out by the participants. 1500 pages of text produced by students and teachers participating in the experience were recorded. Preliminary conclusions of various investigations and training experiences developed are presented.

#### Keywords

COVID-19. Online interventions. Online processes. Investigation. Online training.

## INTRODUCCIÓN

Nos centramos, específicamente, en la investigación sobre el uso de tecnologías de la información y comunicación (TICs) en el campo de la atención en Salud Mental en tiempos de la pandemia COVID-19.

En el período del confinamiento se suspendieron la casi totalidad de intervenciones en salud mental presenciales, a excepción de situaciones de urgencia extrema, y los profesionales se vieron obligados a encontrar recursos que les permitieran continuar la tarea con sus pacientes. En el desconfinamiento ha habido diferentes modalidades de intervención, desde totalmente online, a totalmente presenciales y en diversos porcentajes, combinaciones entre formatos online y presencial.

Se ha producido una evolución progresiva de la utilización de tecnologías desde la década de los 90 del siglo pasado (Freud, S.; Winnicott, D. W.; Mc Luhan, M.; Turkle, S.; Weinberg, H.). Freud se anticipa en los años 30 describiendo al ser humano como un 'Dios con prótesis' que no siempre se siente más feliz con todos sus atributos tecnológicos y Winnicott, con su conceptualización del 'espacio transicional' nos aporta un basamento conceptual adecuado para comprender las características del 'espacio online'. Mc Luhan introduce su concepción del medio tecnológico como mensaje y Turkle describe las características de la vida en la pantalla. A partir de la pandemia del COVID-19 se generó una expansión geométrica con inmensas experimentaciones y acumulación de aprendizaje en muy diversos campos de la atención en Salud Mental, la educación y las intervenciones en los campos de las organizaciones, empresas, la comunidad y los equipos de trabajo.

Kächele (1992), de la Universidad de Ulm, diferencia tres fases de la investigación en psicoterapia: la primera comenzó en la década de los años 30 del siglo pasado, buscando la legitimación de las psicoterapias psicoanalíticas. La pregunta era ¿sirven las psicoterapias? La segunda fase, desde 1960 a 1980, se focaliza en la relación entre el desarrollo del proceso y el resultado. La pregunta era ¿qué es lo que debe suceder en el desarrollo de la psicoterapia de forma tal que al final pueda esperarse un resultado positivo?

La tercera fase en la cual nos encontramos en la actualidad aborda las complejidades de la situación terapéutica y ha hecho más profunda e intensa la investigación del proceso terapéutico. La pregunta es ¿qué procesos a nivel micro son constituyentes de los macroprocesos conceptualizados clínicamente? Estas mismas preguntas consideramos que son válidas en la investigación de las intervenciones y psicoterapias online.

Toda nueva tecnología modifica el lenguaje, las formas de conocimiento, las formas de relación entre las personas y evidentemente las formas de implementar las psicoterapias y las intervenciones online. Otra de las características fundamentales de la comunicación online es su posibilidad de funcionar en diversos grados de sincronidad y de asincronidad, presentando estas modalidades diferentes ventajas y desventajas que intentamos resumir en la tabla 1. Entendemos que en el momento actual del conocimiento de este tipo de intervenciones, podemos afirmar que la combinación de modalidades de psicoterapia presenciales y online, así como la combinación de diferentes modalidades de sincronía y asincronía online, presentan el mejor equilibrio en cuanto a mejorar las ventajas y atenuar las desventajas de las diferentes formas de intervención. Por último, también destacamos que los diferentes lenguajes tecnológicos (textual, sonido, voz, imagen, plataformas de creación online y realidad virtual), ofrecen indicaciones específicas en relación con el tipo de psicopatología de los pacientes tratados.

Los riesgos, beneficios y desafíos que implican las intervenciones terapéuticas online se pueden observar resumidos en la tabla 2, en síntesis, lo que desarrollamos en esta tabla es la idea de que existen significativos beneficios de los entornos online y otros tantos riesgos, aunque el gran desafío es intentar investigar y descubrir las nuevas posibilidades que nos proveen estas tecnologías en el campo de la intersubjetividad, del desarrollo de la creatividad, de las nuevas maneras de conexión y de diferentes formas de transformación social. Si bien, estas observaciones generales deben considerarse en cada caso particular, teniendo en cuenta la relación entre la estructura del dispositivo online utilizado y la estructura de la personalidad de las personas conectadas a la red tecnológica.

TIPO DE CMO	PROS	CONTRAS
<b>SINCRÓNICA</b>	<ul style="list-style-type: none"> <li>El tiempo adquiere una mayor flexibilidad y aumenta la capacidad de organización de las sesiones en relación al espacio presencial.</li> <li>Hay una sensación de 'presencia' que se crea en el espacio online sincrónico al estar con una persona en tiempo real.</li> <li>Si bien una parte de la expresión no verbal queda excluida de la pantalla, en cambio los primeros planos muestran diversas características ocultas y adquiere especial relevancia el fondo y el escenario cambiante del aquí y ahora del paciente.</li> </ul>	<ul style="list-style-type: none"> <li>Menos zona de reflexión, y menor tiempo entre intercambios para pensar y componer la respuesta. En la comunicación textual online, en cambio, estas características se ven especialmente desarrolladas.</li> <li>Dificultad de establecer una comunicación a través de la mirada, especialmente en grupos, en los cuales requerimos apoyarnos en la palabra.</li> <li>Imposibilidad de establecer contacto a través del cuerpo y la dificultad de la percepción sutil de la expresión emocional.</li> </ul>
<b>ASINCRÓNICA</b>	<ul style="list-style-type: none"> <li>No hay dificultades en la organización de la variable tiempo del encuadre. Las diferentes zonas horarias no son un problema.</li> <li>Existe la posibilidad de responder cuando se está preparado y cuando se puede, también es más fácil no responder.</li> <li>Hay un tiempo diferente para la reflexión que permite al terapeuta y al paciente pensar y componer una respuesta.</li> </ul>	<ul style="list-style-type: none"> <li>Se pierden las fronteras de un encuentro limitado en el tiempo.</li> <li>Hay un sentimiento reducido de presencia al no estar juntos en el mismo momento.</li> <li>Se pierde algo de la espontaneidad de la interacción.</li> <li>Las pausas en la conversación y las llegadas tarde pierden su significado, aunque el espaciado y la longitud de las respuestas en la comunicación asincrónica pueden servir de indicadores.</li> </ul>

**Tabla 1.** Comunicación mediada por ordenador (CMO). Sincrónica y asincrónica. Pros y Contras.

RIESGOS	BENEFICIOS	DESAFÍOS
Aislamiento social	Auto organización	Desarrollo de intimidad online
Pérdida o fragmentación de la identidad	Acceso a información y al trabajo de asociación de contenido	Generación de presencia online
Desubjetivización	Desarrollo de un espacio deslocalizado	Accesibilidad y participación de familiares y personas desplazadas en los espacios terapéuticos
Adictividad	Tiempo variable (sincrónico y asincrónico), recuperación del pasado a través de grabaciones	Desarrollo de la creatividad online
Fatiga y distanciamiento en la relación a través del cuerpo	Capacidad de memoria y procesamiento de datos digitalizados	Acceso a contenidos inconscientes y espacios de transformación colectivos

**Tabla 2.** Riesgos, beneficios y desafíos de la comunicación terapéutica online.

## ESTUDIO DE MACRO Y MICROPROCESOS TERAPÉUTICOS A PARTIR DE LA PARTICIPACIÓN ONLINE

En la psicoterapia de grupos y el psicodrama online, hemos desarrollado o tutorizado diferentes investigaciones. Estudiamos los macro y microprocesos terapéuticos grupales a partir de la participación online (Vaimberg, 2010). Se llevó a cabo una investigación de un grupo de psicoterapia que se comunicaba a través de un foro textual siete días a la semana y veinticuatro horas al día durante cinco años, teniendo en cuenta que aún no existían las plataformas de videoconferencia multiusuario. La experiencia nos permitió realizar observaciones que nos siguen siendo de gran utilidad. A lo largo de estos años se han ampliado las investigaciones iniciales que fueron realizadas a través de foros textuales, a otros lenguajes como las videoconferencias y las plataformas de creación colectiva. En estas diversas investigaciones, trabajamos con metodologías de investigación mixtas que complementan las cualitativas y las cuantitativas, utilizando software de recogida y análisis de los datos.

Algunos softwares utilizados para investigación, procesamiento y análisis de datos textuales y en imágenes:

- Atlas.ti. Categorización y procesamiento de datos.
- SDIS-GSEQ. Análisis secuencial de retardos.
- Theme.5. Análisis de t-patterns.
- ARS. Análisis de redes sociales.

A través de estas metodologías de investigación y del análisis informatizado de los datos hemos realizado diferentes estudios, que nos han permitido descubrir macro y microprocesos terapéuticos en psicoterapias online. Otro estudio analiza momentos de transformación terapéutica y patrones de relación intersubjetivos ocultos. El análisis informatizado de redes sociales ha facilitado el estudio de diversos fenómenos de liderazgo y de interacción en intervenciones grupales (Vaimberg, 2012).

En el momento actual estamos iniciando estudios exploratorios de investigaciones cuantitativas y cualitativas para evaluar el impacto, utilidad y necesidades de los profesionales, familiares y pacientes en el uso de intervenciones y psicoterapias online y estudios comparativos con las intervenciones presenciales en el campo de la atención en Salud Mental.

## INTERVENCIONES Y PSICOTERAPIAS ONLINE EN TIEMPOS DE COVID-19. FORMACIÓN ONLINE EN SALUD MENTAL, POSIBILIDADES Y DIFICULTADES.

En el último año se han desarrollado formaciones en teoría, técnica y entrenamiento en la implementación práctica de las intervenciones y psicoterapias online con 400 profesionales de la Salud Mental de todo el mundo. Comenzamos la tarea en el período de confinamiento y durante el desconfinamiento y actualmente en períodos de confinamientos selectivos. Desarrollamos una metodología pedagógica que combina Videoconferencia por Zoom y un Campus Virtual que emplea foros textuales de debate acerca de los conceptos trabajados y de las experiencias clínicas realizadas, así como trabajos de elaboración teórica a partir de la bibliografía aportada y del estudio de la experiencia clínica compartida durante la formación.

La recogida de material de reflexión teórica y de experiencias clínicas constituye un documento de 1500 folios de material escrito digitalizado y una gran cantidad de links de artículos, bibliografía específica, videos y películas de utilidad pedagógica.

Se trabajó con profesionales de la Salud Mental pública y privada de países de habla hispana y portuguesa. Estos profesionales durante el tiempo de la formación implementaron intervenciones y psicoterapias online, observando diferentes posibilidades y dificultades en relación con las características personales de los profesionales y las características de las estructuras psicopatológicas de los pacientes.

Una parte importante del entrenamiento fue el constituido por la experiencia de participación y la reflexión en el grupo de formación, el desarrollo de prácticas de coordinación de grupos pequeños y presentaciones online.

Las formaciones realizadas online tuvieron una duración de 25h., 8h. de trabajo en grupos grandes, medianos y pequeños a través de videoconferencias por Zoom en las cuales se discutieron casos clínicos de todas las especialidades: niños, adolescentes y adultos, neuróticos, trastornos de personalidad, psicóticos, situaciones traumáticas y de duelo. Se estudiaron las diferentes utilidades y posibilidades de los medios tecnológicos empleados para diversas edades y estructuras psicopatológicas (Vaimberg, 2020).

Los profesionales, durante el período de formación realizaron en su práctica institucional o privada intervenciones individuales, de pareja, familia y grupales. Se delimitaron diferentes objetivos terapéuticos, de prevención, seguimiento, psicoterapias focales, de apoyo, esclarecimiento y psicoterapias profundas. Intentamos sistematizar las diferentes variables constitutivas del encuadre de las intervenciones online, posibilidades y combinaciones de encuadres observados en la cantidad de experiencias clínicas que se compartieron en la formación. Resumimos los puntos principales de este trabajo en la tabla 3.

A partir de esta experiencia, se han iniciado investigaciones cualitativa y cuantitativa acerca de las ventajas y las dificultades encontradas en la multiplicidad de los casos tratados, desde la perspectiva de las valoraciones realizadas por los profesionales y también desde la perspectiva de pacientes y familiares. Se valora también la metodología de formación empleada. Para el desarrollo de esta actividad formativa se constituyó un equipo docente formado por 9 profesionales que realizaron diferentes roles dentro de los grupos de trabajo, clases de teoría y de técnica, coordinación de grupos, funciones de apoyatura tecnológica, gestión de las plataformas empleadas y mantenimiento de una comunicación online fluida.

VARIABLES DEL ENCUADRE						
<b>Tiempo</b>	sincrónico	asincrónico				
<b>Espacio</b>	físico - presencial	online	virtual			
<b>Máquina tecnosocial</b>	textual (foros-chats-email)	audio (teléfono, archivos de sonido)	videoconferencia con o sin: imagen y sonido. Simultánea o diferidas	videojuegos	realidad virtual	plataformas de creación online
	uni o bi usuario	multiusuario				
<b>Objetivos</b>	seguimiento	focal	apoyo	esclarecimiento	psicoterapia profunda	
<b>Tipo</b>	niños y adolescentes	adultos	pareja y familia	grupos	grupos grandes	

**Tabla 3.** Estudio del encuadre en psicoterapias e intervenciones online

## DISCUSIÓN

En los últimos 30 años se han desarrollado grandes avances en la utilización de tecnologías en Salud Mental, existiendo dos grandes grupos polarizados: tecnofílicos y tecnofóbicos. A partir de este último año en el cual muchos profesionales se vieron obligados a utilizar tratamientos mediados tecnológicamente, se fueron ampliando los posicionamientos subjetivos de los profesionales y pacientes en relación con el uso de estas posibilidades terapéuticas. Al mismo tiempo se han ampliado significativamente la variedad de dificultades y riesgos, así como las indicaciones y contraindicaciones en Salud Mental. Se han realizado múltiples descubrimientos e innovaciones y detectado nuevas utilidades. A muchos

profesionales les preocupa la utilización de este gran despliegue de medios tecnológicos como excusa para incrementar el empobrecimiento de los equipos y dispositivos de Salud Mental y evidentemente será un tema por el cual deberemos velar. El eje de las discusiones ha variado, ya no se plantea tan asiduamente si las psicoterapias online deben o no utilizarse. Ahora la cuestión es cómo deben utilizarse y para qué situaciones, qué posibles combinaciones e hibridaciones de encuadres y de entornos presencial y online pueden ser de mayor utilidad. En estos momentos necesitamos estar libres de prejuicios y permitirnos observar e investigar las transformaciones que van teniendo efecto en nuestra mente, en nuestras relaciones y en nuestra sociedad.



## CONCLUSIONES GENERALES

- A partir de las diferentes investigaciones realizadas en el pasado, de otras investigaciones posteriores, de los estudios en curso y de las múltiples experiencias de formación llevadas a cabo, estamos en condiciones de poder elaborar unas conclusiones que podremos ir ampliando a partir del análisis de la gran cantidad de información que se produce, velozmente, en la multiplicidad de experiencias clínicas en curso.
- La aplicabilidad de las intervenciones y psicoterapias online depende de la disponibilidad de los medios tecnológicos y de las habilidades de los profesionales, pacientes y familiares para utilizarlos. Al mismo tiempo, la estructura de la personalidad de las personas implicadas en la comunicación online determina el tipo de intervención online indicada.
- Las intervenciones mixtas online-presenciales que se observaron en diferentes combinaciones posibles, mostraron la mayor tendencia a potenciar sus posibilidades y atenuar las dificultades de ambos encuadres: online y presencial.
- Hemos comprobado la necesidad de evitar una actitud prejuiciosa en cuanto a las indicaciones y contraindicaciones de las intervenciones online. Nos ha sorprendido, la utilidad de estas intervenciones en post brotes psicóticos, en pacientes diagnosticados de trastornos de personalidad u organizaciones borderline, en el abordaje y elaboración de situaciones traumáticas, en el tratamiento de adolescentes y en el abordaje de niños con Trastornos de Espectro Autista o adolescentes con Síndrome de Asperger.
- Además de estas aplicaciones hemos observado otras posibilidades como el abordaje de personalidades impulsivas o con comportamientos adictivos. La elaboración de la situación de duelo en el período de confinamiento, el acompañamiento de diferentes situaciones clínicas o sociales (personas que viven en la calle, situaciones de maltrato, abordaje de situaciones de crisis, personas ingresadas o en situación de aislamiento), acompañamiento de personas con dificultades de desplazamiento, limitaciones sensoriales, neurológicas o de distanciamiento geográfico.
- En casos de menor complejidad clínica hemos observado muy buenos resultados en los procesos terapéuticos online. De todas maneras hay pacientes y profesionales que se sienten más cómodos con intervenciones presenciales.
- Las intervenciones híbridas que combinan al mismo tiempo o durante el mismo período de tiempo diferentes modalidades de intervenciones presenciales y online, muestran una serie de interesantes posibilidades que están en período de observación y de evaluación.
- Hemos valorado la utilidad de diversos lenguajes tecnológicos: teléfono (probablemente el más utilizado), texto, videoconferencia, videojuegos, plataformas de realidad virtual y plataformas de creación colectiva. En diversas modalidades de sincronía y asincronía.
- Como observación general y para terminar. Resaltamos la necesidad de desarrollo de nuevas conceptualizaciones teóricas, de nuevas técnicas y de la cooperación internacional para el entrenamiento de profesionales y la evaluación de los resultados en estos momentos de crisis sociosanitaria a nivel del planeta.

## BIBLIOGRAFÍA ESPECÍFICA UTILIZADA PARA ESTE TRABAJO

- Vaimberg, R. (2010). *Investigaciones de procesos terapéuticos grupales a partir de participación online*. Tesis doctoral presentada en la Universidad de Barcelona en el 2010.
- Vaimberg, R. (2012). *Psicoterapia de Grupo. Psicoterapia de Grupo Online. Teoría, técnica e investigación*. Barcelona: Octaedro.
- Vaimberg, R y Vaimberg, L. (2020). Transformaciones a través del espejo tecnológico, en Weinberg, H. and Rolnick, A. (Ed). *Theory and Practice of Online Therapy. Internet-delivered Interventions for individuals, Groups, Families, and Organizations*. (pp. 188-204). New York: Routledge.
- Weinberg, H. and Rolnick, A (2020). *Theory and Practice of Online Therapy. Internet-delivered Interventions for individuals, Groups, Families, and Organizations*. New York: Routledge.

## BIBLIOGRAFÍA COMPLEMENTARIA

- Anguera, M. T. (1992). *Metodología de la observación en las ciencias humanas*. Madrid: Cátedra.
- Freud, S. (1913). *Tótem y tabú y otras obras*, en vol. XIII, O.C., Buenos Aires: Amorrortu editores, 2ª ed. en castellano.
- Freud, S. (1914). *Introducción al narcisismo*, en vol. XIV, O.C., Buenos Aires: Amorrortu editores, 2ª ed. en castellano.
- Kächele, H. (1992). Investigación psicoanalítica 1930-1990. En *Revista Chilena de Psicoanálisis* 9.
- Magnusson, M. S. (2000). Discovering hidden time patterns in behavior: T-patterns and their detection. *Behavior Research Methods, Instruments and Computers*, 32, 1, pp. 93-110.
- Mc Luhan, M. (1983). *El medio es el mensaje*. Barcelona: Paidós.
- Turkle, S. (1997). *La vida en la pantalla*. La construcción de la identidad en la era de Internet. Barcelona: Paidós.
- Vaimberg, R. y Lombardo, M. (2015). *Psicoterapia de grupo y psicodrama. Teoría y Técnica*. Barcelona: Octaedro.
- Vaimberg, R. (2009). Escena, Heterotopía y Ciberespacio. *Intercanvis*, 22, pp. 45-58. Retrieved from [http://intercanvis.es/pdf/22/22\\_art\\_05.pdf](http://intercanvis.es/pdf/22/22_art_05.pdf)
- Vaimberg, R. (2005). Psicoanálisis y sociedad de la información. *Intercanvis*, 14, pp. 63-71. Retrieved from <http://intercanvis.es/pdf/14/14-09.pdf>
- Weinberg, H. (2013). *The Paradox of Internet Groups: Alone in the Presence of Others*. London: Karnac.
- Winnicott, D. W. (1979). *Realidad y juego*. Barcelona: Gedisa.



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Revised on April 24, 2021

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- \* Proofreading by native speaker is requested as essential.
- \* Only when the manuscript meets the following instructions can a peer-review process (mentioned later) be started.

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- Manuscripts can be submitted either in English or Spanish.

## TYPES OF REGULAR ARTICLES AND LENGTH

- **Scientific Research:** Scholarly articles that feature theory, research, and/or excellence in practice in the field of group psychotherapy and group processes. Submissions will be reviewed by the editor-in-chief, consulting editors, or other scholars. The main text must exceed 3,000 words but not exceed 5,000 words.
- **Case Study:** Scholarly articles that feature case study in group psychotherapy and group processes. Submissions will be reviewed by the editor-in-chief, consulting editors, or other scholars. The main text must exceed 3,000 words but not exceed 5,000 words.

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- **Special Focus on “Tools of Change during/after COVID-19” Articles** (for Volume 10, 2022): Scholarly articles that feature issues in COVID-19 in group psychotherapy and group processes. Submissions will be reviewed by the editor-in-chief, consulting editors, or other scholars. The main text must exceed 2,000 words but not exceed 3,000 words.
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Submitted manuscripts must contain the following information;

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- Author Information: Name(s) of author(s) (indicating a corresponding author); short CV (**60-70 words if only one author; 30-50 words if more than one author**) with email address, photograph of author(s) (high definition) supplied separately as an image file (ex. jpeg file).
- Body of the Manuscript
- Notes: Special remarks/ Acknowledgements should be indicated in Endnotes. Footnotes should not be used.
- References
- Separate File including Figures and Tables: All Figures and Tables should be formatted in a camera-ready file or image file and be saved in a separate file.

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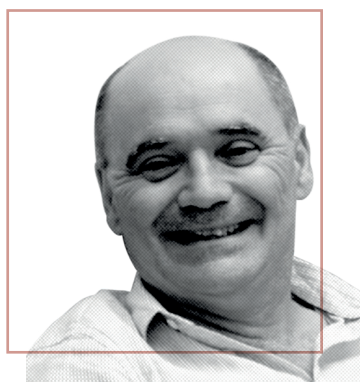
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## From Doing to Being. Interactions, emotions, relationships, and consciousness: steps in the psychodramatic approach towards understanding human identity.

## Del hacer al ser. Interacciones, emociones, relaciones y conciencia: pasos del enfoque psicodramático hacia la comprensión de la identidad humana.



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### Abstract

A scientific theoretical study.

The world is currently experiencing a lengthy period of prolonged, intense, and - in various respects - dramatic restrictions. Intended to contain the ever-spreading pandemic, these restrictions are impacting on our movements and our social interaction. This situation, however, can be taken as an opportunity to develop theories, thoughts, and insights into the origins and the processes by which human identity form.

Over the following pages, we will examine the complex, fascinating pathway that leads from the body to the mind, from action to thought, through the various dimensions of psychism (primarily: perception, emotion, and consciousness).

### Keywords

interaction, emotions, body, mind, metacognition.

### Resumen

Un estudio teórico científico.

El mundo vive actualmente un largo período de restricciones prolongadas, intensas y, en varios aspectos, dramáticas.

Destinadas a contener la pandemia que se extiende sin cesar, estas restricciones afectan a nuestros movimientos y a nuestra interacción social. Sin embargo, esta situación puede aprovecharse para desarrollar teorías, conocimientos y reflexiones sobre los orígenes y los procesos de formación de la identidad humana.

En las siguientes páginas examinaremos el complejo y fascinante camino que lleva del cuerpo a la mente, de la acción al pensamiento, a través de las distintas dimensiones del psiquismo (principalmente: percepción, emoción y conciencia).

### Palabras clave

interacción, emociones, cuerpo, mente, metacognición.

## THE AIMS OF THE PRESENT STUDY

The history of the paths through which humanity has built mental models (representations) explanatory of experienced and observed reality shows two different ways to proceed; the first consists of intuitions, mental acts productive of axioms and postulates, able to explain the phenomena observed. In the second case explanations and universal laws are derived from the observation of what exists;; knowledge therefore takes its origin from concrete and specific sensory experiences.

It is therefore acquired awareness that the search for knowledge can proceed in two distinct, opposite but integrable directions: from general to particular (deduction); from particular to general (inductive process). (Aristotle; G.Galilei. 1632; Popper,1959).

Acting these two modes of research alternatively, though in articulated connection, it is possible to build a system of laws able to describe and explain reality at different levels of complexity.

Moreno experimented with both modes of scientific investigation, arriving, both conceptually and methodologically, at very valuable formulations.

In the first case, he left us fascinating insights: the one that recognizes in human beings an almost divine creative potential, and the one that hypothesizes a possibility of remote, implicit, communication between people, the tele, two-way empathy.

Inductively, through participant observation of subjects in action such as children in the playground, professional actors, war refugees, Viennese prostitutes, and inmates in re-education, he developed both intervention techniques and theoretical constructs related to the concepts of role, spontaneity, and sociometry.

These important acquisitions account for the importance of interpersonal relationships in the development of personality (Tele Theory); at the same time, thanks to them, we know that psychodramatic intervention is effective in meeting the needs of structuring/restructuring the individual personality and we know the reason for this effectiveness (Role Theory); finally, as an ontological determination, we know that the human being is characterized by a significant creative attitude (Spontaneity/Creativity Theory).

However, not all the dimensions of the reality of the Subject have found, in the Morenian conception, a complete development; the most significant among these gaps is the one that refers to an articulated and defined Theory of Personality.

Moreno left important intuitions and conceptual sketches, but he did not arrive at a defined and systematic theorization about the instances, processes and functions that compose and sustain the human personality.

The present study is therefore proposed as a contribution to the common research work that the community of psychodramatists is doing to respond to this need for further definition of the overall system of thought at the basis of psychodramatic practice.

### THE METHODOLOGY USED

The methodology that supports the work presented here is first of all that of collecting different data, elements of knowledge, mental representations, coming from a variety of sources, and approachable, connectable, for some common significant aspect.

One source of such data can be found in the conceptualizations contained in Moreno's writings; the second source can be found in the literature produced by other authors and schools of research and thought that have been active on the same themes; the third place of

origin of the ideas considered is that coinciding with the intense and considerable activity "in situ" carried out by psychodramatic operators in a century of history of the method (the writer can refer to at least 5000 sessions, corresponding to over 10,000 hours, of personally experienced psychodramatic workshop).

Subsequently, after creating an appropriate mental space, within it the collected ideas will be approached, juxtaposed, compared and possibly connected and integrated, to arrive at new elements of knowledge.

### A MATTER OF SET

To allow – or even to ensure - better understanding of this topic, a clear definition of its various elements and circumstances is essential.

When treating people and relationships, the term 'setting' is frequently used in reference to the collection of conditions within which treatment takes place. While originally an English word, in this context the term is also used in other languages. In general English, the word has a variety of meanings (including background, frame, environment). In psychoanalytic language and its associated concepts, 'setting' is used to refer to both the collection of external elements that form physical and relational space in which the therapy takes place (the location, the positions and postures of the actors, the frequency of sessions, the duration of the treatment, etc.) and also the internal elements. These internal elements, which are linked to the mental dimension of both the patient and the psychotherapist, (e.g. free associations and verbal expression, distancing from the emotional content expressed by a patient, not responding to patients' express requests, interpretation....) therefore form the psychological space of the encounter and give structure to the psychotherapeutic process as a relationship.

In psychodrama, there is a certain amount of confusion in the way the term 'setting' is used, since it is often also employed in reference to the location in which the therapeutic activity takes place, i.e. the psychodrama theatre. In actual fact, within this field, the 'setting' is not the physical environment but rather the collection of rules or underlying guidelines intended to foster, stimulate, and organize the various interactive/relational processes that occur during a psychodrama session.

Another more specific term is used to refer to the concrete, structural aspects that form the basis (and therefore allow the performance) of these activities and that is the 'set', i.e. the "psychodrama theatre". The set consists of the stage, the subject (or patient), the leader (or director),



the various auxiliary egos (or simply 'auxiliaries', the role played by the other members of the group), and lastly the audience.

### A MATTER OF SETTING

The contractual conditions that govern and organize a psychodrama session (i.e. the setting) have various aspects of note, the first of which is the *directive* character of the management of the group. The second is the *suspension of judgment* (those involved are required to refrain from openly judging the other members of the group, in either subjective or diagnostic terms). A third condition, the *suspension of response*, consists of the leader instructing the participants at the meeting to refrain from entering into any dialectical discussion with the other members of the group about their points of view, expressions, or statements.

Directly associated with the *suspension of response* requirement is the organization of exchanges between participants and the connected communication methods, which are based on the principle of *circularity*. In each of the session segments and the individual parts (referred to as activities) of structured actions and interactions in which the participants are involved, the participants start acting, one after another, in a circular fashion; this activity takes shape and proceeds until that particular part of the session is completed and its specific objectives achieved.

The principle of *circularity* of interactions and communication is associated, in turn, with a *symmetry* criterion, which ensures all the members of the group are on an equal footing.

Finally, the psychodrama director suggests roles and interactions which are not only symmetrical, but also *complementary*. The *complementarity* criterion refers to how - within the reciprocal relationships between the different members of the group - each member plays a counter-role with respect to the others, which is part of the processes by which their specific identity is defined.

### A MATTER OF FEELING

Feeling is both a sentiment and a sensation and a direct link can be traced between these different states of being. New knowledge in the field of neuroscience has brought confirmation of this, as well as explanations for it, and we are confident that it will continue in this direction in the future.

Examining emotions is extremely important in the field of psychodrama for two reasons. Firstly, because this

practice has often been included, in a reductive and somewhat confusing way, among what are known as the *cathartic methods* (catharsis = purification or purging; the cleansing of emotions). Secondly, because of the way in which a psychodrama session is structured and unfolds means it focuses specifically on the emotional aspects of events and, in turn, stimulates and generates masses of *emotional movements*.

Dealing with emotions is both demanding and fascinating and this field has been explored extensively within different areas of study and from various perspectives. The literature on emotions is truly endless and the space available here too limited to provide even a vaguely satisfactory summary (an interesting, substantial, yet synthetic compendium, from a psychodramatic perspective, can be found in an article published recently by De Leonardis, 2019).

In this handful of pages, then, I will simply highlight and describe certain aspects of the "emotional world" that are particularly inherent - if one examines and considers certain interesting links - to psychodramatic theory and methodology.

Let's start this consideration with a definition which summarizes the aspects explored later on, providing a reference for the discussion:

*An event, if attributable to a subject, is defined as an act, a product of action. Through perception, this immediately interacts with the actor's mental apparatus, in the form of a sensation. The sensation then reverberates in the conscience as an emotion and subsequently, during the actors' life, the diachronic development of emotions takes the name of sentiment.*

### CO-EXPERIENCING AND SHARING MOODS: THE CO-CONSCIOUS AND CO-UNCONSCIOUS

The participation by a group of people in a series of psychodrama sessions, even if they run over a very short period of time, leads to the creation of a sort of "familiarization" among the participants. A deep and stable sense of belonging is established, originating from shared experiences of intimacy and a willingness to trust. A sort of cognitive and affective "common identity" is created, partly consciously and partly implicitly. Moreno (1961) uses the following words to conceptualize and describe this phenomenon:

A co-conscious or co-unconscious state is not the preserve of the individual. It is always a shared property and cannot be reproduced without combined effort .... however great the capacity of a single partner within a couple may

be (or member of a group, I might add), that individual cannot reproduce any event relating to coupledness on their own, because the conscious and co-unconscious shared by partners is the matrix from which they draw inspiration and knowledge... It is life itself that binds them together, and it is the experience of living that leads them to develop a kind of "interpsyche", a structured stream of co-conscious and co-unconscious. (p. 236)

Apart from certain elements, such as the various members' life experiences, what is shared in the processes described by Moreno is the emotional world, viewed from two different perspectives. The first concerns the emotional content of the life of each participant, who expresses and shares their emotions within the group and in doing so builds and fuels what is known as the 'co-conscious'. The second focuses on the fact that the experiences, interactions, and communicative exchanges generated during participation in the psychodramatic experience lead to intense and significant emotional dynamics, which are produced and experienced collectively, forming what is known as the 'co-unconscious'.

### EMOTIONS: SO REGULARLY EXPERIENCED, YET SO UNFAMILIAR

It has already been said that emotions have long been observed and investigated from various study perspectives. Despite being so greatly explored, the definitions reached nevertheless remain uncertain and often contrasting.

The *emotional world* is interpreted varyingly as a life experience, as a somatic or, conversely, mental phenomenon, as a state or as a process consisting of multiple components, as a resource we humans have or, conversely, as a psychopathological symptom.

Given the above, it is clear how the difficulty in providing a definition of this field lies precisely in its multidimensional nature. Emotions are both body and mind, behavioral manifestations and thoughts (or at least, they are in their embryonic stage). Emotions are a physical expression of being and, at the same time, of cognition. In psychodramatic terms, they are action and representation. In accordance with this duality, they can be defined further by saying they belong to the reality of both the ego-actor and the ego-observer, contributing to the constitution and the evolution thereof at the same time.

I feel that the reason for so much confusion and uncertainty lies in that well-known need in most fields (however different they may be) for a certain "distance" to be maintained from a phenomenon when observing it, in order to consequently understand it (and therefore its constituent aspects) clearly and objectively.

For humanity (and by that I mean both as individuals and as a species), emotions are such an essential part of our core, so intertwined with all the acts involved in our formation and

evolution, that we find this necessary shift away extremely hard to make. We suffer from a sort of *indeterminacy principle* effect, in a social-psychological sense.

Emotions have always actively accompanied every evolutionary stage of the phylogenetic path of the human being, in the same way that they are an integral part of each individual's birth and development processes. They are so omnipresent that their peripheral function, the idea that they played merely an ancillary role in the constitution of (a) *Being* as a personal and social entity, should have been doubted immediately. Let's look at certain characterizing aspects of this phenomenon, underlining the fundamental importance of emotions with respect to various peculiarities of human identity.

### WHAT ARE EMOTIONS?

Defining emotions is complex because they are such a rich variety of things. We can start by distinguishing between *primary emotions* and *secondary emotions*, by matching the two groups to the different nervous structures involved and the different mental manifestations of each group. In simple terms, primary emotions can be interpreted as *neurophysiological reactivity*. They are more connected to the bodily dimension of being and can be interpreted as *arousal* phenomena, i.e. a physiological reaction produced within the body. Secondary emotions, meanwhile, are associated with the functioning of more evolved brain circuits, they belong to a distinctly mental dimension and involve *appraisal*, i.e. the cognitive assessment of experience.

Secondly, emotions are related to the body, both as a place of activation/origin of the emotional process, and as a dimension within which the energies produced by the emotional process are expressed and/or concentrated/released.

Emotions are therefore inherent to the body, finding their 'starter' in the biological structures of the perceptive functions and in the processes that originate from these functions. Perception processes are either focused on the perceiver (proprioception and interoception) or outside thereof. Perceptual stimulation becomes sensations, which can be considered a basic and initial manifestation of emotion.

Emotions, however, also consist of a corporeal dimension in that they are supported by the interconnected activity of a person's different biological structures. Broadly speaking, they are connected throughout the body as a whole, and strictly speaking, they are connected by the brain.

Our body supports and participates in the production and development of emotional processes and, at the same time, experiences the effects thereof and - sometimes - expresses them.

There are various biological regions, cerebral districts and, lastly, mental functions involved in emotional processes. Panksepp (2014), among others, identifies three distinct categories of mental processes, each one of which is connected to specific areas of the brain, which correspond, in turn, to different stages of the phylogenetic evolution of cerebral structures.

Summarising then, emotions can be considered a collection of forms of reactions (consisting of numerous different processes) experienced within a subject in relation to stimuli from both the outer world and from within. This reactivity takes on different forms and is connected to specific structures and functions, including neurophysiological manifestations, neurovegetative reactions, instinctive responses, affective experiences, mental processing in the form of representation.

The most complex and advanced form of mental representation of the human being is the conscious form and, in particular, the evolution of this known as metacognition (thinking of ourselves as thinking beings, the awareness of being conscious entities). Emotions are also related to this further dimension of *Being*.

Once again, evidence of and an explanation for this can be found in the findings of neuroscientific research. Damasio (1994) starts by claiming that a Cartesian circle had occurred when the apparatus of rationality was deemed superior and distinct from its biological functions, thereby refuting the fact that the former should be considered internal to and arising from the latter.

## EMOTIONS AND SENTIMENTS

These two aspects are often mixed up and mistakenly considered synonymous, however what distinguishes emotions from sentiments is quite simply time. Time, not only as a physical dimension of reality but also, and above all, as an existential element.

Emotions correspond to the present, to immediate and short-term feelings, while sentiments are like a “logbook”, a record of all the emotions experienced. They accompany us throughout life, participating in the formation of our life story and the structuring of our personality.

Neuroscience helps us in this regard by providing conceptual support and depth to these arguments. Damasio, in particular, clearly highlights a distinction between emotions and sentiments while acknowledging that they belong to a single process. He defines emotions as complicated collections of chemical and neural responses, which go on to form neural configurations and thus become sentiments. (Damasio, 1999).

This reflection by Damasio is extremely interesting as it takes into account (confirming and further developing) the circular causal relationship that binds brain and mind, interconnecting the neuronal apparatus and the emotional processes that are part of the mind. On the one hand, the cerebral organ is the site of and contributes to the origin and development of emotions, and on the other, emotions and their action (starting from the biochemical reactions) contribute to the evolution and articulation of the brain's structures.

According to Damasio, consciousness is built on two phenomena. The first occurs when the person comes into contact and interacts with something, the second is the modifying effect this interaction has on the person. The biology of consciousness explains how the brain constructs representations of the two components, person and object, and of the relationships established between them.

Damasio (1999), again, provides neurological evidence of how certain brain mechanisms are common to both emotions and consciousness. According to his conception, the conscience is connected to emotions, it is derived from them through the transformation of emotions into sentiments, which start with sentiments of the body.

The body therefore participates in and is fundamental for conscious experience at the same time. The mind is not separate or distinct from the body but rather firmly connected with it. It offers the biological foundations and conditions that allow, among other things, its scientific exploration and explanation.

Specific brain areas and neurobiological mechanisms have been identified as linked to awareness of oneself and others, hence consciousness is corporeal and emotional first and foremost, and it becomes contemplative only later.

In his “*La mente relazionale*” (1999), Siegel also underlines the great importance of emotions in the structuring of many mechanisms on which the functioning of the mind is based.

The following quotation is an extremely interesting passage from Siegel's work, which highlights a special function of emotions that we will look at more closely later on: “In attachment experiences, the primary factor is the type of emotional communication ... Emotions play a fundamental role in attributing a value or meaning to representations, and in this way our reality is shaped by emotional and interpersonal processes. “ (Siegel 1999, page 6).

## FUNCTIONS OF EMOTIONS

Emotions, in different forms and manifestations, have accompanied humankind along the various stages of its evolutionary path, in the same way they accompany each of us humans through the different stages in the development of our identity.

At each evolutionary stage (as far as the species is concerned) and development stage (in individuals), different emotions and different functions are associated depending on their origin, centrality, and importance.

According to John Marshall Reeve, these different functions can be grouped into three distinct categories, namely adaptive, social, and motivational.

With reference to Ekman's theory, for the sake of brevity, we'll look at just a few examples of these functions. Fear is linked to protection, it signals danger, an emergency, and puts those who feel it in a state of alert. Sadness is associated with the need to re-process an event or a moment, a cry for help, and the beginning of a restoration process. Anger lies behind active self-defence, attacks, the defence of borders, or the movement thereof to one's advantage. For individuals, pleasure is connected to the pursuit and creation of a condition of psychophysical wellbeing, for the species, it stimulates and accompanies reproduction.

Among the many functions there is one which, because of its general, non-specific nature, I consider extremely important, although it has been underestimated and ignored by the vast majority of authors. I am referring to the described signifying function, as already mentioned by Daniel Siegel.

It is significant that much earlier, in one of his essays from 1939, Jean Paul Sartre had stated that: "the study of emotions has verified this principle: an emotion refers to what it signifies. And what it signifies, is all the relationships with the world established by humans".

In addition to the intrinsic value of an emotion, with its own purposes and effects, the signifying function of emotions, highlighted by Sartre and Siegel, is extremely interesting because it links emotions to another fundamental category investigated by the Morenian theory and used in psychodramatic methodology: *the role*. As a symbolic representation, this too, as we will see, also has (among other things) a signifying value.

Emotions perform a signifying function due to their vitalism, energy, and sensibilities. On a basic, essential

level, experiences are defined by their "flavours", the different shades and nuances they bring to a person's perceptions.

In addition to establishing, organising, and structuring (shaping) the action of the individual within the world, due to their symbolic nature, roles also embody, represent, and evoke meanings linked to ideas, concepts, and values.

## A MATTER OF ROLES

For psychodramatists, the role is a fundamental element of *Being* and *Action*. Remember that the role is "the actual and tangible forms which the self takes. Therefore, we can define the role as the functioning form the individual assumes in the specific moment he reacts to a specific situation in which other people or objects are involved. The symbolic representation of this functioning form, perceived by the individual and by others, is called role." (Moreno, 1961).

According to Morenian ontogenetic theory, *Action* is first and foremost a founding component of *Being*. Only in the second instance does it become its expression. "Roles do not emerge from the self; it is the self that emerges from the roles." (Moreno, 1985, page 36).

According to the same theory, a fundamental of psychodramatic thought, the first form of *Action*, from an evolutionary viewpoint, is the Action of that which is known as the *global being*. This is the term with which Moreno effectively defined the state of newborns, who exist entirely through physical action and movement. Their action occurs in a temporal dimension fixed in the present, in the moment, and characterized by immediacy. A baby is totally absorbed by its own acts, living in an existential condition of globality, which makes action, perception, experience (and representation) a whole. In these early times of subjective human existence *all is Identity*, to use the concise and effective Morenian definition. Everything is in concrete form. There is no separation, distinction, between form and meaning, between the physical object and its mental representation.

It is important to underline, to fully emphasize, how the role, foundation, and origin of the self (in other words, of identity) is structured on and corresponds to three different dimensions: a) *substantial*: it is operation, concreteness, tangible or, in any case, perceptible; b) *formal*: it has its own precise and defined structure, c) *symbolic*; it contains inner meanings and draws on outer meanings.

Here, too, we find abundant and important concordances with the most recent acquisitions within the line of studies carried out in the field of neuroscience: “Cognition cannot be reduced to the activity of the brain but must include the body to which that brain is bound. The concept of self can be interpreted on different levels of complexity, the minimal level being the minimum self or core-self, the more complex being the self of narrative identity.” (Gallese, 2014).

Again: “Embodied simulation is an attempt to describe ... a basic functional mechanism involved in social cognition, not confined to the domain of action but including other aspects of intersubjectivity such as emotions and sensations.” (Gallese, 2014).

Thanks to recent discoveries regarding what have been coined “mirror neurons”, we know that the neuronal structures involved in the performance of a certain behaviour or task are exactly the same as those which are activated in motor inactivity conditions when a subject observes and, at the same time, builds an internal mental representation of concrete behaviours and actions.

Summarising and simplifying, in both the Morenian and the neuroscientific approaches, what we do is the precursor to and foundation of what we think, know and, ultimately, are. Therefore before *cogito ergo sum* comes *ago (I act) ergo sum*.

Gallese’s *embodied simulation* can be understood as bodily representation, i.e., the implicit form inherent (in an embryonic condition) in roles at a level of development which we psychodramatists refer to as ‘psychosomatic’.

**Psychosomatic** (or bodily) roles are those which although they can be taken and observed at any age, are the only ones encountered in the very early stages of human development. This is the stage where, as already mentioned, everything is identity, i.e. the simple, concrete dimension of being, as a dynamic, vital presence in the world, contains all meaning.

Only gradually, thanks to the interaction between the child’s neurological development and its relationship with the world (made up of objects and people) does a representative activity gradually emerge through the production of images inside the mind.

This still takes place within the first stage of an individual’s mental development, in what Moreno calls the “first universe”. However, it refers to a second phase thereof, a more evolved phase, wherein *all is reality*. During this period, a child is capable of separating and extracting

mental representations from the concreteness of the action (since he or she produces mental images) but is as yet unable to distinguish reality from the imagined. It is only with a further passage, upon accessing what is referred to as the *second universe*, that it becomes possible to fully discern between reality and pure imagination. Moreno hypothesises that this is enabled by the action of two particular, specific neurological structures, which are distinct yet mutually interactive. Forming two systems, in what he calls the *warming-up process*, the *first* is connected with the actions of reality, the other with imagined actions.

As a growing child accesses a representative dimension of life, a second category of roles emerges which leads to the foundation of the self: *psychodramatic (or phantasmatic) roles*. These concern the child’s inner world and help structure it in a particular and exclusive way. They are both constituent and representative of the child’s subjective specificity, of the unique ways in which the child experiences emotions and mentally represents reality.

Every single human being has a specific subjective identity but is also part of different relational contexts comprising other subjects, with whom that person interacts in a mutual or reciprocal way. The first broader context within which a role is taken and identity defined is the circumscribed and private context of the family within which one grows up. **Family roles** (father, mother, son, brother, sister ...) belong to this area.

As one broadens one’s field of action, moving towards increasingly structured and complex interactions, the individuals enter various collective contexts, finding a place for themselves therein. One experiences sociality and groups that differ considerably, in terms of the number of members, the type of group, the consistency, complexity, the organizational methods, and also the reasons for their formation, the aims and goals thereof.

Taken together, all these elements form the social dimension, within which one takes **social roles**. These roles form the foundation for the structure and identity of groups and, at the same time, contribute to the development and enrichment of the personalities of individuals.

Continuing along this metaphorical path that leads us from the individual closer and closer to the general (or universal) dimension, we reach the **cosmic** or *value roles*. These are the highest degree of abstraction as regards the founding structures of both psychic and social reality. This is the category of role that concerns



the transcendent, the purposes, the meanings, and the ultimate and absolute connections of human existence.

All these five categories, or dimensions, of role are important and contribute to the formation of human identity, humans as individuals and as groups. Among these, the first two - psychosomatic and psychodramatic roles - are absolutely essential for the development of human personality through metacognition. Bodily events (physical and concrete) together with imagination/representation form the foundation for the other three subsequent levels of identity.

As the study and practice of the concept that *the mind that originates from Action*, psychodrama focuses on and uses in particular (though not exclusively) the first two dimensions of a role, i.e. corporeality and representation. One could even define psychodramatic activity, overall, as an attentive, aware, structured, and interconnected series of separate *moments* that explore and stimulate activities relating to the body and the imagination, with the ultimate aim of pursuing and creating integrated connections between the said two different dimensions.

According to Morenian theory on human personality, personality is the result of the collection of roles that gradually emerge over the course of an individual's existence. As these roles develop, in terms of complexity and type, and connect with one another, they form a harmonious, integrated structure. Personality is the complete, complex form resulting from the integrated connection of all those partial "operational forms" - with their specific structure and aims - which we call roles.

### WARMING-UP PROCESSES AND THEIR ACTIVATORS

The term coined by Moreno to refer to all those psychic phenomena linked to the activation, mutation, development, and interconnection of different roles is *warming-up processes*.

*Warming up*, therefore, means something much more complex and significant than simply the preparation of a group, and a particular member thereof, for the psychodramatic exploration (through acting) of the content of the member's internal world.

### PHILOSOPHY OF THE MOMENT

In Morenian thought, this is the concept that refers to the study and arrangement of both the constituent dynamics and the resulting dynamics of the warming-up processes. There are three underlying factors: the *locus*, the *status*

*nascendi*, and the *matrix*. The *locus* is the environment in which the action (resulting from a specific creative event) originates and develops. It is the *field* where all the interactions between an *entity* and its interlocutors and antagonists (counter-roles in psychodramatic language) appear and take shape, which give substance to the manifestation, development, and modification of its being through its own precise, specific identity, however expected or unexpected this may be.

The *status nascendi* is the primary state of the action of every human act or expression, the precise moment in which a role appears and takes shape.

*The matrix is* an entity in its starting condition, as yet unexpressed, the "original organism". It is the entity at its zero moment, with its own wealth of potential and determinants inherent in its specific being. The *matrix* is, for example, the seed from which a plant will develop, or an embryo which will grow into a living being.

Human subjectivity, the Self, arises and develops in connection with the activation of a succession of warming-up processes triggered by *activators of the Self*, which Moreno (1985) divides into physical and mental.

"There appears to be very little mental activity in the activation of the newborn. We can assume that it uses only physical starting stimuli. Throughout our lives, physical starting stimuli continue to be the recovery stimuli for all warming-up processes" (Moreno, 1985, page 119). Following and interpreting Moreno's thought, psychic and social life can be seen as a succession of moments, a continuum along which the vital energy of human beings unfolds, taking new and appropriate forms (which we call roles) relating to individual and collective needs.

Activators (which may be physical or mental) are states of the individual, or of "others" (people or things, both being referred to as counter-roles), which lead up to and trigger subsequent states of being.

Among the various mental functions of the human being, Moreno attributes one of particular supreme importance, and that is *spontaneity*. He defines it as an unconscious factor, activator, and organizer of warming-up processes and of the resulting structures and configurations. It is a particular, special form of "intelligence" that allows the individual to make "an appropriate response to a new situation or a new response to an already familiar situation". (Moreno, 1953, p. 42).

## CONCLUSIONS

I think I can say that the study presented here confirms, by highlighting and describing its processes and constitutive functions, the validity of Moreno's original intuition which identified action as the epistemological paradigm that founds human subjectivity. Therefore, action is not only to be considered a manifestation and expression of being, but also to be valued as the foundation of metacognitive thinking, which is proper to the human being.

## HYPOTHESES ABOUT FUTURE LINES OF RESEARCH

A possible idea of development of the research that we want to share now consists in a deepening / experimental validation about the mode of operation, and the consequent effectiveness of some methodological procedures of Psychodrama; we can achieve this by observing and studying the intragroupal, cerebral and mental events within a psychodramatic session, integrating in the research the techniques of investigation (brain imaging) so well developed and used in the so-called neuroscience.

## BIBLIOGRAPHY

- Anolli, L. (2003). *Le emozioni (Emotions)*. Unicopli, Milan.
- Aristotele, *Opere, Metafisica Z 15*, 1039b28, 1973, Laterza, Bari
- Boria G. (2005), *Psicoterapia psicodrammatica., Sviluppi del modello moreniano nel lavoro terapeutico con gruppi di adulti, (Psychodramatic psychotherapy. Developments of the Morenian model in therapeutic work with groups of adults)*, Angeli, Milan.
- Damasio, A. (1998). *Emotion in the perspective of an integrated nervous system*. Brain Research Reviews, 26, 83-86.
- Damasio, A. (1994). *Descartes' error: Emotion, reason, and the human brain*. Avon Books, New York
- Damasio, A. (1999). *The feelings of what happens*. Harcourt Brace, New York.
- De Leonardi P. (1994), *Lo scarto del cavallo. Lo psicodramma come intervento sui piccoli gruppi. (The horse's refusal. Psychodrama as an action in small groups)*, Angeli, Milan.
- Ekman, P. (1992). 127267384 *An argument for basic emotions*.127267384 Cognition and Emotions, 6, 169-200.
- Gallei G.(1632), *Dialogo sopra i due massimi sistemi del mondo, (Dialogue Concerning the Two Chief World Systems: Ptolemaic and Copernican)*, 1970, Einaudi, Torino.
- Gallese, V., Migone P., Eagle, Morris N. (2006), 127267385 "La simulazione incarnata: i neuroni specchio, le basi neurofisiologiche dell'intersoggettività e alcune implicazioni per la psicoanalisi127267385 (127267385 The embodied simulation mirror neurons, the neurophysiological basis of intersubjectivity and some implications for psychoanalysis127267385 )", in *Psicoterapia e scienze umane*, n. 3, 2006, pp. 543-580
- Gallese, V. (2010), "127267385 *Le basi neurofisiologiche dell'intersoggettività (The neurophysiological basis of intersubjectivity127267385 )*", in *La società degli individui*, 37, 1, pp. 48-53. Gallese V. (2014), *Corpo e intersoggettività (Body and intersubjectivity)*. Report at the 18th SOPSI Congress in Turin.
- Goleman D. (1999). *Intelligenza emotiva (Emotional Intelligence)*. Ed. BUR, Milan.
- James W. (1884). *What is an emotion?* Mind 9, 188-205.
- Le Doux J.E. (1999). *Il cervello emotivo (The emotional brain)*. Baldini & Castoldi, Milan.
- Moreno J. L., 1953, III ed. 1978, *Who Shall Survive?*, Beacon House, New York, 1964 Italian translation : *Principi di sociometria, psicoterapia e di gruppo e sociodramma*, Gruppo Editoriale Fabbri, Bompiani, Sonzogno, Etas S.p.A., II ed. Etas Libri, Milan.
- Panksepp J. & Beaven, Lucy (2012). *Archeologia della mente-Origini neuroevolutive delle emozioni umane (Archaeology of the mind-Neuro-evolutionary origins of human emotions)*, 2014 Raffaello Cortina, Milan.
- Popper K.R. (1934), *Logik der Forschung, The Logic of Scientific Discovery*, 1959,Routledge.
- Reeve, Johnmarshall. (1991) *Understanding motivation and emotion*. 2018 Seventh edition Hoboken, Wiley Custom, New York.
- Reggianini, D. (2009) *Il dialogo intrapsichico tra io-attore/io-osservatore. Quella originale, fondamentale e salutare doppietta interna e la sua amplificazione metodologica in psicodramma. (The intrapsychic dialogue between I-actor and I-observer. That unique, fundamental, healthy inner duality and its methodological amplification in psychodrama)*. Classic Psychodrama, AIPsiM Notebooks. Year XI n. 1-2, 79-100, Milan.
- Sartre J.P. (1939), *L'immaginazione. Idee per una teoria delle emozioni (The imagination. Ideas for a theory of emotions)*.1972, Bompiani, Milan.
- Siegel, D. J. (1999). *The developing mind*. Guilford Press, New York. Italian translation.:2013 *La mente relazionale: neurobiologia dell'esperienza interpersonale*. Raffaello Cortina, Milan.
- Zorzi, M., V., Girotto (2004). *Fondamenti di psicologia generale (Fundamentals of general psychology)*. Il Mulino, Bologna

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## Role Play and its Applications

### El juego de rol y sus aplicaciones



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#### Abstract

Scholars in various disciplines have studied applications of role playing into their chosen fields in psychology and social sciences. Their explorations of role play have spanned over a century. Yet, most colleges, universities, and mental health training institutions devote little effort to teaching role play in a systematic fashion, ignoring this set of skills, its deep roots and vast potential to enhance the work of professionals in psychotherapy, counseling, coaching, and education. This article sets out to survey some of the prominent social scientists whose writings described and helped shape role playing as an important cluster of techniques that may be applied to a wide variety of theoretical schools of thought. After reviewing different theories on role playing, this article describes the process and techniques as we have implemented at the Sociometric Institute in New York.

#### Key words

Action techniques, role theory, application to psychotherapy

#### Resumen

Académicos de varias disciplinas han estudiado las aplicaciones de los juegos de rol en áreas determinadas de la psicología y las ciencias sociales. Las exploraciones del juego de rol han abarcado más de un siglo. Sin embargo, la mayoría de los colegios, universidades e instituciones de formación de salud mental dedican pocos esfuerzos a la enseñanza del juego de rol de forma sistemática, ignorando este conjunto de habilidades, sus profundas raíces y su vasto potencial para mejorar el trabajo de los profesionales de la psicoterapia, el asesoramiento, el coaching y la educación. Este artículo se propone hacer un repaso de algunos de los destacados científicos sociales en cuyas obras describieron y ayudaron a dar forma al juego de rol como conjunto importante de técnicas que pueden aplicarse en una amplia variedad de escuelas de pensamiento teórico. Tras repasar las diferentes teorías sobre el juego de rol, este artículo describe el proceso y las técnicas tal y como las hemos aplicado en el Instituto Sociométrico de Nueva York.

#### Palabras clave

Técnicas activas, teoría de los roles, aplicación a la psicoterapia

### THEORETICAL BACKGROUND

In her literature review of psychodrama, a part of her doctoral dissertation, Rebecca Ridge connects J. L. Moreno's development of role theory to earlier works of other theoreticians. Ridge (2010) writes that Moreno was influenced by William James (1890) who wrote that the function of role was to enter the unconscious and bring shape and order to it. James, who was a professor at Harvard, focused his work on the study of psychology as a cognitive science of consciousness. His ideas countered the prevailing views that humans are creatures of instinct and habit. He argued that instincts are modifiable and transitional through the development of habits that provide distinct memories of prior experiences. James (1897) viewed the "self" in four different types that may be related to various roles the person plays in life: the material, the social, the spiritual, and the pure ego.

Theories of roles gained significance in American sociologists' circles in the 1930s through the 1950s (Blatner, 2000), among them was George Herbert Mead. Mead (1934) was inspired by Darwinian evolution theory and pragmatism, and also the German psychologist Wundt (1894), who viewed gestures as emanating from the mind through the self and society, creating social interactions. Mead observed that humans have the capacity to respond to themselves, and adopting perspectives that let them step aside of themselves and see themselves as objects. Their communication and interactions with each other are aimed at solving problems that they encounter. It is

an action-oriented process that allows them to build resources with others in order to construct solutions. This is done by anticipating the other person's response and taking on the roles or attitudes of the other. Thus, social interaction from which both the self and society emerge, is fundamental. Mead generalized that cooperation based on communication relies on significant symbols and gestures and is essential for human survival.

Earlier that year, Moreno (1934) published his own magnum opus "*Who Shall Survive?*" which was later published in 1953 and its student edition in 1975 and 1993. This book presented the theoretical framework of Sociometry, the study of group interactions and emotional networks. It also included Moreno's theory of human development as interconnected to role theory. From the moment of birth, humans are role players who develop through action and interaction in their social atom. Initially, in the pre-verbal phase, babies relate and interact through their body (somatic roles, such as crier, sleeper, eater, etc.). As they grow up, they develop social roles (e.g. brother, parent, teacher, fire-fighter) and then psychological roles (e.g. nurturing parent, thinker, dreamer, joyful dancer). Thus, in learning the various roles the person progresses from the initial physical and sensory roles to interpersonal, interactive roles and onto internal and interpersonal roles. Moreno (1993) wrote:

Every role is a fusion of private and collective elements: It is composed of two part, its collective denominators and its individual differentials. It may be useful to differentiate between *role taking*—which is the taking of a finished, fully established role which does not permit the individual any variation, any degree of freedom, [and]—*role playing*—which permits the individual some degree of freedom—and *role creating*—which permits the individual a high degree of freedom, as for instance, the *spontaneity player*. *The tangible aspects of what is known as 'ego' are the roles in which it operates*. Role relationships between roles are the most significant development within any specific culture. Working with the 'role' as a point of reference appears to be a methodological advantage as compared with 'personality' or 'ego.' These are less concrete and wrapped up in metaphysical mystery. [...] Role emergence is prior to the emergence of the self. The roles do not emerge from the self, but the self emerges from roles. (p. 47)

Thus, role play becomes the arena of training people to become more spontaneous, more creative and better able to navigate between role taking to role playing, into which

they can add their own personal touch. While role taking is equated with learning by imitating, role playing requires a higher degree of spontaneity. The next level is the most creative, whereby the individual creates roles that have not been presented to him/her before. We may view the role-playing techniques in this light, as helping the person achieve higher degrees of creativity and fulfillment.

Dayton (2005) adds that "When we explore the role, we also explore the thinking, feeling and behavior, along with the act hungers and open tensions, embedded within the role. This is a part of what makes role-play such a profound vehicle for growth" (p. 151).

Blatner (2000) draws a comparison between social role theory, which he considers a unique American contribution to social psychology, and Moreno's approach to roles. While sociological role theory tends to be more descriptive and academic, Moreno's emphasis is on practical applications among people in their social context with the goal of improving their lives. Blatner (2000) writes:

The most significant feature of applied role theory is that it works as a practical language for all kinds of psychological interventions, a *lingua franca* for discussing problems among many different disciplines—psychology, social work, psychiatry, nursing, anthropology, pastoral counseling, family therapy, organizational consulting, personal 'coaching,' etc. I envision applied role theory as a major component in the teaching of practical psychology in educational programs because of the relative familiarity of its terminology. (p. 153)

One of the leading psychologists who would undoubtedly agree with Blatner's vision is Raymond Corsini, who has written about roleplaying (one word in Corsini's term) as the most widely used, albeit insufficiently understood, application of role theory. In the foreword to his manual, written with Sam Cardone (Corsini & Cardone, 1966), their mentor Alfred Dreikurs states that roleplaying is the most naturalistic of all forms of psychotherapy. Dreikurs, who has taught at the Alfred Adler Institute in Chicago, writes (Corsini & Cardone, 1966):

For many years I have championed the use of roleplaying and have employed it in my office practice, mostly to supplement interviews, to help unfreeze patients from old, useless, habitual patterns, and to give them experience in new ways of acting. Properly used, roleplaying is a most valuable adjunct for therapists of any persuasion. (p. ix)



Corsini details three purposes for use of the technique of roleplaying whether in individual or group sessions:

- 1) Diagnosis: learning more about the nature of the problem and how the client operates, thinks and feels.

- 2) Instruction: by watching others roleplay in a group setting the client learns how they operate in various situations.

- 3) Training: as the clients roleplay they may gain insight about themselves, learn to express and effectively deal with feelings and develop new life skills. The effect of this “major technique” is both deep and lasting on all levels: the cognitive, emotional and behavioral. The result is nothing short of personality transformation. Corsini brings many case examples highlighting the impact of roleplaying on clients and their therapy, as he offers ways to hone this skill set.

Clinical Sociologist Melvyn Fine (1990) sought to integrate sociological perspectives into counseling and psychotherapy. Fine was inspired by Harry Stack Sullivan and Karen Horney, who had emphasized the importance of family and social relationships and their impact on the individual's mental health and well being, as akin to the sociological ideas. Fine and his colleagues' attempts to include sociologists in child guidance clinics were met with resistance by the psychiatric establishment. A closer affinity was found with social workers whose primary influence was from medicine and psychology who had been initially trained as sociologists. Fine postulated that personal unhappiness stems from interpersonal relationships and thus a person must solve both personal and social problems to find satisfaction. The key to such resolutions is understanding the functions of social roles, which he views as the core of our individual identities. Defining social roles as “complex patterns of human behavior” Fine (1990) elaborates:

They can be identified by what people do and how they interact; they can also be highlighted by examining what people are trying to do or trying to convince others to do. They are patterns of interpersonal action that are guided by both internal and external directions. They are shaped by a person's plans, thoughts, feelings, and by the demands made by others. (p. 4)

Fine's presentation also includes an essential element that makes it possible to help people change dysfunctional roles which cause unhappiness: roles are flexible, and change over time. The program that Fine devised is called

role resocialization, and he offers many case examples to illustrate this model. It was designed to serve children and adults in the clinical arena as well as in education and life skills improvement (i.e. getting along better with others).

The major difference between the various models, which center on role theories and role plays, appear to be whether or not these are based primarily on psychodrama. The latter emphasizes action rather than mere talking in the sessions. David Kipper, who was a student of J. L. Moreno, presents an extensive analysis of role play as a primary method and as an adjunct technique for other modalities. The title of Kipper's seminal book (Kipper, 1986) “Psychotherapy Through Clinical Role Playing” seems to be too narrow a description, as the book provides a comprehensive examination of role playing in both clinical and non-clinical settings. Kipper surveys the ubiquitous use of role playing in psychotherapy and also in training and behavior simulations. The examples abound: rehearsal of ceremonies, with the original participants or with stand-ins, answering questions before examination, preparations for interviews, jury & trial simulations and more. With regard to applications of role playing in psychotherapy, Kipper discusses the known criticism of the traditional methods, mostly psychoanalysis. The idea that behavioral change would naturally follow insights proved disappointing. Further, Kipper notes Moreno's objections to psychoanalysis as artificial and lacking as it focuses on the individual and does not include his/her social and intimate contexts. In addition, critics of psychoanalysis contend that its emphasis on insight does not necessarily carry into the patients' life situations. Moreno, on the other hand, sought to see his clients in their homes, and in public venues in their communities.

The challenges that Kipper envisions for psychotherapists are how to approximate real life situations in a therapeutic setting and how to maximize the effectiveness and impact of therapy in their real life. In this context, role playing may serve an important function, in keeping with Kipper's statement that human beings are born actors, as it offers options to learn in action and change dysfunctional roles. In spelling out the reasons to include role playing in therapy, Biddle (1979) writes:

Role Playing is a natural phenomenon that is practiced by children in the process of growing, therefore it forms part of the normal repertoire of roles that are performed and enjoyed by everyone. The client who plays roles in therapy may provide insights concerning roles that are played elsewhere by others or by him or herself. The therapist and other clients (if present) can also gain insight or add their interpretations in



the role-playing session. Role playing also allows the client to practice alternative roles (rather than simply talk about them). (p. 329)

Leaders in the field of psychodrama have been proponents of role theory and its many applications, including role play. They have demonstrated methods of applying role play in individual therapy, couples therapy and work with corporations. This work has been taught and applied in the United States, Europe, Latin America, Australia and New Zealand. A partial list of these leaders includes Martin Haskell (1975), Max Clayton (1994), Sue Daniel (2007) and Esly Carvalho (2013). Another field within the clinical realm where the advantages of inclusion of role play and other action techniques have been recognized is supervision (Williams, 1995).

### Applications in Various Fields

Whether or not connected to psychodrama, it is close to impossible to find a training program for therapists, educators or coaches, which does not utilize role play. And aside from practitioners of the strictly psychoanalytic modality, other mental health professionals occasionally use role play in sessions with individuals, couples or groups. It is known that leaders in the field of family therapy (Virginia Satir, Carl Whitaker) or emotionally focused therapies (Fritz & Laura Perls) studied with or “borrowed” from psychodrama. Creators or cognitive therapies (e.g. CBT, DBT) also routinely use role play in their sessions. Even proponents of hypnosis and hypnotherapy include role play in their work (Greenberg, 1974 & 1977). What has been missing is a more systematic training in role therapy to truly extract the potency of this action-oriented skill to transform people’s functioning and lives.

### The Structure of a Role-Playing Session

As in psychodrama sessions or workshops, there are three distinct phases which include role playing: The warm-up, enactment and closure. This approach involves physical, social and psychological elements and the clients must be ready to move from talk to action. The therapist’s task is to help the client in this process, and in order to be effective therapists have to undergo training that will help them “transform” the client’s narrative into action. Time management is an important skill to develop as well; when to bring the enactment to its conclusion, and also to allow time for sharing and closure.

#### A. The Warm-up and enactment techniques.

There are many techniques drawn from psychodrama which may be applied in role playing. These must

be utilized judiciously and be relevant to the client’s presentation and experience.

The following are some of these techniques; an experienced psychodramatist may also devise others as needed:

1. Verbal discussion: background information, a brief description of the issues and the persons involved.
2. Description of situations in question.
3. Writing (a letter, dialogue, script).
4. Guided imagery; this is especially helpful in future projection of a desired outcome and also as a means of reaching physical and emotional relaxation.
5. Scene-setting: introduces the client (and therapist) to the location, persons, and the sensory background and also helps the client re-live the situation in a safe setting.
6. Inclusion of art, music or poetry when the client and therapist are adept in expression in such media.
7. Empty chair: a commonly used technique that allows the client to place on the empty chair a person with whom he/she needs to resolve issues or to express unexpressed feelings and thoughts. If the role play is more intra-psychic than interpersonal, the therapist may ask the client to place on the empty chair a part of the self or an emotion.

#### B. The Enactment

In this phase the client is instructed and assisted to move to enactment of scenes relevant to the issue presented. The therapist needs to decide what role plays will be enacted, whether these would be interpersonal, dealing with issues between the client and others in his/her life, or intra-psychic about an internal conflict. Such decisions must be shared with the client as their alliance and involvement form this “contract.” As in the previous segment, the therapist employs various action-oriented techniques.

1. The enactment flows from the client’s narrative. All the techniques mentioned above may be used and also doubling and role reversal.
2. Showing the client how to play each

role (posture, expression, tone of voice) to approximate the person or feeling in real life. This is not exactly a role reversal as it would be in a psychodramatic enactment, but just showing the clients and supporting their effort.

3. Staging the role play, beginning with a scene setting (where, what, who...).

In this phase the therapist also decides whether he or she would play a part or let the client play all of them. It is important that the therapist be comfortable in a decision to play role(s) or not.

### C. The Closure

This segment constitutes a conversation between the therapist and the client. A discussion about thoughts and feelings that have emerged, and if new roles are rehearsed, how the client anticipates applying them outside of the therapy room. If the role play occurs in a group session,

members who observed the enactment may share their own feelings and thoughts, giving feedback to the client (protagonist). It is important to avoid any judgment of the client and thus help him/her reinforce their work to change roles in healthier ways.

### Summary

Role play has been utilized by therapist of many schools and disciplines. Although it draws from psychodrama, it also differs primarily because it is a set of techniques. While psychodrama is a method with its own theoretical, philosophical, and historical underpinnings, role play is not attached to any specific theory. Therefore, it is more flexible in its applicability to other methods. It can enrich the practice of therapists, educators, and coaches by expanding their understanding of culturally accepted roles and in working-through action--to deepen their clients' experience in exploring roles, letting go of dysfunctional roles and rehearsing more adequate, healthier roles.

## REFERENCES

- Biddle, B. J. (1979). *Role theory: Expectations, identities, and behaviors*. New York: Academic Press.
- Blatner, A. (2000). *Foundations of psychodrama: History, theory, and practice* (4<sup>th</sup> ed.). New York: Springer Publishing Co.
- Carvalho, E. (2013). *Manual de Psicodrama*. Brasília: Brasil: Plaza de Encuentro. (in Spanish).
- Clayton, M. (1994). *Role theory and its application in clinical practice*. In: Holmes, P., Karp M., & Watson, M. (eds.) *Psychodrama since Moreno: Innovation in theory and practice*. New York & London: Routledge.
- Corsini, R. J. & Cardone, S. (1966). *\*Roleplaying in psychotherapy, A manual*. Aldine Publishing Company: Chicago.
- Daniel, S. (2007). *Psychodrama, role theory and the cultural atom: New developments in role theory*. In, Baim, C., Burmeister, J., & Maciel, M. (eds.), *Psychodrama: Advances in theory and practice*. London & New York: Routledge.
- Dayton, T. (2005). *The living stage: A step-by-step guide to psychodrama, sociometry and group therapy*. Deerfield, Florida: Health Communications, Inc.
- Fine, M. L. (1990). *Role change: A resocialization perspective*. New York: Praeger Publishers.
- Greenberg, I. A. (ed.). (1974). (sp)*Psychodrama: theory and therapy*. New York: Behavioral Publications.
- Greenberg, I. A. (ed.). (1977). *Group hypnotherapy and hypnodrama*. Chicago: Nelson-Hall.
- Haskell, M. R. (1975). *Socioanalysis: self direction via sociometry and psychodrama*. Los Angeles: Role Training Associates of California.
- James, W. (1890/1950). *\*The principles of psychology*. New York: Henry Holt.
- Kipper, D. A. (1986). *\*Psychotherapy through role playing*. New York: Brunner Mazel
- Mead, H. G. (1934). *Man, self and society*. Chicago: Chicago University Press.
- Moreno, J. L. (1993). *Who shall survive?: Foundations of sociometry, group psychotherapy and psychodrama*. McLean, Virginia: American Association of Group Psychotherapy and Psychodrama.
- Ridge, R. (2010). A literature review of psychodrama, submitted to ASGPP for journal of group psychotherapy, psychodrama and sociometry. <http://asgpp.org/pdf/Ridge20Journal.pdf>
- Williams, A. (1995). *Visual & active supervision: Roles, focus, techniques*. London & New York: W. W. Norton.
- Wundt, W. (1894). *\*Lectures on human and animal psychology*. \*(J. E. Creighton & E. B. Titchener, Trans.). (2<sup>nd</sup> German Ed.). London: S. Sonnenschien & New York

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## Discussion on the Meaning of “Reverie of Groups” During School Consultation

### Discusión sobre el significado de "Reverie de grupos" en la consultoría escolar



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#### **Abstract**

In schools, where teachers tend to seek immediate solutions, the question of how to provide meaningful interventions has drawn considerable attention from school psychologists all over the world. The purpose of the present study is to analyze case data, including the phenomenon named “reverie of groups” from a previous study, which refers to the retention of discomfort in a group of teachers, resulting in an indirect change in problematic students. In this case study, it was initially difficult to adopt a clear policy that created immediate solutions; the psychologist and teachers experienced feelings of uncertainty. After several consultations between the psychologist and teachers however, the troubled student indirectly changed. The teachers’ attitudes became responsive and pro-active in the aftermath. Thus, the significance of reverie in the school consultation context was demonstrated, as was the power of groups to maintain a sense of security by sustaining the capacity of reverie.

#### **Key Words**

Reverie of Groups, School Psychologist, Projective Identification, Scapegoating

#### **Resumen**

En las escuelas, donde los profesores tienden a buscar soluciones inmediatas, la cuestión de cómo proporcionar intervenciones significativas ha atraído una atención considerable de los psicólogos escolares de todo el mundo. El propósito del presente estudio es analizar los datos de un caso, incluyendo el fenómeno denominado “reverie” de grupos de un estudio anterior, que se refiere a la retención del malestar en un grupo de profesores, lo que resulta en un cambio indirecto en los estudiantes problemáticos. En este estudio de caso, al principio fue difícil adoptar una política clara que creara soluciones inmediatas; el psicólogo y los profesores experimentaron sentimientos de incertidumbre. Sin embargo, tras varias consultas entre el psicólogo y los profesores, el alumno problemático cambió indirectamente. La actitud de los profesores pasó a ser receptiva y proactiva a partir de entonces. De este modo, se demostró la importancia del ensueño en el contexto de la consulta escolar, así como el poder de los grupos para mantener una sensación de seguridad mediante el mantenimiento de la capacidad de ensueño.

#### **Palabras clave**

Reverie de Grupos, Psicólogo Escolar, Identificación Projectiva Chivo Expiatorio

## REVERIE OF GROUPS

The issue of the victim and victimizer dynamic between teachers and parents/students appears to be globally pervasive. According to Twemlow et al. (2012), teachers who try to place children in special education or to limit their psychological care “often do not feel they have the necessary social skills and psychological knowledge to cope with [them] ... and frequently request that the children be separated from their peer group into special classrooms or referred for treatment” (p.188). This is a frequent occurrence in Japan, where there has been a noteworthy surge in the number of special-needs students, despite the decline in the number of students overall (Ohashi, 2017). Twemlow et al. (2012) contend that the issue of disrupted school communities is psychological, and this approach can be considered a form of mentalizing. Therefore, it is not illogical to suggest that it is the imperative of school psychologists to intervene in such a context to provide psychological support to teachers and school communities (Twemlow et al., 2012).

Using an organizational analysis framework, Ohashi (2017) examined interventions to help teachers and school organizations employ psychological principles in the face of psychologically-challenging conditions. She presented a model of support for teachers at intellectual special needs schools, who presented mental health problems because they had to respond to violence or escape disturbing student behavior. Such experiences made teachers feel persecuted. The Educational Model for Attachment Disorders in Special-Needs School (EMADIS) was the first model to address this situation (see Fig. 1). This model was developed through a theoretical study based on multiple cases (Ohashi, 2017); isolation and the excessive closeness of the student-teacher pair were deemed central to the problematic situation. Indeed, the situation is explained in terms of student-teacher projective identification dynamics (Klein, 1946; Bion, 1957; 1959) and the concept of alpha functioning which depicts a shift from a pathological object relationship to a developmentally facilitative relationship.

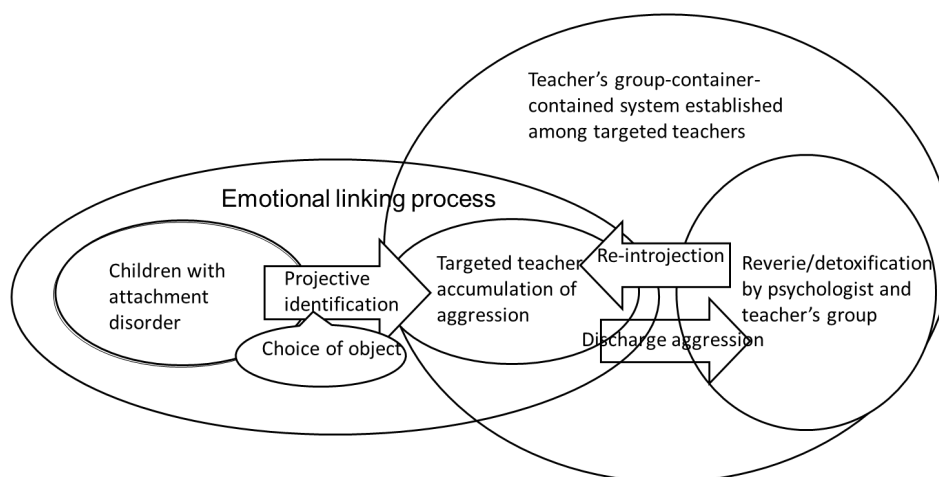


Fig.1: Educational Model for the Attachment Disorders in Special-needs Schools.(Ohashi, 2017)

Because the purpose of Ohashi's study (2017) was to build an initial model to explain the dynamics of the problematic situation, case-related phenomenon was not fully explored. The current case study observed a release of teacher aggression, as shown in the EMADIS, but this problem was met with no resolution (e.g. an augmentation of teaching policy). Instead, the issue was dismissed amidst widespread – but repressed – feelings of discomfort and bewilderment. Notably, the psychologist also felt uncomfortable as if the consultation had failed. From the EMADIS-informed perspective, she could not recognize the process of detoxification and re-introjection. That is, she failed to see the transformation of the beta element into the alpha element (by the alpha function) in this case.

Nevertheless, immediately after this intervention, the student's behavioral problem changed significantly, and the teachers were able to work with the student. The indirect change in the problematic student was deemed a result of the teacher group's retained discomfort. This phenomenon is named the reverie of groups (Ohashi, 2017). According to Bion (1962, p.36), reverie is “that state of mind which is open to the reception of any ‘objects’ from the loved object and is therefore capable of reception of the infant's projective identifications whether they are felt by the infant to be good or bad. In short, reverie is a factor of the mother's alpha-function.” Thus, the EMADIS demonstrates the importance of reverie which runs counter to immediate solutions, and shows that the group supports this reverie.



Moreover, reverie is a necessary condition for alpha functioning – though the former alone is not sufficient to create the latter. Notably, however, in Bion's theory of projective identification, the concept of capacity of reverie has been replaced by the concept of alpha-functions. This leads one to question what group conditions support reverie. Therefore, the purpose of the present study is to analyze case data, including the phenomenon named reverie of groups in the previous study (Ohashi, 2017), and to summarize the elements of alpha function, reverie, and the role of the group in the EMADIS. This study is significant because it may identify elements necessary for psychologists as consultants in the difficult consultation process unique to problem-solving-oriented schools.

## CASE STUDY

Naomi is a 13-year-old girl in the seventh grade at an intellectual special needs school. The seventh grade instructor group consists of three teachers. Ms. Sawa is a full-time head homeroom teacher in her 50s. Mr. Okubo and Mr. Honda are both part-time substitute homeroom teachers; both of them are in their 20s.

Ms. Sawa has been the target of Naomi's violence, which caused the experienced teacher to be absent from school. Similarly, a sub-teacher also became depressed and took a leave of absence after dealing with Naomi.

When the psychologist went to observe the class, Ms. Sawa had bruises all over her body. Naomi, whom the psychologist had never met before, was found standing in front of the door, yelling "don't come near me!" When Naomi realized that the psychologist would not leave, she ran to her and assaulted her with a jump-kick and blows. The sub-teacher, Mr. Honda, then approached the psychologist and advised her not to join the class, because the group would be unable to continue its course work while she remained, observing. The psychologist reports that this occurrence left her feeling angry with him.

Returning to the student, it is worth noting that Naomi's birth mother had a mild intellectual disability and her father was a member of a Japanese gang. Moreover, since the matriarch subjected Naomi's brother to severe physical abuse, Naomi herself was taken into protective custody during infancy. Later, she was placed in a residential welfare facility for disabled children. Naomi was diagnosed with reactive attachment disorder (RAD), oppositional defiant disorder (ODD), and a mild intellectual disability. She was also extremely thin, with the distinctly expressionless face associated with psychotics. The current circumstances of her mother were unknown, and her father sporadically came to see her.

At school and the facility, Naomi presented impulsive and extreme violence toward teachers, staff, and other children. This included direct physical violence. In addition to harming others, she also hurt herself by gouging her shins so hard that the bones were visible.

Notably, other teachers believed the problem was not Ms. Sawa's leadership or instruction. Indeed, they felt that the problem was Naomi's violence toward women in general. According to the psychologist, Naomi would depend on Ms. Sawa, and make demands, but as the teacher acquiesced, the student's demands became greater. One such demand was that Ms. Sawa show Naomi her menstrual blood. When she refused, Naomi became verbally and physically violent, then ran away. But, when Ms. Sawa appeared downtrodden in the aftermath, Naomi surreptitiously came back to ask her what was wrong. Such occurrences gave Ms. Sawa a strong sense that she had to be there for Naomi.

At the start of the academic year, Ms. Sawa, Mr. Okubo, and another male teacher began working together. Two weeks later, the male teacher fell ill and took sick leave. After another two weeks, Mr. Honda joined the team. Following Mr. Okubo's first student home visit, Ms. Sawa asked, "How was it?" Mr. Okubo responded, in jest, "It was a good hook." In response, Ms. Sawa reprimanded him about his attitude, and Mr. Okubo subsequently began ignoring her and demonstrating disdain for her professional requests. They did not even engage during the morning teacher's meetings.

On the other hand, Mr. Okubo and Mr. Honda talked often, being of the same age and with much in common. Whenever Ms. Sawa left the class to follow Naomi or was unable to control her, both Mr. Okubo and Mr. Honda criticized her. Thus, she began to lose confidence in her own teaching abilities. Indeed, she even took a course on attachment disorder during the summer break, which led her to conclude that she should help Naomi form an attachment. Still, believing other teachers would not understand or support her, she became professionally lost. Ultimately, she resolved to simply wait for the school year to end.

## ASSESSMENT AND INTERVENTION

Ms. Sawa was scapegoated. Concerned that the unhealthy dynamic of the teacher group would negatively impact the entire class, the psychologist opted to intervene with the teacher group instead of Naomi. The intervention aimed to stimulate individual aggression, which would allow the teachers to expel what they defended. It also sought to promote individual differentiation and support the

regressed ego functions underpinning this pathological group dynamic (Blanck & Blanck, 1994).

### VIGNETTE OF GROUP SITUATION

Following the psychologist's proposal, a school coordinator commenced the first session by inviting members involved to "have a talk [about] classroom management regarding Naomi with the psychologist." The second session was inspired by her proposal to "continue [the] talk from [the] last session." The attendees were Ms. Sawa, Mr. Okubo, Mr. Honda, the psychologist, and the school coordinator – who had observational and recording duties. The session was held in the school's meeting room.

#### SESSION 1: 30 MINUTES, AFTER SCHOOL

- 1 Mr. Okubo and Mr. Honda sit next to each other; Ms. Sawa occupies the open seat she finds beside them.
- 2 The psychologist stated: "You all came in the midst of a busy day." Mr. Okubo and Mr. Honda would not look at her. The psychologist continued: "I know you are all having difficult time instructing Naomi and Ms. Sawa believes she should improve Naomi's development of attachment to others." Mr. Honda said nothing. When the psychologist asked him what the problem was, Mr. Honda said, "nothing particular." Mr. Okubo said, "I don't have a particular problem."
- 3 The psychologist then stated, "The other day, I could not observe the homeroom class. I heard the class has a problem dealing with Naomi. Having heard various stories, the sub-principal and I feel there is a problem, so I called you to this meeting." As the psychologist spoke, she had enough self-awareness to know that she tends to retreat when she feels slightly irritated. Thus, she tried not to withdraw and, instead, continued.
- 4 The psychologist asked, "Mr. Okubo does not really have a problem, right?" He replied, "Mr. Honda is dealing with this issue well; Naomi does not cause trouble in front of us. I think Ms. Sawa is in trouble, isn't she?" Ms. Sawa said in an exasperated manner, "Yes! I'm in trouble!"
- 5 Mr. Honda then said, "I appreciate your effort in assembling us like this, but I think psychology is not necessary for education." Ms. Sawa became annoyed and said, "Don't you think it is rude to talk to her like that?" She was ignored.

- 6 The psychologist stated, "Other teachers informed me that Naomi may become violent toward women. But, this is only a psychology-related talk." Mr. Honda said, "Well, both male and female educators have to be able to deal with –" he suddenly showed a little interest and asked whether gender could influence the target of student violence. Ms. Sawa, Mr. Honda, and the psychologist continued discussing the differences between males and females in a relatively neutral way.
- 7 The psychologist subsequently said: "According to psychology, when teachers have bad relationships like this, it obviously has a negative influence on students – including Naomi." Mr. Okubo said, "It is not my intention to have a bad relationship," to which Ms. Sawa answered, "I have never had a homeroom teacher group who fails to communicate like this one (Mr Okubo)."
- 8 The psychologist said: "In any case, you seem to feel that you cannot talk to each other. I am sure you have many complaints. We need more time to discuss your complaints, and to talk." Ms. Sawa then said, "No, that is not necessary; I think it is just impossible." Mr. Okubo said, "I don't see the necessity of doing so." Mr. Honda did not reply.
- 9 The exchange ended. On her way home, the psychologist felt disturbed.

#### SESSION 2: 90 MINUTES, AFTER SCHOOL

- 10 The psychologist began by conveying the following goal: "In order to help you communicate better, I will try to create a safe space for you to tell each other what you are thinking, including your complaints."
- 11 Ms. Sawa said, "I give up. It's impossible."
- 12 The psychologist then asked all three teachers what they associated with the idea of there being "no need to talk."
- 13 Mr. Okubo said that although Mr. Honda was the same age as he, Mr. Honda managed the homeroom well, so he felt safe. With a negative demeanor, Mr. Honda asserted that he could not understand what the psychologist had in mind for Naomi's future, and that he wondered what was wrong with the current situation. Furthermore, he stated that if

Naomi was calm, she would not create trouble for other classes or students, and that it was better for her to be confined. Ms. Sawa said, "The way we think is just different." She did not speak much, and maintained an avoidant demeanor. It was obvious that she was angry.

- 14 There was a growing sense of tension between Mr. Okubo and Ms. Sawa. When Ms. Sawa talked, Mr. Okubo made sounds of disapproval. When Mr. Okubo talked, Ms. Sawa snorted.
- 15 Mr. Okubo suddenly blurted out in a loud voice: "Well, Ms. Sawa, you are the head of this grade! What are you doing? You are so unlike a leader. Without a leader, the younger ones become unsure of what to do, but we have to manage anyway!"
- 16 The psychologist noticed transference as this remark seemed to reflect his pent up anger toward the group. The psychologist felt hopeful.
- 17 Ms. Sawa immediately and angrily replied, "What is your attitude toward seniors? Who do you think you are?" The psychologist thought a positive process was now underway.
- 18 From there, an emotional shouting match ensued. Mr. Honda appeared confused and rapidly lost his confidence.
- 19 The psychologist mirrored each member's claim, using the keyword "anger" several times (e.g. "you are angry with \*\*\*\*"), and let them continue yelling at each other.
- 20 When they calmed down, the psychologist asked Mr. Honda what he was feeling. Uncharacteristically, he stammered and said nothing noteworthy.
- 21 Ms. Sawa stated that she was irritated by younger people who treat her as if she were stupid. Mr. Okubo discussed his wish to be accepted by seniors but mused that they would not embrace or protect him anyway. He had a sense of distrust toward seniors. Mr. Honda did not articulate much, but the confusion / lack of confidence beneath his expressionless face was clear.
- 22 Ten minutes before the session ended, the psychologist commented on the significance of the talk they had had, despite the fact that no resultant policy was yet formed. In response,

Mr. Okubo said, "I don't see any meaning to this meeting at all." Later, Ms. Sawa came to talk to the psychologist. She said, "See, they were making me look stupid, weren't they? I have to do it alone." The psychologist felt both fatigue and disappointment. She put the matter on a temporary hold while she sojourned for the day.

One week later, when the psychologist returned she was informed that Naomi had become violent toward Mr. Okubo and Mr. Honda. Mr. Honda thought that the prior meeting may have had an intuitive, indirect effect on Naomi. He began talking to Ms. Sawa, and Mr. Okubo joined the discussion. Ms. Sawa then announced, "I have come this far; I think I can still be a maternal figure to Naomi." She continued to interact with Naomi, surrendering her body too. She reported on her interactions with Naomi, and the results, to the psychologist with enthusiasm. Her role as instructor was expanded and she established a peer group for adolescent female students.

Around this time, Naomi would sometimes fall asleep while Ms. Sawa read a picture book to her in a sunny place. Ms. Sawa gazed lovingly at Naomi, saying, "I feel like [when] I used to breastfeed my own children." Before she commenced ninth grade, Naomi became a caring student who displayed almost no violent behavior. In retrospect, she said, "I tended to be violent when I was having fun, or if I was with a person I liked." This surprised the teachers. Mr. Honda resigned the next spring, stating a desire to re-think his pursuit of a teaching career. Mr. Okubo obtained the qualification to become a regular teacher and was transferred to another special needs school.

## ANALYSIS

**Case Material.** I will attempt a minimal analysis, focusing on the points that serve the purpose of this study. To this end, the analysis will focus on the quality of the beta elements introduced by Naomi's projective identification. In addition to the self-injury (gouging her shins to her bone), her "show me the blood" statement may be considered psychotic. Still, it is reasonable to assume that she is unable to singlehandedly contain her fear of bizarre objects, and that she was projecting or acting out her fear of them. The fact that these statements were made not long after the onset of menarche seems to be due to the heightened anxiety associated with secondary sexual characteristics, and the search for a container. At the same time, her insistent demand of "show me" felt like a demand for the teacher to be naked or to show Naomi the very marrow of her bones. This refusal to tolerate secrecy seems to express the trauma of secrecy,

her intense desire for a symbiotic relationship, and the intense fear of not being able to obtain it. This desire for a symbiotic relationship can also be inferred from the “breastfeeding in a sunny place” incident between Naomi and Ms. Sawa. The strong desire for a symbiotic relationship can subject those who experience this projective identification to experience a strong sense of

intrusiveness.

### The interventions and their results.

The processes before, during, and after the intervention can be summarized as they appear in Fig. 2. The following is an analysis of the intervention and its results.

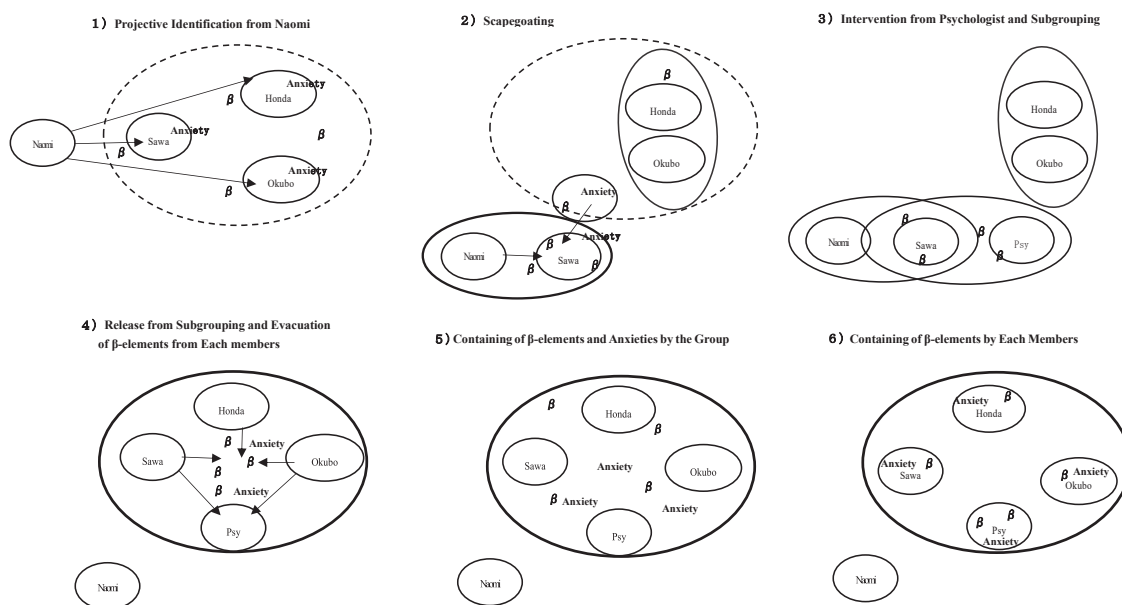


Fig. 2: The Process before, during and after the intervention

Fig. 2-1 shows the effects of Naomi’s projective identification (β). In addition, it can be assumed that the teachers were anxious from the beginning of the term, due to Naomi’s reputation and the fact that the previous homeroom teacher had taken a leave of absence. Thus, the teachers’ anxiety is also described. Fig. 2-2 demonstrates the scapegoating situation that occurred. According to the EMADIS, this could be explained by the fact that Mr. Honda and Mr. Okubo, who were unable to contain the β-element projected by Naomi, discharged it from the group, along with the Ms. Sawa-Naomi pair. Moreover, the lack of information sharing between Ms. Sawa and the other teachers in this case may have caused the scapegoating situation. Ms. Sawa’s resolve to tackle the situation head-on promoted Naomi’s projective identification. Rather than Ms. Sawa’s inappropriate attitude, Naomi’s conviction that Ms. Sawa could be a container may have triggered a storm of emotions (Blanck & Blanck, 1994) and could have been seen as

a threat to Mr. Okubo and Mr. Honda. Neither had been teaching for a long time, and this would have aggravated their anxiety. Therefore, Mr. Okubo and Mr. Honda reinforced the scapegoating dynamic by maintaining that “Naomi was in trouble because Ms. Sawa’s instruction was inappropriate” (Fig. 2-2). Consequently, Ms. Sawa’s performance declined, and Mr. Okubo and Mr. Honda were able to defend themselves against the negative emotions within themselves.

In this defensive group constellation, Mr. Okubo and Mr. Honda’s fears were well protected, until the psychologist intervened. Then, Mr. Okubo and Mr. Honda unconsciously perceived the psychologist’s attempt to intervene in the stable, defensive group structure as dangerous. Thus, they adopted a negative attitude, evidenced by actions such as the refusal to make direct eye contact with the psychologist. This attitude angered the psychologist, who sensed that a subgroup structure of “Sawamura the sensei and the psychologist” versus “Mr. Okubo and Mr. Honda” had been established (Fig. 2-3). Moreover, the psychologist felt that she was already

strongly involved in the group dynamics, and concluded that the normalization of group dynamics was a necessary intervention.

During the first session, the psychologist informed the teachers of the significance of group discussion and the need for the group's dynamics to normalize. The statements of Ms. Sawa and Mr. Okubo at (8), suggest that the aforementioned remarks were not accepted. Notably, however, Ms. Sawa's rebuttal to the psychologist at (8) and the fact that she refuted the psychologist at (11), caused the latter to relax. From this, one may determine that the subgrouping had been released and the group boundary between the three teachers and the psychologist had been reinforced. Thus, a transition, such as that from Figure 2-3 to 2-4, occurred.

Gradually, the psychologist uncovered their respective grievances regarding the theme of "anger," which led to outbursts of aggression from Mr. Kubo and Ms. Sawa. This is consistent with the process shown in the EMADIS. At (15), where the outburst occurs, lies another point of interest: Mr. Okubo's anger that Ms. Sawa was "not like a leader."

Mr. Okubo wanted to *Amaeru* on seniors (to depend on), and Ms. Sawa did not accept that the *Amae* was a form of affection and desire to be supported/loved; this caused their relationship and communication to break down. It can be assumed that Mr. Okubo, whose first teaching year was made anxious by Naomi, had felt and expressed relief that he could feel safe with his guardian (Ms Sawa). This was evidenced by his friendly and familiar "It was a good hook" comment. However, Ms. Sawa noted only his impolite manner and ignored Mr. Okubo's anxiety and *Amae*. He may have been hurt by this, and prompted to scapegoat her as a leader who did not accept his *Amae*. At (17), Ms. Sawa said, "What is your attitude toward seniors?" in response to Mr. Okubo's outburst. Through this statement, Ms. Sawa's attitude toward Mr. Okubo's indulgence is again expressed.

In Japan, there exists a culture in which teachers are considered fully-fledged from the time they begin teaching. Clearly, Ms. Sawa agreed with this sentiment. However, the psychologist felt that behind her cultural attitude, Ms. Sawa may be carrying some pain and playing the role of a strong and domineering mother. In the situation she became a weak mother who was abused. As shown from (15) to (17), the personal conflicts of Mr. Okubo and Ms. Sawa are discharged without anyone being fully aware of them. Moreover, although Mr. Honda rarely spoke, his expression was unmasked,

and his apparent upset reflected his anxiety as it was. In this sense, the  $\beta$ -element discharged here is not so much Naomi's  $\beta$ -element as it is a mixture of individual conflicts and anxieties that were stimulated by Naomi and were discharged without being thought about (Fig.2-4).

Thus, from (15) to (17), the psychologist began to feel hope. This hope can be analyzed from the framework of Blanck & Blanck's (1994) point that it is important to distinguish between transference with hostile aggression and developmental movements toward a separation. Additionally, as shown in Figs. 2-4 and 2-5, the reinforcement of the group boundary enabled the group to hold the  $\beta$ -elements and anxiety of each individual without interpreting them. It might be more appropriate to say that they physically experienced them.

At (22), the psychologist was left feeling fatigue and helplessness. Moreover, all three teachers felt bad afterwards and retained that feeling, although they would normally rationalize, split or dispose of such ill feelings. Also at (22), Mr. Okubo and Ms. Sawa's remarks to the psychologist seemed to indicate the discharge of the  $\beta$ -element to the latter. Although the group as a whole remained bewildered by the  $\beta$ -elements, they must have tried to make the psychologist hold them, to some extent (Figure 2-6 demonstrates more beta-elements of the psychologist). Through all of this, the psychologist did not intervene much, but carried and endured a considerable amount of the beta elements that emerged in the group. By extension, it was assumed that the teachers also carried and endured their own  $\beta$ -factors (Figure 2-6).

In the process that followed, Naomi underwent a sudden change. Previously directed only at Ms. Sawa, her violence became directed at Mr. Okubo and Mr. Honda. I assume that the reason for this change is that Naomi felt that Mr. Honda and Mr. Okubo became capable of being containers. Thus, she was able to unleash her emotions on each teacher. This indicates that the  $\alpha$  function of each teacher had been restored. Subsequently, Ms. Sawa frequently consulted the psychologist and used the psychologist as a container to maintain her own  $\alpha$  function, thereby helping Naomi to grow. This process is consistent with the process shown in the EMADIS.

## DISCUSSION

The purpose of this study was to use a detailed case analysis to re-examine and elaborate upon the concept of reverie of groups from the EMADIS. The analysis discussed the clinical significance of emphasizing



reverie, and the contribution of the psychologist's sense of safety and how the group contributed to that sense.

### THE CLINICAL SIGNIFICANCE OF EMPHASIZING REVERIE

An important question in this study was whether it was necessary to emphasize reverie, which is positioned as a necessary condition for  $\alpha$  function in the EMADIS, which was constructed based on the process of alpha functioning. In this case, it is thought that the recovery of  $\alpha$  function in each teacher was because they were conscious of anxiety and inexpressible discomfort. Moreover, they vividly experienced and endured these feelings. If the term reverie is replaced by the term  $\alpha$  function, and only the importance of  $\alpha$  function is emphasized, we may neglect reverie – which is the essential perspective. If this happens, the transformation from  $\beta$  to  $\alpha$  will not occur. Particularly because school is a place where immediate solutions are required, we should emphasize reverie, not the  $\alpha$  function.

### THE PSYCHOLOGIST'S SENSE OF SAFETY AND WHAT THE GROUP CONTRIBUTED TO IT

It is not easy to help teachers maintain their reverie amidst group dynamics shaped by interaction with such difficult students. It goes without saying that it is important for psychologists themselves to continue to undergo reverie to support teachers' reverie. However, it is possible that school psychologists sometimes lose the psychic space to maintain their own reverie because of such complicated group dynamics. Unfortunately, it is difficult to find studies that examine ways in which to maintain the psychologist's own reverie during difficult situations beyond psychotherapy settings.

Bion (1970) referred to negative capability as the ability of the mind to maintain reverie. Negative capability is the ability "of being in uncertainties, mysteries, doubts, without any irritable reaching after fact and reason" (Bion 1970, p.125). According to Bion, this is supported by a sense of "security" and "patience" (1970, p.124). The psychologist in this case consistently stated that "this meeting was meaningful" because she was able to observe the teachers' growth with hope. Also, although the anger directed at the psychologist was hard for her, it was also an indicator of their differentiation. It was a relief to the psychologist that they did not rush to superficial anger, but continued to follow the process of becoming more like themselves. The fact that the psychologist could

follow this process among the teachers was conducive to the psychologist's own sense of security.

Still, the teachers' projections were very heavy, and the psychologist did not feel as if she contained them alone. As shown in Fig. 2-5, it was not only the psychologist's effort to contain it, but the group's. This experience of not being contained by the psychologist alone may have been the source of the tentative and intuitive term reverie of groups. Moreover, I believe that the three teachers' reverie was supported by the group, that is, the group provided the teachers with a sense of security for their reverie. In addition to the containing function of the group, the teachers could see and hear others emit irrational and emotional voices. Since they were also in the presence of others and emitted those voices, they were able to more safely admit that there was indeed a chaos within themselves that was difficult to immediately resolve.

### CONCLUSION

This was a singular case study used to examine the necessity of the term reverie of groups. To this end, it demonstrated the importance of emphasizing the term reverie to support the  $\alpha$  function of teachers – one of the purposes of school consultation. This study also suggests the possibility that the power of the group may help support teachers' reverie by providing a sense of security to both teachers and psychologists.

The limitations of this study are detailed below, as are perspectives on the future. First, the term  $\beta$ -elements requires further elaboration in terms of its operative definition. This will facilitate the term's use beyond the field of psychotherapy. Moreover, the group's contribution to the psychologist's and teachers' reverie was presented, which is an important point in terms of the use of the group in consultation. In the present case, the psychologist's familiarity with organizational theory and group psychotherapy may have made her feel more comfortable with the group. In the future, it would be useful to deepen the study of the power of groups to support reverie through a review of group psychotherapy theories. Further case analyses to examine the conditions under which groups contribute to the members' sense of security would enhance this initiative.

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## REFERENCES

- Bion, W.R. (1957). *Differentiation of the psychotic from the non-psychotic personalities*. *International Journal of Psychoanalysis*, **38**, 266-275.
- Bion, W.R. (1959). *Attacks on linking*. *International Journal of Psychoanalysis*, **40**, 308-315.
- Bion, W.R. (1962). *Learning from experience*. Tavistock.
- Bion, W.R. (1970). *Attention and Interpretation*. Tavistock.
- Blanck, G. & Blanck, R. (1994). *Ego psychology (2nd ed.): Theory and Practice*. Columbia University Press.
- Klein, M. (1946). *Notes on some schizoid mechanisms*. *International Journal of Psycho-Analysis*, **27**, 99-110.
- Ohashi, Y. (2017). *Psychoanalytic Consideration of a Model for Clinical Intervention in the Confusion in Intellectual Special-needs Schools: Projective Identification by Attachment Disorders and Teachers' Isolation*. *Seigakuin University Ronso*, **30**(1), 65-81.
- Ohashi, Y. (2019). *Aichaku Syougaiji tonos Tsukiaikata*. (how can we have a good relationship with kids in school?) Kongo Pub. Tokyo, Japan.



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