

The cosmos between family and psychodrama children's group

The triangle of child, parent and psychotherapist as a lively and creative space

Karl-Ernst Heidegger

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Abstract While the child is working on its personal development in the psychodrama group, additional developmental processes become necessary within the family to help apply the child's newly gained knowledge and skills to its everyday life. Children oftentimes attend and participate with incredible enthusiasm. In some cases, they even continue to play at home with their parents and siblings. This leads to an interplay between the group and the family. How can this force of change be transferred into the family life and what happens if this spark cannot be ignited? The author intends to demonstrate how the inclusion of the parents increases the effectiveness of the therapeutic children's group. Aside from offering an overview over the challenges of parent counselling, he places a special focus on the personal auxiliary roles, the satisfaction of the needs of both parents and children as well as the striving for encounter between the group and the family.

Keywords Child psychodrama · Parent counselling · Social stage · Therapeutic relationships · Auxiliary ego · Guidance · Encounter

1 Introduction

So far, young Fabian has always enthusiastically attended the group and has made good progress. As psychotherapists, we were pleased with his advancement on the symptom level. Moreover, he had a positive group experience for

✉ Karl-Ernst Heidegger
Sillgasse 12, 6020 Innsbruck, Austria
E-Mail: praxis@heidegger.tirol

the first time in years. All of a sudden, his enjoyment ceased. He began to cry before leaving for the group sessions and on the way to the group. What happened?

Children who previously enjoyed attending the groups suddenly drop out. Their resistance towards the group and the treatment increases without any reason becoming apparent during the sessions. A deeper reflection on this phenomenon often takes us into the cosmos existing between the group and a child's family.

Moreno has repeatedly used the term cosmos to describe the interpersonal world between human beings. Above all, he pronounced his view that individuals should never neglect their involvements and interactions. Depending on its context, the Greek origin of the word cosmos refers to both "world order" and "jewellery". Here, the terms order and change are closely intertwined with each other. In the literature regarding psychodrama, this aspect of the work is described using the real social atom of the child, or with the work performed on the social stage, although the concept of the social atom is too broadly phrased. Thus, it is necessary to differentiate between family atom and social atom (cf. Biegler-Vitek 2014, p. 15ff). For this reason, I prefer to speak of the child's framework. I am going to address further aspects of the social stage again in the third section of this article.

Together with my colleagues, I have been organising psychodrama groups for children for more than 20 years. We call our project *Kinderbühne* ("children's stage"). Group work with children involves a detailed examination of a child's framework in order to also guide what is ongoing around the group. In most cases, this means spending time with the parents. These activities are mutually dependent, and their interplay connects them to each other.

In order to understand this world in-between children's group and family, I will try to portray the different tasks and responsibilities of our work with the parents and the child's framework, before I analyse the dynamics of the triangle between family, child, and psychotherapy. Our personal role and attitude help us to safely navigate throughout this specific field and to bridge the gap between the separate worlds of the group and the family. In the process, we can pay attention to the basic needs of both parents and children. By doing so, the effectiveness of the psychotherapeutic children's group is supposed to increase.

2 Tasks and responsibilities regarding the work with the child's framework

Working with the parents and the child's framework respectively implies several tasks and responsibilities that I intend to summarise here in six sub-sections. Not all these points will always be of significance at the same time and in all cases. However, if one of these aspects comes into play and is not taken into consideration, problems will emerge. Often enough, we touch upon several of these aspects during just one session. It is important to me to emphasise that I understand these tasks and responsibilities as an integral part of group-based psychotherapy with children.

2.1 Setting structural parameters for the entire treatment

In order to get properly started with the treatment, we must establish certain parameters. Initially, the parents or another extended network supporting the child must request and agree to the treatment. A safe environment (Verhofstadt-Denève 2003) is to be established not only for the children but also for the parents. To achieve this, it is necessary to provide clarity and transparency regarding the actions within the social framework of a child. Therefore, we need to clarify which family members and institutions of the extended network must be notified, what kind of information must be exchanged, and what place we will assume within the network of other supporting institutions.

For me, it seems important to understand all of this as a continuous and mutual guidance process lasting from the very first session until the completion of the treatment. From the viewpoint of the child and the parents, a holding environment is thereby created, which Daniel Stern, based on attachment theory, likes to link to the parents' longing for a secure base and empathetic support (Stern 2006; Gauthier 2013, p. 34ff). This prospering trusting relationship increases the effectiveness of the treatment (Gauthier 2013, p. 34ff).

Whenever children join our groups, we offer additional sessions to their parents and other important attachment figures that usually take place without the children. The same happened in the case of young Fabian. Based on this agreement, I was able to invite Fabian's parents to a meeting and work on his displeased stance.

2.2 Motivation for the treatment

Entering treatment is already the result of a preceding development that parents had to pass through, often with the help of institutions supporting them. Furthermore, in most cases, certain given circumstances provide us with valuable information regarding aspects such as psychological strain and willingness to change. Respecting their previous history and the current given circumstances serves as a useful approach to establishing the before-mentioned trusting relationship with a family and ultimately helps them to accept the processes of change. Hannelore Stollewerk (2014) points out how much energy families tend to invest in maintaining their resistance to a treatment whenever it is not possible to properly respond to their concerns.

In our context, parents and child initially need to be won over for this form of treatment. Therefore, there must be a good balance between the symptoms, other problematic factors, and the resulting expectations that lead a family to us (cf. Aichinger 2012, p. 23ff). Usually, a certain longing hides behind the child's symptoms and the parents' distress. If we can identify and navigate along this specific longing, we can help increase their motivation.

If parents do not come to us on a voluntary basis but act under pressure from school or youth welfare authorities, the parents' conflict with the extended social network of their child will influence the content of the parent counselling. During this

process, we must meet the attachment figures of the child (especially the sceptical ones!) at their own level. Feelings of resistance need to be discussed and given a proper stage.

The parents of eight-year-old Fabian signed their child up under pressure as his school was threatening them with the imposition of sanctions. At first, the parents were against the proposed measures and reached out to the hospital. Only after the hospital also recommended the group, the parents phoned us. The mother appeared to be very hopeful, whereas the father remained rather sceptical, but could not come up with a better alternative himself.

2.3 Exploring the child's living environment

Basically, the point is not only to understand the system within the child but also the child within its system (cf. Aichinger 2012, p. 45). Considering the given context, we must place special focus on the child's family and its extended social environment. We do not only need to explore the child's actions but also the actions of the family as a whole.

Fabian suffered from anxieties. This led to him running out of the classroom during lessons and hiding. He refused to participate at school and sometimes sat beneath his desk. The communication between school and parents turned out to be rather frustrating. His teachers blamed the parents' high expectations for Fabian's behaviour, while the parents in turn criticised the educators. Fabian and his parents felt misunderstood. Furthermore, the parents complained that Fabian did not play with other children and could not find any friends.

By considering the entire living environment, we create a basis for psychotherapeutic diagnostics and an improved understanding of the symptoms. The symptoms act as the children's language. Therefore, it is even more important that both we and the parents learn to understand this language. However, we must also recognise that this way of communicating is significantly more difficult to decipher without the parents' input. Simultaneously, we can begin to act as translators and educate the parents.

Children often appear to be relieved when we inform ourselves and discuss delicate subjects with their parents. However, they do not wish to be immediately involved in the process itself.

2.4 Supporting a child within its framework

The recovery process of the child during the therapy must be transferred into "real life" to finally result in certain changes. This is more easily achieved when the framework of the child supports its progress. At the same time, the parents also need to come up with new patterns and new inner pictures (cf. Stollewerk 2006, p. 96). This integrative work consists of two aspects. While the first one focuses on the everyday home-life, the other one concentrates on the events within the group. The first aspect requires us to analyse problems of the children's daily routine.

Whenever necessary, we enhance our approach by establishing contact with other helpers or teachers of the child.

We put the child's world on the social stage and aim to guide the child through this process. Sustainable change is most likely to be achieved when the principal characteristics of a disorder are not treated in an isolated fashion with the child alone (Biegler-Vitek 2014, p. 158).

The second aspect focuses on the parents' specific way of understanding both the processes within the group as well as the development the children undergo in the group. Parents must be convinced that the treatment indeed makes sense, as children can sense unuttered parental resentments or ambivalences.

Even though Fabian's parents noticed their child's enthusiasm for the group therapy, filled with doubt, they also challenged the plausibility of the playful elements. At home, he told them that he played the role of a great wizard in the group. "Of course, he enjoys that as he can act in a megalomaniac manner", his father declared rather condescendingly.

The meetings with the parents offer a suitable platform to discuss topics that the child brought up in the group. The parents can continue working on these topics and relate them to peculiarities from their everyday life. The trick is to make the ongoings on the stage comprehensible and to bridge the gaps between the different mindsets of children and parents. While children deal with the world around them in a playful manner, adults do this in a primarily verbal-conceptual and causal-logical way (cf. Fryszer 1993, p. 213; Aichinger 2012, p. 59). Whenever the children are not present, I enjoy working with staged presentations on a table stage using symbols. In Fabian's case history, it was important to make the boy's symbol play tangible and easy to identify with for his parents.

I carefully tried to introduce Fabian's parents into the scene of a particular game, arranging little finger puppets for the roles on the table. The children in this group had already played "Middle Ages" in several versions with kings, knights, princesses, witches, and a dragon in a forest setting. The first time, Fabian desperately wanted to be king. He sat in his castle, safely behind walls (toy blocks) and tried to command the knights. He enjoyed the feeling of being king. "Just like at home", his parents spontaneously commented. But outside the walls—where there was fighting—everything seemed to be more thrilling. The next time round, he came up with the idea of being the most powerful wizard. Together we pondered what the source of the wizard's magical powers might be and arrived at the idea that to gain these powers, he needed to cook a magic potion from dragon scales. This potion was only effective for a short time. I had to play the role of the terrible dragon. Of course, Fabian wanted to perform magic right away, but he had not collected any dragon scales yet and therefore had a problem on his hands. Still, he had a concrete goal set up in front of him. First, he persuaded the knight to steal a scale from the dragon. The mother immediately interrupted, saying that her son hardly ever spoke with other children at school. The boy who played the knight enthusiastically stole scales from the dragon, enabling Fabian to perform magic. In the very next

step, Fabian transformed the dragon into a mouse. As soon as the spell lost its power, the game started over. The other children joined in on the fun, shrinking the wild dragon, and provided Fabian with fresh scales each time ... Step by step, the parents began to understand how Fabian was developing over the course of the game.

If a family member starts developing, it also has consequences for the other members. If a child behaves differently, it affects the parents and siblings as well. If a family member finds a practicable solution approach, all the others benefit from this process. This can also cause problems, as other family members are forced to adapt their own roles. Consequently, this raises the questions of how we can empower parents to adequately deal with their children's disorders or coping tasks and how they can be enabled to comprehend the hidden need behind a symptom. Guidance and development of the parents' roles go hand in hand.

2.5 Supporting the parents

On the social stage, we try to encounter the parents in a benevolent and sympathetic way. Parents wish to be seen; they need space for their distress. It is not important what they might have done wrong, even if they confide their feelings of guilt and insufficiency to us. Children cannot choose other parents anyway. This requires a general openness for the parents' contributions, enabling a view through a colourful kaleidoscope, not giving away beforehand what we are about to see. On an ideational level, we aim for parental accountability and a strengthening of the parents in their roles. The goal is not to guide the parents along the path but rather to position them in a counselling and caring mode for their children as proposed by schema therapy (Zarbock et al. 2013).

Occasionally, this is achieved by using topics from everyday life and by addressing questions regarding developmental phases, approaches to symptoms, traumatic experiences, or education issues. However, often enough we can also achieve this by addressing the parents' central life themes, which the children as symptom carriers may express but cannot resolve as long as the family life is in disarray (cf. Richter 1970, p. 9f).

The fears, depressions, addictions, and other psychological disorders of the parents affect and influence their children. As this is not a self-therapy scenario focussing on the parents, it is important to remember that the child always remains at the centre of our attention. The goal is to encourage the parents to take a proactively creative role towards both themselves and their children, as Jan Bleckwedel put it (cf. 2008), and to ensure that the parents' roles develop alongside the progress of their child.

Many parents can only agree to psychotherapy for their children if they themselves also receive a sufficient level of attention (cf. Stollewerk 2014, p. 300) or support (Denk 2021, p. 37). If feelings of excessive demand, envy and fear of failure arise in the parents, the social stage offers a suitable opportunity to find a different approach. In this event, it is also important to help the parents develop trust in the power of

their personal parental roles. In practice, I experience this process in a very positive light.

Parents have needs too, which need to be recognised and fulfilled. The Children's Psychodrama programme functions on a need-oriented basis and, if required, this approach is designed to also include the parents.

2.6 Offering support in the event of family conflicts

Exploring the living environment of the children can sometimes uncover open or hidden family conflicts that affect them in an adverse manner. These can include relationship problems of the parents or intergenerational conflicts. On the social stage, it is oftentimes inevitable to bring the parental conflict into the equation (Stollewerk 2014, p. 301).

Parents can take much better care of their children if they find suitable solutions for their own problems. As with the development of the parents' roles, we consequently stick to our own role as a child's psychotherapist. If the parents decide to end their mutual relationship, the focus must not be on counselling in regard to their separation and/or divorce but on the children dealing with this. We give our best to give the children a better understanding of the situation.

At the same time, symptoms, or behaviour patterns of the child such as hyperactivity, fits of rage, and clinginess can result in family conflicts. They reveal different educational styles and correlate with the parents' personal central life themes. Often enough, the parents confront each other with a variety of accusations. For the child, this situation poses a double dilemma. On the one hand, it experiences itself as a burden for the family and blames the parents' conflict on itself. On the other hand, parents can only help their child to a limited extent. In this case, the parental conflict also requires co-treatment.

3 The triangle—a lively and creative space

In each family's individual case, the emphasis and combination of these tasks and responsibilities is different. If we manage to avoid approaching these tasks and responsibilities as a mandatory checklist, we will come across a cosmos abundant with different constellations, in which the various spheres, just like planets, are sometimes not visible at all, before reappearing in a wide range of different combinations. Can we understand this cosmos as a creative space where new things can emerge? Believing this to be the case, I primarily see a triangular formation consisting of child/parents/psychotherapy.

In the field of child psychodrama, we transfer this triangle onto the social stage that I have already mentioned several times throughout this text. The social stage does not only take place on scheduled dates with the parents and other attachment figures but also during less plannable occasions, e.g., when they deliver and collect the children (cf. section 5). The social stage provides us with a platform, on which the work with the child's framework can take place. It remains valid throughout the entire process and is placed below the encounter and enactment stage, resembling

a “flan base” (Heidegger 2011). Additionally, it has a far-distance effect on the work with children. The psychotherapeutic process begins on the social stage. They cannot sign up to the group without the assistance of any attachment figures. This establishes the foundation for the further treatment (Pruckner 2002). Later, we accompany the children on the encounter stage, develop the parameters for the sessions with them, and accompany them onto the enactment stage. During psychotherapy we oftentimes allow the borders between enactment and encounter stage to become blurred (cf. Schaller 2007; Heidegger 2011). It is possible to experience each stage individually, but we must also be aware of their interplay and overlapping (cf. Pruckner 2002, p. 155ff).

If the enactment process does not unfold in a friction-free manner, we first try to overcome the disruptive factors together with the children on the encounter stage. However, if this is not enough, we will discuss it on the social stage as we hope that the work with the parents helps us to remain able to act. The other way round, the situation is very similar. In case of disturbances on the social stage, the formation of the relationship with the children proves to be more difficult. For instance, if the parents find certain games inappropriate, the children find it harder to engage in them.

In this case, Fabian’s peculiar and resisting behaviour on the way to the group necessitated a family orientation meeting. I felt obliged to sit down with his parents and show them how creatively Fabian was using the enactment process for his purposes and how much of an achievement this was representing. Ahead of the next group session, I told Fabian that I had had a good conversation with his parents and was looking forward to seeing them again. From this moment on, his enjoyment of attending the group was successfully restored.

Taking just one glance at a scene, one immediately notices a unique characteristic of child psychotherapy. The parents watch the development of their children on the enactment and the encounter stages, while the children watch their parents on the social stage. In both cases, children and parents are both spectators and protagonists. It is of no specific significance that neither are the parents present at the groups nor do the children attend their parents’ meetings.

Other helpers (individuals and institutions alike) are also involved as spectators and protagonists. In a classical theatre setting, they would be watching from the balcony. This creates a lively atmosphere influencing our work in the children’s groups. Aside from the drop-off and pick-up situations and other collective meetings, the opportunity to really watch each other hardly ever arises. Thus, parents and children look out for other signs. They try to scan us in order to find out what kind of impression the parents and the children respectively left on us and intently listen to our feedback.

The children experience our work with their parents from a different angle. They notice the surrounding parameters that we establish and experience with their parents and that it does not constitute a breach of loyalty if they cooperate with us. They hear about the motivation and the worries of their parents and learn to connect this with their self-efficacy. They experience our open and appreciative attitude whenever we are exploring their living environment with their parents and perceive us in

our auxiliary ego functions. Additionally, they intently observe when their parents actively search for solution approaches for their own issues and central life themes and start to resolve family conflicts. This gives parents the opportunity to become role models for their children.

All family members address themselves to their tasks and responsibilities. If we manage to find a loving approach, children can more easily detach themselves from their parents' conflicts and find the necessary breathing room for their own development.

4 Our own roles within this world: fulfilment of basic needs

As psychotherapists we approach this world by shaping different relationships and by committing ourselves to the child and its family. Our actions are based upon the needs of the child and the needs of the parents (cf. Aichinger 2011). We can act along the guidelines of Klaus Grawe's consistency theory model, which he postulated on the basis of neuro-psychotherapeutic research, naming four basic needs relevant for psychotherapy: attachment; orientation and control; increase and protection of self-esteem; gain in pleasure and avoidance of discomfort (cf. Grawe 2004, p. 186ff).

Child psychodrama intentionally meets these basic human needs in its enactment phases. The fulfilment of needs encourages alternative and new behavioural patterns. Additionally, the effectiveness of child psychodrama is also closely related to the fulfilment of basic human needs (Aichinger 2009; Weiss 2010). If we intend to continue on Alfons Aichinger's basic principle, according to which we must base our actions upon the needs of children and parents, then we must do so on all given stages. After all, satisfied basic needs do not only help the child but also the parents to develop valuable personal resources.

The assuming of auxiliary ego functions enables us to approach our work in a need-oriented fashion. In a family-based context, parents intuitively and permanently assume auxiliary roles in order to further the development of their children (cf. Mingers and Schaul 2021), whether as a complimentary auxiliary ego, as a counterpart, or as a concordant auxiliary ego. We act in a similar manner when we work with families and have to become aware of the formation of relationships towards every individual family member.

In 1937, Jacob Levy Moreno wrote an article emphasising the significance of the auxiliary ego functions of the psychotherapist in the treatment of two or more patients. Additionally, he thereby postulated an important principle for working with families. He presumed that the primary ego, namely the patient, is not able to resolve a conflict with his or her family members and therefore needs help:

“The auxiliary ego is a therapeutic agent who provides the assistance he needs. The auxiliary ego has in this form of therapy two functions; (a) as an extension of the primary ego: he is identified with him and represents him towards others; (b) as a representative of the other person, the absentee, until the two primary subjects themselves are ready to meet” (Moreno 1946, p. 235).

For Moreno, it is a central function of the auxiliary ego that each family can be reached via the triangle.

Michael Schacht additionally connects the auxiliary ego function with that of mutual role expectation and further advises psychotherapists to also look out for a partially complementary adoption of role expectations on the encounter stage (cf. Schacht 2009; 2018). This calls for psychotherapists to contribute a high level of personal engagement, since they constantly must regulate between a therapeutic and a personal role (Schacht 2018). By perceiving this regulating function as a part of the therapeutic role, a psychotherapist manifests a bridge to the client, as once demanded by Richard Hycner, via which one can enter the space in-between and explore the expanding borders where humans encounter each other (cf. Hycner 1989, p. 124). Willingness to also engage oneself in personal roles allows for more factors than just methodical and therapeutic knowledge to influence the therapeutic role (cf. Schacht 2018).

The formation of relationships becomes a psychotherapeutic instrument and serves both as a basic principle for working with the content-based topics as well as a vehicle for the therapeutic progress of a spontaneously creative change (cf. Schacht 2009, p. 237). It is an important requirement for the progress of the therapeutic process to successfully establish a relationship between the psychotherapists and the children along with their attachment figures (cf. Grawe et al. 1994, p. 781). Thereby, a corrective relationship experience becomes possible.

Consequently, we engage with the children's group as well as with the attachment figures on several different stages, relying on a multitude of auxiliary ego functions. I empathise with children and parents to a great extent. In other words: on the social stage, I alternately assume the auxiliary role, first for the child and then for the mother and the father respectively. If I manage to understand the parents and the child, I can assume the important bridging function and open the aforementioned lively space.

Retrospectively, I believe that I only started to fully grasp Fabian's symbol play when I told his parents about it. Their comments regarding the playing manner of their child did not only provide further insight into the child's distress but also revealed the parents' worries. Thereby, both sides became easier to understand.

Of course, we should expand a little more on Schacht's idea, so let's assume auxiliary roles and engage on a personal level. Basically, the point is to allow the possibility of encounter, perfectly aware of the fact that encounter cannot be planned in every detail. Instead, it presents itself to us as a gift (Krüger 2000). We can only attempt to create favourable conditions for encounter at all corners of the triangle. Pursuing this basic approach, we can assume an important intermediary function between the child in the group and its parents.

To conclude our little case narrative: Fabian's father later asked me for another meeting to inform me that he bought his son a magic kit in order for them to perform magical tricks at home. At school, Fabian was even allowed to demonstrate his tricks in front of the entire class.

5 An opportunity for encounter—beneficial and inhibiting factors in group-related work

During the Covid-19 crisis, due to the heightened effort we have invested to maintain our group offering for children, we became aware of the fact that the processes around a psychotherapeutic children's group including all involved attachment figures also calls for guidance as much as the group itself. These complex processes demand much more than just organisational skills. Rather, we must fully apply ourselves, using our basic psychotherapeutic attitude.

As I mentioned in section 2, the setting in which the meetings with the parents take place is quite plannable. However, there is also a "psychodrama outside the doors". Surely, all readers working with children's groups in their practice immediately have a mental picture in their heads. Before the group session starts, the children are waiting according to whatever state they are in. Namely excited, anxious, lively, or even hyperactive. Additionally, there are younger and/or older siblings, baby buggies, mothers and fathers, grandparents or other attachment figures who are accompanying the children. Our groups consist of children from all conceivable social backgrounds. Thus, this results in an exciting, not plannable momentary encounter right by the practice door. This moment lasts only for a few minutes, but it nevertheless exists. A similar hurly-burly unfurls during the pick-up situations. Ultimately, this scene is nothing else but a social stage influencing the treatment of the children and demanding our spontaneity. Here, relationship happens on a more improvised basis.

During the lockdown periods of the current pandemic, we had to deal with the drop-off and pick-up situations in an even more responsible manner and focused more intently on the scenario unfolding at the door. The parents appreciated our efforts and were delighted to find out that we were still offering our groups, trying to figure out how they could still take place despite the numerous protective measures. Thereby, we manage to meet a basic requirement for encounter, namely reciprocity.

As we do not have any other choice but to include the social environment, it is necessary to actively arrange this process. Moreno even spoke of a duty to facilitate encounter with all who are involved in a scene. We can achieve this by creating a clear setting for the work with the parents. However, we are increasingly aware of the fact that this inclusion ultimately takes place during each single encounter and in almost every scene in and around the group. One cannot enforce encounter but only foster it to develop properly. Likewise, these scenes enable us to find beneficial and inhibiting factors within the triangle of parents/child/psychotherapy, though a cancellation of the encounter is also within the bounds of possibility (cf. Heidegger 2017). These beneficial and inhibiting factors both influence the success of the work with the children in the group as well as the success of the work with the parents.

While some parents take delight in exchanging their experiences with other parents, others feel shame about their situation, watch the other parents anxiously, or fear that the other children might be a bad influence on their own offspring. In short, the whole scenario can be a burden on the parents. In this case, the atmosphere feels tense, and the children can sense the stressors. All these can be inhibiting factors if the parents cannot come up with a solution and we leave them alone in their distress.

Many parents tend to drop off their children early for the therapy sessions as they seek the personal contact with the psychotherapists. However, if they express too many wishes and suggestions, this will become a nuisance. (Naturally, the parents' concerns and requests still remain of interest to us.) However, if we manage to create a friendly atmosphere and enough space for the enjoyment of the children, beneficial factors can emerge. The focus shifts towards the sparkling, bright eyes of the children. If we succeed in openly analysing those scenes around the group sessions, we actively support them in their efforts to facilitate their children's attendance of the group. During the scheduled meetings with the parents, we can discuss the "psychodrama outside the doors".

The motivation of the parents tends to differ significantly. Even within one family, this factor can fluctuate rather strongly. Some parents must overcome enormous mental barriers and a substantial inner resistance to allow their children to attend the group. If the children obviously enjoy the sessions, while the issues at home continue, it can have a demotivating effect on the parents—almost as if causing problems in the home environment was met with a reward! A similar situation occurred in the case of young Fabian. Parents try to enable their children to do certain things. If they see that their effort does not go unnoticed and unappreciated, this can be a beneficial factor. However, if their efforts go unnoticed and unappreciated, this can be an inhibiting factor. Usually, we try to address these topics during our meetings with the parents. If parents do not only feel bad at home but also on the social stage, it can disrupt the work with the children.

Exploring the children's living environments offers valuable insights into their family lives. The parents put their trust in us and reveal their weaknesses to us. By staying appreciative of them, we offer them valuable support. If we get into conflict with the family system, our work will become more difficult. If, during the encounters with parents, the development of the parental roles comes to the fore, we can support this process by taking the parents seriously and trying to understand them. If we emphasise our roles as experts, we make the contact with the parents more difficult. The situation must not become unpleasant for the parents whenever we talk about their children—and vice versa, of course! Everybody constantly observes each other, even though these situations are not official joint sessions.

In short, enthusiasm for playing, bright eyes, and friendly words about other family members are all beneficial factors, while an exaggerated display of expertise, "well-intentioned" advice, guilt-tripping, and a lack of understanding can be inhibiting factors.

6 Summary

The following five conclusions can help us navigate throughout the cosmos between family and psychotherapeutic children's group:

1. In the context of parent counselling, we must pay attention to a diverse range of tasks and responsibilities, always taking into consideration the given constellations.

2. Secondly, we must consider the triangle between parents (or other attachment figures), the child, and us as psychotherapists. Within this triangle, everybody becomes an active protagonist as well as an observer. This opens an interpersonal space, which we are free to pattern according to our own ideas.
3. The third conclusion is based upon the principle that the successful establishment of relationships increases the effectiveness of every treatment, and that psychodrama strives for encounter. Generally, moments enabling encounter can help us to transform the space existing between group and family into a creative cosmos. And vice versa, inhibiting factors are likely to close this cosmos. This basic attitude not only includes our young patients within the group but also their attachment figures.
4. In order to facilitate encounter, we need to assume auxiliary ego functions on all stages. With the help of these auxiliary ego functions, we attempt to satisfy not only the basic needs of the children but also those of their attachment figures.
5. Our guidance function goes far beyond conducting the group sessions, since it also atmospherically and practically touches upon the cosmos between children's group and families.

For the most part, psychotherapists agree that working with the framework of a child is an integral part of every child psychotherapy, both in a personal consultation and a group setting, even though the literature regarding this field frequently only consists of an annexed chapter here and there. In practice, the everyday and real-life possibilities differ significantly amongst psychotherapists and many of them are left to their own devices (Kallenbach 2014). Regarding the funding of this part of the work, private practices often need to overcome enormous barriers (Heidegger 2021). In this respect, a specification and theoretical doctrine regarding this field is becoming increasingly necessary.

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References

- Aichinger, A. (2009). Psychodrama in der Psychotherapie mit Kindern. In F. von Ameln, R. Gerstmann & J. Kramer (Eds.), *Psychodrama* (2nd edn., pp. 399–410). Berlin, Heidelberg: Springer.
- Aichinger, A. (2011). *Resilienzförderung mit Kindern. Kinderpsychodrama*. Vol. 2. Wiesbaden: Verlag für Sozialwissenschaften.
- Aichinger, A. (2012). *Einzel- und Familientherapie mit Kindern*. Kinderpsychodrama, Vol. 3. Wiesbaden: Springer VS.
- Biegler-Vitek, G. (2014). Wo ist mein Platz in dieser Welt? – Soziometrie als Grundlage der Hypothesenbildung in der Psychodrama-psychotherapeutischen Arbeit mit Kindern und Jugendlichen. In G. Biegler-Vitek & M. Wicher (Eds.), *Psychodrama-Psychotherapie mit Kindern und Jugendlichen* (pp. 11–38). Wien: facultas.
- Bleckwedel, J. (2008). *Systemische Therapie in Aktion. Kreative Methoden in der Arbeit mit Familien und Paaren*. Göttingen: Vandenhoeck & Ruprecht.
- Denk, G. (2021). Morenos Konzept vom Hilfs-Ich in der Psychodrama-Therapie von Menschen mit kognitiven Behinderungen. Vom Helfen zum Hilfs-Ich. *Zeitschrift für Psychodrama und Soziometrie*, 20(1), 35–44.

- Fryszar, A. (1993). Psychodrama in der Arbeit mit Familien. In R. Bosselmann, E. Lüffe-Leonhardt & M. Gellert (Eds.), *Variationen des Psychodramas* (pp. 196–219). Mießen: Limmer.
- Gauthier, Y. (2013). Können wir die Kluft zwischen Praxis und Forschung überwinden, wenn es um Bindung geht? In F. Pedrina & S. Hauser (Eds.), *Babys und Kleinkinder. Praxis und Forschung im Dialog*. Frankfurt a. M.: Brandes & Apsel.
- Grawe, K. (2004). *Neuropsychotherapie*. Göttingen: Hofgrefe.
- Grawe, K., Donati, R., & Bernauer, F. (1994). *Psychotherapie im Wandel. Von der Konfession zur Profession*. Göttingen: Hofgrefe.
- Heidegger, K.-E. (2011). *Beziehungsgestaltung auf der Spielbühne*. Unpublished Master Thesis at Danube University Krems
- Heidegger, K.-E. (2017). Beziehungsgestaltung und Begegnung auf der Spielbühne. *Zeitschrift für Psychodrama und Soziometrie*, 16(1), 151–158.
- Heidegger, K.-E. (2021). Eine Reise durch Österreich – Kinderpsychotherapie in Österreich. In *ÖBVP-News* (pp. 8–13).
- Hycner, R. (1989). *Zwischen Menschen. Ansätze zu einer dialogischen Psychotherapie*. Cologne: Edition humanistische Psychologie.
- Kallenbach, G. (2014). *Begleitende Elternarbeit in der psychodynamischen Konzeptualisierung*. Gießen: Psychosozial-Verlag.
- Krüger, R.T. (2000). Begegnung als Rahmen psychodramatischen Denkens und Handelns in der Einzeltherapie. *Psychodrama*, 10(18/19), 65–90.
- Mingers, D., & Schaul, H. (2021). Hilfs-Ich Funktionen in der psychodramatischen Familienspieltherapie. Im Dienste der Familie. *Zeitschrift für Psychodrama und Soziometrie*, 20(1), 21–33.
- Moreno, J.L. (1946). Intermediate (in situ) treatment of a matrimonial triangle. In J. L. Moreno, *Psychodrama* (Vol. 1, pp. 233–245). Beacon House. <https://doi.org/10.1037/11506-047>.
- Pruckner, H. (2002). Du sollst nicht fragen, das Kind will nicht reden. *Zeitschrift für Psychodrama und Soziometrie*, 1(2), 147–175.
- Richter, H.-E. (1970). *Patient Familie. Entstehung, Struktur und Therapie von Konflikten in Ehe und Familie*. Hamburg: Rowohlt.
- Schacht, M. (2009). *Das Ziel ist im Weg. Störungsverständnis und Therapieprozess im Psychodrama*. Wiesbaden: VS.
- Schacht, M. (2018). Der therapeutischen Beziehung eine Bühne. In S. Kern & S. Hintermeier (Eds.), *Psychodrama-Psychotherapie im Einzelsetting. Theorie und Praxis des Monodramas* (pp. 35–48). Vienna: facultas.
- Schaller, R. (2007). Das Hier-und-Jetzt der Gruppe als psychodramatische Bühne. Selbstmanagement-training mit aggressiv-antisozialen Jugendlichen. *Zeitschrift für Psychodrama und Soziometrie*, 6(1), 83–98.
- Stern, D. (2006). Introduction to the special issue on early preventive intervention and home visiting. *Infant Mental Health Journal*, 27(1), 1–4.
- Stollewerk, H. (2006). *Das Netz des Akrobaten. Zum Umgang mit dem realen sozialen Atom in der Kinder- und Jugendtherapie unter Einbeziehung der speziellen Problematik von Bindung und Bindungsstörungen*. Unpublished Master Thesis at the Danube University Krems
- Stollewerk, H. (2014). Die Arbeit mit dem sozialen Atom. In G. Biegler-Vitek & M. Wicher (Eds.), *Psychodrama-Psychotherapie mit Kindern und Jugendlichen* (pp. 298–312). Vienna: facultas.
- Verhofstadt-Denève, L. (2003). The psychodramatical 'social atom method': dialogical self in dialectical action. *Journal of Constructivist Psychology*, 16, 183–212.
- Weiss, G. (2010). *Kinderpsychodrama in der Heil- und Sozialpädagogik. Grundlagen – Therapie – Förderung*. Stuttgart: Klett.
- Zarbock, G., Loose, C., & Graaf, P. (2013). Grundlagen der Anwendung von Schematherapie bei Kindern und Jugendlichen. In C. Loose, P. Graaf & G. Zarbock (Eds.), *Schematherapie mit Kindern und Jugendlichen*. Weinheim, Basel: Beltz.

Further Reading

Aichinger, A., & Holl, W. (2010). *Psychodrama – Gruppentherapie mit Kindern* (2nd edn.). Kinderpsychodrama, Vol. 1. Wiesbaden: Verlag für Sozialwissenschaften.

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Karl-Ernst Heidegger Mag. MSc (1963) is a clinical psychologist and psychotherapist in private practice in Innsbruck. The focus of his work includes child psychodrama as well as teaching courses for child psychodrama. Furthermore, he served as the chair of the specialist department in the Austrian Federal Association for Psychotherapy (ÖBVP) for infant, child, and adolescent psychotherapy, and of the Kinderbühne in Tyrol.