

## **The Power of Play**

**Keynote, Third International Conference for Psychodrama with Children and Youth, 28.09-01.10.2023 Plovdiv, Bulgaria**

It is a great honour and pleasure for me to be able to give the opening lecture at this conference, especially since it was exactly 50 years ago that I was allowed to participate in a psychodramatic role play for the first time. In 1972, as a psychology student in Tübingen, I attended a seminar with Heika Straub, a student of Moreno, on monodramatic puppet play with a child. In the following semester, she assigned me the tasks of a student assistant, which included finding a child for the therapy demonstration, taking the anamnesis and diagnosis, and bringing the child to the therapy sessions.

However Jan, the inhibited seven-year-old boy I brought to the first session, didn't let me out. And he refused to play with the puppets. He preferred to play family. Mrs Straub was to be the mother, he the big, loving son and I the little, cheeky one. And before I knew it, I was part of a psychodramatic play without knowing what to do. As the big brother, Jan whispered swear words to me, like stupid pig, fat cow, which I was then supposed to say out loud to my mother. He would also give me instructions on what nonsense to do to annoy my mother, like sticking out my tongue or flipping the bird. Since I didn't know anything about role-playing at that time, I got quite sweaty when I insulted and annoyed my professor, a distinguished lady, in this way in front of the students sitting behind the one-way window. And I feared that I had behaved completely untherapeutically when I dutifully followed the boy's instructions to play. After this experience of great uncertainty, I firmly resolved to learn role-playing from scratch so that I could enjoy playing with children in the future. When Heika Straub founded the Moreno Institute in Stuttgart in 1974 and made it possible for me to participate in the first training group for adult psychodrama, I gratefully accepted the offer. Thus I am looking back on fifty years of engagement with the magic power of play.

But over the last fifty years, play has become less valued in our society, and the amount of time children spend playing has been declining for years. In 2018, the American Academy of Pediatrics warns of this dangerous global trend in a comprehensive report. The AAP's report not only highlights the importance of children's play for brain development. It goes one step further and calls for paediatricians to prescribe playtime.

In Europe, the PISA debate in particular has contributed significantly to a shift in pedagogy towards a focus on school-based learning and an increasing view that play is a superfluous and unproductive pastime for children. This is also reflected in the low priority given to play in the individual education and orientation plans for day-care centres in the 16 German federal states. There is a lot of talk about building and developing children's basic skills, about early intervention, but play is mentioned in only one education plan.

This is why German neuroscientists see children's play as more endangered than ever and are sounding the alarm. Neurobiologist Gerald Hüther, for example, has been calling for more time for children to play. Together with philosopher Christoph Quarch, he has even dedicated an entire book to the subject. In "Rettet das Spiel!" (2018), they argue for a rediscovery of the importance of play, not only for children but also for adults, in order to regain playful creativity in an age dominated by instrumental thinking.

Contrary to the social tendency to devalue children's play, neuroscience in particular has been emphasising the power of play for some years now. I would first like to

briefly present the most important statements for child psychodrama. Bogdan Draganski will discuss the neuroscientific studies and results in detail tomorrow. According to neuroscience, play has three main effects on the brain. "Play disarms fear, builds connectedness, and teaches social skills and competencies for life," says child development expert Karyn Purvis.

1) Let us first turn to anxiety reduction through play. Therapy studies show that therapy successes are easier to achieve when children can explore their situation and develop solutions without stress in a safe and relaxed atmosphere. According to neuroscientific findings, play has an important function in reducing fear and stress. In play, the body's own reward and approach systems are activated and areas associated with fear and aggression are inhibited.

2) According to Sergio Pellis (The Playful Brain 2010), the experience of play changes the connections of the neurons at the front end of the brain. "And without play experience, those neurons aren't changed," he says. These changes in the prefrontal cortex during childhood help wire the brain's executive control centre, which plays a crucial role in regulating emotions, planning and solving problems. When children play, their brains build new circuits in the prefrontal cortex that help them navigate complex social interactions. Evolution, he argues, has produced children's love of play primarily to create bigger and better functioning brains.

The economy has also registered this. Playfulness has also been gaining in importance in the world of work for several years. There is talk of playful work and playful business. Only those who think and act playfully in the future will be flexible, innovative and fit for the future. Playfulness is becoming a success factor for companies.

3) Play is a guarantor of survival in social contexts. "The function of play is to build prosocial brains, social brains that know how to interact with others in positive ways," says the famous neuroscientist Jaak Panksepp. He sees play, especially so-so play, as a tool for learning the rules of living together.

When playing and activating the neocortex, epigenetic changes are occurring that change the brain. In the study of rats, Panksepp found that "of the 1,200 genes that we measured, about one-third of them were significantly changed simply by having a half-hour of play".

In his book Affective Neuroscience (1998) he goes one step further. He identifies seven basic circuits in the brain that are the primary emotions we come into the world with, such as fear, caring and play. These primal emotions are with us at birth, pre-wired in our midbrain, an ancient part of the human brain. The instinct to play is built into our biology, the **play circuits** in our brain. Humans - and all mammals - have a biological drive to play that has evolved over millions of years. So we play not because we want to, but because it is in our nature to play. Michael Brecht, neuroscientist at the Humboldt University in Berlin expresses his conviction in his study published in 2023 in the scientific journal "Neuron" that when he played with rats, he tracked down a brain structure in the midbrain, the periaqueductal grey, which could also explain the need for play and fun in humans.

Despite these results, it is important to keep in mind, says Michael Brecht, that "of all mammalian behaviours ... play is one of the least understood neurobiologically".

So we cannot yet have any exaggerated expectations of the research results so far. But they do provide important indications that therapeutic successes are easier to

achieve when children reduce their anxiety and stress in the stress-free and safe atmosphere of symbolic play and the neuronal networks are activated with the help of which they become creative and imaginative for change.

What do these three effects of play on the brain mean for us child psychodramatists?

1) If play reduces anxiety and stress, as brain research emphasises, then play is not only helpful in child therapy, but also in educational or family counselling and this sometimes already when contactin. Especially when children, adolescents and parents are under a lot of stress and also cause stress for the counsellors. And we all of us, children, parents and therapists respond to stress with fight or flight, the two evolutionary strategies for threat.

Children do not usually come to counselling on their own. They are brought by their parents, often against their will. Because it is usually the parents who are suffering from the child's problems or who are under pressure from kindergarten or school. And the children are afraid that the parents have given the counsellor a "mafia-like killer order" to deal with the problematic, anxious or aggressive part of them. It is therefore understandable that this "problem part" does not want to cooperate, but reacts with refusal and fight or fear and flight.

Moreover, children do not feel the need to talk about their problems and difficulties. But if we treat children in family counselling like little adults (as in medieval painting) who have to talk about their problems like adults, they will be cognitively overwhelmed in the adult-dominated setting, cannot participate enough and develop an aversion to counselling, as studies show. And we shouldn't be surprised if they then behave in ways that we perceive as disruptive and obstructive to counselling. The result is the exclusion of children from family therapy, and thus the therapeutic marginalisation of children with their specific needs.

Unlike adults, children present and deal with their conflict situations without re-exposing themselves to the pain, suffering, sadness and anger associated with the scenes and reliving these feelings. In symbolic play, children represent, appropriate and shape their inner reality. And they do this in such a way that they enjoy acting out their stressful scenes and have a great deal of fun processing their experiences. So how do children do this creative masterstroke of joyful re-enactment of highly stressful experiences? They bring fun and lightness into counselling and therapy with two highly therapeutic tricks:

1. they can externalise and alienate difficult situations and view them from a safe distance using a specific form of enactment that is very different from adult conflict management. The healing power of children's play is based not least on this regulating quality. Children transfer their stressful experiences to another time, e.g. when dinosaurs still existed, to another place, e.g. a distant galaxy, or to other characters, e.g. heroic or animal figures.
2. the role changes and role reversals that they perform spontaneously, of their own accord and without guidance from the therapist, enable them to move from the role of passive sufferer to that of active creator and agent, and thus to adopt what Moreno calls the "creator's perspective".

I would like to use a case study to illustrate how it is possible to get in touch very early with the problematic part of the child through play, to show it that we recognise it as a creditable strategy to satisfy a basic need and that we do not want it to go away. And how this can be used to calm the child's anxiety.

This morning, some of you have experienced how the difficulties of children in separation and divorce situations can be dealt in a child-friendly way through psychodramatic parts work with animal figures.

Now an example of a role play:

Sarah, a seven-year-old girl was reported at the counselling centre by a young, single mother as being at risk of being expelled from school and referred for special education due to her aggressive, defiant and disruptive behaviour in year one. Sarah was later found to have disorganised attachment due to her mother's borderline personality disorder.

Before our first counselling session together, I hear Sarah screaming angrily in the hallway outside my room. When I open the door, I see her mother angrily dragging Sarah towards the counselling room. And Sarah is holding on as hard as she can and screaming. In order not to intensify the power struggle, I resort to the two forms of child enactment, externalisation and role reversal. In order to put Sarah in a position of self-efficacy, I take on an inferior role, retreat "frightened" behind the door, look out only with my head and ask anxiously: "What's going on here? Is there a mighty beast (externalisation) standing at my door, roaring and sending shivers down my spine?" Immediately Sarah's expression changes. Instead of continuing to scream, she looks at me grimly and says, "A dragon!" I look even more frightened: "A dragon in the flesh outside my door! He won't want to get into my room! I hope he won't hurt me". Sarah grins triumphantly and replies, "You'll never defeat him, no one ever has!" I agree with her, I wouldn't stand a chance against such a powerful dragon. But to win this mighty and magnificent dragon as a friend, that would be nice, then I wouldn't have to be afraid anymore. Sarah replies with a grin: "He's going to get you now". I whine and complain and ask her, using the parts work- that also takes on a directing self and other parts-, if she might be the dragon's friend or even the owner and could perhaps ask for mercy on my behalf. „He is my pet dog“, she replies. I admire her for having such a strong herding dog, she has nothing and no one to fear. I ask her if this mighty dog obeys her. "Of course," she says. "I'd like to see that," I ask. And immediately she shows me that the dragon obeys her word. "Sit!" she calls sternly and, after changing roles, sits down on the floor as the dragon. Then, after another change of roles, she demands "Give paw!" and after change stretches out one paw to me as a dragon, which I of course accept cautiously and tremblingly. Amazed, I ask her how she managed to get such a powerful, wild animal to obey. In comparison, training a lion in the circus is child's play. She proudly replies that she is strong. I express my delight that such a strong dragon trainer would visit me with her mighty dragon, it is a unique experience. Perhaps she could even show me how to win him as a friend. "Let's see", she replies before entering the consultation room.

In this case study you can see how the symbol play takes away the fear and gets Sarah to cooperate. She then shows how to deal with the dragon so that it does not get angry and attack. And that only she can command the dragon.

On the 2nd effect of the play

If, as neuropsychology emphasises, play creates creativity, we need to encourage children to show their solution ideas in play.

In psychodramatic play, children find surprising solutions in an intuitive body knowledge about the indispensable basic needs hidden in their symptoms, which have no place in their families, and about the upcoming developmental tasks. And through the part work with animal figures, they show the parents which parts they need to develop in order to be able to deal better with the aggressive or fearful parts

of the child they complain about. And it is always impressive how the children find solutions in symbolic play. They give parents a role that brings them into a solution attitude that the child needs for its development. The play then resembles solution gymnastics.

An example of this: Intellectual academic parents come to counselling with their nine year old daughter and report in a gentle tone that Anna is very annoying, disruptive, demanding, aggressive and unresponsive to any educational measures at home. And indignantly they say that they had already broken off a counselling session because the counsellor had advised them to set more limits for their daughter. But they did not want to bring up their daughter in the same authoritarian way they had been brought up.

During these remarks from the parents, Anna gets up and makes a mess of my desk, not responding to the parents' ban. As the situation threatened to escalate, I asked the parents if, for their daughter's sake, they would be willing to play a story together so that Anna could show her solution to the problem. Anna happily agrees, the parents are a bit sceptical but want to give it a try for their daughter's sake.

Anna quickly finds a story, she wants to play "Animals on the farm". She is a little cat, her mother is the mother cat, her father is a hedgehog and I am the farmer. Then I get the family to set up the scene with cloths and upholsteries. When the game starts, the little cat jumps on the mother cat. But she wants to be left alone and retreats behind the stove. When the little cat goes to the hedgehog, the hedgehog curls up. Then she comes to me, lies down on the table, tears up my breakfast dishes, eats my sausages, poops in my bed and scratches and bites me when I try to put a lid on her. I regret that this cat has such little regard for prohibitions. Other kittens would have quickly turned tail and obeyed if I had been stricter. Since I am at a loss, I will have to ask an animal expert for advice.

So I change roles and come to the farm as an animal expert. I put the expert role aside for a moment and ask Anna what the expert would tell the farmer. She gives the instruction, he discovers that the cat is not domestic but wild. As the expert, I explain to the farmer the true nature of the cat. Wild cats cannot be treated in the same way as domestic cats. The usual educational measures would not help. No wonder the house cat and the hedgehog smell it, get scared and hide from the wild cat. As the game leader, I ask Anna again, "And what would the animal expert advise?" Anna answers spontaneously that he would advise the farmer to let the cat be raised by a wild cat mother.

I act out this instruction and ask the mother if she would be willing to take on this role. Since the mother agrees, I go into the forest as the farmer, lure the wildcat into a trap and bring it home. Anna, as the little wildcat, happily jumps on the wildcat mother and fights with her. In her new role, the mother can be more lively and stronger, which I have often seen with depressed mothers. She fights with her, but also shows her limits by hissing and holding her. And in this role she shows a stamina, a backbone and a strength that she lacks as a human mother. With bright eyes, Anna lets herself be educated. As the farmer, I comment that wildcat children can only be raised by wildcat parents.

The advice of her daughter that wildcat children can only be raised by wildcat parents can be accepted unchallenged by the parents, in contrast to the advice of the family therapist to set more limits for the daughter. Therefore, the parents are ready for more family playes.

In the next session, Anna wants the whole family to play wildcat. To give the parents a physical experience of the wildcat side, I play the fox and sneak up to steal the little

wildcat's food. The wildcat parents defend their child with teeth and claws, hissing at me and chasing me away. And in the next session I let myself be chased and caught as a hare.

You can certainly imagine how parents become more vital and steadfast in such roles, but also, as a by-product, how much fun it is for parents who previously felt incompetent and helpless to chase the therapist around the room as a rabbit and make him faint. Since this kind of body therapy is also good for their pair relationship, they continue to play even when their daughter's challenging behaviour disappears.

And now for the 3rd impact

In order to promote the social brain, child psychodrama should not limit this promotion to group therapy with children (Aichinger und Holl 2017), but extend it to resilience-promoting play in kindergartens and relationship- and attachment-promoting play in schools. And to preventive groups for children in separation and divorce conflicts, for children of addicted or mentally ill parents, as I described in the second volume on child psychodrama (Resilience Promotion with Children 2011). Or the evidence-based trauma stabilisation programme that Milena and Stefan presented yesterday to strengthen the resilience of traumatised refugee families. According to the developmental psychology literature, the peer group plays a crucial role in the development of social competence even at pre-school age, so it is an important task to bring children into successful relationships with each other through symbolic play, to develop solidarity and helpful relationships with each other, and thus to build up an important protective factor. For Moreno, this experience of helping each other is an essential factor in group therapy.

Let me illustrate this with an example of a bonding- and relationship-building play with a school class:

A colleague and I were called into a fifth-year secondary school class after a boy, Tim, who had been bullied, threatened to go on a rampage. After discussions with the staff, it became clear that there was little cohesion in the class as a whole. The pupils, who came from two villages that had been at odds for generations, had split into two rival sub-groups. And that they were already fighting each other on the school bus, rather than coming together as a class.

As this is a small class (15 pupils), we play bonding- and relationship-building stories with the whole class, with the aim of integrating Tim into the class and making the whole class a community.

For the first session we tell a story about a team of mountaineers, well trained and in tune with each other, who go to the top of a very difficult mountain in the Himalayas in search of a healing stone that can cure incurable diseases. After crossing gorges and crevasses and securing each other, they set up their first base camp. The next morning, they climb an icy face and find the stone on the summit. In their euphoria, they are too late to notice that the weather has changed and a huge blizzard is breaking out. The climbers know they must descend quickly before they are snowed in. Then an avalanche breaks out, pulling the climbers into a hole in the snow and burying them, so that no fatal injuries occur. In the valley, however, a rescue helicopter is standing by to receive the distress signals. Despite the blizzard, it flies off and lands on a platform, buffeted by the storm. The rescue team rappels down into the gorge, locates the buried victims, quickly dig them out and give them emergency treatment. They carry the injured climbers on stretchers to the helicopter, which flies them one by one to the clinic. There, specialists are ready to take X-rays, treat frostbite, splint fractures and operate on internal injuries. After a dramatic rescue

operation in which all the climbers were cured, the President of the Confederation (the class teacher) present them all with the Federal Cross of Merit in a ceremony at the clinic that is broadcast live on television worldwide.

Once the three sub-groups - the climbers, the rescuers and the hospital doctors - have set up their scenes, the mountain, the helicopter and the clinic, the play can begin. While the mountaineers climb the dangerous mountain, the rescue team and the doctors practice an emergency operation. Then the accident happens. The other children are fully immersed in the rescue operation, sweating to recover the buried victims and care for them in the clinic, Tim, on the other side, who plays the helicopter technician, is only busy with the maintenance and repair of the helicopter. To get him in touch with the other children, I come as a paramedic and ask him to check the blood pressure of a climber in shock, a boy with a lot of influence in the class. „He is in a very dangerous condition and must be under constant observation“, I tell him. As the play progresses, I keep asking him to help the injured and the doctors, so that by the end of the play he has come into play contact with several children, which they acknowledge in the feedback round.

Even between the children who had previously quarrelled, positive relationship experiences develop. For example, a boy, who is an emergency doctor, carries a girl from the "hostile" village, who is an injured mountaineer, to the clinic and cares for her with empathy. And when a mountaineer, the leader of one village, was losing blood in the clinic because of his wounds, I, as a male nurse, asked his biggest rival from the other village if he could donate blood for him, as he had the same blood type. Without hesitation, he lies down next to the injured man and gives him the necessary blood in a direct transfer (via a rope). And two guys from the helicopter crew visit the injured climbers in the clinic after the rescue and bring them chocolate. At the beginning of the play, the two wanted to build machine guns and were only persuaded to play with when we gave them the task of blowing up avalanches. In the final round, many children reported that this was the first time they had been able to play without fighting.

Five relationship-building stories brought the children closer together, so much so that after the project the bullying of the pupil stopped and the class community was much stronger. Even three months later, we have received very positive feedback from the school about the class and Tim.

However, not all children are able to take advantage of these good opportunities to change neural patterns through psychodramatic play. There are children who, because of their specific disorders, remain in their inner working model of themselves and the world and reinforce their problematic strategy of satisfying or protecting basic needs in play. Here, disorder-specific interventions are needed to shape symbolic play in a way that stimulates neural pattern changes and strengthens the prosocial brain.

In this way we can take advantage of the brain's influence on play. I would like to illustrate this with two examples.

**First** an example of a conflict between outreach and avoidance behaviour.

With very anxious children, I have often seen them choose stories in which they wanted to overcome challenges and dangers. But already during the scene setting, and even more so during the play, they became afraid of their courage and fell back into avoidance behaviour.

I would like to give an example of the interventions I used to help them develop a self-efficacy strategy and how I stimulated neural pattern changes:

Very anxious eight-year-old boys want to play foxes stealing chickens from the neighbouring farm. Regine- who is also attending the conference- and I are supposed to be the farmers who can't stop them. But as soon as we set up the scene, the boys start avoiding it. While we set up the farm with the chicken coop, they are mainly occupied with building their cave. They make it comfortable with blankets and pillows. A stream runs through it so they don't have to go outside to drink. They are also building a pantry, which is already full of chickens.

To help them move from avoidance behaviour to coping behaviour, I change my role and come in as a "supporting double" in the role of a neighbouring old fox. I would have smelled the smell of chickens in the yard and would have a great desire to hunt chickens. Would they come with me, I ask. They reply that they have just eaten a lot of chickens. They were not hungry today and did not need to hunt. They would spend the day comfortably in their cave and chill. They also have a TV room there. And they throw me a chicken that I'm satisfied with. They quickly become more and more passive and lie withdrawn in their cave. To get them physically into the fox posture they were aiming for when they chose their roles, I tell them I have to sharpen my claws on a stone so I can dig a hole under the fence faster. Have they sharpened their claws yet? They reply that the fence is built on rocks and you can't dig there - but we didn't say that when we set the scene. As they react negatively to this intervention, I tell later that I want to train for the hunt. I ask if a fox would pull a rabbit skin across the meadow for me so that I could do trapping exercises. A boy takes up the idea and pulls a rabbit skin with a string across the meadow. I try to catch it but miss. The other foxes laugh at me and say they can do it much much better. I ask them to show me how they do it, so I can learn from them. One by one they grab the fur and I have to pull faster and faster. „Can you also catch in the air when a hare jumps or a chicken flies?“, I ask. I toss up a fur and again they show how high they can jump. I admire their jumping power too. After this sweaty training I express my wish to try out what I have practised on the henhouse. „Will you come with me and show me again how easily you can jump over the fence and catch the chickens in flight?“, I ask. And they are willing to come along.

Meanwhile, Regine has changed roles and is playing a hen who is provoking the foxes, to make hunting more attractive. Her farmer had built a fence so high that they could never get over it. I quietly ask the foxes if we should trick the naughty hen first by pretending we can't jump over the fence and bouncing off it. We all play the trick with great relish. The hen laughs at us, she thought we couldn't do it. At a signal, we all jump over the fence, grab her and all chickens and drag them into the cave, where we eat them with relish.

As the old fox I describe admiringly how high the young foxes jumped over the fence and grabbed the chickens as they flew away. The foxes listen with pride.

Then Regine changes roles again and arrives as a farmer's wife, who is very annoyed when she finds nothing but feathers in the chicken coop. She can't believe that foxes have come over this high fence. They must have wings. The children are amused by the scolding farmer's wife and huddle together in the cave.

I base my interventions of the training on embodiment research, which shows that many people find it difficult to change their feelings and moods directly, especially when they are under stress and fear. It is easier, even in the most stressful moments, to change one's posture and thus have a positive effect on the psyche.

This can also be seen in the play. The boys only lose their fear of stealing chickens when they have physically practised catching and jumping. And the positive feelings associated with the corrective, embodied experience of the challenge overcome



consolidate the neural patterns that enable the fear to be mastered. In this way, play becomes solution gymnastics.

**Second** an example for a conflict between two basic needs:

Particularly with insecurely and disorganisedly attached and attachment traumatised children, it can be observed that they often are unable to play to change. They re-enact in the counselling or therapy relationship what they have experienced in terms of attachment. Their conspicuous or provocative behaviour is a test to see if the counsellor or therapist will be as unreliable, dismissive and punitive as the previous attachment figure. And they create a strong pull in the therapist to behave in a way that is complementary to their attachment pattern. That is, when we respond intuitively, we validate the previous attachment experience rather than facilitating a corrective experience.

An example of this: In situations of stress or anxiety, 10-year-old Julia experienced rejection rather than sensitive attention from her overburdened single mother. In order to adapt to the state of chronic rejection by the attachment figure, Julia no longer sought closeness with her mother in situations of stress and anxiety, but developed insecure-avoidant attachment behaviour and a false independence. In this way she avoided the pain of rejection in a situation of emotional neediness.

Under pressure from the school, the mother comes to counselling with Julia because she always hides at school when she is hurt or teased. And she pushes the teacher away when she tries to comfort her. To give Julia a corrective bonding experience with her mother, I offer mother-child play therapy.

In the first session, Julia wants to play Hermione, who is quite clever and can do magic. She gives her mother the role of Dumbledore, the good headmaster of Hogwarts. I'm to play McGonagall, a wizard teacher, who thinks Hermione is the best wizard student. And she develops the following story: Hermione discovers that dementors are entering the boarding school through a cellar corridor. And she alone defeats them with the Patronus Charm. When I ask her if Dumbledore and McGonagall would come to her rescue, she says no. No one but she would have noticed the danger and dealt with it alone.

Once the scene is set, the mother, as Dumbledore, retires to his study, saying he has a spell book to read. I, as a teacher of magic, am preparing for tomorrow's lesson. Hermione wanders restlessly through the boarding school, feels the cold, climbs into the cellar, spots the invading Dementors and throws the Patronus Charm at them. Unlike other children, whose eyes light up at the thought of their self-efficacy, Julia is in a state of high stress. It is at this point that I knock on Dumbledore's door and ask him if he is as worried. A cold breeze was blowing through the boarding school. Julia replies that Dumbledore would not notice anything. The mother accepts this with pleasure and says, that there are good wizarding students at the boarding school, like Hermione, who could defend themselves if anything were to happen.

I am faced with a dilemma: if I follow Julia's instructions, I confirm her inner working model: if I am unwell, if I am in distress, I have to cope alone. There is no support or help from attachment persons. And I would be unilaterally siding with her apparent autonomy. And her basic need for secure attachment, expressed in the choice of roles for Dumbledore and McGonagall, would be violated again. But if I resist her instructions, I violate her need for self-efficacy and disrupt her organised strategy of adapting to the suboptimal care situation and reducing her stress by distracting herself in apparent autonomy.

To meet the two basic needs, self-efficacy and attachment, and to facilitate a corrective attachment experience, I use an attachment led intervention: I disagree

with Dumbledore. „It is our job as boarding school teachers to ensure the protection and safety of the children in our care, even if we have a great wizard student like Hermione“, I say. „We have to make sure our students are protected“. And I will go with Dumbledore to find the cause of the cold. We spot Hermione and try to help her. But she turns us away, saying she can manage on her own, she doesn't need anyone. I reiterate that we trust her with everything, but that it is our duty to protect the students. As Hermione continues to struggle, very agitated, as if she has to save her life on her own, I ask Dumbledore and Hermione if we shouldn't combine our Patronuses to create a greater force. He agrees, Julia nods. And I suggest striking our wands together in time against the Dementors at each syllable of *Ex pect o pa tro* and throwing the Patronus against the Dementors at *"nus"*. This priming intervention through synchronisation aims to alter developmentally inhibiting physiological regulations at the neurophysiological level. This is because data on stress and oxytocin regulation in avoidant attachment patterns show that avoidantly attached children have low oxytocin levels and high stress levels, that work against the development of secure attachment at both the real and symbolic levels. The aim of stimulated synchronous movement is to reduce the insecurely attached girl's high stress level and increase her low oxytocin level to make her more open to intervention at the level of symbolic interaction. The oxytocin released induces trust and empathy and reduces anxiety and stress.

According to attachment researcher Henri Julius (Am Du zum Ich 2020), this enables the child to engage in secure attachment and caring interactions, to engage in attachment behaviour itself and to accept the caring behaviour of the attachment figure.

Julia accepts this offer to play and, as Hermione, asks us to shout louder. And we slap each other with our hands for every dementor we take out. Little by little, she joins us in the rescue, becoming more relaxed and rejoicing with us at every hit. To give her more protection, I ask Dumbledore to hold his cloak over Hermione so the Dementors can't suck any more luck out of her. Julia allows it, but says she doesn't need it. After a long battle - Julia gives the play instructions that new Dementors keep coming in - she says, exhausted and proud, "They're all gone now". I admire Hermione's mastery of the Patronus Charm and her ability to eliminate the Dementors, even though she is still a student. The wizard teachers couldn't have done it better. And I describe my inner state to encourage the mother to mentalise. My fear of being overwhelmed by the mass of Dementors and not being able to protect Hermione well enough, my exhaustion and my relief. And I ask Dumbledore how he felt. He too found the threat frightening, almost unbearable and was afraid for Hermione. „If it was so frightening for us wizards, how bad it must have been for Hermione“, I mentalise. „She is still a child and has taken on the responsibilities of adults“. Then I ask Dumbledore to take Hermione to the hospital wing so that she can be strengthened with herbs. Hermione replies that she doesn't need that, she's fine. However, in addition to this part of her that is avoiding attachment, there is also a part of her that is needy, leaning on Dumbledore for support. I ask Dumbledore to lay his healing hands on Hermione so that happiness can return to her heart - the Dementors have sucked it away. And Hermione adds that she also needs some lucky chocolate. After Julia has allowed herself to be pampered for a moment, she stands up and says that everything is all right now.

In further lessons, I tried to use attachment-guided interventions to enable titrated successful attachment experiences, to interrupt Julia's and her mother's previous strategy of organisation and thus to change the maladaptive attachment concept.

I would like to conclude with this. For Moreno, play is the royal road for children and the royal road to children, which is confirmed by neuroscience. And child psychodrama, like no other child therapy method, uses play to reduce anxiety and stress, to develop neural networks that allow creativity to flourish, and to develop the social brain.

However, in order for psychodramatic symbol play to lead to the child's further development and not to the entrenchment of problematic patterns, disorder-specific interventions are needed that target the internal as the external system. We must therefore not only be empathetic guides in the child's symbolic play, but also decisive and structuring leaders, to promote friendship between the strategies that satisfy the four basic needs (self-efficacy, attachment, self-esteem and pleasure) or protect against injury. And to familiarise the children with the basic needs that have been splitt off and to make possible experiences that they would not allow on their own. Only in this way can we enable children to satisfy their needs in a more functional and less contradictory way, without high psychological costs and side effects.

Thank you for your attention.