

*Empower: A Daphne III project, our mission, structure and results**

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Summary. *This contribution presents the main results of Empower which is a research-intervention project in the real world that focuses on the problem of gender-based violence, particularly domestic violence and the mother-daughter relationship. The contribution develops the idea of Morenian sociatry where psychodrama can be considered an elective intervention to help those who are prisoners of victim-perpetrator relationships, since psychodrama proves valuable for troubleshooting identity. The University of Padua leads in every aspect of this project, and heads a partnership, composed of groups belonging to the FEPTO,*

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that collaborate with anti-violence centers in Easter Europe (Albania, Bulgaria, and Romania) and Western Europe (Austria, Italy and Portugal).

Key words: *Empower' research-intervention, Morenian sociatry, intergenerational female submission, psychodrama intervention, ecological model.*

During the Fourth World Conference on Women in Beijing in September 1995, the United Nations Secretary-General Boutros Boutros-Ghali said that violence against women is a universal problem that must be universally condemned. This issue is present and growing in every country, transcending boundaries of class, education, income, ethnicity and age (Innocenti Digest, 2000). It can be considered a sociatry problem, in the sense indicated by Jacob Moreno (1953) within the discussion on the pathologies of society topping the individual dimension. Indeed it heavily depends on cultural social scripts which are transmitted through intergenerational and traditional relationships for centuries. In many societies, women are taught to accept, tolerate, and even rationally justify domestic violence and to remain silent about such experiences (Zimmerman, 1994). Violence of any kind has a serious effect on women's psychology and health, particularly, domestic violence that is characterized as an event that happens in the most secure environment – one's home. This means that women who are victims of family violence are not mentally ill, but instead are social victims, who need to be helped through socio-relational strategies.

Empower is a European project realized within the parameters of the Daphne III Program and is aimed at taking care of women that have been victims of violence. Since these same victims also have a sociatry problem, the victims of domestic violence need psychological help, not so much because they are mentally ill, but because they have to find new coping strategies to change the course of their lives. In Moreno's opinion (1972), sociatry presents a general effort to bring the best insights of clinical, social psychology, psychiatry, and sociology to the general population, to heal social problems, race relations, gender violence, discrimination, and educational challenges. In this context, psychodrama and sociodrama are strategies aimed at dealing with some clinical problems through relational work (Bosselmann, 1986), promoting the evolution of Self through the guided experience of "being the Other" and permitting the representation of

the personal states of consciousness. Psychodramatic techniques of sociology are particularly significant for marriage and family counseling (Castry, 2010). Empower has considered gender violence and domestic violence as prototypic problems of sociology where psychodrama and sociodrama may provide particularly efficacious interventions.

The United Nations Declaration on the Elimination of Violence against Women (1993) and Daphne Programs require new strategies to contrast against the phenomenon of violence and in order to rise up to these challenges, Empower, developed a longitudinal intervention for victims of domestic violence in six European countries, including Albania, Austria, Bulgaria, Italy, Romania and, Portugal. Our intervention consisted of applying psychodramatic techniques which produced excellent results.

Project

Empower is a longitudinal research intervention in the real world, whose mission is to intervene in two different geographical areas: the East, which is the area where European female trafficking originates, and the West, which is the destination area for females that have been trafficked. The fundamental idea is that the territories, where trafficking blooms are the places in which the cultural background of both primary and secondary relationships is sexist, and domestic violence can be characterized by latent ideologies which facilitate female subordination and gender violence. The second fundamental concept deriving from this basis is inherent to the millennial intergenerational transmission of female subordination passed from the mother to the daughter. Empower's start point is to intervene on the consequences of the interiorized role of subjugation of the daughter that is a victim of domestic violence. The aim is to use psychodrama to study and modify the victimary condition, helping women to become aware of their condition. Empower seeks to help these women achieve resiliency and self-determination by rising above the limits imposed by intergenerational relations and empowering them to mobilize their coping strategies.

The longitudinal research design will do the following:

- a) carry out a psychological intervention to support women through the use of both psychodramatic techniques and the ecologically-integrated

techniques, emphasizing the "changing role" for promoting resiliency (Koleva, 2011);

b) assess the effectiveness of the program in changing the "positioning" of the victims, using both quantitative and qualitative methods.

Three steps are involved in the treatment of victimized women:

- taking the victim into care and conducting initial tests;
- creating psychodrama groups, each group consisting of a maximum of ten women, and each group meeting for an estimated 25 times, in two-hour sessions;
- final testing (ex post tests), return, exchange and discharge.

The goal is to provide victims with an environment for psychological development, and to offer special attention to the roles they have internalized that were passed down from the mother, in order to promote a new self-representation through which they can break free from a fate of oppression and build a new existential journey; in effect each becoming a "mother of herself".

Method

The research design

Empower adopted methods focused on determining the biographies of the women by examining the dynamics at play according to role and status in society and culture. We adopted the integration of two kinds of interventions: counseling, using the ecological systemic approach which consists in supporting the social network of victims in order to permit them to reintegrate into everyday life and psychodramatic techniques (of groups and/or individuals), that similarly to the sociatrical intervention is aimed at enhancing relational resources.

This longitudinal study involving the treatment of victimized women, was organized in three stages:

- taking the victim into care and conducting initial battery tests (ex-ante);
- creating psychodrama intervention groups;
- final testing (ex-post): return, exchange and discharge.

Protocol

The Assessment involved the administration of a battery test at the beginning and at the end of the program in order to evaluate the intervention efficacy of the program.

The battery tests consist of three scales:

- BDI-II (Beck Depression Inventory-II version), Beck, 1996: is a self-reported analysis of depressive symptoms. The second version reflects revisions in the Fourth Edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV);
- SAI-R (Spontaneity Assessment Inventory- revised), Kipper & Shemer, 2006: will be adopted to measure the change in spontaneity management;
- CORE-OM (Clinical Outcomes in Routine Evaluation Outcome Measure), Evans et al., 2002: to evaluate the clinical practice efficiency.

Participants

The total sample used for the study was composed of N = 136 participants, between the ages of 15 and 68 (M=36.6; DS=12.95), years of education between 0 and 20 (M=11.28, DS=3.98) that correspond to middle level of education. All participants took part in the study voluntarily. They did not receive any type of compensation for their participation in the study. Eighty-eight point one percent of the sample had at least one child and 11.9% did not have a child. One participant was missing. Marital status was classified into six clusters (single, married, separated, divorced, widows, concubines): 30.2% were “single”, 39.7% “married”, 4.4% “separated”, 22.1% are divorced, 2.9% “were widows” and only 0.7% were concubines.

The occupations were also classified into clusters (student, employed, housewife, pensioner, unemployed). One participant was missing. Five-point one percent were students, 59.5% were employed, 11.1% were housewives, 6.7% were pensioners and 17.6% were unemployed.

Table 1. Socio demographic variables of samples in each Country

Country	N	Group		Age (years)			Education (years)		Children Yes (1 or more)	Marital status	Occupation
		PG	EG	Range	M	SD	M	SD			
Italy	14	8	6	26-58	38.64	9.37	13.21	3.86	92.8%	42.9% separated 28.6% married 21.4% single	42.8% employed 42.8% unemployed
Austria	33	19	14	16-68	41.15	12.78	12.13	3.26	63.63%	33.3% married 33.3% single	54.5% employed
Bulgaria	21	9	12	22-66	39.71	12.02	14.33	2.49	90.5%	38.1% married 38.1% divorced	52.4% employed 38.1% unemployed
Portugal	17	7	10	24-68	46.4	12.72	7.9	3.26	88.2%	58.8% married 23.6% divorced	64.7% employed 35.3% unemployed
Romania	33	15	18	19-62	33.18	9.15	11.48	3.55	100%	60.6% married 21.2% divorced	60.6% employed 30.3% housewife
Albania	18	12	6	15-24	20	3.38	7.38	3.10	100%	83.3% single	77.7% employed
Total	136	70	66	15-68	36.6	12.95	11.28	3.98			

The experimental design used was longitudinal and provided the data collection for the two different groups: the group which took part in the ecological intervention (EG) and the group which took part in the psychodramatic techniques (PG), at two different times: t1 (beginning of the program) and t2 (end of the program). The results for each country in the sample are as follows: Italy (EG n=6; PG n=8); Austria (EG n=14; PG n=19); Bulgaria (EG n=12; PG n=9); Portugal (EG n=10; PG n=7); Romania (EG n=18; PG n=15) and Albania (EG n=6; PG n=12).

The validation of parametric variables within the whole sample as well as the single groups was performed for every country (Italy, Albania, Bulgaria, Austria, Portugal, Romania), who volunteered to take part in the investigation and included about 1000 university students.

Results

The data analysis consists in: internal consistency of SAI-R and CORE-OM in each country and group and average score in each country and group.

In the literature the internal consistency of the SAI-R is .79 (Kipper & Shemer, 2006), the average score on the SAI-R was 66.41, SD = 10.16, and no significant differences for either gender were found. The internal consistency of the SAI-R in total sample, at t1 was .95 (Cronbach's Alpha), and at t2 was .96. The average score on the SAI-R at t1 was 49.75 (SD = 16.48), and at t2 was 54.71 (SD = 14.74). The average score on the SAI-R in PGt1 was 51.95 (SD = 15.66), and in EGt1 was 47.42 (SD = 17.11); The average score on the SAI-R in PGt2 was 56.47 (SD = 15.37), and in EGt2 was 52.94 (SD = 13.19).

Table 2 shows the internal consistency (Cronbach's Alpha), of SAI-R, in each country at two points in time as well as the average score and the gender differences between scores.

Table 2. Cronbach's Alpha and average score at t1 and at t2, SAI-R

SAI-R	alpha t1	alpha t2	average score t1	SD	average score t2	SD
Italy	.93	.97	58.84	16.66	58.13	18.33
Austria	.96	.97	42.47	15.84	48.18	16.22
Bulgaria	.78	.93	45.48	7.80	49.90	11.79
Portugal	.93	.95	47.45	15.48	54.73	12.91
Romania	.94	.93	46.35	15.23	53.93	11.83
Albania	.77	.83	69.42	10.31	69.20	8.22

Anova 2×2 (time × group) on the SAI-R score showed significant differences between t1 and t2 [$F(1,134)= 19.24$; $p<0.001$] in total sample and in each country.

The internal consistency of the CORE-OM was .94 (Evans et al., 2002), and for each domains the Alpha values were: Well-being $\alpha=.68$, Problems $\alpha=.85$, Functioning $\alpha=.72$, Risk $\alpha=.62$, Non-risk items $\alpha=.90$. The average score was .76 (SD = .59), and for each of the CORE-OM domains: Well-being (W) M =.91 (SD =.59), Problems (P) M =.90 (SD =.72), Functioning (F) M =.85 (SD =.65), Risk (R) M =.20 (SD =.45), Non-risk items (-R) M =.88 (SD=.66). No significant differences for either gender were found.

The internal consistency of the CORE-OM in total sample, at t1 was .89 (Cronbach's Alpha), and at t2 it was .91. The average score on the CORE-OM at t1 was 56.03 (SD = 18.95), and at t2 it was 47.92 (SD = 19.94). The average score on the CORE-OM in PGt1 was 56.26 (SD = 21.15), and in EGt1 was 55.78 (SD = 16.45); The average score on the CORE-OM in PGt2 was 50.00 (SD = 23.04), and in EGt2 was 45.71 (SD = 15.89).

The Table 3 illustrates the internal consistency (Cronbach's Alpha), of CORE-OM, in each country at two points in time , as well as the average score and the gender differences between scores.

Table 3. Cronbach's Alpha and average score at t1 and t2, CORE-OM

CORE-OM	alpha t1	alpha t2	average score t1	SD	average score t2	SD
Italy	.93	.93	57.48	27.10	40.36	24.45
Austria	.92	.96	58.00	19.16	47.42	25.22
Bulgaria	.83	.78	58.95	15.65	52.33	12.95
Portugal	.75	.82	62.29	11.92	57.70	13.61
Romania	.78	.80	56.89	13.74	49.51	12.59
Albania	.90	.94	40.34	22.41	37.38	23.52

Anova 2×2 (time × group) on SAI-R scores showed significant differences between t1 and t2 [$F(1,134) = 24.87$; $p < 0.001$] in total sample and in each country.

The correlation analysis between SAI-R and CORE-OM, confirm the hypothesis that there is an inverse relationship between indices of spontaneity and psychological well-being in total sample and in each Country, in each group and at two times ($r_{t1} = -0.577$, $p < .001$; $r_{t2} = -0.580$, $p < .001$). Also in the total sample there are negative correlations between the instruments that establish an inverse relationship between spontaneity and psychopathology.

Discussion and conclusions

The results from the present research demonstrate a high validity of the research instruments used in the study. Moreover, the results obtained from the various samples of the different tests are positioned below the thresholds established by previous clinical studies of validation. In addition, statistically significant correlations were found for almost all the comparisons between the various instruments, thus confirming the

existence of a close relationship between the level of spontaneity and various aspects related to the individuals well-being.

The results confirm the hypothesized model, showing positive correlations between indices of spontaneity and psychological well-being and negative correlations with indices of depression for all countries investigated. Furthermore, the results support the idea that both models (psychodramatic and ecological) contribute to strengthening the empowerment of women victims of violence. However, psychodramatic techniques were the most effective in countries where women live in a situation of greater subordination.

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