

*Clinical illiteracy about domestic violence against women among young Italian psychologists**

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Summary. *The article examines the exam papers of 85 psychology graduates who, after one year of post-graduate training, were faced with a clinical case. The case in question had a history of domestic violence. The candidates were asked to describe their reflections on the clinical story and to propose the most suitable treatment while highlighting the reasons and the purposes behind these choices. The content analysis of the compositions showed how violence within the family investigated, and in particular violence against the mother and her son, was neglected in interpreting the assigned clinical case.*

Key words: *domestic violence against women, child witnesses to domestic violence, psychological illiteracy on domestic violence*

In 2012, Italy ratified the Council of Europe Convention on Action against domestic violence against women (Istanbul Convention) but the struggle of the feminist movement in creating appropriate women's shelters is still going on.

Today mass media seem to be much more sensitive to these themes while the literature and the cinema are producing many works which induce an overall process of social awareness. However, it is also clear that the network formed by social services as well as by judicial and health care systems is inadequate to deal with this issue. A number of contributions

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have examined the possible role played by first aid stations at length (Reale, 2011; Romito, 2005) pointing out the need to create specific structures aimed at treating violence against women (Nunziante Cesàro, Stanziano, & Riccardi 2012). Other new approaches also underline the importance of arresting the violent partner (Baldry, 2006). Further studies, instead, highlight the role played by primary social services and, in particular, their preventive function (Menna, & Arcidiacono, 2012; Arcidiacono, & Ferrari Bravo, 2009; Di Napoli, 2012).

However, only very recent papers examine the role played by various professionals when dealing with domestic violence cases. Specifically, some of them studied, for example, the stance of the General Practitioners in Italy (IGPs) highlighting the importance that they attribute to health personnel training and, for women, to be well informed about these matters (Arcidiacono, & Tuccillo 2012; Tuccillo, Arcidiacono, & Di Napoli, 2012; Di Napoli, Aria, Arcidiacono, & Tuccillo 2012).

One research, in particular, analyzes how priests cope with requests for help from women. In fact, although priests tend to largely give spiritual refuge to victims of domestic violence they also tend to utterly disregard, in the name of the family and for the partner's consideration, both any intervention or negotiation whatsoever among the different members of the family and any criminal report filing (Arcidiacono, Di Napoli, Tuccillo, & Fiore, 2012).

In light of the literature about this topic and of the research which we personally carried out we decided to focus on interventions carried out by psychologists (Arcidiacono, & Di Napoli, in press).

Our aim was to deepen our knowledge about the attitudes and the professional behaviours of psychologists faced with domestic violence cases. In addition, one of the two authors of the present paper, as one of the members of 2012 committee for the state examinations for the certification to the profession of psychologist, in reading the exam papers which presented, among the other things, a domestic violence dimension, noted a difficulty for the majority of the examined candidates to cope with this topic.

Indeed, much to the examination committee's surprise, the presence of domestic violence seemed not to be an object of consideration for treatment of the described clinical case. Therefore, from reading the compositions and the discussion that followed later on with the university fellows in order to evaluate the candidates' degree of professional maturity, there arose the need for a deeper examination of the textual material. We decided, therefore, to deepen our knowledge by means of a research project aimed at analyzing the contents of the texts in depth. Secondly to

investigate whether or not (and if so how?) the topic of domestic violence was included within the analysis of the proposed clinical case. The final purpose was to investigate how young psychologists deal with the phenomenon of domestic violence within their clinical practice.

Method

Participants and procedures

For the purposes of this study, we analyzed 85 exam papers written by graduates in psychology who underwent the first session of the 2012 state examination for certification to the profession of psychologist (D.M. 13,1; 1992 n. 240 and subsequent laws). The authors of the papers are between the age of 25 and 54 with an average age of 32.

The assignment was outlined as follow: «A psychologist of a local community centre is faced, in the course of a first psychological interview, with Mrs F. who is preoccupied for one of her three sons' dysfunctional behaviours. In particular Mrs F. is concerned about the scholastic problems of her second son G. whom is attending middle school. A few weeks before G. felt ill due to the use of psychotropic drugs thereby he was taken to the hospital. It emerged from the anamnesis of the case that Mrs F. has been separated since one year. She described her ex husband as a violent and heavy alcohol user also affected by psychiatric disorders. Yet, Mrs F. points out that the ex husband was not a bad man, it is just that he was ill and he did not have any intention to be treated. After the separation, Mrs. F., along with her three sons, moved back to her place of origin. Yet, although she is now separated, her ex husband keeps on threatening her and his daughter on the telephone. Meanwhile G., who moved to a new school, started to show scholastic and behavioural problems. Mrs F. recounts G. to be the more picked on by his father who vents on him through physical and psychological violence. On the ground of the anamnestic data, the candidate is required to indicate which part of the case story he/she would deepen, to formulate a diagnostic hypothesis, and to illustrate a possible intervention, specifying the specific objectives and methods which are intended to be utilized».

The candidates were assigned three hours for elaborating the case story. Afterwards, the write-ups were discussed in a preliminary fashion by a team of five expert psychologists and subsequently analyzed by a team of

three young psychologists who had not taken part in the selection of the candidates. The data collection was analyzed under the supervision of a senior researcher and by means of a thematic analysis.

Thematic analysis is, indeed, a form of qualitative analysis which takes into account what is said rather than how it is said. Braun and Clarke (2006) proposed a process of carrying out data analysis in six separate stages:

- data familiarization;
- initial coding generation;
- search for themes based on initial coding;
- review of themes;
- theme definition and labelling;
- report writing but there is a great deal of unbridled going backwards and forwards between the different stages (Howitt, 2010).

Afterwards we specifically referred to the diatextual perspective which is a form of pragmatically-oriented *discourse analysis* aimed at discovering the procedures implied in the social construction of reality. This is a concept that emphasises the fact that the interlocutor must constantly associate text meaning with context meaning.

Results

The coding procedure of the thematic analysis led to defining the following thematic areas:

Case story focused on:

- mother;
- father;
- second born;
- brother and sister;
- reciprocal relationships;
- other circumstances and events.

Description of the intervention hypothesis focused on:

- case aetiology with regard to the various members of the family;
- role of the described events;
- treatment hypothesis for the various members of the family;
- treatment methods and tools.

The candidates in describing the case reported faithfully and rigorously

the indications proposed by the outline:

- the concern of the mother over her three children and in particular over her second born.
- the violence expressed and acted upon by the father over his wife and his son, the latter was only referred as his father's main target; ongoing phone call threats aimed at the mother and her daughter.
- child's problems and critical events affecting the boy's life: Past and recent problems such as the hospitalization due to drug use as well as poor scholastic performance.
- family interactions: a) between the spouses; b) between the mother and her sons; c) between the father and his second born; d) within the new family structure along with the presence of the grandparents
- family life's critical events: a) the separation between the mother and the father; b) the move to the mother's country of origin; c) father's alcohol abuse and violent behaviour.

Regarding the formulated treatment hypothesis, the aetiology of the case story has been based on the boy's drug dependence as well as on his conduct and attention deficit disorder; among the most frequently reported life events are the move and the hospitalization; the effects related to domestic violence were, not taken into account. In the majority of cases the DSM IV was proposed as the diagnostic functional model of reference; in regard to the most suitable clinical model of reference to be adopted, the candidates suggested treating the family as a whole. Particular attention was paid to communicational and relational dynamics by means of a reference to undergoing systemic therapy. Yet, it is quite telling that the "family system" in question does not include, rather exclude, the father figure.

Individual-centred behavioural-cognitive and dynamic therapies were also proposed. It was suggested that the boy undergo the Tree test (Koch, 1993), the Family test (Corman, 1985), a number of personality tests such as the MMPI, and finally the IQ test and further cognitive performance tests. The dimension of violence, instead, seems to be evaded and decentralised from the family problems.

The comparison between the categories used to examine the case story and those for formulating a treatment hypothesis makes us better understand the extent to which domestic violence does not represent for our respondents a valuable dimension for making a treatment hypothesis.

Moreover, the textual analysis of discursive mode (Mininni, 2003) pertinent to the expressive linguistic area shows the presence of a collusive dynamic which the candidates expressed when analyzing the woman's case story. Every candidate wrote out the outlined clinical case: «ex husband as a

violent and heavy alcohol user with psychiatric problems. Mrs F. says that her ex husband was not a bad person, it is just that he is ill and he does not have any intention to be treated». Yet, in utilizing the preposition “violent ex-husband but not a bad person” they made use of a particular form of “reported speech” which slightly alters its semantic sense. The syntax of the period, constructed around the adversative conjunction “but”, besides unused when the case story has been outlined, lends the mother’s speech a particular sense which places her husband’s violent behaviour upon a justificatory level.

The candidates, by the same token, underline this aspect when describing the case story, yet when they were asked to formulate a diagnostic hypothesis and a related treatment they left it in the background. In this way, the element “violence against the mother” and “violence against the sons” never came out as a possible etiologic explanation for the boy's problems, but instead other elements were outlined such as: “separation” and “move”.

This lack highlighted a general difficulty for young psychologists to take in the overall problematic situation.

It is, indeed, possible to understand that the semantic category ‘presence of violence’ leads to generating a path of sense elaboration with the interaction of four possible semantic universes (semiotic square) (Mininni, 2003). Given a binary relationship of two contrary signs (presence/absence of violence) we created a second binary relationship where the principle of difference is brought into play: every element in a system is defined by its differences from the other elements (justification/not taking in charge and not justification/taking in charge).

For all of these reasons and in light of what emerged from the data analysis, “avoided violence” has become the central element of our reflection upon the candidates' difficulty in coping with the topic of domestic violence.

Conclusion

Our respondents very seldom seem to be concerned about the possible impact of intra-family violence on the children, although in the scientific literature there is substantial evidence for it (Kashani, Daniel, Alison, Dandoy & Holcomb, 1992) as well as of the effect of post-traumatic stress disorder on youngsters that witnesses domestic violence (Kilpatrick & Williams, 2010);

The concern about the possible effects of violence perpetrated by the man on his wife who is suffering severe stress as a consequence of this is

also disregarded; as are possible reflections and proposals regarding what sort of family therapy would be the most suitable, whether or not to include the father into the family context, and if so in which way, and finally how to protect the young girl from her father's insisting calls are all aspects not discussed in any of the exam papers. Therefore, this research shows the need for an increased professional awareness related to the effects of intra-family violence which should begin at the university stage.

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