

The Moving Forward Project

REFLECTING ON THE EFFICACY OF SOCIODRAMA AND PLAYBACK THEATRE IN ADDRESSING FAMILY VIOLENCE

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ABSTRACT

The Moving Forward Project is a collective endeavour established in Dunedin, Aotearoa New Zealand to address family violence. It aims to raise awareness of the subtleties, complexities and systemic nature of domestic violence, reduce isolation for those affected by it, promote healing and strengthen moves towards change. In this article, facilitators Sandra Turner and Cinnamon Boreham describe the project's pilot programme. They discuss the way that, in designing the programme, they matched the systemic nature of family violence with the systemic perspectives of sociodrama and playback theatre. The authors also present the programme's participants and evaluation research undertaken with them at the programme's close.

KEY WORDS

domestic violence, family violence, playback theatre, psychodrama, sociodrama

The Backdrop

In 2010 a partnership was established between the Dunedin Collaboration Against Family Violence, Stopping Violence Dunedin, the Dunedin Playback Theatre Company and the local psychodrama group. Named The Moving Forward Project, its pilot programme involved a two hour public session held every second month that focused on the complex dynamics of family violence using the mediums of sociodrama and playback theatre. Invitations were particularly offered to men undertaking domestic violence programmes, men and women involved in domestic violence and professional workers in the field. The objectives were to raise awareness of the subtleties and systemic nature of family violence, reduce isolation for those affected by it, promote healing and strengthen moves towards change. The programme was evaluated

via research questionnaires and interviews.

In this article we, the facilitators, describe The Moving Forward Project's pilot programme and its participants, introducing the reader to one in particular. We discuss the way in which the programme design matched the systemic nature of family violence with the systemic perspectives of sociodrama and playback theatre. As well, we present and reflect upon the results of the evaluation research that was undertaken at the programme's close.

Matiu: A Story

Matiu, a young Māori man attending his first session, reported that on a previous occasion he had arrived at the door but could not come in. He said he was not sure 'what stopped him, just that he was whakamā (shy and unsure of what to expect)'. He was disappointed but had nevertheless returned for this following session. This time Matiu was able to enter the room, but with his head down he made no eye contact. Some participants were familiar to him but he felt unable to move towards them, instead sitting alone. Matiu was quiet for the first part of the session, maintaining his bowed head. He reflected the stereotypical image that some young Māori men adopt, wearing their hoodies pulled full over their heads whilst gazing at the floor. Although he clearly demonstrated that he wanted to be invisible, he also took in what was occurring.

The sociodrama was focused on valuing family Christmas traditions and passing them onto the next generation. A woman enacting the role of a grandmother expressed herself to Matiu, who had agreed to play her eight year old mokopuna (grandchild). "Your dad doesn't want you at all. You don't know where you belong. I can see you are a bold little boy and that you do things really well. I love you." Full of pride, the grandmother gazed lovingly upon Matiu and held him warmly. Matiu heard her loving words, words that were strange to hear yet nevertheless sorely longed for. He was a generous auxiliary, who despite his self-consciousness made himself available and contributed to the session. The sociodrama also benefitted Matiu. In experiencing unconditional love and acceptance, this significant moment provided him with much that was missing in his own life.

Later, during the playback theatre, an invitation was issued for one more story before closure. Matiu, head still bowed, got up, took the teller's chair and proceeded to tell his story. "This will be the first Christmas in six years with my family. I have been in jail. I want to leave my old ways behind. It's time to have a change of heart. In my family it was bash first and ask later. The path I am going down is just the same. It is bad. It's a transition time for me to make myself healthy. I'm leaving my old life (gangs) to be with my real family. I want to make the change." The playback conductor asked what this might be like for him and Matiu replied, "No violence. No hurting other people". The performance began as one actor took up the role of the gang, another represented Matiu's whānau

(family) and a third played Matiu. The gang's seductive quality was enacted, graphically illustrating its hold over Matiu. As he sat in the witness position he saw himself with his back to his whānau, rejecting them for life in the gang. The karanga (call) came from his family. "Come home Matiu. Come home." The tension was mirrored to him as the actor playing Matiu fell again into the arms of the gang whilst challenging the whānau. "Where were you when I needed you? They (the gang) were here for me." The karanga became stronger. "Matiu, we love you. Come home." Matiu replied, "I don't know the way back". The whānau responded, "Get on my back. I will carry you. We love you. Come home". At the drama's end all three actors held the tension, potently illustrating Matiu's ongoing struggle. Matiu was engrossed. The conductor asked, "Is this how it is?" "Yes", he clearly replied. More fully in his body, he was able to hold eye contact with the actors and speak directly to the conductor. The audience was powerfully affected by Matiu's story. During the social and refreshments time afterwards, many moved towards him with warmth and respect. Here was healing for Matiu, healing for others, a community healing itself.

Family Violence: Systemic in Nature

It is an easy and seemingly logical idea that the person who commits the violent act is the one who is wrong and then not a big leap to 'the wrong person is a bad person'. Labelling reduces the complex and rich tapestry that is an individual, leaving them with a one-dimensional self-image. When this happens we are using a person's behaviour to define them, dismissing not only their goodness but also the systemic influences. We know that roles are enacted within a context and events are located within a system. Family violence is systemic in nature and this is acknowledged by the New Zealand Ministry of Social Development (2012).

There is no single causal factor or theory that can adequately explain, in isolation, the presence or absence of all types and forms of family violence. Rather, many factors interacting in a complex way contribute to the occurrence of violence in families/whānau. Factors include: systemic and environmental variables, such as inequality, patriarchy, the impact of colonisation, and discrimination; and variables, such as power imbalances /differences and personal/psychological characteristics /traits /attributes.

Sociodrama and Playback Theatre: Systemic Perspectives

Psychodrama, sociodrama and playback theatre involve systemic perspectives. Underlying their methodologies is a core belief in the creative genius of every person, their worth appreciated and strengthened. Auxiliary roles are enacted in present time to assist in social atom repair. The key is being deliberate regarding what we create in the world with those with whom we come into contact.

Sociodrama specifically explores social issues confronting communities. Sternberg and Garcia (1989:12) provide a clear definition.

Sociodrama . . . taps into the truth about humanity that we are more alike than we are different. Sociodrama helps people to clarify values, problem solve, make decisions, gain greater understanding . . . and become more spontaneous and playful.

Through the ages, storytelling has enabled communities and individuals to process life events and come to know themselves. The ability to tell a life story is strongly linked to good mental health (Holmes, 2001). The more coherent the telling the more mastery of one's life is developed. As we tell our stories, the belief systems that shape our behaviours emerge and become accessible to change. Playback theatre is a form of community theatre based on this philosophy. Actors 'play back' audience members' unrehearsed stories, using improvisational theatre and music to portray depth and multiple layers. Used around the world to facilitate social change through the telling, hearing and playing back of stories, it can assist a community to address bullying in schools, heal the aftermath of a disaster or celebrate its history.

Given that family violence occurs within a wider social system, the invaluable systemic focus of sociodrama and playback theatre is well suited to its exploration and healing. These methods were therefore utilised by the Moving Forward Project to focus on some of the issues associated with domestic violence during the pilot programme's six sessions. The issues included the effects on a young child when parents and step-parents are at war with one another, the way that a family manages the absence of a father and the arrival of a 'new dad' and the determination of acceptable compromises when meeting another person who holds different values. Sociodrama and playback theatre assisted audience members to process family violence stories as victims, perpetrators and witnesses. Matiu's story was one of them.

Participants in the Moving Forward Project's Pilot Programme

Over the six sessions of the programme 34 people attended, 24 women and 10 men aged from 16 to 65 years with 20% identifying primarily as Māori. Nationally, Māori comprise 14.6% and in Dunedin 6.2% of the population (Statistics New Zealand 2006 Census). As well as reflecting our links with members of the Māori community in Dunedin, we took this to mean that the project was more than usually accessible to Māori. However, there were no Pacific Island attendees, indicative perhaps of our weak connections to that community. Approximately 13 of the 34 participants were currently experiencing violence in their lives, although only two openly acknowledged this. We knew that two of the women routinely experienced partner initiated verbal and physical abuse,

that some participants had never questioned their physical punishment of children and that one participant missed several sessions because of intimidation from her partner.

Those who did not disclose their experiences of violence may have felt ashamed. However, it is more likely that some were unwilling or unable to fully comprehend what constitutes a definition of violence, partly because this was such a common occurrence in their lives. There were many who witnessed violence in their extended families but did not see this as impacting on themselves. Sixteen participants identified as professional programme providers, counsellors, social workers, domestic violence workers, mental health workers or corrections staff and of these, six were currently experiencing violence in their own lives. Of the 18 identifying as non-professional, seven were currently experiencing family violence and seeking help from woman's refuges, domestic violence programmes or individual therapists.

There are strong cultural norms within the helping professions of valuing professional boundaries and avoiding dual relationships with clients. More often than not, the source of these norms is a lack of trust and sense of vulnerability arising from under resourcing or doubt as to a professional's ability to manage herself amidst the complexity of relationships. Despite this, we had been deliberate in inviting participants from the client group and the group of helping professionals to participate together. We saw value in challenging the idea that the client group was the only one struggling with the issues of domestic violence. The stigma of being the client and the privilege and protection afforded the professional helper serve to reinforce old stereotypes and keep a binary map of the world in place. The distances between these and other subgroups at the sessions were palpable. Social workers kept themselves apart from the offenders, Māori distanced themselves from Tauīwi (non-Māori), clients avoided the professional therapists and a number of women stayed distant from the men. Despite these significant challenges the sociodrama and playback sessions, where equal and personal participation was encouraged and expected, succeeded in creating a learning experience for everyone.

Evaluating the Moving Forward Project's Pilot Programme

The Moving Forward Project's pilot programme was assessed through qualitative research. Outcomes data, collected from questionnaires and interviews with a cross-section of participants, is organised here into nine themes with interview quotes presented first, followed by commentary and reflection.

Factors that Made Attendance Attractive

*It was a break from the house and an opportunity to meet people.
I felt safe.*

I wanted a place to go on a Friday night, not the pub, a place to make friends and aid my recovery.

I wanted help to deal with things.

I trusted the facilitators.

It was a level playing field. It was okay for everyone to speak.

I wanted to develop as a facilitator.

I wanted to be generous and contribute.

It was free.

Despite the challenging environment, the facilitators were able to create a safe and engaging group space that allowed everyone to participate in their own way. This is no small thing. We learnt over time to attend carefully to the warm up of the group and to deliberately build the sociometric links. Both facilitators were held in high regard in the community and this was critical to attracting the range of participants who attended. Our modelling of openly enjoying relationships with people across the different subgroups was particularly influential.

There is a hunger within the wider community for opportunities to learn and progress. After a rehabilitation programme for drug dependency or domestic violence, participants require a place to go where they can interact with like-minded people who are also pursuing a healthy life. The option of individual therapy is only available to those with an extra \$80 plus per week in their budget. This effectively eliminates whole sectors of the community. Our cost free policy enabled many people to attend who would normally be excluded. The programme also offered community workers, group facilitators, probation officers, counsellors and students a rich opportunity to participate and to learn experientially about group process and family violence dynamics. An alcohol and drug free space was important to many participants. We provided an environment where people could talk honestly about a range of sensitive issues and be confident of being well responded to.

Factors that Acted as Barriers to Attendance

Lack of child care.

Problems with transport.

Complications of managing dual roles.

Feelings of insecurity in the open group.

We were well aware of the financial hardship that many participants experienced and though we worked to mitigate this, it could not be eliminated. Transport was arranged for some but the provision of childcare was outside our resources. The complication of managing dual roles meant that two people elected not to continue. In both these situations this was a good decision, indicating an

appreciation of the limits of possibility. Being in an open group with the potential for clients and their professional workers to meet was challenging for some. It is accepted practice that the primary relationship must be protected and that good professional boundaries be maintained. In many cases this can lead to rigidity that effectively excludes all contact with the client group outside of the professional setting. Moreno's (1978) teachings were based on the encounter, the development of spontaneity and the healing of community. Whilst complex, it is possible to be involved in a mixed group when one is able to hold relationship with authenticity and flexibility. However, the two participants who struggled with the open group had just begun recovery and required the safety of a closed group.

Personal Development

*I had my voice in the first sociodrama. I was surprised, shocked and delighted.
I took my experiences to my therapy (the longing for an absent mother or father and the place of the neglected child were shared by many).
It stimulated me to look at more things in myself.
Got me to wonder what I had done to my children.
I learnt that children have to come first. I have a new respect for children.
I saw how children get used. They are an excuse to have a go.
I learnt there is a lot of power in being a victim. I've begun to surrender my victimhood.
I'm having pretty nice chats with my mother and keeping in more contact.
I needed to go back and feel the emotional pain. I have since gone back into therapy.*

Following the playback and sociodrama sessions it was inevitable that participants would reflect on their own feelings and responses. It was only later, through the interviews, that we came to know of some of the profound reverberations this occasioned in their lives. Playing a family member, a child, an estranged parent or an abuser in a sociodrama caused people to look at their own behaviours, past and present. In playing the roles of children participants role reversed, sometimes for the first time and this had positive significance for the children in their lives and also for the child they had each been. This increased awareness of the needs of children in domestic violence systems had many outcomes. Overall, there was a new respect for children and a willingness to own one's own actions. Social atom repair occurred between parents and their children and between adults and their parents. A number of participants actively sought therapy as a result of the sessions, whilst those in therapy were re-stimulated. This heightened awareness of personal functioning occurred for the professionals in the group as much as it did for anyone else. With increased consciousness, these practitioners' clinical responses became more considered.

Development of Insights into Family Violence

Everyone's story is different.

Everyone plays a role. However, not everyone is a willing participant.

I understand how complex it is now.

It helped me to be softer with my own family when violence is being acted out.

Family violence gets generalised with assumptions that everyone's experience is the same.

Many myths exist regarding family violence. A typical question asked of a woman who remains in a violent relationship is, "Why does she stay?" This puts the onus on the woman to make the intervention, often further isolating her and leaving her with limited options. There are other naive assumptions that stereotype those impacted by family violence such as, only men perpetrate family violence, all perpetrators of violence are cruel bullies who don't care, perpetrators only do this to gain power and control over others in their family and only Māori practise family violence.

In the sociodrama and playback sessions individual stories emerged and were valued by the group. As well, the more subversive aspects of family violence were highlighted. Group members moved from a simplistic understanding to appreciating the complexities that are always present. They developed a greater ability to see the system as a whole, primarily reducing judgment and promoting the ability to role reverse. This outcome, which was evident across the client, practitioner and general public subgroups, was significant. From a relatively small input, participants integrated a deeper understanding of the nature of family violence and developed their abilities to think systemically.

Professional Development

I learnt about leaders being bold.

I have begun to move towards men. I don't say no to working with them anymore.

I learnt to go to the dark places.

I learnt about forming a relationship with each person in the group.

I saw the facilitator work in action and shift away from the interminable check in. The group was leader facilitated and not leader dominated.

We need to develop more fine tuning (as group workers) and to be alert to the changes in someone . . . not just focus on the dysfunctional.

I learnt to work with dual relationships and to not withdraw.

I'm learning to look at people without blame.

Overall, the professionals developed more capacity to enter into relationship with the client group. The old labels, which produce separation, loosened and there was more noticing of the health in each person. Despite there being some dual relationships in the group, individuals stretched themselves to be personally

present whilst still holding a professional identity. Flexibility and creativity were mobilised without sacrificing professionalism or responsiveness. Linear thinking dictates that the perpetrator of family violence is at fault and must change. At one level this is correct in that we must each take responsibility for our actions. However, this negates the larger context in which people live and the multiple factors contributing to any situation. Practitioners learnt that when working with a systemic understanding, judgment is likely to drop away and a new tolerance for the complexity and subtlety of all situations develops.

The ability to facilitate group work is commonly underestimated and consequently group leaders are often inadequately trained. Anxious practitioners reach for the manual and adopt a false authority that in the end cuts across relationships and the warm up of the group. Their observation of leaders working with ease and vitality in this group created another possibility. They saw that it was possible to 'get with' whatever was emerging in the group without any need to fix or help and thus began to envisage such ability for themselves. The idea that we must help someone can frequently turn into a burden. We stop 'being' with the person and become focused on 'doing' something for them, often simply imposing our version of what is needed. But when we double the person we are already assisting. The practitioner who "learnt to go to the dark places" learnt both to be unafraid of doubling and paradoxically that doubling was all that was needed.

Experiences of the Open Group

Though we were from different backgrounds everyone was the same.

I wanted to support others so I put myself forward, a sense of we will do this together.

I owed it to the group to be involved.

I liked that there was no judgment.

The form doesn't discriminate. It was inclusive and safe for everyone to be involved. The more experienced practitioners took risks as well.

I couldn't trust people I didn't know. I feel safe with my own colour (for this person especially the group felt unsafe).

Our intention was to encourage the participation of people from all walks of life, as it is clear that family violence does not discriminate. As people shared their stories, myths were broken and this reduced isolation. Group members thoughtfully took risks when sharing stories, a significant development given that this was an open group of both professional workers and clients. Everyone experienced some stretch, particularly practitioners who needed to be more thoughtful than other participants. Where there is a dual role it is critical the therapist stays clinically aware at all times. When this can be achieved, along with holding an authentic relational presence, the gifts are huge. It is a relief for the client to see the therapist as an ordinary member of the community, grappling with the complexity of families.

An outcome of maintaining an open mixed group was a collapse of the 'us and them' divide. Transference positions, the holding of fixed roles originating in the original social atom, were harder to maintain and this provided more opportunity for here and now relationships to develop. A positive regard for each group member was built. This continued outside the group when people encountered one another in everyday situations and took the time to say hello. A member of the client group was especially surprised when a social worker greeted her in the supermarket. Inclusion was modelled and worked to reduce the power disparity that frequently occurs when the professional is the authority in someone else's life. When envisaging the group as inclusive of all subgroups we noted that there were limited opportunities for people of such different demographics to meet on a level playing field. When we saw ex-prisoners having a cup of tea with psychologists and social workers at the close of sessions we knew that the way the world is ordered was beginning to change.

Impacts for Māori and Taiuiwi (Non-Māori)

I didn't realise that this happened in Pakeha whānau (White families).

This is deep. It really gets you to the heart of the matter.

I can bring all of who I am here. It's safe.

I could see that all the Māori were on one side and we were all on the other. I didn't like that so I shifted over.

It warms my heart when I see my own people and Taiuiwi finding common ground. That doesn't happen much.

There was a buzz in the air on the first night of the pilot programme and alertness especially evident when a group of Māori arrived. Tentatively they placed themselves in a tight group at the back of the room. They consisted of iwi (tribal) practitioners and whānau (family), both ngā tāne (men) and ngā wāhine (women) undertaking domestic violence programmes. Later, over a coffee, they noted the newness of moving into a Taiuiwi (non-Māori) service and being able to identify with the themes of the group. One man expressed relief on hearing swearing during the sociodrama. He had known it as a child, thus at that moment the drama became real to him and he engaged in the session. Sociodrama and playback practitioners highly value the sacredness of a group of people, their customs and their stories. A range of Māori participated, from those steeped in Tikanga Māori (Māori custom and traditions) whose first language was Te Reo (the Māori language), to those on a journey of re-claiming their heritage. They brought to the sessions a typically Māori systemic overview of the world, a perspective where everything is inter-related. This was very much part of past cultural practices and continues to be taught by iwi (tribal) practitioners, kaumātua (male elders) and kuia (female elders).

Perspectives on Playback Theatre

*It was good to be a witness. I could see more. I didn't have to get up and do something.
I got more from playback. It was more intimate. The release was amazing. I was walking
free for a couple of days.*

It reminded me of where I have come from.

I realise I only told half my story. I held back my part in it.

A lot of stuff came up afterwards and I needed someone to talk to.

For me it was laid back therapy.

The actors were great. They got the actual ferocity right.

Others' stories had a powerful impact on me.

Playback theatre offers a mirror to the storyteller, highlighting layers of experience not always considered during the telling. Each story reveals universal themes that others link to. This can be an enlivening yet edgy experience for both the teller and the audience. In the sessions, we offered an opportunity for personal responses to the sociodramatic story that unfolded first. Thus, if a catharsis of integration had not emerged then, it would later occur during playback theatre. Group members experienced a great deal of satisfaction when the full expression of their feelings was taken up by the playback actors. The actors themselves were well trained and confident to access and express a depth of feeling. They had spent significant time in rehearsal, processing their personal stories and responses to family violence. Playback makes it possible for people to stay in the witness position. This assists with the development of a reflective mind, which for some is very different to old patterns of reactivity. When family violence occurs, everyone in the system typically experiences isolation. Some participants noted a reduction in isolation and a commensurate development of community.

Perspectives on Sociodrama

It was more challenging. You are more involved.

I enjoyed playing innocence. I played the middle brother instead of always being the eldest.

I learnt there is a big system with more people involved than just the client.

I warmed up easily. I surprised myself.

It was like I was sitting there with my own family.

I learnt that the mum was probably lonely.

Sociodrama enabled the participants to clearly see the systemic nature of family violence, which led to a greater appreciation of the multiple factors at play in any given situation. The exploration of social and family dynamics at the typical level enabled full participation from group members, without fear of exposure. They entered enthusiastically into the sociodramas, creating typical scenarios

and adding important elements such as the family dog. Sometimes roles were enacted by groups, as when three participants took up the role of the abusing mother together. This offered multiple doubling and also addressed performance anxiety for a naïve auxiliary.

Participants took up both familiar and unfamiliar roles, indicating great willingness to stretch outside of comfort zones and experience the world of the other. When role reversal occurred throughout the system, a rich understanding from all perspectives emerged. This produced greater awareness and compassion and lessened judgment. Group members were frequently surprised by their involvement in the sessions. Despite initial caution, they easily warmed up and found themselves volunteering to take up roles. It was delightful to see those who usually think they have nothing to contribute making meaningful interventions. For example, during one sociodrama an audience member called out passionately to a participant playing a man who was hiding and feeling ashamed of his violent actions. With great feeling she said, "I can see you are not a bad man. I will stand with you". This was a moment of transformation.

Conclusion

The Moving Forward Project's pilot programme used the mediums of sociodrama and playback theatre to address family violence. Despite challenges and difficulties, the gains were rich and often unexpected. The qualitative research undertaken at the close of the six sessions highlighted a range of benefits, one of the most important being participants' deepening appreciation of the subtleties, complexities and systemic nature of family violence. Participants learnt that all relationships hold a potential for violence, whether this be overriding another's opinion or physical assault as an outlet for anger and frustration.

It is unusual for clients, professionals and others involved in this area to work collectively on a level playing field. Thus, the bringing together of the subgroups was another significant achievement in and of itself. Trusting relationships were developed with key participants in each subgroup so that they could confidently promote the project to their people. Barriers softened between subgroups as each developed the capacity to see beyond prejudice and first impressions. The ability to stand in one another's shoes matured and with that, came respect.

The project continues and has attracted funding from the Dunedin Collaboration against Family Violence and the Dunedin City Council. The Moving Forward Project won the 2011 Sonja Davies Peace Award.

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