

A Discussion on Science and Research in Psychodrama

Philip D. Carter and Charmaine McVea



Phil: Hello Charmaine. I very much appreciate your paper (McVea, 2007) in the AANZPA journal. I am curious as to what impact it had. What was your motivation in presenting it and what has arisen out of it?

Charmaine: The study that I discussed in the 2007 journal investigated the short and longer term impact of a psychodrama enactment for the protagonist using Robert Elliott's (2002) single-case efficacy design.

My motivation for writing the article was to demonstrate that research can be done with integrity and can produce encouraging results that illuminate our practice and give us a vehicle to communicate the benefits of our method to others. By integrity, I mean that we can investigate psychodrama without compromising its form or philosophy. Elliott's approach is practice-based and, I believe, a good fit with psychodrama. I have a vision of creating a series of efficacy studies based on the work of AANZPA practitioners, which would combine to form a substantial research project. From my experience to date, I am confident that this research would demonstrate that psychodrama interventions can have positive therapeutic impacts that are maintained over time. Hopefully, it would also lead us into new discoveries about the therapeutically helpful aspects of psychodrama.

Since the 2007 article was published I have had conversations with many AANZPA members who have some interest in research.

Phil: Let's discuss outcome research first. Many studies have already been done and published. In Schramski and Feldman's (1984) review of outcome studies of action methods 39 out of the 200 studies applied directly to psychodrama and the rest to related action methods. Half the studies were experimental with differing subject groups in terms of age, ethnicity, and profession. Therapist experience differed as did the outcome measures used. Perhaps, the agencies that require some evidence of psychodramatic efficacy might be satisfied with that.

Charmaine: As you say, these studies generally support the efficacy of psychodrama or specific psychodrama techniques. In 2007, Michael Weiser reviewed psychodrama research published in English and German journals over the previous 50 years and found some encouraging results. As with the reviews you mention, much of the research he looked at was conducted in the 1980's and earlier. Agencies are generally not going to be interested in research that is 30 years old, and for good reasons. The trend in academic reviews is to look to research that has been carried out in the last 10 years, to see what is happening in current applications and in response to current social/psychological concerns. Early ground-breaking research is acknowledged, but there needs to be contemporary development of theoretical conceptualisation and practical applications. As Weiser points out, many early psychodrama studies do not meet contemporary standards of scientific rigour, which raises questions about how confidently we can interpret the findings. Probably more important, though, is that without current research, we send out a message that nothing worth investigating has emerged in psychodrama practice over the past 30 years.

Phil: A psychodrama practitioner called on to 'prove' psychodramatic practice might also point the way to the vast collection of written work collated in the psychodrama bibliography database (www.pdbib.org) initiated by James Sacks and continued by Michael Wieser.

Charmaine: Much of the psychodrama literature is practice-based case reports, where practitioners write up work with their own clients that they have experienced as interesting or particularly effective. These reports are an invaluable source of clinical wisdom, and form an essential part of our professional literature. They do not, however test in a scientific sense if

psychodrama 'works', because they do not rigorously examine the assertions that the author is making. Practitioner reports generally do not acknowledge the impact of the practitioner's bias on how the material is being presented, they do not consider if the change is significant or lasting, what other factors might have influenced the outcome, or if the example being reported is typical or idiosyncratic. Well designed empirical research attempts to account for the impact of these various factors, and is therefore regarded more highly as giving a fuller account of the efficacy of a particular intervention.

Phil: Some practitioners are comfortable that positive therapeutic impacts occur and do not seek the extra work of arranging pre- and post-session measurements and follow up inquiries. The call to research on efficacy has been perceived as relating to external ideas of authority, as submitting to a safety orientation in our culture. A trainee clinical psychologist interested in psychodrama training was warned not to use any method unless there was empirical evidence for it. In another case, the agency had already pre-determined they wanted an approach which could be delivered with little training. Psychodramatists would be prudent not to get involved in such setups or get involved in making descriptions to suit others when they aren't really interested. Many have been okay with our size and see no need to have external approval or even credibility. Perhaps they have also had the good planning and fortune to be able to obtain work and earn a living while sustaining this independent view.

Charmaine: I know for myself that I have no interest in gathering information for the sake of justifying the work I do. What I am interested in is being able to investigate more fully what is happening for a protagonist or group during psychodrama that is therapeutically helpful. Then I want to be able to communicate my findings with the wider community, to contribute to building an understanding of the process of therapeutic change and what makes good therapeutic practice. I have a particular bias that psychodrama theory and practice has an enormous amount to contribute to the world, and that the world will be a better place if psychodramatists are making that contribution. Research is one area in which there is great scope for us to make a contribution.

If we are going to build a research culture within psychodrama, I would envisage it emerging out of a creative perspective, pursuing questions we are interested in (different people, different questions of course), open to discovering something new. We can also relate to the wider community by contributing to some of the topical conversations of our times; for

example, conversations about the types of processes that promote healthy functioning in individual, family, community and organizational life, and about the most effective use of public resources. Psychodramatists have a lot to contribute to these conversations, and empirical research is one vehicle through which we can make this contribution.

Of course many practitioners will never be oriented to research. Let's hope that they will continue to experiment with their application of the psychodramatic method, reflect on their experiences with their peers and clients and share their insights through writing. Research is a slow process and new developments are actually led by practitioners, not researchers. Nevertheless, there is a fine tuning and deepening of understanding that can happen when practitioners and researchers get together.

Phil: There are a number of interesting things here. An additional reason why existing outcome studies are weak is that there are differences in practice. What is called psychodrama is different between regions, practitioners, and over time. What is meant by producing the script of a protagonist differs. What is considered mirroring, doubling, and role reversal differs amongst practitioners. Perhaps, we have to develop operational definitions of our key methods and techniques before rigorous research can be claimed. Lynette Clayton's (1977) work in developing a rating scale for role warm-up is an example of a research approach to gaining precision.

Charmaine: In order to develop a scale that is measuring the construct that the researcher is interested in, it is usual to involve people who are familiar with the construct in working out what the key features of the scale might be. There are further steps that are taken subsequently – largely to do with testing the instrument out in different circumstances or with different groups of people - to strengthen the validity (i.e. that the instrument is measuring what it says it is measuring) and reliability (i.e. consistency) of the scale. It would be wonderful if there was more development of instruments that suit the research that psychodramatists want to do. For example, Lynette Clayton's role warm-up scale, and the role relationship instrument¹ developed by Peter Parkinson, could be investigated further, to establish their credentials as research instruments. There are undoubtedly many other examples of sociometric measures that could be applied to good effect. To develop robust instruments we have to become

¹ This computer-based system is currently being upgraded for use on the internet. Contact Peter for further information: peter@mentor.co.nz

precise about what we are talking about when we use psychodramatic terms. Additionally, as Kipper and Hundal (2005) found when they constructed a measure of spontaneity, the results may challenge some of our preconceived ideas and require further development of underlying theory.

Phil: Some would consider the psychodrama method and process itself a 'robust research design' for the science of human relations. The laboratory in which all dynamics in human interaction and behaviour can be experimented within their ecological truth, the part examined in the context of the whole and the whole perceived from the perspectives of the parts. In this way, practitioners can be considered researchers. In this spirit, I examined the scientific validity of the role test (Carter, 2013). Part of a psychodramatic session was formulated as an experiment. The psychodramatist posed a hypothesis that certain



functioning that been achieved as a result of a therapeutic intervention. A psychodramatic role test was devised to test that hypothesis. This instance of a role test was then used to reflect on and examine the 'science' of the role test. The role test was found to be scientific in that: a hypothesis is submitted to its greatest challenge; ecological validity is approached by seeking to have all significant factors in their actual dynamics; all factors can be arranged in different configurations. Limitations from a scientific perspective were: replication is not possible, generalizability is limited, dependent and independent variables are ill-defined, and claims to causality are debatable. The article may offer ideas on how therapists could scrutinize the methods within their own practice as to scientific worthiness and not solely rely on external ideas of evidence and science.

Charmaine: Yes, as practitioners we are constantly experimenting and noticing the impact of our interventions on the protagonist and the group, and encouraging psychodrama participants to do the same. Practice-based research begins with this lived experience of the protagonist, group and director, and then opens that experience up to be examined from a range of different perspectives. The role test that you have written about could

be a good example of this. Role tests are a common feature of psychodramatic enactments – sometimes used intentionally and sometimes arising serendipitously. I would conceptualise the role test as a measure of in-session change – part of a research methodology but not the whole picture. To develop this further as an element of a robust research design, there are a number of areas we might consider. For example, how do we know that the protagonist has successfully met the role test? Can we identify the elements of a successful role test in such a way that adequately trained observers would agree with this assessment? How do we know that the person didn't already have this role well-established in their repertoire before the psychodrama enactment? – after all, they may have just needed time to warm-up to a familiar way of functioning. Intuitively, we may have the answers to these questions – a good research design will map out this territory so that observations of the protagonist's functioning in the role test sits within the context of their fuller experience. Of course another question that I think would be well worth investigating is, what is the relationship between a successful role-test (i.e. in-session change) and changes that occur after the protagonist leaves the group and goes back into their life (post-intervention change)?

Phil: As you outlined in your paper (McVea, 2004), *It's not enough just to say it works*, proving efficacy by itself is not satisfying. Positive effects have been shown for almost any intervention. Simply sitting with a person creates a positive effect. Other studies have identified factors in positive outcome in therapy and found the technique and therapeutic model to be a minor factor; for example, Assay & Lambert (1999) gave 15% to that, 40% for client variables, 14% to expectancy and placebo, and 30% to the therapeutic relationship. You encourage us to consider process-outcome studies, to use scientific-based research to build understanding and precision in our methods. You outline 5 approaches in the paper. In McVea (2007) you give an excellent example of one approach. It would be very useful and worthwhile if a group of us can take this type of approach up and build both our knowledge and our credibility. As part of this, I imagine work is being done on how to deliver and make assessable research instruments to practitioners in such a way that they could use them in their practice. I am interested to hear of any news in this front. I imagine that a simple pre- and post-session instrument such as the two you outline, plus an efficient follow up are possible. What are the opportunities and hindrances you have been experiencing in this area? What education is required? Training?

Charmaine: I think this is something we could do quite simply. Basically it would require a few practitioners who are running psychodrama groups and who are willing to be involved, and one or two researchers who manage the technical aspects of bringing the research together. These groups may overlap, but it is not essential for all practitioners to be researchers or vice-versa. One of the roles that the researchers would undertake would be to prepare an ethics application that would be submitted through a university ethics committee. A number of AANZPA members have links to universities, and could facilitate this aspect. Perhaps the greatest challenge that I have encountered, is the concern that gathering data will somehow interfere with the warm-up of the group. What I have found is that when group members understand the rationale for collecting information, they tend to be willing to participate and feel pleased to be contributing to the advancement of the work. Group members are often keen to participate in interviews before and after the psychodrama group, and gain a lot personally through the process of reflection.

Phil: Without a strong motivation, I don't see anyone organising a group of practitioners and researchers like this. Is there a simpler way practitioners could generate something that would have enough scientific worth? Could we offer a pre- and post-session questionnaire. There are very short measures that have been shown to correlate with longer methods and instruments. For example the Session Rating Scale of Duncan (2003) has a handful of questions that have been shown to show correlation with efficacy. Could it be done for a group over a number of sessions, no follow-up interview? Ethics and safety could be done effectively without necessarily involving a university ethics committee. Actually the common approach of these committees can be limited or even misdirected in that they tend to assume participants can be fully informed and give consent before the data collection. Aspects of this are described by David Larsen (2014) in his new psychodrama thesis "I Don't No: Consent in psychodramatic dyadic therapy when the protagonist's conserved coping role system is one of compliance."

Let's say simple instrument outcome research was done by half a dozen people. Would that be useful?

Charmaine: There are a number of budding researchers in AAANZPA who might take up this challenge. I know of at least one collaborative research project involving AANZPA members (a researcher and a practitioner) currently under way, so this type of project is definitely feasible. On the

other hand, yes, practitioners can collect their own outcome data as a standard part of their practice. There are a number of questionnaires that have been developed primarily for the purpose of measuring therapeutic change – for example Michael Lambert’s Outcome Questionnaire (OQ-45), Scott Miller’s Outcome and Session Rating Scales (ORS & SRS) and the University of New South Wales’ Depression-Anxiety-Stress-Scale (DASS). This type of data collection has become standard practice in many counselling agencies, influenced largely by the work of people like Michael Lambert and Scott Miller, who have shown that early feedback about client progress can lead to better therapeutic outcomes. Some agencies use this data to support the work that they do – but it is general support for work of the practitioners within that agency, not for a particular therapeutic approach. If AANZPA members gathered this information it might tell us that this group of practitioners, who are psychodrama trained, are getting positive outcomes with their clients. To be able to draw more compelling conclusions about the efficacy of psychodrama, other information needs to be considered.

The question of ethical clearance is probably worthy of another conversation at a later time. Briefly for now - ethical clearance ensures that the research meets community standards when working with people who may be vulnerable, and that we have established processes for handling sensitive information. This goes beyond our normal ethical practice, because the intention of research is to publish the results in a public forum, where the participants in the research usually have little say in where or how the information is used. It is now common practice for research journals to require prospective authors to have ethical clearance before they will publish empirical research. So, if we can set up ethical clearance at the outset, we ensure that we have thought through the implications of the research for the participants, and we have much more capacity to get our findings out into the world.

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