Review Paper:
The Effects of Psychodrama on the Health of Adolescent Girls: A Systematic Review

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ABSTRACT

Background: During the growth process, young adults are often exposed to and involved in a number of risky behaviors which can have permanent social and health-related consequences. Moreover in clinical practice with adolescents, they frequently miss to comply with a therapeutic program. In this regard, designing proper interventions for adolescent behaviors is necessary. Psychodrama is a kind of non-scripted theater often used as a psychotherapy. The purpose of this review is to determine the effect of psychodrama on the health of adolescent girls.

Methods: Resources were searched in the databases of Scopus, Ovid, Science Direct, PubMed, Web of Science, IranMedex, and SID, with keywords of “psychodrama”, “adolescence”, “teenager”, “health”, and “girls”. Both English and Persian resources without time limitation were reviewed.

Results: In total, 1840 relevant studies were found. By respecting inclusion criteria, 8 interventional studies were selected to be included in this review. In these studies, some of the effects of psychodrama, such as improving anxiety, depression, oppositional deviant disorder, hyperactivity, frustration, emotional regulation, aggression, conflict resolution skills, forgiveness, self-esteem, and communication skills were determined.

Conclusion: The study results indicate improvement of some topics of mental or social health of the adolescent girls. It is suggested that other topics of mental and social health be investigated and more valid studies be designed on the effects of psychodrama on the mental and social and physical health of adolescent girls.

Keywords:
Psychodrama, Adolescent, Girls, Health

1. Background

dolescence is an intermediate stage of mental and physical human development occurring between puberty and adulthood.

Important changes introduced at all levels during adolescence include biological, psychological, and maturity changes (Diamantopoulou & Verhulst 2011). In the adolescent development, youth are often exposed to or involved in a number of risky behaviors which can have
permanent social and health-related consequences (Gul
tone & Moore 2000).

Unfortunately in clinical practice with adolescents, they
disorderly do not comply with a therapeutic pro-
gram. This compliance refers to “the level to which a
patient’s behavior agrees with the clinical prescription
in terms of following diets, taking drugs, or perform-
ing other lifestyle changes.” Given the range and im-
portance of adolescent’s noncompliance, extensive
research has conducted to clarify its measurement, rec-
ognition, and determinants (Friedman & Litt 1987). In
this regard, development of specific interventions for
adolescent behaviors seems necessary (Diamantopou-
lou & Verhulst 2011).

In the last decade, the study of feelings and their sig-
nificance in behavior have gained much interest among
researchers (Llorca, Malonda & Samper 2017). Recent-
ly, the psychological and social aspects of the clients’
noncompliance have received much attention, too. Inves-
tigations of intervention methods based on established
psychological values have yielded encouraging results.
Lots of these techniques are applicable in clinical set-
tings (Friedman & Litt 1987). One of these interven-
tional methods is psychodrama (Thabet et al. 2009).

Psychodrama is a kind of non-scripted theater often
used as a method of psychotherapy. In psychodrama,
the clients use unplanned performance, dramatic self-
presentation or role playing to understand their lives and
gain insight into them (Pio-Abreu & Villares-Oliveira
2007). However, conducting psychodrama requires ex-
tensive training (Thabet et al. 2009). Only, a licensed
psychodramatist can direct a psychodrama therapy
group. In this procedure, the real-life is reenacted and
the past situations or inner mental processes are acted
out in the present time. Then the individuals or groups
evaluate their behaviors and deeply understand specific
situations in their lives. Psychodrama is an innovative
method to explore and solve personal problems.

Psychodrama is most often used in a group setting; and
the group members serve as therapeutic agents for oth-
ers. Thus psychodrama is an individual psychotherapy
performed in a group, and it is not a kind of group ther-
apy. It may also be utilized in a clinical or community-
In general, psychodrama is a technique that helps the indi-
viduals resuscitate the events in their lives instead of just
talking about their social and psychological problems
(Thabet et al. 2009). Psychodrama has proven benefi-
tial with adolescents and even more advantageous with
adolescents than adults (Mackay, Gold & Gold 1987).

One of the most important duties of nurses and mid-
wives is health education to adolescent girls. In this
regard, psychodrama can be conducted by them. The
purpose of this review is to determine the effect of psy-
chodrama on the health of adolescent girls.

2. Materials and Methods

This study is a systematic review assessed the studies
conducted on the effects of psychodrama, as an interven-
tion, on the health of the adolescence girls. The review
was prepared according to PRISMA-P (the Preferred
Reporting Items for Systematic review and Meta-Analy-
sis Protocols) used as a guide for authors to present their
systematic review (Shamseer et al. 2015).

Eligibility criteria

The inclusion criteria were determined according to
PICOS (P: Population, I: Interventions, C: Comparisons,
O: Outcomes, and S: Study design) (Centre for Reviews
and Dissemination 2009). The selected articles were
those that their study participants were the girls aged
between 12 and 18 years and psychodrama were deter-
mined as an intervention program for improving their
health. Moreover only the interventional studies such as
randomized controlled trials, quasi-experimental, and
before-after studies were selected. Also the resources
published in English and Farsi with full text were se-
lected as high quality studies.

Search strategy and databases

Resources were searched in the international databases
including Scopus, Ovid, Science Direct, PubMed, Web
of Science; and in the national databases such as Iran-
Medex and SID; with English keywords as “psychodra-
ma”, “adolescence”, “teenager”, “health and girls”, and
equivalent Farsi keywords. Databases were explored on
March 27, 2018, without time limitation.

After searching in the databases, the titles and abstracts
of the studies were analyzed based on PICOS criteria,
then the selected resources were assessed for method-
ological validity. All of the processes were performed
by two authors. For this purpose, a checklist including
the information of this study, including study title, first
author (y), study type, sample size, intervention and out-
comes was developed.
3. Results

A total of 1840 studies (Scopus 430, Ovid 210, Science Direct 125, PubMed 12, Web of Science 17, IranMedex 49, and SID 98) were found. Finally 8 studies were selected to be included in this review. The flowchart of this process is presented in PRISMA flow diagram (Figure 1).

Table 1 presents the characteristics of these 8 studies conducted on the effect of psychodrama on the health of adolescent girls. The selected studies were published from 2009 to 2016. Five of these studies were quasi-experimental with pre-test, post-test design and control group; two studies were randomized controlled trial and one was a before-after study without control group. The sample size of these studies were between 18 and 84 individuals. In five studies, all of the participants were girls and in three, both boys and girls were included. The psychodrama as the intervention lasted 10-14 sessions, each session for 1.5-2 h, one or two session per week. Also in each study, the process of psychodrama had been explained with specific program.

Also the outcomes of psychodrama interventions in these 8 studies included reducing anxiety, depression, physical complaints, hyperactivity, aggression, oppositional deviant disorder, and frustration with obstacle dominance or survival need. It also included increasing emotional regulation, conflict resolution skills, conduct disorder, forgiveness, family and social and physical self-esteem and relation skills. However, it did not cause any significant changes in self-defense, emotional transparency, physical and verbal aggression (As the subscales of aggression) and educational self-esteem (As a subscale of self-esteem).

In general, the final selected studies had significant shortcomings in terms of research methodology such
Table 1. Characteristics of the studies conducted on the effect of psychodrama on the health of adolescent girls

<table>
<thead>
<tr>
<th>No.</th>
<th>Study Title</th>
<th>First Author (Year)</th>
<th>Study Type</th>
<th>Sample Size</th>
<th>Intervention</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Efficacy of psychodrama techniques in internalizing symptoms (anxiety, depression and somatization) among adolescent girls victims of bullying in Kermanshah City</td>
<td>Jamshidi Nazar et al. (2014)</td>
<td>Quasi-experimental with pre-test, post-test and control group</td>
<td>Thirty adolescent girls who achieved higher scores in the bully/victim questionnaire, 15 girls in experimental and 15 girls in control group</td>
<td>Eight group psychodrama sessions (1.5 hours-two times per week)</td>
<td>Reducing the internalizing symptoms and its sub-scales including anxiety-depression, isolation-depression, and physical complaints</td>
</tr>
<tr>
<td>2</td>
<td>Effectiveness of school based psychodrama in Improving mental health of Palestinian adolescents</td>
<td>Thabet et al. (2009)</td>
<td>Interventional study with pre-test, post-test and without control group</td>
<td>Eighty-four school adolescents (56 boys and 28 girls) aged 12-17 years from three schools selected randomly</td>
<td>Carbonell and Parteleno-Berehmi Psychodrama model (1999), focused on giving adolescent the opportunity to cope with trauma</td>
<td>Decreasing the mental health including Oppositional deviant disorder, hyperactivity, overanxious, separation anxiety and depression; and increasing conduct disorder</td>
</tr>
<tr>
<td>3</td>
<td>Studying the effectiveness of psychodrama approach on reducing frustration and increasing emotional regulation of street children</td>
<td>Gerama and Dehghan (2016)</td>
<td>An interventional study with randomly assigned into two groups (control and experimental)</td>
<td>Twenty-two street children, 14-18 years old in Mehr Karaj House</td>
<td>Group counseling with psychodrama approach for 10 sessions (2 hours weekly)</td>
<td>Reducing frustration in factors of obstacle dominance and survival need, but not in factor of self-defense; and increasing the emotional regulation in terms of reception, objectives, momentum, knowledge and strategies, but not in terms of emotional transparency</td>
</tr>
<tr>
<td>4</td>
<td>A comparative investigation of the effects of cognitive-behavioral group practices and psychodrama on adolescent aggression</td>
<td>Karatas and Golcakana (2009)</td>
<td>A quasi-experimental, with two experiments (cognitive-behavioral and psychodrama) and one control group</td>
<td>Thirty-six adolescent students who had the highest aggression levels according to The Aggression Scale (Buss &amp; Warren, 2000) were randomly divided into three equal groups, in each group 12 adolescents, 6 girls and 6 boys</td>
<td>Group-based psychodrama techniques were applied in 14 sessions</td>
<td>A positive effect on total aggression score: anger, hostility, and indirect aggression scores, but had no effect on physical and verbal aggression scores</td>
</tr>
<tr>
<td>5</td>
<td>Investigating the effects of group practice performed using psychodrama techniques on adolescents’ conflict resolution skills</td>
<td>Karatas (2011)</td>
<td>a quasi-experimental research with control group</td>
<td>Twenty-four high school adolescent students and in each group 12 students, 6 boys and 6 girls</td>
<td>Psychodrama was performed once a week for 10 weeks, each session lasted for 90-120 minutes</td>
<td>Favorable effects on adolescents’ conflict resolution skills. The follow-up scores in 12-week after intervention was compared with immediately after intervention did not find difference in conflict resolution skills and sub-dimension; so it seems that the effect lasts for a long time.</td>
</tr>
<tr>
<td>6</td>
<td>The effect of psychodrama on self-esteem and forgiveness of female adolescents with divorced parents</td>
<td>Gorji et al. (2011)</td>
<td>A pre-test, post-test with experimental and control groups and follow-up design</td>
<td>Twenty-four adolescent girls, aged 14-17 years, with divorced parents and lived with their mother, were divided into experimental and control group (12 girls in each group)</td>
<td>Ten two-hour sessions of psychodrama, twice a week, with programed designs for each session according to the protagonist, as the main character in each session drama</td>
<td>The significant effect on forgiveness and self-esteem (family, social, physical self-esteem but it had no impact on the educational self-esteem)</td>
</tr>
</tbody>
</table>
as study design, sampling method, randomization, and sample size. For example, the sampling method of five studies were not based on randomization (Jamshidi Nazar et al. 2014; Karatas 2011; Gorji et al. 2011; Khoubani, Zadehmohammadi & Jarareh 2014) and one study did not have a control group (Thabet et al. 2009). Also the sample size in most studies was small. Except Thabet et al. (2009) study which lacked a control group and the sample size was 84; in the rest of the studies with control group, the sample size in the intervention group was 9-15, and the mean sample size in intervention groups was approximately 12. However, due to the small number of interventional studies in this subject and no access to the full text of older resources, we tried to select studies with the least research pitfalls.

4. Discussion

To determine the effect of psychodrama on the health of adolescent girls in this systematic review, 8 studies were selected according to the inclusion criteria. All studies had been conducted in the recent decade. Although the older resources existed on this topic, their full texts were not available. However, the selected studies had small sample size with some pitfalls in methodology; so the studies with the fewest research errors were selected. Despite the lack of recent interventional studies on psychodrama in the world, a significant number of interventional studies about psychodrama have been conducted in Iran.

Regarding the few number of interventional studies on psychodrama in the world in recent decade compared to the past decade, Karatas (2011) believed that psychodrama was very influential in the early years of the 20th century. Then it dominated the group psychotherapy but its influence in the field of group psychotherapy diminished in the United States in consequent years. On the other hand, the psychodrama popularity soared up in South America, Europe, the Far East and elsewhere. Some suggested that the observed decline in the popularity of psychodrama in North America is due to the poor scientific validity regarding the interventional research on psychodrama (Karatas 2011).

According to our 8 selected study results, psychodrama as an intervention produced some outcomes. These outcomes comprised reducing the internalizing symptoms such as anxiety-depression, isolation-depression and physical complaints (Jamshidi Nazar et al. 2014); decreasing the oppositional deviant disorder, hyperactivity, overanxious, separation anxiety and depression; increasing conduct of adolescents in time of war and conflicts (the participants of this study were Palestinians that live with war) (Thabet et al. 2009); reducing frustration (in term of obstacle dominance and survival need); and increasing the emotional regulation (in terms of reception,
objectives, momentum, knowledge and strategies) of street children. However, psychodrama had no effect on self-defense (as a subscale of reducing frustration) and emotional transparency (as a subscale of emotional regulation) (Geram & Dehghan 2016).

It positively affected total aggression score and its subscales, including anger, hostility, and indirect aggression scores of aggressive adolescents, but had no effect on physical and verbal aggression (Karatas & Gokcakana 2009). It improved the conflict resolution skills of the adolescents with low problem-solving skill (Karatas, 2011), by having significant effects on forgiveness and self-esteem (family, social and physical self-esteem). But it had no impact on the educational self-esteem of adolescent girls with divorced parents who lived with their mothers (Gorji et al. 2011).

Finally, it decreased total aggression and its subscales (physical aggression, oral aggression, anger and hostility) in adolescent girls with high aggression level (Zandipoor 2010) and improved their relation skills (Khoubani, Zadehmohammadi & Jarareh 2014). It seems that lack of psychodrama impact on some subscales in the above studies is due to the small sample size.

In general, the 8 selected study results indicate that outcomes of psychodrama were mostly about improving the mental and or social health of adolescent girls, including positive effects on anxiety, depression, oppositional deviant disorder, hyperactivity, frustration, emotional regulation, aggression, conflict resolution skills, forgiveness, self-esteem, and relation skills. However, the number of studies on the impact of psychodrama on physical health (not mental/social health) of adolescent girls is limited.

Some documents reported that psychodrama is effective on improving the physical signs of some diseases. In this regard, Bektas (2006) reported a reduction of glycosylated hemoglobin level in the diabetic children after psychodrama, though this could not be considered a direct result of psychodrama. In this study, the diabetic children might have benefited indirectly through changes in their parents’ behavior and better communication within them. Also the role that psychodrama in the treatment and understanding of asthma is argued according to medical knowledge and clinical experience by some researchers (Parkinson 1997). Using the psychodrama has positively affected blood pressure and heart disease as well (Schalling 1973). Of course, the effect of psychodrama on these diseases is not a direct one. In fact, the psychological or mental effects of psychodrama will improve the signs and symptoms of these diseases (Bektas 2006). However according to our search in databases, we did not find any study showing the impact of psychodrama on the signs and symptoms of adolescent girls’ diseases.

As an adolescent’s identity develops, he or she compares himself or herself to healthy, active peers, and adults. The limitations produced by preventive regimen or medication may make the adolescent feel defective or different. Therefore, the adolescent may reject to follow the prescriptions given during this period. Then, his or her physical health may be endangered (Friedman & Litt 1987). The appealing nature of psychodrama is attributed to its powerful influence as seen in clinical practice (Karatas 2011). It is suggested that further studies be conducted on the effects of psychodrama on the physical health of adolescent girls.

Also the existing studies about the effects of psychodrama are limited to the number of mental and or social health issues. Therefore, it is suggested that some studies be conducted on other topics, such as lack of coping mechanisms (Llorca, Malonda & Samper 2017), smoking control programs (Carolyn 2009), use of drug substances (Karataş and Gürarslan, 2017), and body dissatisfaction (Thompson et al. 1999). The study of mental health including the feelings and emotions and also their influences in the people’s behavior has gained popularity among researchers in the last decades (Llorca, Malonda & Samper 2017).

Also we recommend that valid studies be conducted on the effects of psychodrama on the mental and or social health of adolescent girls. Considering the quality of the studies, there is not enough evidence supporting the importance of psychodrama methods in mental and or social health of the adolescent girls. It is, therefore, necessary to study psychodrama more deeply in future studies with larger sample size.

According to this systematic review, psychodrama can improve some mental or social health problems of adolescent girls. These positive effects included decrease in anxiety, depression, oppositional deviant disorder, hyperactivity, aggression, frustration, forgiveness, and increase in the emotional regulation, conflict resolution skills, self-esteem, and relation skills. However, there was not any study on the impact of psychodrama on the signs and symptoms of adolescent girls’ physical diseases. Therefore it is suggested that further studies be conducted on the effects of psychodrama on the physical health of adolescent girls. Also we suggest that some studies be conducted on the effects of psychodrama on
the other topics of mental or social health such as lack of coping mechanisms in adolescent girls. Also we recommend that more valid studies be designed about the effects of psychodrama on the mental, social, or physical health of adolescent girls.

There were some limitations in this systematic review. Only the studies published in English or Persian language were included in the review. In addition the full text of some articles were not available. Also some older related resources exist that we did not manage to access them.

Ethical Considerations

Compliance with ethical guidelines

This paper was approved by Ethics Committee of Iran University of Medical Sciences (IR.IUMS.REC 1396.32694).

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Conflict of interest

The authors declared no conflict of interest.

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