

PSYCHOTHERAPY RESEARCH IN THE FORM OF MASTER THESES -

An overview of topics, methods and frequency distributions of the master theses from the first 13 years (2006 - February 2019) of university courses in psychodrama psychotherapy at the Austrian Association for Group Psychotherapy and Group Dynamics (ÖAGG)/The Danube University Krems (DUK).

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Prolog

The department psychodrama has been a part of the ÖAGG for over 40 years. It was founded and institutionally established at the ÖAGG in 1976. The first training regulations were drawn up in 1978 and since then training groups have taken place on an ongoing basis. At that time, the training regulations did not differentiate between the use of psychodrama in the area of socio-pedagogy or counselling and in the psychotherapeutic fields. A clear separation between psychotherapy and social pedagogy or counselling was then introduced by the Austrian Psychotherapy Act in 1991. In 1993, the Austrian Federal Ministry of Health recognised the department psychodrama as a training institution for psychodrama psychotherapy. The first psychotherapy training group which was set up according to the new curriculum began in Vienna in 1995. Since then, there have been started one or two training groups with 12 to 14 participants each year, in Vienna as well as in some federal provinces.

Since 2005 there has been a cooperation between the Psychodrama Department/ÖAGG and the Danube University Krems, which now even facilitates a university degrees in psychodrama psychotherapy: Master students receive the title "Master of Science in Psychotherapy" upon graduating. Students without a high school diploma can acquire the title of "Academic Psychotherapist". Since university courses in psychodrama began at the DUK in 2005, 24 specialised training courses for psychodrama psychotherapy have started throughout Austria: In addition, 7 upgrading courses have been offered since 2006, which enabled non-academically trained psychodrama psychotherapists to obtain a master's degree in psychotherapy.

Since then, 146 students have finished their academic therapy training. Currently there are about 200 students actively studying in the specialised training courses and some more in the upgrade course.

To get a master's degree, a master thesis must be written. Master theses are scientific texts which contain 18.000 – 30.000 words, which is 80 - 130 A4 pages. They can be written individually or also as a couple. Writing a master thesis in psychotherapy requires considering the scientific principles and applying the scientific methods of the psychotherapy research. Psychodrama Master theses must be based on theoretical or practice-orientated topics in the field of psychodrama psychotherapy. Writing a master thesis requires the combination of psychodrama therapeutic practice with psychodrama theoretical concepts. Students of our university courses learn to think psychodramatically, to act psychodrama therapeutic and to scientifically investigate their or foreign practice. In addition to practice-oriented therapeutic training, up-to-date literature on psychodrama and scientific

work are explored and taught in several successive seminars. Since psychodrama in Austria is classified as one of the humanistic types of therapy, all master theses are based on the Moreno's classical approach regarding role theory or current developments in humanistic psychodrama.

There is currently a total of 139 master theses written and approved in psychodrama. The following is a presentation of the current status of all master theses in psychodrama and an overview of the client groups and therapy settings researched, namely the research topics and research methods. If you have interest in one of the master theses, then you could download one yourself from the online catalogue from the Danube University's library:

https://search-duk.obvsg.at/primo_library/libweb/action/search.do?vid=DUK

A. CATEGORISING THE MASTER THESES ACCORDING TO THEMATIC FOCUSⁱ

Depending on the thematic focus, the current collection of master theses can be divided into 2 blocks: one block deals with theoretical topics and the other block deals with practice-related topics.

<i>Total number of master theses</i>	139	100%
Theoretical Topics	7	5%
Practice-related Topics	132	95%

1. MASTER THESIS ON THEORETICAL TOPICS

The following topics were investigated with a theoretical focus:

- "Regeneration drama" (M. Schönherr, 2008)
- "Encounter scenes" according to Stern, Lorenzer from the perspective of psychodrama (R. Bulian (2009))
- The phenomena of "tele" and "encounter" from a scientific and psychodramatic perspective (S. Franke, 2011)
- The phenomenon of "hearing voices" from the perspective of psychodramatic development theory (K. Karlhuber 2011)
- Burnout from a psychodramatic perspective (Tornow, 2013)
- Biologically-entrenched roles and satisfying interaction between babies and their parents (M. Stelzig, 2014)
- The role of the father in the treatment of male patients in the works of Moreno (T. Sageder, 2015)

As one can see by the numbers in the table predominantly practice-related master theses were written. This is due to the requirements for final theses in the psychotherapy training: Students of the specialised training course in psychodrama psychotherapy must write a practice-based master thesis to prove that they are able to explain psychodrama practice theoretically. Graduates who have completed the

upgrade process and who are already psychodrama therapists were allowed to complete with theoretical works.

2. MASTER THESES ON PRACTICE-RELATED TOPICS:

The majority of all the master theses, 132 out of 139, deal with questions which focus on the practice of psychodrama psychotherapy.

After the focus of the research question, this master theses can be divided into the following groups:

<i>Practice-orientated master theses</i>	132
Questions about certain institutional contexts (stages)	9
Questions about special settings	5
Method-orientated questions	35
Questions about special groups of clients	5
Disorder-specific questions	41
Questions about special therapy topics	37

As you can see, most of the practice-related master theses deal with disorder-related questions (41), questions concerning therapy topics (37) or questions relating to therapeutic methodology (35).

a) 9 master's theses investigate questions regarding certain institutional contexts: The following "stages" of psychodrama have been explored:

The School Context: 2

- One master thesis explores how psychodrama individual and group therapy is implemented at school (G. Fercher, 2012).
- A second master thesis goes into extending roles in psychodrama group therapy for primary school children (E. Grosinger-Spiss, 2013):

The context of work rehabilitation: 1

- One master thesis explores individual psychodrama therapy in the context of work rehabilitation (C. Bauer, 2012):

General medical hospital treatment: 2

- One master thesis focuses on the use of intermediary objects in preparing children for operations (H. Houdek, 2012)
- Another researches the therapeutic care for parents in a children's intensive care unit (S. Feuerstein, 2009).

Inpatient psychotherapeutic treatment: 4

- One master thesis focuses on gender-specific work on establishing self-help resources in a child psychiatric ward (U. Apolloner, 2010)
- Another master thesis describes the general conditions for inpatient group therapy (K. Scharfetter, 2013)

- A third master thesis looks at the effect of the therapeutic environment of an inpatient setting on the individual therapy process (H. Kronberger, 2014)
- The newest master thesis in this group focuses on the requirements for succeeding of psychodrama-grouptherapy in an inpatient setting from the perspective of the therapist (G. Licka-Beinhofer, 2018)

b) 5 master theses deal with setting-specific questions:

Following therapy settings were explored:

- The integration of the social atom in inpatient therapy (H. Stollewerk, 2007):
- Working with the real social atom in outreach family therapy (C. Hödl & I. Klausegger, 2016):
- The involvement of parents in outpatient group therapy for children (F. Lechner, 2010):
- The possibilities of psychodramatic couples' therapy in conflict and crisis management (K. Kölbl-Fischer, 2011):
- A gender-homogeneous group of girls (R. Beer, 2013):

c) 35 master theses deal with method-related questions:

Following types or dimensions of psychodrama methodology were researched:

Special forms of intervention: 5

- A theatre project as a primary form of addiction prevention for children (Fellöcker, 2008):
- Follow-up training courses for alcohol-dependent drivers as a secondary prevention project (E. Breuß-Purtscher, 2013)
- The prevention of sexual violence against children in psychodrama group (C. Klimt, 2013)
- Crisis intervention/grief counselling for children/adolescents (A. Nindler, 2013)
- Work on a change of perspective in mediation (A. Wagner, 2016)

Special diagnostic strategy/approach, namely: 1

- The inner stage as an instrument for the development of a diagnosis of the structural level (C. Mosich, 2015)

Psychodramatic (group) arrangements: 3

- Psychodramatic constellation work (R. Riepl, 2011)
- Bible drama (B. Pfaffenwimmer, 2011)
- Therapeutic 'Stehgreif' (improvisational) theatre (E. Schöpfer, 2013)

Special methodological strategies, psychodramatic arrangements or techniques: 10

- Warming-up as a process, phase and technique in groups (M. Canazei, 2007)
- Self-created hero figures as intermediate objects in the adolescent therapy of a boy (C. Zauner, 2010)
- The technique of mirroring (A. Amann, 2013)
- The arrangement of future projection (R. Kasper, 2013)
- The social atom in different phases of the therapy process (S. Weigl, 2014)

- The technique of sharing in psychodrama in group therapy (I. Hupmann, 2014):
- "Timeline" - work for short-term psychodrama therapy in an inpatient setting (E. Hochleitner 2015)
- The somatic part of the warm-up phase in mandatory anti-violence training for young men (B. Kühbauer, 2016)
- Self-constructed intermediary objects in child and adolescent therapy (P. Zauner, 2016)
- Doubling in psychodrama therapy with children and their parents (C. Brach, 2016)

The shaping of therapeutic role and relationships in psychodrama therapy: 7

- The function of the therapeutic relationship in working with structurally impaired children (R. Hochgerner, 2006)
- The question of the therapist's physical involvement in children's psychodrama (E.K Heidegger, 2011)
- Possibilities for forming the group leader's direction when offering choices for the protagonist (K. Goger, 2016)
- Forming a therapeutic relationship with women who have experienced childhood sexual violence (E. Weigl, 2016)
- The fundamental therapeutic attitude specific to psychodrama (C. Beer, 2017)
- Significance of Moreno's Philosophy for Therapeutic Role Design (V. Fink, 2018)
- Role of auxiliary egos in psychodrama groups with children (M. Gutmann, 2018)

The inclusion of "external" methods/techniques within the framework of psychodrama therapy: 7

- One master thesis deals with using computer-transferred communication with regards to psychodramatic advice online (S. Spitzer-Prochazka, 2008)

2 master theses explore the use of external diagnostic techniques, namely:

- The use of action lists (T. Kasper, 2013)
- The compatibility of Operationalized Psychodynamic Diagnostics (OPD2) and psychodrama (E. Wanderer, 2014)

4 master's theses explore the integration of external therapeutic techniques in psychodrama therapy:

- Body therapy techniques (I. Lenz, 2013)
- Music as an intermediate object in psychodrama in individual therapy (M. Geiger, 2012)
- Musical instruments in psychodrama in group therapy (A. Hagenbichler, 2013)
- Film as an intermediary object (K. Heger, 2018)

1 master thesis investigates the inclusion of external theory models in psychodrama therapy, namely:

- Neurobiological concepts (L. Mayerhofer, 2014)

1 master thesis investigates certain therapy phenomena:

- The development of cohesion in a psychodrama annual group (B. Schrammel, 2018)

d) 5 master theses deal with client-specific questions, namely:

- The Principles of psychodramatic **child therapy** (H. Pruckner, 2006)
- The consideration of **cultural belonging** in the sense of inter-/transcultural psychodrama psychotherapy (T. Mundt-Smejda, 2015)
- The consideration of **gender** factors in psychodrama therapy (M. Helbich, 2017):
- Possibilities of empowerment in a **women**-specific psychodrama therapy group (H. Hofer, 2018)
- Psychodrama interventions in single therapy with **men** with the aim to promote their autonomy in relationships (P. Angleitner, 2018)

e) 41 master theses investigate disorder-specific questions:

Many master theses investigate psychodramatic therapy for a particular disease or disorder. As it is usual in Austria, mental illnesses and disorders are diagnosed and classified according to the ICD.

There are currently master theses for all ICD diagnostic groups, except for group F7: mental retardation.

There is one master thesis on the diagnostic group F0: Organic disorders:

- Research into psychodrama therapy for senile dementia (F 02) (B. Rotter, 2012)

5 master theses explore psychodrama therapy in F1 diagnoses: Mental and behavioural disorders due to psychoactive substance abuse:

- One master thesis researches the effect of social relationships on alcohol therapy (F10) (E. Grissenberger, 2014)
- Another one investigates the use of psychodrama in stopping smoking (F17). (B. Starzer-Eidenberger, 2013)
- A third one deals with the possibilities of group therapy for substance dependence and structural disorders (M. Ketscher & D. Mayrhofer, 2016).
- A further one explores the role development through addiction therapy in alcohol dependence (D. Boland-Skiera, 2018)
- A last one explores the interventions to develop motivation for alcohol abstinence (D. Mühlbacher, 2018)

2 master theses explore psychodrama therapy in F2 diagnoses: Schizophrenia, schizotypal and delusional disorders

- One master thesis investigates the use of intermediate objects in the treatment of schizophrenia (J. Kund, 2015)
- Another one explores the possibility of promoting self-awareness in people with ongoing paranoid schizophrenia through psychodrama therapy (G. Atzmüller, 2016).

There is 1 master thesis on F3: Mood disorders

- This master thesis sets the focus on self-help resources in psychodrama in inpatient therapy for depressive disorders (N. Schlager, 2017)

A total of 8 master theses deal with psychodrama therapy for F4 diagnoses: Neurotic, stress-related and somatoform disorders.

The following topics are dealt with:

- Short-term psychodrama therapy for the fear of flying (F40). (K. Chalupsky, 2012)
- Group therapy for social anxiety among children (F 93.2) and adolescents (F 40.1) (B. Schorn, 2012)
- The use of psychodrama therapy for anxiety disorders (F41). (K. Grimmer, 2007)
- Psychodrama therapy for panic attacks (F41.0) (I. Langer, 2012)
- Activating self-help resources for panic attacks in psychodrama in individual therapy (F41.0) (V. Krauskopf, 2016)
- Psychodrama in individual therapy for a child with occupied compulsive disorder (OCD, F42) (S. Bachler-Klein, 2010)
- Psychodrama in individual therapy for dissociative disorders (F44) for women (G. Kastner, 2011)
- Psychodrama in individual therapy for psychosomatic and somatoform disorders (F45) (I. Amon, 2011)

6 master theses deal with psychodrama therapy in F5 diagnoses: Behavioural syndromes associated with physiological disturbances and physical factors

The following topics are researched:

- The disorder model of/and psychodrama therapy for anorexia (F50.0) and bulimia (F50.2) (S. Kern, 2008)
- Psychodrama interventions for anorexia in individual therapy with regards to regulating emotions and experiencing connections (F50.0.) (S. Kössler, 2016)
- Group therapy for bulimia (F50.2) related to role theory (B. Etlinger, 2012)
- Group therapy for bulimia (F50.2) related to interventions (B. Haid, 2014)
- Group therapy for binge eating disorder (F50.9) (Interventions) (D. Feichtenschlager, 2015)
- Couple therapy for vaginismus (F52) (W. Hofer, 2013)

6 master theses explore psychodrama therapy in F6 diagnoses: Disorders in personality and behaviour:

- Psychodrama in individual therapy for Borderline personality disorder (F 60.31) (S. Hintermeier, 2008)

- Psychodrama in individual therapy for histrionic personality disorder (F60.4) (A. Pölzl, 2015)
- Dependent personality disorder (F60.7) and co-dependence from a psychodramatic point of view (C. Pichlhöfer, 2010):
- Psychodrama in individual therapy for narcissism and narcissistic personality disorder (F60.8) (D. Nowak-Schuh, 2013)
- Psychodrama therapy in dissocial personality disorder (F 60.2) (J. Ortner, 2017)
- Psychodrama Therapy with men with automatic gambling addiction. Connections and exit scenarios (S. Mohl, 2018)

3 master theses dealt with psychotherapy in developmental disorders (F8):

- Psychodrama in group therapy for adolescents with Asperger's syndrome (F84) (C. Pfohl, 2012)
- Psychodrama in individual therapy for children with Asperger's syndrome (Z. Kamhi Rath, 2016)
- Disorder-specific modifications of monodrama therapy for a child with Asperger's syndrome (S. Jernej, 2017)

6 master theses investigate psychodrama therapy for behavioural and emotional disorders beginning in childhood and adolescence (F9):

- ADHD (F90.0) - Children in the psychodrama group (M. Schatovich-Kiss, 2009):
- Offers in Perception and encounter in individual psychodrama therapy with children with ADHD (M. Hricova, 2018)
- "The aggressive child" (F91 and F92) in the psychodrama group (E. Sakrausky, 2013)
- Psychodrama in individual therapy for a girl with social anxiety disorder (F93.2) (H. Bader, 2011)
- Psychodrama for elective-mutism (F94.0) (G. Biegler-Vitek, 2011)
- Psychodrama in individual therapy for a child with nonorganic encopresis (98.1) (M. Legl-Bruckdorf, 2017)

In 3 master theses, psychodramatic therapy for structural disorders was investigated without reference to specific diagnoses:

- Treating patients with structural disorders with group therapy in an inpatient clinic (I. Grauf, 2010)
- Outpatient psychodrama group therapy for people with structural disorders (G. Trinkel, 2013)
- Structural interventions for structural role development in individual settings (P. Schäfermeier, 2018)

f) 37 master theses deal with specific therapy-relevant topics:

5 master theses focus on specific physical phenomena:

- Emotions in psychodrama in group therapy (E. Ehrlinger, 2011)
- Flow in psychodrama in individual therapy and/or accompanying yoga (M. Krautschneider, 2012)
- Processing grief in preschool-age children in the event of the loss of a sibling (E. Lindtner, 2016)
- Processing feelings of shame in psychodrama therapy (M. Heider, 2016)
- Therapeutic process design with basic suicidality (M. Harmer, 2018)

8 master theses research questions concerning personality (role) development:

- The importance of the development of As-if and the ability to play in children's Monodrama (E. Zahrl-Weis, 2012)
- Role development in a children's psychodrama group (C. Kühtreiber, 2012)
- The development of forming scenes in psychodrama individual adult therapy (M. Stuller, 2016)
- Structural personality development and social atoms in adolescent girls (day clinic) (A. Wagner, 2016)
- Promoting the ability to change perspective in individual psychodrama therapy for people with structural deficits (C. Schaschl, 2017)
- The identity development of adolescents in a psychodrama psychotherapeutic youth group and their identity development (D. Wagner, 2018)
- Interventions and techniques in individual settings to strengthen the personality development of patients with multiple sclerosis (S. Just, 2018)
- Role development in early childhood regulatory disorders (S. Kornsteiner, 2018)

4 master theses researched questions relating to relationship skills / forming relationships: The topics covered are:

- The construct of the "Helper Syndrome" from a Psychodramatic Perspective (R. Reinthaler, 2011)
- The topic complex of love-connection-partnership from a Psychodramatic Perspective (E. Brandstetter, 2013)
- Connecting to peers/friends in childhood (V. Dudde, 2016)
- Diagnosing and treating co-dependency (S. Kreckeis, 2017)

1 master thesis deals with a question relating to sexuality:

- Work with the sexual role in psychodrama in individual therapy (C. Hammer, 2016)

1 master thesis researches a question on (primary) family relationships/family topics, namely:

- Processing topics surrounding the father in monodrama (N. Wickert, 2016)

3 master theses deal with the questions on social belonging/integration:

- A way out of social isolation as part of psychodrama group therapy for the parents of hearing-impaired children. (S. Blachowsky, 2010)
- Coping with loneliness in psychodrama therapy (D. Trattnigg, 2011)
- Integrating migrant children into a children's psychodrama group (M. Mürzl, 2013)

3 master theses deal with questions on stress/burden/overburdening:

- The effects of parents overburdening their children on their well-being in adulthood. (H. Goditsch, 2007)
- The effectiveness of psychodrama individual therapy for the problem of burnout (I. Ressl, 2009)
- The effects of burnout on the social atom (S. Frank, 2014)

A total of 9 master theses focus on questions on trauma/trauma processing. The topics covered were:

- A group therapy concept for traumatised children (M. Wicher, 2007)
- Gender-specific processing of traumatic events in adulthood (H. Knapp, 2011)
- Sociodramatic encounter groups for family members of national-socialist perpetrators and victims (H. Gött, 2012)
- A psychodrama group of women with experience of violence. (K. Leitgeb 2013)
- Group cohesion in the inpatient therapy of traumatised patients (S. Neureiter-Penn, 2016)
- An encounter group of "German" and Slovenian-speaking Carinthians (S. Jelinek, 2016)
- Accompanying the separation of women from violent relationships (A. Eisterer, 2016)
- Structure-related, developmental interventions in psychodrama inpatient group therapy with complexly traumatised people (C. Ebner-Ehrenreich, 2017)
- Use of "Timeline" in groups with male Arab refugees (H. Pek, 2018)

3 master theses explore questions about physical diseases and limitations: The following topics were discussed:

- Considerations for barrier-free psychodrama for people with a disability (M. Bräuer, 2015)
- A psychodrama follow-up group for people with breast cancer (B. Schabata, 2015)
- Psychodrama in individual therapy for obesity (C. Wöran, 2016)

As you can see, the master theses on psychodrama deal with a wide range of topics. The master theses are very informative because they process the relevant literature for the topic. Furthermore, they are exciting because they provide insight into other people's activities in psychodrama therapy and, in part, also offer instructions for how to deal with certain situations.

B. CATEGORISING THE MASTER THESES ACCORDING TO RESEARCH DESIGNS AND METHODS

What approaches were used when conducting research? Which research designs were used? Which research methods were used?

<i>Total number of master theses</i>	139	100%		
Literature reviews	8	6%		
Empirical research theses	39	28%	quantitative	4
			qualitative	27
			Mixed method	8
Practice reports	92	66%	process-oriented	24
			topic-orientated	68

As one can see, only 8 master theses are written as literature reviews. These are the works of Canazei, Schönher, Bulian, Franke, Langer, Reinthaler, Riepl and Stelzig.

The overwhelming majority (131) of the master theses are based on empirical work or written as practice reports.

More than 2 thirds of all the master theses (92) were written according to the design of a so-called "cross-theory practice report". This design, which was offered by the Danube University Krems for practical research within the context of master theses until the end of 2017, was available in two versions: process-guided or topic-guided. In both variants, theory relevant to the topic and one's own practice were interwoven. In contrast to other empirical designs, a practice report that is crossed with theory only ever conducts research into one's own therapeutic practice.

1 third of the master theses (39) master theses were based on empirical research.

In the following, I will only refer to this large group of master theses with empirical or practical research. But first some statistics:

1. The frequency distributions in connection to the groups of people researched and the research settings.

a) *The distribution according to the age groups of those who were researched are as follows:*

<i>Empirical work and practice reports</i>	132	100%		
Children/adolescents	34	26%	Children	29
			Adolescents	5
Adults	96	72%	Adults	85
			Elderly	1
Children and adolescents (e.g. families)	2	2%		

What is the distribution in relation to the different age groups of the researched client groups?

As can be seen above, 3 quarter of all 132 master theses explore psychodrama therapy with adults, 1 quarter of the theses deal with psychodrama therapy with children or adolescents and 2 of the theses focus on therapy with families. Since psychodrama therapy with children and adolescents has been carried out very successfully and these modifications are also taught in our advanced study, it is great to see that child psychotherapy is also being researched.

b) The distribution according to the research setting:

What is the distribution in relation to the research setting?

In 115 of the 132 practice-related master theses, the research setting was the therapeutic setting, i.e. patients were researched in a therapeutic context.

<i>Empirical work and practice reports</i>	132	100%
Classical research design	14	11%
Therapeutic research design	118	89%
Individual setting	54	
Couples setting	2	
Social atom	3	
Group setting	47	
Single + group	12	

As one can see, the research conducted in these psychodrama master theses was mostly on psychodrama in individual therapy settings (monodrama) and group therapy settings. Couples therapy and social atom (family therapy) settings were dealt with relatively little in comparison.

In the other 14 master theses, the examination settings were **classic empirical research settings**: For 9 research works (mastertheses of Amann, Beer, Heider, Helbich, Mundt-Smejda, Ortner and Weigl, Fink and Licka) psychodrama therapists were interviewed. Lechner interviewed the parents of children undergoing therapy. Gutmann interviewed children undergoing group therapy and auxiliary Egos. Wagner Angelika interviewed mediators. Fellöcker analysed a stage play for preventing addiction of children and Sageder analysed Moreno's therapy protocols.

As was told before, a big amount of these practice-research master theses were practice reports. Thus, this form was very well-suited the context of psychotherapy training to check whether those doing the training could explain their own therapeutic

work in a theoretical way. Since this design cannot be connected to the international scientific community, and is also used less and less, I will not go into it further here.

For the purpose of the Fepto Research meeting, the 39 empirical master theses are more interesting. As in psychotherapy research in general, a quantitative, qualitative or mixed method approach can be used. As you can easily see from the numbers in the last table, our psychodrama students hardly used purely quantitative designs. Most empirical master theses were based either on a qualitative or a mixed method approach.

2. Master theses with empirical research

2.1. Master theses with quantitative research designs: 4

The following research designs can be found:

For 3 of the master theses a quantitative evaluation study was conducted.

- *Grauf's* work (psychodrama in inpatient group therapy for structural disorders)
- *Trinkel's* work (psychodrama in group outpatient therapy for structural disorders) and
- *Schabata's* work (psychodrama follow-up group for breast cancer).

The research of these 3 master theses is based on the **evaluation of a psychodrama therapy group using quantifying examination methods** (tests, self-evaluation scales) in a pre-post design.

Hupmann's work on the technique of sharing is a quantitative comparative study of 2 different psychodrama groups.

2.2. Master's theses with qualitative research designs: 27

27 Master Thesis are based on empirical research with a qualitative approach. The following research designs were used:

Analysis of the documents

Fellöcker's master thesis is based on the analysis of a play used for addiction prevention of primary school children by means of a **qualitative content analysis**.

Case studies:

In 5 master theses the research design of an individual case study was used:

- *Bachler-Klein's* work (on therapy for childhood obsessive-compulsive disorder)
- *Karlhuber* works (on hearing voices)
- *Amann's* work (on mirroring,
- *Tornow's* work (on burnout biographies) and
- *D. Wagner's* work (on identity development of adolescents in psychodrama in group therapy).

Karlhuber, Amann and Tornow used **individual interviews** and **qualitative content analyses** according to Mayring as a data collection method for evaluation, while Wagner used a **group interview** and the **hermeneutic sequence analysis**.

Field research

13 of the qualitative master theses, conducted research into the given practice topics within in the scope of field research. Different qualitative survey and evaluation methods are used:

- *Kastner*: uses the **Grounded Theory** to investigate the appropriate therapeutic support for women with complex or childhood trauma (with dissociative identity disorder).
- *Mundt-Smejda* used **Experts Interviews** for research into specific cultural factors and the way they can be applied in inter-/transcultural differences in psychodrama-therapeutic settings.
- *Goger* uses the **theoretical interpretation** of her **observations** in researching the possibilities of direction in offering choices (for the protagonist) in psychodrama in inpatient groups.
- *Gutmann* uses **group discussion** of children and auxiliary egos and **content analysis** to investigate the role of Auxiliary Ego in the psychodrama group with children
- *Kühbauer* uses **observation, group discussion & an expert interview** as survey methods for researching the possibilities of the somatic part of the warm-up phase in mandatory anti-violence training for young men in a forced context. He then evaluates this material by means of **a qualitative content analysis**.
- *Heider* researches the appearance and processing of shame in psychodrama therapy by means of a **content analysis of individual interviews**.
- A. Wagner (2017): evaluates **expert interviews** on the significance and effect of the change in perspective in mediation with **qualitative content analysis**.
- *Hözl & I Klausegger* explore the work with the real social atom in therapeutic outreach family work by means of **interviews**, which they evaluate using a **qualitative content analysis**.
- *Weigl* interviews experts on how to build relationships with sexually traumatised women in monodrama and analyses the content of the **problem-oriented interviews**.
- *Jelinek* investigates an encounter group of Slovenian and "German" Carinthians based on the **recorded conversation contributions**, which she evaluates **by context analysis**.
- *Neureiter-Penn* investigates the determining factor of group cohesion in the group psychodrama therapy of traumatized patients in an inpatient context using a special **questionnaire** (Stuttgarter Bogen), which she evaluates **by a context analysis**.
- *Beer interviews* Austrian psychotherapy trainers on their psychodrama-specific therapeutic attitude which is then evaluated by a content analysis.
- *Ortner* conducts **expert interviews** on psychodrama therapy in dissociative personality disorder and evaluates them by typological analysis.
- *Helbich* researches the gender sensitivity of psychodrama psychotherapist trainers in **interviews** and evaluates them by Mayring's qualitative content analysis.

- *Fink* explores the importance of Moreno's therapeutic philosophy for psychodramatists with **interviews with PD therapists**, qualitative content analysis)
- *Pek*: investigates the use of Timeline in group work with male Arab refugees through **participant observation**, which is interpreted by scenic understanding.
- *Licka-Beinhofer*: investigates Psychodrama group therapy in an inpatient context through expert interviews with therapists, evaluated by content analysis.

3 master theses are qualitative evaluation studies

- *Ressl* investigated an individual psychodrama therapy in burnout by a **written therapy report of the client**, which was evaluated by a content analysis.
- *Ehrlinger* investigated emotion-promoting through psychodrama techniques in group psychodrama therapy by interpretation of the **group therapy protocols**.
- *Etlinger* investigated a group therapy in bulimia by **interviews, which were evaluated by a content analysis**.

1 master thesis can be classified as a comparative study

Krautschneider compares the flow experience in individual psychodrama therapy with and without accompanying yoga training using partially-structured interviews and the grounded theory.

2.3. Master theses with mixed-method research designs:

8 master theses followed a mixed method research approach. The following research designs were used:

Document analysis:

Sageder's work (on the role of fathers in treating male patients in Moreno), is based on the **quantitative and qualitative evaluation** of Moreno **case reports** by means of a **content analysis**.

Field research was used with mixed method research for 2 master theses:

The field studies by *Lechner* and *Grissenberger* investigate the respective field with the help of quantitative and qualitative survey methods:

- *Lechner* investigates the involvement of parents in the therapy process of their children. He collects data **through asking the parents by questionnaires** and evaluates them quantitatively + qualitatively.
- *Grissenberger* researches the effects of forming social relationships in alcohol therapy. She compares (quantitatively and qualitatively) **social atoms** which were produced at 4 different points during therapy.

5 master theses are based on a mixed method evaluation research design:

- *Zauner* evaluates individual psychodrama therapy with a depressed adolescent using *psychometric data from clinical-psychological diagnostics* (quantitative) and **observation protocols, visual therapy material and an expert interview** (qualitative).

Kühtreiber, Pfohl, and Starzer-Eidenberger subject group psychodrama processes to a mixed method evaluation:

- *Kühtreiber* evaluates the development of the children's roles in a children's group using **quantitative observation data** from the group therapy sessions and **interview protocols** with the parents, which are evaluated qualitatively.
- *Pfohl* evaluates a social competence group of adolescent Asperger patients using a **FEEL test** (quantitative), **semi-structured interviews** with the participants and **observations** from the group process as qualitative data.
- *Starzer-Eidenberger* evaluates psychodrama in a group for quitting smoking with various **quantitative data collection tools** and **qualitative data on the therapy process** (HAT, therapy diary).
- *Heger* evaluates the use of movies in psychodrama group therapy using **problem-specific questionnaires and scales on social competence and self-efficacy**.

Summary:

As you can probably see, there has been a considerable number of psychodrama master theses that have emerged within the framework of the university courses in psychodrama in these first 13 years, in total 139. These master theses explore the application of psychodrama therapy used with a wide variety of client groups, in different and somewhat innovative settings and contexts. So, they represent an important extension of existing psychodrama research, which is already taken into consideration in the current theoretical discourse on psychodrama in German.

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List of the examined Master theses:

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- Amon, I. (2011). *Psychosomatik im Psychodrama. Die Behandlung von somatoformen Symptomen in der Einzeltherapie*.
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- Apolloner, U. (2010). *Am Ende der Kindheit – wo ist mein Zuhause? Geschlechtsspezifische Ressourcenarbeit in der Psychodramagruppe mit Mädchen und Buben zur inneren Stabilisierung und Entwicklung einer Bereitschaft sich aus dem geschützten Kontext der Psychiatrie zu verabschieden*.
- Atzmüller, Gabriele (2016). *Schizophrenie und Psychodrama. Förderung des Selbstempfindens bei Menschen mit einer kontinuierlich verlaufenden paranoiden Schizophrenie*.
- Bachler-Klein, S. (2010). *Begegnung in einer undurchschaubaren Welt. Ein psychodramatisches Konzept der Entstehung und Behandlung von Zwangsstörungen im Kindes- und Jugendalter*.
- Bader, H. (2011). *Die gute und die schlechte Antonia sollen eine Person werden. Theorieverschränkter Praxisbericht über eine Psychodramatherapie mit einer kindlichen Angstpatientin vor dem Hintergrund aktueller Forschungsergebnisse*.
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- Beer, R. (2013). *Rollenerweiterung von zehn – zwölfjährigen Mädchen in der geschlechtshomogenen Gruppe*
- Blachowsky, S. (2010). *Wege aus der Isolation über eine therapeutische Gruppe. Theoretische Reflexion und Begründung eines psychodramatischen, gruppentherapeutischen Ansatzes in der Arbeit mit Eltern von behinderten Kindern unter besonderer Berücksichtigung der Erwärmungsphase*
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- Breuß-Purtscher, E. (2013). *Psychodramatische Kernannahmen und Methodiken in der Verkehrssicherheitsarbeit am Beispiel Nachschulung für alkoholauffällige LenkerInnen*.
- Bulian, R. (2009). *Die Begegnung und das Szenische bei Daniel Stern, Alfred Lorenzer und im Psychodrama*.
- Canazei, M. (2007). *Anwärmung in psychodramatisch geführten Gruppen*.
- Chalupsky, K. (2012). *Psychodramatisches Verständnis und Therapie von Angststörungen am Beispiel der Flugangst*.
- Dudde, V. (2016). „*Ein Freund, ein guter Freund...“ Bindung an Peers und Freundschaften im Jugendalter*.
- Ebner-Ehrenreich, C. (2017). *Schutz und Trost erfahren. Strukturbezogene, entwicklungsfördernde Interventionen in der stationären Gruppenarbeit mit komplex traumatisierten Menschen*
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- Feichtenschlager, D. (2015). *Psychodramatische Interventionsmethoden zur Emotions-, Spannungs- und Selbstwertregulierung bei Menschen mit Bindge Eating Disorder im stationären Gruppensetting.*
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