

【 Research Article】

## Mental health knowledge required for aid workers at battered women's shelters

Yuko Yoshitani (The Japanese Red Cross Hokkaido College of Nursing)

【 Abstract 】

**Purpose:** Aid workers at a DV shelter discussed cases with mental health professionals to identify the difficulties experienced by the aid workers in assisting battered women. The objective of the present study is to clarify the types of mental health knowledge that were found to be useful by the aid workers in finding modes of treatment and assisting their clients in future.

**Methods:** Five female aid workers, who were directly involved in caring for battered women at an agency operating a DV shelter, met with the researchers to discuss cases on five different occasions over a 1-year period. At each meeting, the aid workers were asked to discuss cases freely, while the researchers took notes. Following each meeting, the notes were reconstructed, and data related to the study objective were extracted, qualitatively analyzed, and then classified.

**Results:** The types of mental health knowledge that the aid workers found to be helpful in finding a treatment direction and assisting their clients were:

1. Basic assumption group (group dynamics theory), 2. Object loss and ambivalence, 3. Double bind message

【**Keywords**】 Domestic violence, battered women's shelter, support to aid workers, women's rights, case study

### I. Introduction

In recent years, domestic violence (henceforth DV) has been regarded as a serious social issue in Japan. That is not to say that DV has proliferated in recent years; but rather than previously, female DV victims could not call for help. However, recent grass-roots activities of local private shelters for the DV victims have brought results, and the public is no longer ignoring DV issues, hence it has been thought of as coming into the open.<sup>1)</sup>

The law concerning the prevention of violence by spouses and the protection of victims (henceforth "DV prevention law") was enforced in Japan in 2001, so that violence, even between husband and wife, can be treated as a crime by the police, administrative organs and legal organizations.

According to the survey, targeting 4,500 Japanese individuals aged over 20 of both genders, conducted by the

Cabinet Office from October to November in 2002, 19.1 percent of women have suffered harm in the form of assaults, emotional threats, and sexual extortion. Of these, 4.4 percent perceived this harm to be life-threatening, and 4.4 percent were injured and received medical treatment. Moreover, 42.1 percent had not consulted anyone else, confirming that the DV situation remains serious.<sup>2)</sup>

Local private shelters provide assistance to DV victims. Furthermore, DV counseling support centers have been established by prefectural and city governments to work alongside the private shelters.

We had the opportunity to work with aid workers involved in caring for such battered women in a shelter. Consequently, the need of these shelter workers for expert mental health advice became obvious, even though they assisted the victims based on the belief that they were protecting the women's human rights.

The Cabinet Office conducted a survey targeting aid workers dealing with domestic violence nationwide from January to February 2004. The number one response to the question "What is your dissatisfaction or burden?" was "Having difficulties in assisting victims who have multiple problems, other than violence", chosen by 77.3 %. Moreover, the response to the question "What is necessary to improve the quality of counseling and aid workers' health?" was "To enhance learning opportunities such as case study meetings with invited external experts", accounted for 43.8% and most.<sup>3)</sup>

We, therefore, considered clarifying the types of knowledge required by the aid workers, attempting to provide expert knowledge concerning psychological health, or mental health education.

## **II. Methods**

### **1. Participants**

Five female aid workers, who were directly involved in assisting battered women at an agency operating a DV shelter, met with researchers to discuss cases. Over a 1-year period, they held five meetings in which they discussed 8 cases.

The aid workers mainly comprised volunteers and people with experience in welfare and human rights fields.

Since this study targeted aid workers at a single DV shelter, there is a limit imposed, whereby the knowledge obtained must be generalized. To cover this limit, the outline of the shelter concerned by the research was described as far as possible throughout the article. However, there is a limit to the detail of this description, since it had to remain anonymous.

In addition, this article does not describe the direct opinions of women needing assistance, since direct research of women at the shelter was avoided in order to reduce their burden. For the aforementioned reasons, there will necessarily be limits on exploiting the knowledge obtained for future assistance.

Nevertheless, in consideration of the present circumstances and background to DV in Japan, for

feminist research, it is believed to be worthwhile to work on female-related issues with those directly involved in assisting the battered women and focusing on their experiences of the work.

### **2. Data collection**

At each meeting, without structuring questions, aid workers were asked to discuss cases freely, while researchers took notes.

Following each meeting, the notes were reassembled, the data were described, and then discussed using mental health knowledge according to the study purposes.

Furthermore, since the qualitative study could not be discussed by two or more researchers, its reliability is also limited.

### **3. Ethical Considerations**

The study's objectives involved five female aid workers directly involved in assisting the battered women. They received explanations about the study's objectives, methods, the freedom of participation and withdrawal and the anonymous publication, and agreed on those in writing.

For the method of study, the notes taken by the researchers were applied to the study in order to avoid any problems with the aid workers writing on the research sheets.

### **4. Outline of the Concerned DV Shelter**

This DV shelter was set up by a group, which had been established to support all problems for women in 2001.

The DV shelter protected 25 women or more and accommodated for a total of 200 nights or more over the last 1 year.

The local authority supplies the shelter with a fixed amount per person per night for a battered woman and accompanying children in the form of expenditure for related tasks. This includes expenses for food, daily articles, medical expenses, communication, court documentation required and bureaucratic procedures, and transport expenses for going out with the aid workers

while living in the shelter.

Aid workers usually give users explanations of the following procedures, including the transfer from moving into the shelter to living independently. The users choose from the following options and implement the relevant choice, assisted by the aid workers.

- i Will you file for a protection order to prohibit a violent husband from getting closer to you? Will you also have your husband charged for criminal prosecution with assault?
- ii Will you file for a divorce in the domestic court or not?
- iii Where will you live when separating from your husband? (If a woman expects to move to a different city or prefecture, aid workers may take her to the local shelter or DV counseling support center.)
- iv How will you get there? (In principle, aid workers take them.)
- v How will you make a living? Do you need a welfare benefits application or not?

This shelter is operated mainly by membership expenses from members who agree to its purpose. The shelter also receives assistance from the local authorities and accepts donations from local residents.

This DV shelter is situated in a city with a population of approximately 100,000, while the towns and villages surrounding the city have populations of approximately 5,000 each. People from those areas go to the city if needed.

### III. Results

At the meeting, aid workers selected some cases in which they had difficulties dealing with assistance or felt their assistance was inadequate when performing self-assessment, and then discussed them.

In addition, all the cases to be discussed had involved women with children or pregnant women.

1) Shelter users are unable to carry on their daily life or

care for their children.

The users are expected to care, by themselves, for their children and for themselves in the provided facility. Except for the day they move in, users have to tidy and clean up their room, buy food, cook their meals, and so on by themselves. They also have to keep their children clean and feed them.

Most users were relieved, to some extent, by evacuating to the shelter and were thus able to care for themselves and their children unassisted.

However, certain users, who were regarded as problematic cases in the meeting, did not care for their children or communicate with them.

The following are details of problems experienced:

- i There is anxiety over children's health, due to an irregular daily rhythm.
- ii Meals and mealtime are inappropriate for the children's age, so they have a problem with their physical condition.
- iii Users do not keep themselves or their children clean.
- iv Users do not tidy up their room.
- v Users seem to neglect their children.

Based on all the problems listed above, in each case, aid workers asked whether users need help for their lives, and in fact workers cooperated with them.

If users refused their cooperation, aid workers took another opportunity to explain the necessity of such actions for them and their children, and instructed them about methods, in efforts to cooperate with them.

Aid workers occasionally acted themselves on behalf of users, when the latter refused to cooperate.

Moreover, some users, featured in cases i to v above, had the habit of wasting money. Some of them explained they had experienced personal bankruptcy. Aid workers explained users' future income potential and what expenses should come first for their living.

Furthermore, when users started their independent life outside the shelter, and felt anxious about their daily life or caring for their children, aid workers contacted public

health nurses and local authority caseworkers to request their continued support for such users.

Regarding these cases, aid workers considered that users would be somewhat anxious upon leaving the shelter to start their independent lives, and that they could assist and talk to the users in an appropriate way by better understanding them, even though they had supported them throughout their time living and caring for children. Therefore, they selected these cases to discuss at the meeting.

Participants in the case study meeting reconfirmed the importance of assistance by aid workers, such as explaining the necessity to users and their children, instructing them of relevant methods, and cooperating with them.

At the same time, they reconfirmed that the users, in principle, should take care of their children and themselves in their daily lives, and that the shelter is a facility to escape from their violent husbands and prepare for their independent future life, where aid workers provide assistance for users.

#### 《Self-esteem and words of appreciation》

For users obsessed with thoughts of their own stupidity, caused by repeated damage from violence, researchers recommended aid workers not only help the user in her daily life and in caring for children, but also find things that the user is able to do by her, and moreover, acknowledge and appreciate the user when they do these. In fact, aid workers were able to carry out some of these recommendations at the shelter soon.

#### 《Communication between Mother and Child》

Aid workers felt that one user seemed relatively unconcerned about her child, for example, when she called attention to her child who was likely to go out alone. Regarding this case, researchers confirmed that aid workers realized that the user's message toward her child was completely opposite to her attitude, which gave them the impression that she did not to worry about her child at

all.

Subsequently, researchers explained to aid workers that this was a communication pattern which causes confusion, since the child could not decide if they should follow their mother's words or her attitude. Even though researchers could not determine whether the user usually communicated with her child like that or whether she would have health problems due to her husband's violence at that time, they encouraged aid workers to explain and advise the user that she should attempt to express nonverbal messages implying the same meaning as has verbal messages. In fact, aid workers were swiftly able to carry out some of these recommendations at the shelter.

Participants in the meeting reconfirmed the following: if users have difficulties in their daily lives and in taking care of children, or need medical treatment, aid workers should ponder why users are unable to cope with their daily lives and take care of children, even when living in a secured environment. Then, in principle, aid workers assist them by relieving their anxiety about violence so that they can live their lives. Moreover, if users are unable to take care of their children and if this significantly affects the children, top priority must be given to children's lives.

#### 2) Children behave as if they were influenced by DV

The article 2 in the "Law for prevention of cruelty to children" in Japan describes that letting children witness DV shall represent child abuse. This is because children often behave as if they are influenced by the DV, regardless of whether they themselves are directly exposed to the violence, or because they are psychologically abused by witnessing the DV.

The study's objectives perceived cases seen as especially problematic to handle; where DV significantly affected children by impacting on their long term future development and health, and cases where the behavior and language of children affected by DV hurt their similarly affected mother.

#### (1) Response to Fear

《Children who are sensitive to minor stimulation that reminds them of violence》

Regarding cases where DV significantly affected children by impacting on their long term future development and health, since such children suffered from violence by their father or were frightened by witnessing DV, many of them reacted to minor things that reminded them of their father.

Some of them were scared simply by hearing any words representing "father" when listening to picture books and could not continue to listen. Others tried to avoid clothes or items worn by their mother when she was battered by her husband. When those children reacted thus, both mothers and aid workers alike were very shocked.

《Mother-Child bond》

Again, regarding cases where DV significantly affected children by impacting on their long term future development and health, the mother remained in close contact with her children, some of whom did not try and avoid their mother. There were two reasons for this reaction; (1) the children themselves felt anxiety, (2) children worried about their mother, who suffered from violence, so they kept her in sight.

Since the users also became nervous and tired of preparing for a new life after evacuating to a shelter, they seemed to have difficulty in remaining in sufficiently close contact with their children.

In those cases, instead of the mother, who needed time to prepare for their new life or legal procedures, aid workers took care of the children. Moreover, with the future development and health of those children in mind, aid workers asked public health nurses, caseworkers and nursery staff in local areas where mother and children moved in, to continue to assist them.

Furthermore, a few users kept in contact with their children so much that the aid workers felt discomfort. Similar discomfort was felt when users did not care for them, despite contacting them all the time. In those cases, aid workers provided assistance described in "III-1) Shelter

users are unable to carry on their daily life or care for their children".

When children retreated more closely to their mother, due to the fear of violence she received from their father, aid workers took care of children instead of the mother. Participants in the meeting reconfirmed this to be necessary and important assistance.

Moreover, regarding cases where children worry about their mother, who suffered violence, and keep her constantly in sight, if she recovers herself to a violence-free life, they will feel relieved and be able to give her some space when required. This explanation from researchers reassured aid workers.

## (2) Complex Response

Regarding the behavior that is likely to be due to DV, more complex responses were found than simply "(1) Response to Fear".

One child was eager to return to their father, while mother and brother were pleased to start a new life, away from their father's violence. With this in mind, the first child expressed sorrow at losing the previous life with the father, and blamed the mother, stating "it was her fault".

In this case, they eventually started a new life away from their father. Aid workers were unable, however, to understand this child's feeling. Therefore, this case was difficult to understand, and discussed as a problematic case.

Moreover, researchers explained to aid workers in understanding situations where children are eager to return to their violent father, or they attack or insult their mother who was a victim of their father's violence.

The following are the details of these explanations:

- i Children can lean towards the stronger behavioral characteristic between the strength of the father and the weakness of the mother, even if it represents violence, in order to protect themselves. In this case, although it may take time, they can also adopt the mother's strength if they see their mother starting a new life and recovering herself to be free

of violence, behaving positively to protect them.

- ii Children sometimes got used to their previous lives, having themselves chosen to adopt the violent father, and may therefore feel sad at losing their previous life. In this case, the main task for children and their mother is how they could prevent father's violence, despite the loss of their daily task, as aforementioned, in the new violent-free life, as well as the need to deal with "tasks for themselves" which they have never done before. Therefore, it will take enormous courage for them to choose a new life, and it is understandable that they feel anxious and react negatively in many ways.
- iii Although children certainly hope to start a new life away from their violent father, at the same time, they have some ambivalent feelings of hoping to continue their previous life, even if they suffered DV. Individual family members may have intensively ambivalent feelings. In this case, it is advisable to express such ambivalent feelings, as aforementioned, and share them with each other, especially with a child who wishes to return to the father.

Aid workers focused their attention on the view that users feel anxious about their new life, even if they escape the violence, and that one of the family members may experience such feelings intensively; whereas other family members do so subconsciously. Moreover, aid workers realized that the researchers' explanations would be helpful for them to understand users and their children in providing future assistance.

### 3) Shelter users are unable to become fully independent.

«Users are not able to tell what they wish to do»

For a new life away from violence, users need to choose from the procedures described in "II-4. Outline of the Concerned DV Shelter", and determine their option.

However, several users were unable to tell what they wished to do in future, which was difficult for aid workers. They found it difficult, because they could not understand

why these users were unable to speak their minds while others could.

Therefore, aid workers explained them the expected outcomes of their possible decisions and the types of assistance they could receive when making their decision, and also gave them time to organize their thoughts.

What is more, there were instances of aid workers who thought they could not assist users, even with the above methods, and a case where the user later started thinking she was forced to act by the aid workers in a shelter, even though she herself had made a decision regarding the procedures for her independent life after receiving explanations, or where another user returned to her violent husband voluntarily right after starting her independent life.

«Thinking she was forced to do so, despite the fact that she had made up her own mind»

In cases where the user started to think she was forced to act by the aid workers, despite having made her decision about the procedures for her independent life voluntarily, aid workers attempted to talk kindly to her about the decision-making process, like "I explained the procedures to you, and you thought about it carefully, and then made up your mind, didn't you?", in order to let her recall. This method allowed the user to proceed to her independent life, even if it was insufficient to get her to admit that she had already made her decision herself.

Researchers explained to aid workers that when a user starts to think she was forced to act by the aid workers in a shelter, despite having made her decision regarding procedures for her independent life after having received explanations, the user's actions reflect her anxiety about starting a new life. Moreover, aid workers can understand this anxiety if they think the user is unable to spontaneously leave her husband, because she is psychologically tied down by his violence.

«Going back to her violent husband»

In cases where the user returned to the violent husband,

aid workers regularly contacted and called on her right after she started her independent life, and repeatedly explained the following to her: i The general process of DV includes three stages, an explosion period, a honeymoon period, and a tense period, which represents a vicious circle. ii Going back to the husband would be a danger, even if he promised not to attack. iii When going back to the violent husband, the violence often becomes worse than ever if he re-attacks. Therefore, she needs to evacuate to a shelter at the earliest opportunity.

In this case, even though aid workers attempted to give users the necessary explanations and suggestions in each case, it had little result, as users claimed to be forced into actions by the aid workers, or returned to the violent husband, thus perceiving the assistance received to be inadequate. For the reasons above, this case was discussed as a problematic one.

Researchers also explained that even if the user who escaped her violent husband is thinking of her independent life and is determined not to return to him, it is difficult for her to realize that her husband is taking every possible means, at any time and even while she is staying in a shelter, to do all they can to keep her. However, few users in problematic cases returned to their husbands, enabling most women to proceed to independent lives free of violence, meaning the assistance by aid workers is significantly worthwhile.

Aid workers also reconfirmed the difficulty for users in separating from the violent husband and starting a new life.

## IV. Discussion

### 1. Damage and recovery process

To discuss cases where users were unable to carry on their daily lives or care for their children, where they thought they were forced to do so, despite having made their decision, and where they returned to violent husbands, aid workers had to make practical use of knowledge concerning the generally recognized damage and recovery process.

Furthermore, regarding cases where children behaved as

if influenced by DV, it was necessary for aid workers to understand that children were also abused by witnessing DV and to implement the recovery process.

In cases of repeated violence, some victims become dependent and do not act voluntarily. These behaviors are the result, rather than the cause of the repeated violence. It is well known that anyone having undergone repeated physical or mental violence loses self-esteem, feels powerless, and is discouraged to act spontaneously.<sup>4)5)</sup>

Since the violent husband may take every possible means, deliberately or subconsciously, to keep her, there are often occasions where victims, who have left the DV shelter and are supposed to start independent lives, are re-attacked by their former or new husbands.<sup>6)</sup>

In reference to the aforementioned case, where the DV victim's parents take the violent husband's side, friends and relatives, as well as the victim herself, believe her dependence to be the cause, rather than the result of the violence.<sup>7)8)</sup> Moreover, even if they do not consider her dependence to be the cause, they often consider her response to the violence to be inappropriate.<sup>9)10)11)12)</sup>

For this study, each member reconsidered the purpose and concept of the DV shelter during the case study meeting. It is considered important to prevent aid workers, at least, from thinking victims are also to be blamed, and inflicting pain on them.

### 2. Double bind message

Regarding cases where a user seemed not to care about her child, it was explained that this needed to be understood as a double bind message, focusing on the aid workers' feelings of discomfort, and emphasizing that the user did not wish to ignore the child but something was wrong. Even though the user may have behaved thus temporarily or constantly, aid workers should have considered any possible assistance while she was in a shelter to positively exploit the situation.

Aid workers were unaware of such double bind messages prior to the case study meeting. However, they seemed able to understand users by paying attention to

their inexpressible feelings of discomfort.

Double bind messages were identified as a cause of schizophrenia and of exacerbating the same. However, such messages occur commonly in daily life. The receivers of such double bind messages are forced to go on the defensive, meaning if such messages proliferate repeatedly in the family, the receiver is hurt and confused. Since the schizophrenic patients are unable to reply properly and self-defensively, they inevitably become confused and their condition may deteriorate.<sup>13)</sup>

As for this case study, if the receivers are children, they are obviously unable to reply self-defensively, there is thus significant potential for confusion. Furthermore, as well as the aforementioned cases discussed in the meeting, there is felt to be a need for aid workers to explain and advise the user that she should attempt to express nonverbal messages implying the same meaning as her verbal messages.

### 3. Response to object loss

Users and their children are assumed to lose their comfortable family life due to DV, as well as their familiar environment and family, albeit exposed to violence, by starting a new life free of violence.

The following describes three themes concerning these losses:

#### (1) Identification (defense mechanism)

To understand children who were eager to return to their violent father, or attacked or insulted their mother, who was already a victim of their father's violence, it was necessary to understand that an unstable environment had caused children to strongly identify with their father.

Children are surrounded mainly by significant others, of which the father is one. Therefore, if their father is violent, children are supposed to be threatened by most surroundings, which make it very hard for them. Consequently, those children are considered to have identified more strongly with their father, compared to those with a normal father, in order to adapt to the violence, reduce the threat from their surroundings and

protect themselves.

It is believed that understanding this mechanism allowed aid workers to understand the importance of assisting children and their mother so that they could live in a violence-free environment, rather than thinking children should return to their father only because they wish to do so, or because they attack or insult their mother.

#### (2) Response to object loss

To understand children who wish to return to their violent father, it was necessary to understand the mechanism whereby they developed a strong response to object loss for their father.

If the children's father were violent, they would have been living and becoming strongly obsessed with their father's behavior on a daily basis. Therefore, the object loss can be significant for children if they live without the father.

It is considered that understanding this mechanism allowed aid workers to understand the importance of assisting children and their mothers, so that they could live in a violence-free environment. It also helped avoid them being confused by the children's responses or interrupting their mother's independence when hearing that they wish to return to their violent father.

#### (3) Ambivalence

To understand cases where children wished to return to their violent fathers, it was necessary to understand the fact that the user and children had had ambivalent feeling, such as a wish to live with their husband or father but also to be separated from the same. In consideration of such feelings, it was considered important for users and children to express their ambivalent feelings and share those with each other. With this in mind, understanding this mechanism allowed aid workers to understand the importance of assisting children and their mother, so that they could live in a violence-free environment.

Since aid workers are well aware that DV victims basically have complicated feelings toward their husbands



and can hardly escape them as soon as he inflicts damage, aid worker seemed easily able to understand the aforementioned ambivalence.

When children cannot gain enough attachment from significant figures like their parents, the following two types of response occur, linked to anxiety concerning their attachment are found:

i sticking to the target of attachment and remaining in contact, ii ignoring the target and becoming violent.<sup>14)</sup>

In this case study, both of the results surfaced; some children stuck to their mothers, and others were violent to them. Especially in the latter case, a certain amount of identification with their violent fathers must have occurred.

Everyone has ambivalent feelings, but those with strong ambivalent feelings and an inability to realize the fact suffer more and subconsciously avoid solving the problems. In terms of mental health, it is important to realize own ambivalent feelings and to separate feelings and thought.<sup>15)</sup>

In this case study, since every member of family seemed to have ambivalent feelings toward their violent husband or father, it would be helpful to persuade them to express in words their subconscious feelings.<sup>15)</sup>

#### 4. Family system and basic assumption group of group dynamics

To understand cases where children wished to return to their violent fathers, it was necessary to understand that users and children had had ambivalent feelings, such as a wish to live with their husband or father but also to be separated from the same violent individual.

The family system and group dynamic theories suggest the idea that, in a group of family members, one of them intensively shares the ambivalent feelings to which other members are also part of it.

The group dynamic theory also suggests the idea that all groups contain a "work group", in which members work toward their goal, and the "basic assumption group", in which members go against their surface goal, and if some of the members do so, the fact must be acknowledged that

some members in the whole group, and even the "work group", may also subconsciously not wish to actually achieve the goal.

With the explanations provided by those theories applied to such cases, aid workers seemed able to understand that users, who hoped superficially to live independently, might have ambivalent feelings toward their husbands.

In this case study, a child who wished to return to the violent father is considered to be an "Identified Patient" while the child formed a basic assumption group, even though they themselves were the sole member.<sup>16)17)18)</sup>

The child might express subconscious feelings existing in the family, including anxiety about starting a new life away from violence or the attachment to the violent father or husband, as the "Identified Patient" of the basic assumption group. In this case, it is advisable to express in words such subconscious feelings with each other in the family.

#### V. Acknowledgements

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