Social Work and Sociometry: An Integration of Theory and Clinical Practice

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Social Work practice emerged with emphasis on meeting the person where they are, within the context of their relational environment. As a profession, social work strongly emphasizes the importance of human relationships and the social forces within society that impact an individual's experience. *Sociometry*, which was developed by Jacob L. Moreno in the beginning of the 20th century, refers to both the qualitative and quantitative study of interpersonal relationships. Sociometry is mostly unknown to social workers and absent from most social work education curriculums. It is a great tragedy that social work has not yet integrated the methods and theories of sociometry into its repertoire as sociometry has much to offer social workers. My hope is to help familiarize you to sociometry today.

Jacob Moreno, who is also the founder of psychodrama and group psychotherapy, described sociometry as "the inquiry into the evolution and organization of groups and the position of individuals within them" (Moreno 1934). He referred to sociometry as a science by, for, and of the people (Moreno 2014). The clinical practice of sociometry offers experiential group exercises that efficiently highlight group connections and disconnections, shared identity or experiences, attractions and repulsions, and an assessment of the group based on chosen criteria. These sociometric exercises could be adopted by social workers for use in clinical, educational, and community settings. There are far too many sociometric exercises for me to outline in this short article, but I will introduce you to three of them here with the hopes of activating your curiosity to learn more!

One of the simplest experiential sociometric tools, called a "Spectrogram", offers facilitators a here-and-now assessment tool. Basically, this is an imaginary line in the room, often from one wall to another wall, with each wall designated as an opposite end of a spectrum. Think of it as a life-size scale from 0% to 100%. For example, in my inpatient addiction group at Mirmont Treatment Center, I might ask "how familiar are you with 12-step programs?" and designate one end of the spectrogram as "I have never heard of a 12-step program" with the other end being "I know everything there is to know about 12-step programs". After designating the two ends of the spectrogram, I invite group members to

answer the question by physically placing themselves on the spectrogram within the room. This provides me with an assessment of the group based on the chosen criteria (in this case, familiarity with 12-step programs) while also providing participants with an experience of seeing where they stand within the group. After group members have placed themselves on the spectrogram, they can be instructed to share with each other or aloud to the group about why they are in that location. Some spectrogram questions I often use include "how resilient do you judge yourself to be?" "how much has loss impacted your life?" "how connected do you feel to this group?" If I am facilitating a training or teaching students, I often use spectrograms to assess the group's knowledge of the topic before I start so I can tailor my teaching to meet the audience at their level of understanding.

While the spectrogram utilizes participants' experience of self, "Hands-On-Shoulder Sociometry" is a measurement of the group's experience of each other. With this sociometric tool, after obtaining permission from the group around physical touch, the facilitator instructs the group to indicate their answer to each question by placing their hand on the shoulder of another group member (only one choice!). Using this tool in a client group, I might ask "who do you feel most connected to?", "who in this group has inspired you?", or "who in this group would you like to get to know better?". As group members indicate their choices, they can be invited to share directly with the person they chose about why they chose them. This exercise helps to build and deepen interpersonal connections between group members while allowing participants to see how other people experience them. The configuration of choices based upon the chosen criteria provides the facilitator with significant information about the distribution of sociometric wealth, the nature of connections, and the presence of any "sociometric stars" or "isolates" within the group. The use of this sociometric tool with survivors of trauma requires extra sensitivity and may need to be modified due to the physical touch.

A third sociometric tool, called a "Locogram", provides measurement of group choices related to categories. In a client group, for example, I might designate the four corners of the room as different group topics and invite group members to choose a topic by standing in the corresponding corner of the room. This can also be done with prepared printouts, such as having different emotions (or other criteria, such as mental health diagnoses, defense mechanisms, personal strengths, etc.) printed on paper which are then scattered throughout the room. Group members can be instructed to stand at the emotion that best describes their experience in this moment. The locogram will organize the group into smaller clusters based on shared experience and offers opportunities for individuals to relate with each other. One could ask a series of questions with a locogram on emotions, or the "feeling floor check" as Tian Dayton (2014) has named it, such as "which emotion do you find most difficult to tolerate in others?," "which do you most try to avoid?," and "which have you become better at dealing with?" Each of these questions creates movement in the room and fertile opportunity for group members to connect.

My experience has shown that many clients strongly prefer sociometric exercises over talk therapy or lecturing. The experiential nature of clinical sociometry allows clients to move beyond words and keeps participants engaged. These exercises tap into the power of the group using participants as therapeutic agents for each other.

To learn more about sociometry, visit asgpp.org – the website of the American Society of Group Psychotherapy and Psychodrama which offers a journal publication, conferences, local chapter meetings, a community of students, certified practitioners, and trainers, as well as information about future training opportunities. Visit www.blatner.com/adam/pdntbk/sociombibliog.html for a comprehensive list of sociometry reading.

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