

## **The Value of the Experiential Group in the Personal Development of Adolescents with Creative Potential and Relationship Difficulties**

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### **Abstract**

**Introduction:** *Personal development is addressed to all the people who want to improve their life by overcoming some blockages and difficulties, but also by activating their own resources. In the present study, we focus on the adolescent with above average creative capacities and with difficulties in relationships, with a problematic self-concept and inadequate self-esteem.*

**Objectives:** *This experiential module was addressed to adolescents aged 17-20 with artistic skills. It included 12 sessions. The main purpose of the therapeutic method is to integrate the body-mind-emotion complex, integration that can facilitate positive consequences (behavior), thus reducing those interpersonal difficulties which hinder adaptation. We aimed to help the participants form and undertake an image and self-identity proper to the environmental requirements.*

**Method:** *It was scientifically proven that people with creative potential have a large capacity of visualization and a great emotional vulnerability. For this reason, in the process of personal development for adolescents with interpersonal difficulties, we primarily focused on putting them in contact with themselves, on body awareness, mentalization and meditation. We especially used body awareness techniques, expressive artistic techniques (drawing, modeling and painting) and drama therapy*

**Results:** *Adolescents were assessed before and after participating in the personal development module with several tools: interview, questionnaire type tests, projective tests. Both quantitative and qualitative analysis of the psychological assessment results showed an improvement in the capability of self-knowledge, self-esteem and ability to relate for the participants in the group.*

**Conclusions:** *The experiential approach proved once again the importance of grounding in the here and now, in order for the subject to gain a flexible attitude and to see the multitude of alternatives for solving a situation. When all levels (body, mind, emotions) function as a whole, the consequences of integration lead to reduced relational adaptation problems.*

**Keywords:** *teenagers, potential, interpersonal, difficulties, personal, development*

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## **I. Introduction**

Relational adaptation difficulties, which represent the basic problem of adolescent participants in this personal development program, are due to patterns already formed in infancy, according to the attachment theory. Young brains are built to learn from the adult, and attachment relationships form the framework in which the relational connections are formed. Absence of relational connections may prevent the development of neural connections, thereby limiting the ability for relational adaptation later.

The main purpose of the therapeutic method is to integrate the body-mind-emotion complex, integration which can facilitate positive consequences (behavior), thus reducing those interpersonal difficulties that hinder adaptation. To promote this integration, emotional regulation was pursued through body-awareness, mentalization and meditation.

The feeling of safety is manifested, in general, through a coherent recounting of experience, which in turn reveals a coherent "self". "By that I mean a self that (1) makes sense rather than being riddled with inconsistencies; (2) hangs together as an integrated whole rather than being fractured by dissociations and disavowals; and (3) is capable of collaboration with other selves" (Wallin, D.J., p. 178).

It was scientifically proven that people with creative potential have a large capacity of visualization and a great emotional vulnerability. Often, these people give the impression of an emotion without body, float above experiences, are unaware of their body, are not inside themselves and do not feel the body from inside.

For this reason, in the process of personal development for adolescents with relationships difficulties, we primarily focused on putting them in touch with themselves, on body awareness, on mentalization and meditation.

An attitude of mentalization creates potential for affective, cognitive and behavioral flexibility, because it allows us to imagine multiple perspectives. "Through implicit understanding and explicit reflection, mentalizing enables us to take a step back from our experience and representations, in order to make sense of them, and thus to become increasingly the author and interpreter of our own life" (Wallin, p. 211).

Meditative attitude towards experience, as well as mentalizing, confers significant benefits. Its practice can help us modulate incomprehensible feelings, reduce self-imposed suffering, adapt to life's changes easier and experience deeper joys offered by life. It is proven that meditation has a profound impact upon the body reducing the stress index and the level of anxiety.

To improve verbal language, it was aimed at directly by linking it with the annoying experience and

describing feelings generated by that experience through role-playing and through meditative concentration on breathing.

We often notice that some people lack the necessary words to describe their crucial experiences. "That which we cannot verbalize, we tend to enact with others, to evoke in others, and/or to embody" (Wallin, D.J., p. 163). Typically, these barriers are reduced when a "here and now" framework is created, by role-playing the desired relational dynamic.

Considering all these aspects, we have to see the effects of this personal development process in the experiential group.

## **II. Methods**

### **The group of subjects**

This experiential module was addressed to adolescents with artistic skills, Arts students, aged 17-20. It included 12 working sessions, plus 2 evaluation sessions: initial and final assessment. Number of participants: 9 teenagers, 3 boys and 6 girls.

We chose participants after adolescents expressed their desire to participate in this group. Before the onset of group activities, a diagnosis of the participants' personality peculiarities was made, in order to build a personal optimization module adapted to their needs.

### **The initial assessment**

For a proper diagnosis, we performed the following:

- a preliminary interview with the subjects;
- testing;
- discussions with their parents (when it was possible) to learn more about them and to obtain their consent for the participation in the group.

The preliminary interview with teens contains, besides information about the purpose and unfolding of the group, an assessment of their motivation to attend the group, their needs, aspirations and problems. The interview was accompanied by strategies of good observation, to capture elements of vulnerability arising from non-verbal communication.

### **The tests**

- *The Tennessee Self - Concept Scale: Second Edition - TSCS: 2* – L.W. Warren (1996)
- *Thematic apperception test (T.A.T.)* – Henry A. Murray (1943)
- *Draw-a-Person test (D.A.P.)* - Karen Machover (1949)
- *Self-Esteem Scale SS - Rosenberg* - Rosenberg Morris (1965)

- *Locus of Control Questionnaire* – Julian B. Rotter (1966)
- *Eysenck Personality Inventory (Neuroticism scale)* – Hans J. Eysenck (1964).

### **Initial evaluation findings (hypothesis)**

#### **Indicators common to the study participants**

After the initial evaluation, the following indicators emerged in all participants:

- Cognitive level: contradictory ego image, problematic self-concept and inadequate self-esteem tendency have resulted from applying the test to assess self-concept (TSCS: 2); low self-esteem resulted from the interpretation of Self-Esteem Scale SS - Rosenberg; hesitation in decision making, lack of motivation.
- Emotional sphere: emotional tension, negative emotions, misfit tendencies, indices of addiction, need for control and interpersonal difficulties were identified by using projective tests, D.A.P., T.A.T. and the Eysenck Neuroticism Scale. The latter showed the presence of emotional instability.
- Behavioral level: lack of involvement in group activities, the absence of satisfaction in activity, passivity, not undertaking responsibility, addictive tendencies and externality were indicated by the interpretation of Locus of Control questionnaire (Rotter, J.B., 1966).
- Global indicators: disturbance of the adaptation mechanism, intra and interpersonal conflicts, lack of interest in social involvement, distrust in one's own abilities, the presence of an inferiority complex, inadequate self-esteem, lack of motivation, discrepancy between the self-image and the real potential and internal conflicts are the outcomes of correlating test results with the information obtained from the preliminary interview.

When setting goals, it was also considered important that they should meet the needs and expectations of all participants and that the manner of their attainment should be enjoyable for everyone.

#### **Short presentation of participants after the initial assessment**

1. A. is 19 years old and a film-directing student. Evaluation revealed a pronounced tendency of orientation towards the future (existential angst), at the expense of being in contact with the present. His father left home when he was very young and he has been waiting for him ever since, thus he makes plans for the

future only in terms of this paternal presence. He daydreams. He has no friends, no one understands him. Favored actual capacities: hope and faith.

In need of development: cogitation issues, realistic rules and perceptions, self-confidence, fulfilling of creativity by putting ideas into practice, making friends whom he can trust.

2. C. is 18 years old and a dancer. She says she reacts to conflict by physical asceticism. She often eats without being seen by others. She is diagnosed with anorexia nervosa (puberty anorexia). She does not mind being thin, she even thinks she needs to lose more weight, but it seems to her that she is different from others, fact that prevents her from making friends.

In need of development: verbalizing conflict, sincerity, not comparing to others, self-confidence, self-esteem, relationship skills.

3. S. is 17 years old, a student in the last undergraduate year. S. accuses feelings of discouragement, helplessness and passive attitude. The natural mother died at birth and at first, she was raised by her grandparents, then by her stepmother with whom she is in a permanent conflict. She says that she was and still is restricted in choosing friends. She suffers from an inferiority complex, she says that "she is not good at anything ... " and believes that no one likes her. She has anxiety, sleep disorders with nightmares accompanied by panic attacks, cries a lot and cannot stand anyone around her. She feels lonely, useless and overwhelmed by depression.

In need of development: relationship with herself, with others, self-confidence, hope, discovering her abilities and the joy to help others.

4. V. is 19 years old, she is a film student, meets unpleasant reactions from others because of her eccentric behavior. She lives with her mother, who has been raising her alone since she was seven, instilling the idea that she is unique, that all others are inferior to her, that no one deserves to be her boyfriend. When in need, or in some cases of conflict, she develops symptomatic eccentricities of behavior. She feels the need to act flashy and inappropriate; she does not acknowledge the merits of other, she says she is arrogant and wants to change her attitude towards others.

In need of development: the ability to verbalize conflicts, courtesy for others, modesty, selflessness, honesty, empathy, to recognize the value of others and to appreciate them.

5. R. is 19 years old, she is a philosophy student, accuses group fear and the development of feelings of unworthiness and nothingness, shame and guilt, acquired during an attempted sexual abuse. Since

then, she has isolated herself, and has not trusted anyone. She is overwhelmed by sadness and loneliness. The relationship with her Ego is over-developed.

In need of development: contact with the environment, relationship with others, politeness, honesty, verbalization of conflicts, strengthening confidence in oneself and others, developing the ability to feel better in the company of others.

6. N. is 18 years old, studies design. He expresses the growing need to have relationships with others. He is afraid of loneliness. He lives with his parents, who are very demanding (they are police officers) and restrict his social life. When he was little, he would stay locked in the house until his parents came home from work. He does not stand solitude, desperately seeking the company of others. He believes that he behaves wrongly, being too pushy in his desire to make friends. Everybody is avoiding him, telling him that he is tiring and annoying.

In need of development: relationship with his Self, making first contact with his Self, then with others, building social skills, activating his adaptive resources and finding strategies for solving inner conflicts.

7. G. is 19 years old, he complains about feeling interest for people of the same sex. He was disappointed in his attempts to have intimate relationships with the opposite sex. He has no confidence in his ability to have intimate relationships with the opposite sex. He feels anger towards himself, displaying a defensive attitude towards the opposite sex. Evaluation revealed low self-esteem, tendency to reject compliments, self-doubt.

In need of development: contact with his Self, relationship with the opposite sex, learning and expanding the sense of self-worth, valuing his own resources, improving self-perceptions.

8. M. is 18 years old, a film student; she has a strong tendency to ignore mandatory rules and norms. She acts against them, showing an extreme nonconformity. The negligence of outer looks and of proper manners is obvious; she rejects any advice, behaving rebelliously. She is an only child and she was not refused anything. She considers herself above anyone, having conflicting relationships with others.

In need of development: relationship with her Self and other's. Also, the order, cogitation and punctuality can be developed. Particular attention should be paid to trust in herself and others, hope and secure attachment, appreciation for the reason for which there are rules.

9. F. is 19 years old, is a model and art student. She shows interest in persons of the same sex. She has three older brothers who terrorized her during

childhood. She does not stand boys (ever since her childhood), feeling comfortable only around people of the same sex. She is bothered, though, by the lack of the ability to have an intimate relationship with a person of the opposite sex. She wants to clarify this thing because she often feels prosecuted and stigmatized. Sometimes, she has doubts about it. In need of development: relationship with the opposite sex, sharing experiences with others, finding solutions for inner conflicts, learning how she can change her thoughts and feelings.

### **General objectives**

Initial evaluation findings led to the construction of the following work objectives common to all participants in the group:

- Strengthening self-concept through self-acceptance (of the body, psyche, their own sexuality), aspect which involves clarifying the significant relationships which the teen has had from childhood until present;
- Raising confidence in themselves and others. Trust in others is significantly correlated with self-confidence;
- Increasing the availability for relating;
- Development of social adaptive capacity by increasing empathy, tolerance to frustration and cooperation;
- Tolerance to frustration and cooperative spirit are developed indirectly as a result of increased self-esteem.

The specific objectives were established for each session separately. These objectives were attained by body awareness techniques, expressive art techniques, role-playing in the context of dramatizing the content within personal experiences or of a given situation, all gathered under the dome ludo-therapy principles. Expressive techniques were used both as diagnostic tools and as intervention, being combined in a harmonious manner and in accordance with the needs of the group.

### **Therapeutic strategy for personal development module**

Working in group is an extremely exciting method in therapy which also provides a unique opportunity for group members to discover and express their emotions and feelings, to practice new ways of relating and to give and receive support for their therapeutic journeys. Teen participants can practice self-expression, and experience new ways of being and behaving. One of the biggest advantages is the feedback received by its members. Group members have equal status, which can be extremely important for them: to receive honest feedback from an equal

peer. This group of personal development for teens is centered on developing and undertaking an appropriate relationship with their Ego and other's ego, through alleviation of those intra-psychic conflicts, formed against a background of inadequate self-esteem. Inadequate self-esteem can damage all levels of interaction.

The main purpose of this group process is to help teenager participants to form and to assume a self-image and self-identity appropriate to environmental requirements, in order to overcome these contradictions, emotionally perceived and lived as an impasse to be overcome. Problems of relational adaptation actually reflect a contradictory relation with the social environment.

### **Structure stages**

This personal development module for adolescents is structured in four stages:

**Stage I** (two sessions) - the group has created a climate of trust, unconditional acceptance, which facilitates self-disclosure and personal exploration.

This section contains a series of exercises that have helped to form a cohesive group, to know each other and familiarize participants with the specific techniques of the experiential approach. The first challenge was to build the motivation of adolescents towards experience.

Given that adolescents participating in the group have a quite developed creative potential, we felt that it would be beneficial for them to be put in contact with themselves, on the one hand, and on the other hand with the social reality in which they manifest.

To achieve this contact with oneself and with the environment, we have focused on body awareness exercises and emotional expression in the first place, and second on visualization and imagery exercises.

**Stage II** (four sessions) - had as a target the personal analysis of adolescents, during the accomplishment of the following objectives: exploring and unlocking the emotional sphere, identifying the source that created bottlenecks, dealing with the past, working with cognitions to create thoughts and perceptions in line with reality.

**Stage III** (four sessions) – consisted in exploring issues related to: strengthening of self-concept, self-acceptance, integration of polarities, identifying and activating resources, assuming different roles in life, directing creativity in order to form new behaviors which facilitate relational availability and an appropriate self-assessment in accordance with the requirements of reality.

**Stage IV** (two sessions) – aimed at bringing in and fixing acquisitions obtained during the process, in order to implement them in the new life script.

Throughout these stages, we used art therapeutic techniques, psychodrama, drama therapy and a set of exercises with metaphorical and symbolic support. Special interest was given to body awareness exercises, exercises that opened each meeting, with the purpose of putting participants in touch with themselves, with others and with the “here and now” reality. We also followed the idea of narrating a story from their own experience, focused on finding solutions, with the idea of facilitating the achievement of the aim proposed by the teenager, thus obtaining a therapeutic outcome.

Therefore, such use of stories from personal experience, on the one hand is a self-disclosure, and on the other hand, it can share something relevant to the narrator. These narrative experiences can be staged in the form of scenarios developed together, anchored “here and now”. Group participants can practice in this way self-expression and they can find new ways to be and to behave in groups. They can experience how they relapse into old patterns of relating, and how they can adapt to the present, based on feedback given by group members. Particular emphasis was laid on non-verbal communication, on creative improvisation and on a series of symbolic exercises designed to enable spontaneous emotions and the ability of authentic interactions.

**The unfolding of the therapeutic process,** adapted to the issues and needs of group participants, involves:

- challenge and experimentation, psychotherapeutic provocative sequence that consists in launching an exercise (metaphorically, bodily, verbal) with creative and artistic support, employing participants in a “here and now” experience focused on feeling, introspection and self-discovery;
- exploring and analyzing thoughts, feelings and behaviors associated with experiences reconstituted in the present; this way we obtained an enlightening analysis, during a therapist-assisted sequence, facilitated and supported by group feedback in order to change perspective on past experience (by working with stories, role-playing);
- integration of past experiences in the field of individual conscience by re-signifying them in light of the present experience;
- activating personal resources;
- channeling personal resources in a more healthy and fulfilling life scenario;
- implementation of new acquisitions - to assist the group in the implementation of acquisitions through a metaphorical scenario staged through *role-playing*.

### **Techniques used**

We chose to meet the objectives, by using body awareness techniques, expressive art techniques (drawing, modeling, painting), challenging situations and dramatizations of some contents from one's own life scenario or from given circumstances. The focus was on the use of drama-therapy, which help teens express, understand and work on inner conflicts, produce insights and change. In the framework of drama-therapy, the transmission of nonverbal stimuli (physical, kinesthetic, visual, tactile, olfactory) is more important than the transmission of the verbal message. In dramatized scenarios, teens can develop a new consciousness of self and their body (body movements, facial expressions, senses, imagination). They play their own parts, and during the play, they become more aware, more involved, more vivid.

Through dramatic play, ideas and hidden fantasies are unearthed. In Gestalt type drama-therapy, we use sensory awareness exercises such as pantomime and a series of dramatic improvisations in which the use of verbal language also occurs. In this module, all three forms of drama-therapy are used. Pantomime plays an important role, especially in the early stage when teenager participants are still emotionally stuck, having difficulties with verbal expression. Pantomime of sensory images using vocal expressions and body movements without words enhance sensory awareness. Role-playing and dramatic role reversal techniques are often used in this experiential process. In the first case, the teen is playing his own part, and in the second, he or she is playing the role of an opposed person in real life, so the teenager can see himself through the eyes of the other. Group created scenarios are dramatized. In addition, meaningful sequences are staged, which are designed to enable emotionally those involved. By means of drama-therapy, the understanding of self and others is stimulated, thus establishing mutually meaningful relationships. By using metaphorical scenarios, we aimed to direct creativity in a constructive manner. It is known that all the participants of this group have plenty of creative capacity. As we all know, creative resources are beneficial. There are, however, situations in which all this creative force, instead of becoming productive in a constructive way, can trigger an inappropriate imagery. Since creativity requires independence and divergent thinking, non-conformism and autonomy, creative people are prone to encountering adaptive problems. Automatically, they are more vulnerable to external factors, factors that can slow or redirect the creative potential in an unconstructive direction.

### **Structure of a session**

- Warming Up (starting phase): we have always started the session with a funny game that put participants in contact and had a dynamic role. We have also taken into account that participants in the group, with an excess of visualization due to the nature of their artistic orientation, need to be grounded in reality, to be in touch with themselves and the environment. To this end, the exercises, from the beginning of sessions, focused on body awareness, contact and group cohesion, as well as confidence in self and others.

The general idea of this warming-up segment was for the teenagers to focus on the "here and now".

- Core activities (middle phase) are actually activities chosen as a pretext for exploration and intervention. We used metaphoric scenarios that were centered on dramatizing aspects of personal experiences (psychodrama) and on given situations (drama-therapy). In terms of techniques, role-playing was extensively used.

The techniques used aimed for the active involvement of all teenagers in the process of change, by confronting the past, by working with cognitions, by exploring facets of the ego, by integrating polarities and by unlocking resources.

- Conclusion (end stage): the last activity of the session was decided by participants, in order to conclude in an optimistic note, as a successful culmination of the activity from that meeting. Usually, games to increase the cohesion of the group were used.

The techniques used at the end of the session were meant to build confidence. Before the end of each session, a check for unsettled issues, unresolved questions, or points that teenagers wanted to mention, was made.

Every teenager had the opportunity to share experience and provide feedback. This helped them to have more confidence, both in themselves and in others. They learned to value themselves, to perceive themselves in a positive manner. In this way, they increased self-esteem and became available for social networking.

## **III. Results**

### **Final evaluation**

This stage involves:

- a meeting (last) for qualitative assessment of the module;
- re-testing self-esteem;
- re-evaluation of the degree of externality;
- re-evaluation of emotional stability.

The tracking of the evolution of self-concept was achieved at a qualitative level through the observation

method, during the last meeting and throughout the entire program.

- Self-esteem Scale Rosenberg (SS) - Morris Rosenberg (1965) was used for assessing the level of post-intervention self-esteem.

**Hypothesis:** It is assumed that participation in this program would increase the level of self-esteem in the investigated subjects.

As far as this hypothesis is concerned, it is concluded that self-esteem scores from respondents in the group who received the development program are significantly higher than those from the pre-intervention phase are ( $U = 23.5$ ,  $N1 = 50$ ,  $N2 = 50$ ,  $p = 0.004$ ).

- Locus of Control Questionnaire - Rotter (1966) was used for evaluating the degree of externality after the intervention.

**Hypothesis:** It is assumed that participation in this program would reduce the degree of externalization by increasing self-efficiency.

From the psychological point of view, we can talk about the fact that an optimization and personal development program has a beneficial effect on reducing the degree of externalization.

- Eysenck Personality Inventory (Neuroticism scale) - Eysenck H.J. (1964) was re-applied in order to test the post-intervention emotional stability.

**Hypothesis:** It is assumed that the program of optimization intervention would be effective in reducing emotional instability.

For this research hypothesis, *U* Mann - Whitney test concluded that emotional instability post-intervention scores are significantly lower than those from the pre-intervention phase ( $U = 18.5$ ,  $N1 = 50$ ,  $N2 = 50$ ,  $p = 0.000$ ).

### **Qualitative acquisitions after attending the personal development group**

In the end, all participants were given the chance to self-assess in relation to the benefits of psychotherapy that they have obtained during the process of personal development in an experiential group. Self-disclosures were as follows:

A: For me, it was the first experience of this type and, honestly, at first, I did not know what to expect, but it was a beneficial and new experience, from which I have obtained some benefits. The most important thing is that I have forgiven my father and now I can see my life without waiting for him. Then I made new friends, it was great ...

C: By participating in this development group, I have learned to be more attentive to my true needs, not to relate to others' image of me and to enjoy myself as I am...

S: After this experience, I am more open, I communicate easier with my parents, I have more confidence in myself, I am done reckoning with the past and made peace with my mother, which I do not perceive as a stepmother anymore.

V: I can say that now I see myself with different eyes. I do not see myself so special in comparison to others, I feel available for interaction with others, and I am aware that I should not take too much advantage of my creative potential and that I should control the limits of nonconformity in accordance with the requirements of reality.

R: I realize that part of my behavior was programmed back in childhood and that I have real chances to change. Following these group meetings, I realize that my fears have no real support. For me it was a unique experience and very beneficial. I think I need more experiences like this. I cannot wait for the next development group.

N: What can I say? It was great, exactly what I needed ... I'm sorry it is over... I will return to my solitude, I think for me it was not enough.

G: I have found out that I can relate better, now that I know myself better. I realize that I may have given erroneous value judgments to the opposite sex. It would be ironic if I were wrong! Anyway, it is never too late. I think before I was living with a great fear that I would not be liked by girls, that I would not be accepted in their lives. Now I feel I gained more confidence in myself and I do not fear them so much anymore...

M: I do not know if any changes occurred in my case, but I discovered that search is important. I feel calmer, more aware of my shortcomings. At least, now I know who I am... and since it is never too late, maybe it is time to try the big change...

F: In these meetings, I understood that everyone was unique. I guess I was wrong thinking that all boys were the same. All meetings were steps for the rediscovery of my personal ideas and feelings. I enjoyed every moment in which I was able to know myself better. It is a start...

### **Individual development - case study**

In this chapter, we present the evolution of an individual participant in this group of personal development, in order to capture the impact of group process on an individual level. Evolution of this adolescent is presented as a case study, by adding and arranging relevant and meaningful data on one person.

### **Biographical data**

S. is 17 years old; she is a student in the last year of an art high school; her biological mother died at her birth. She lives with her father who remarried.

### **Motivation for participating in the personal development group**

S. accuses sleep disorders, short bursts of sleep with nightmares followed by panic attacks. Lately, she refuses to sleep given the fear of these nightmares. It happened to her several times to wake up suddenly and to have no control over her own body. She had some terrible fears. She is afraid she will not be able to wake up and she could be buried alive. She is haunted by this idea. Besides these issues, she mentions feelings of helplessness, apathy and discouragement. Her biological mother died at birth and she was raised by her grandparents until the age of six, when she was taken by her father who had remarried in the meantime. She was and still is in a permanent conflict with her stepmother. She is always restricted in the choice of friends. No one is allowed to come to her. She suffers from anxiety and during the day she cries a lot and thinks no one likes her. S. would like to have confidence in herself, to be free, to have friends, to sleep well at night and escape the nightmares.

### **The initial assessment**

TSCS: 2 - test for assessing self-concept (interpretation)

After applying this test, the result was:

- self-criticism (SC) < 40 T, defensive attitude supported by a great effort on behalf of the subject to highlight herself;
- MOR and FAM with scores < 30 T, suggesting the presence of a structure of antisocial behavior. We recommend repeated interventions;
- The measurement of how the person perceives relationships with others (SOC) has the lowest score, below the lower limit. This highlights a high level of isolation and avoidance of social contact, as well as damage to interpersonal relationships;
- TOT < 30 T, the subject is overwhelmed by doubts concerning her value, cautious and conservative in terms of self-description. Generally, she blames external factors, compares to people with lower performance and perceives the best as a threat.

### **DAP interpretation**

The drawing of a person was used, as usual, to capture the characteristics of self-image and the subject's unconscious mental contents.

S. reacted normal in the testing situation. She first drew a figure of the same sex, then one of the

opposite sex. After making the second drawing, she became unhappy regarding the first and wanted to make one more. The first drawing seemed too sad, so she wanted to make another one, funnier and more colorful. The first design exudes an overwhelming sadness. Facial features are depressed, it is a strange girl. Eyes are closed indicating refusal to be in touch with reality. Figure is placed to the left; it is slightly on the move and twisted, with her arms behind her back hidden in an unusual attitude. The tendency towards isolation, internalization and the need for maternal protection is evident. The overall appearance is of helplessness and avoidance of reality. The only element pointing to the right is a kind of wing with thorns for defense. The chest wound that bleeds all the time is suggestive. The red color may indicate repressed aggression. Stretched hands express inability to adapt to the environment and relational difficulties. Lack of feet is a clear indicator for the lack of mobility and for the lack of autonomy or safety.

Even if it is colored, the second drawing is an elusive male figure expressing sadness and uncertainty. The face is hidden by a hat brim and the hands are missing. There are also constraint indicators: collar; and sexual indicators: knobs, hat (feminine attempt to hide masculine impulsiveness).

The third figure, even if it is colorful, repeats the pattern of the first drawing. It expresses the same sadness and the hands are the same. In all three drawings, the head is relevant for the problems of self-concept and difficulty in adapting to the environment. There is another indicator of constraint: necklace around the neck (blockage in communication). Noteworthy is the fragile neck, aspect that highlights the difficulty of pulsating control.

### **T.A.T**

Story board 2: The girl in the picture cannot stand life with her parents. She does not even see a connection between her and them. She realizes she must leave, but cannot find the courage. She is thinking, with the books in her arms, maybe she comes up with an idea...

Story board 20: The man leaning against the lamppost is a single father. He thinks bitterly that he has a child without a mother. He does not know what would be best for his child... or for him? Would it be better to seek a mother for the child, or a wife for him? He has a great dilemma... He keeps thinking about himself... he already forgot that a girl who cannot sleep because of loneliness is waiting at home.

Projective tests expressed relevant data concerning negative self-image, low self-esteem, interpersonal



difficulties and inadequate adaptation to the environment and situations. Lack of feet denotes indecision and uncertainty, and strange contorted hands hidden behind show a lack of control over the environment. Very sad human figures (girls) refer to states of depression, dissatisfaction and helplessness.

Self-esteem: baseline score 12 NS: low. A low self-esteem can lead to psychological problems. It is advisable for the self-esteem to have a medium level. S. has a very bad opinion about herself, says that she was inoculated this idea from an early age. *Only her grandparents saw her differently, they thought she was strong, smart and beautiful. Unfortunately, they are not around anymore to encourage her...* During the final evaluation she obtained the score 21, obviously optimistic.

Locus of control: 20 score: prominent external orientation. S. has the locus of control outside. In fact, she recognizes that everything that happens to her has external causes. *She cannot do anything; she is not strong enough to intervene. Destiny is already written; after all, it is not her fault that her good mother died when she gave birth to her...* In the end, she got the score 15, close to the normal range (13).

Neuroticism: baseline score 21 NC: increased level indicating a pretty high emotional instability. The emotional unstable (the one with a high score) shows strong emotional reactions that often interfere with maladjustment to the environment and which lead him to irrational and inflexible reactions. The reevaluation score was 13 NM (medium).

### **Permanent assessment**

Her behavior in the progress of the group activities was quite reserved at first. During the exercise *without a mask*, she was hard to discover. Starting with the third session, an opening on her behalf was felt; she became cooperative and communicative, when she offered to intervene after the *journey into the past* exercise:

T: ... *let's see, who starts?*

S: *I'll try it.*

T: *Let's see S. how was it for you?*

S: *Hard... I offered to talk because I have not yet lost the courage instilled by the atmosphere during exercise. As well as G., I'm surprised at the ease with which I spoke about me.*

T: *I see, for you, Sabina, it is hard to reveal yourself, to talk about yourself...*

S: *That's right, I do not have friends, I have trouble communicating.*

T: *I understand that you want to have friends, right?*

S: *Yeah, I wish I had friends, a social life.*

T: *Do you want to talk about how you felt when you revealed things about yourself?*

S: *At first, I thought a few words will suffice to cover everything, but it was not so...*

T: *Tell us how it was...*

S: *After I released the emotions, I noticed that everyone looked forward to hearing what I had to say about myself. I felt important, appreciated and encouraged...*

S. showed great spontaneity and originality. Slowly the sadness on her face disappeared. After some analysis centered on her unfinished relationship with the biological mother, she said that her stepmother does not seem to bother her as much as before.

In the group psychotherapy program based on the experiential approach, Sabina made the following mental and behavioral acquisitions:

- she has realized that she has no blame for what happened to her biological mother;
- she understood the need to clarify the relationship with her stepmother. During group meetings, she realized that she was unfair to her;
- she started to communicate more openly with her stepmother, they started going out together;
- the most important acquisition is that she no longer has nightmares at night. Even if she falls asleep late, she does not panic anymore;
- she keeps her mind busy with all sorts of memories from daytime;
- she began to make plans for the future, a future that includes her parents;
- she feels a kind of reconciliation; about what happened to her biological mother, she realizes she has no blame;
- she begins to feel supported and understood, not criticized and rejected.

Towards the end of the therapy group, her emotional mood changed, she became optimistic and eager to live, began to want to spend time with her present mother, she did not call her *stepmother* anymore. She did not worry so much that she still had insomnia. Unjustified fears were diminished. She hopes the fears will disappear completely in time.

Below there are some aspects of the final evaluation session, aspects of Sabina's significant progress during the therapeutic process:

T: *Now place the three drawings in front of you, build a relationship with each other and try to observe and share what you feel watching them together. Let's see, who wants to start?*

S: *I'll start, although, as I look more to the drawings, it seems to me that I didn't even draw them...*

T: Let's take them one at a time, first show them to us. What can you say about S. requesting personal development?

S: It seems like it isn't me... (the first drawing represents a female figure with two heads. Each head looks in a different direction, one to the right and one to the left)

T: Why did she have two heads?

S: If I think about it, at the time I was very confused, I did not know where to go. This is why I came here...

T: You said you were confused, meaning... ?

S: Well, it's as if I had two thoughts in mind, one said "do something", and the other did not allow me to act, I was confused...

T: How did you feel when you were confused?

S: I was restless, irritable, often angry...

T: ...angry with whom?

S: ...my stepmother, actually I do not want call her that way anymore. Now I'm not angry with her.

T: What thoughts went through your head when you got angry with your mother?

S: I do not even want to remember, sometimes sinister thoughts went through my head, I imagined I could see her dead. I cannot believe I thought this way...

T: Why did you call her "stepmother"?

S: Because she is not my biological mother. My real mother died when she gave birth to me.

T: Earlier you said you do not want to call her "stepmother" anymore... ?

S: Because I realized that she is not that bad and that she has no blame for what happened to my biological mother. Nobody is to blame...

T: There were times when you thought otherwise...

S: Unfortunately, yes, sometimes I thought I killed her ... that's why I do not want to forget or betray her image. I decided to keep her always in my heart, even if I didn't know her. When I got mad at my mom, I was actually refusing to accept her so that I would not betray my biological mother.

T: Let's get back to the drawing, whose do you think are the two heads?

S: I think I figured it out, one is mine and the other one is my mother's... the mother I do not want to forget. Now I know what causes my restlessness and doesn't give me peace...

T: And the other drawings?

S: Now it's easy, I unraveled the enigma.

T: Tell us, if you want...

S: I'd be glad to do it, in fact it is a release for me, I feel so relieved... Let's start with the second

drawing which depicts two heads separating from each other. They free one from another. They look like two kites taking off, each on its way. I do not think there is anything more to be said... it is obvious. Now I really think this way. I actually held my mother captive in my mind... and myself at the same time. Let there be light!... How differently I see things now.

T: And the third drawing ?

S: The third design represents me healing myself. Do you see this cut? Everything that is wrong with me comes out right here... I'll be another person that will sleep well.

T: How did you come to draw your cut there?

S: I really do not know, does it matter?

T: What do you think...?

S: Well, if I look at it carefully and if I make some connections... I think I did a C-section. I realize now, my mother died during caesarean surgery... somehow, I pulled her out of me this time.

T: What do you feel now?

S: Honestly, a great relief... It's like I got off a heavy bag from the shoulder, a bag that nobody put on my back, I put it on myself...

T: Thank you for your trust!

S. declares herself outright fascinated by this group experience: "Lighter, easier communication with parents and others, I gained more confidence in myself and I learned that sometimes it becomes annoying to blame others for not agreeing with me. It does not bother me so much that I do not sleep at night... I'll find something to do."

#### IV. Conclusions

After this experience, Sabina feels liberated from the black thoughts that gave her no peace. She is satisfied that she has a normal relationship with her mother, she feels liberated from the blame she felt about the death of her biological mother. She is happy that she made new friends. It would be advisable to spend more time with her present mother, to do activities together, to spend time with her new friends, to build projects for the future.

The beneficial effects that this process of personal development had upon the adolescent participants demonstrate that experiential psychotherapy is effective in enhancing the relating capacity.

After this experience, we confirmed the belief that experiential exercises and techniques have a positive effect on adolescents with relationship problems. The fact that a few of them showed clear signs of change is further proof that it is never too late to improve an attachment pattern that was built on a shaky foundation.

Regarding the concept of self, after the reevaluation, there was a quite relevant improvement in the scores of some facets of self. The scores for physical, personal and social self-concepts increased in three of the participants. Family self-concept score increased in one of the participants and the global self-concept score increased in two of them. These two were undergoing individual case studies.

The fact that we mainly worked on body awareness, meditation and mentalization led to emotional harmonization, which has enabled and stimulated the activity of the left hemisphere. Most participants expressed the fact that they no longer felt detached from reality, that they felt good in their body, and that they began feeling positive emotions, which had been unknown to them until that moment.

At the end of the personal development process, some of the group members said they did not feel those internal discrepancies anymore, that they did not feel in conflict with themselves, and that they could appreciate themselves appropriately, in accordance with the requirements of reality.

As a conclusion, the experiential approach proved once again, the importance of anchoring in “here and now” and of bringing into play the experience that created suffering, with the aim to obtain a flexible attitude in order for the subject to see the multitude of alternatives for solving a situation. When all levels (body, mind,

emotions) work as a whole, the consequences of integration result in reduced relational adaptation problems.

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