



Theater Therapy for Young People with Intellectual Disabilities

People with intellectual disabilities constitute an extremely varied group as regards the main aspects of psychic functioning, as well as skills development and the ways of coping with emotionally and behaviorally difficult situations. The differences in the emotional sphere are observed in their ability to recognize and express emotions, while the behavioral ones concern understanding and obeying social norms, co-operating in group, performing certain social roles, and the quality of interpersonal relations.

Many individuals with intellectual disabilities are faced with a barrier created by their inability to cope with situations that require making individual, often very difficult, moral choices. In order to reach a particular decision in a given situation one needs and be aware of his or her personal responsibility for its consequences to have a certain level of assertiveness, as well as a relatively well developed understanding of that kind of situation. Thus, the quality of the choice made determines whether the threat to one's sense of self-dignity increases or diminishes.

Very often individuals with intellectual disabilities encounter problems with realistic perception of their own limitations and capabilities. Their assessment of their own worth and self-acceptance are dependent on the assessment and opinions expressed by others. Respect and acceptance exhibited by those from their nearest environment enable individuals with intellectual disabilities to notice positive aspects of life, despite difficulties associated with their disability.

In contrast, their self-perception adversely affected by such factors as visibility of their disability, limited communication abilities, limited in-

dependence or self-reliance and social stigmatization results in low self-esteem and it may also weaken numerous defense mechanisms¹.

The results of research conducted by Andrzej Giryński and Stefan Przybylski (1993)², as well as Antonina Ostrowska (2003)³ show that individuals with intellectual disabilities are perceived much more negatively by their environment than those with other disabilities, for example physical ones. It is this group of individuals, in addition to people suffering from mental diseases, that arouses the strongest negative emotions and the greatest desire to keep them at a distance. It is likely that because of this they have fewer opportunities to get to know themselves in various interpersonal relations and to participate in the surrounding reality. Variety or greater dynamics of such relations would enable them easier systematization of the world through experience, recognition and naming their own emotions and feelings. They could also better develop their ability to recognize emotions of others and learn how to create opportunities to assertively express their own ones. Considerable research on developmental and adaptive capabilities of individuals with intellectual disabilities has proved that the wider and more stimulating their participation in social life, the more they are able to achieve, and their autonomy can be shaped by developing personal and social competences⁴.

According to Władysław Dykcik, the power that ignites intrinsic activity of such people is both a symptom of their autonomy and a significant factor that shapes it⁵. Such activity is likely to increase their independence in performing tasks as well as the frequency and courage of making right choices. Ditta Baczała points out that the way to support people with intellectual disabilities on their way to self-determination is "to ask them about their opinions; to listen to their opinions on any subject and pay attention to their views"⁶.

¹ E. Minczakiewicz: *Postawy nauczycieli i uczniów szkół powszechnych wobec dzieci niepełnosprawnych umysłowo*. W: *Społeczeństwo wobec autonomii osób niepełnosprawnych*. Red. W. Dykcik. Poznań: Eruditus, 1996.

² A. Giryński, S. Przybylski: *Integracja społeczna osób upośledzonych umysłowo w świetle ujawnianych do nich nastawień społecznych*. Warszawa: WSPS, 1993.

³ A. Ostrowska: *Kompetencje społeczne osób niepełnosprawnych – bariery dorosłości*. W: *Dorosłość, niepełnosprawność, czas współczesny. Na pograniczu pedagogiki specjalnej*. Red. K.D. Rzedzicka, A. Kobylańska. Kraków: Impuls, 2003.

⁴ D. Baczała: *Niepełnosprawność intelektualna a kompetencje społeczne*. Toruń: Wydawnictwo Naukowe Uniwersytetu Mikołaja Kopernika, 2012.

⁵ W. Dykcik: *Problemy autonomii, integracji społecznej i normalizacji życia osób niepełnosprawnych w środowisku*. W: *Pedagogika specjalna*. Red. W. Dykcik. Poznań: UAM, 2005, pp. 363–365.

⁶ D. Baczała: *Niepełnosprawność intelektualna...*, p. 98.

Consequently, creative activity that reveals uniqueness of each person has a great role to play. As Władysława Pilecka points out, creativity is a basic condition of real adjustment, "the most personal processing of information based on one's internal resources"⁷. Quite often, people with intellectual disabilities prove their awareness of their own distinctiveness in the world.

Art therapy is a method that affirms individuality, originality, and uniqueness of subjects participating in the creative process, the character of which depends on the artistic and therapeutic goals. It involves a series of directed psychic and physical activities that support and stimulate development and lead to – more or less conscious – expression of one's own personality. The development of creative potential in the process of art therapy for people with intellectual disabilities is conditioned by human right to freedom, understood as "the right to free expression of one's assessment of what is going on"⁸.

However, they need to put in a lot of effort and hard work in order to learn how to objectively and realistically assess the impact of disability on their emotions and feelings and how it affects their social functioning in everyday situations.

Social situation of people with intellectual disabilities

Personal dignity

In the literature exploring the issue of dignity, there is no single, commonly accepted concept of a sense of personal dignity⁹. Among all definitions there are, however, some common trends. Most frequently a sense of personal dignity is defined as a value, trait, or moral qualification that a human being attributes to specific behavior. There are two overlapping aspects of a sense of personal dignity:

- a general social aspect dependent on social relationships, associated with one's own usual behavior and that of others;

⁷ W. Pilecka: *O dziecięcym przekraczaniu siebie w sytuacji trwałej utraty zdrowia*. W: *O poznawaniu siebie i świata przez dziecko ze specjalnymi potrzebami edukacyjnymi*. Red. W. Pilecka, K. Bidziński, M. Pietrzkiewicz. Kielce: UJK, 2008, p. 265.

⁸ A. Brzezińska: *Drogi dziecka ku samodzielności. Między sprawnością a niepełnosprawnością*. W: *Droga do samodzielności. Jak wspomagać rozwój dzieci i młodzieży z ograniczeniami sprawności*. Red. A.I. Brzezińska et al. Gdańsk: Gdańskie Wydawnictwo Psychologiczne, 2009, p. 29.

⁹ F.J. Mazurek: *Godność osoby ludzkiej podstawą praw człowieka*. Lublin: Wydawnictwo Katolickiego Uniwersytetu Lubelskiego 2001, p. 55.

- a specific individual aspect associated with taking particular action in situations of moral dilemma. It requires making judgments and using certain criteria regarded as values.

It needs to be emphasized that self-respect or self-esteem are central to maintaining mental health and well-being. Respecting an individual's identity and protecting their dignity will help to promote recovery, whereas acts that violate dignity and fail to respect an individual and his or her story can lead to further damage. It is pointed out in "World Report on Disability 2011" that people with mental health problems are one of the most socially excluded groups in society¹⁰. People with disabilities do not necessarily suffer as a result of a reduced well-being. They suffer when, for example, due to certain external requirements (regardless of difficulty levels) they are evaluated as being dependent on other people. These people tend to feel discomfort in situations that may be challenging enough to make them rely on other people in order to accomplish a certain task successfully.

Aleksandra Zawislak¹¹ states that people experiencing various limitations resulting from intellectual disabilities can make precise and accurate statements describing their situation. Moreover, they evaluate their current situation the same way as non-disabled people, that is, objectively by applying certain standards, or subjectively, by relying on direct assessment of their circumstances. It should also be noted that qualitative, rather than quantitative factors that determine a sense of emotional well-being are considered very important criteria of assessing the quality of life.

Theater therapy as a powerful tool for social skills development

The conducted research attempts to verify the hypothesis that improving one's self-esteem may help to prevent the development of psychological and behavioral problems, which are common to children and adolescents with mild intellectual disabilities. The test designed by the author intends to examine the assumed positive effects of drama workshops on self-esteem in young people with mental disabilities¹².

¹⁰ http://www.who.int/disabilities/world_report/2011/report.pdf [accessed 20.12.2014].

¹¹ A. Zawislak: *Jakość życia osób dorosłych z niepełnosprawnościami intelektualną*. Warszawa: Difin, 2011.

¹² Preliminary research results were published in: *Using Theatrical Activities in the Process of Developing a Sense of Dignity among Youth with Slight Mental Disabilities*. "Polish Journal of Applied Psychology" 2006, vol. 4(1), pp. 81–90.

Boosting resourcefulness and optimism in people with disabilities by emphasizing their independence and involvement in the creative process is one of the objectives of the concept of theater therapy adopted by the author, namely, the so-called Theatre of Thought¹³. The techniques used in the theatre aim to reduce the resistance against the disclosure of the participants' emotional experiences and to assist them in becoming aware of their beliefs, expectations, and aspirations. This, in turn, aids communication and promotes a better understanding of each other among participants. According to Sally Bailey, "by experimenting with different methods of dealing with the situation in drama therapy workshops, we can learn new strategies that we are comfortable with. Besides, it's more fun than worksheets or lectures"¹⁴. She also points out the opportunities of dramatic play, role-playing, and interaction that allow people with disabilities to "examine and explore the consequences of different decisions without taking risks [...]". Role playing real-life situations and watching others do so allow students to rehearse a skill until it becomes part of their skill repertory"¹⁵.

Story telling

Just like healthy individuals, people with disabilities have their own life story to tell, and they want to be heard. They also demonstrate a need to create and express themselves. Story telling employs language arts to facilitate healing and thus increases a sense of well-being – by means of creative writing, storytelling, poetry reading, and writing. Such activities stimulate cognition and reflection on one's own life story; moreover, they aid stress release and enhance meaningful communication among participants.

Despite many differences, drama therapy and formal theater stand close to each other. According to Katherine Amsden, "drama therapy is a more indirect approach that allows the person to deal with issues from a distance and helps manage defenses"¹⁶. Sally Bailey adds that, "drama

¹³ The concept of the Theatre of Thought is described by the author of this article in *Teatrotterapia jako metoda kształtowania poczucia godności u osób niepełnosprawnych*. Poznań–Kalisz: Biblioteka Arteterapeuty, 2012, pp. 233–249.

¹⁴ S. Bailey: *Drama: A Powerful Tool for Social Skill Development*. "Disability Solutions" 1997, vol. 2(1), p. 2.

¹⁵ Ibidem.

¹⁶ B. Trainin Blank: *Theater Processes Therapeutic in Drama Therapy*. *The New Social Worker*. http://www.socialworker.com/feature-articles/practice/Theater_Processes_Therapeutic_in_Drama_Therapy/ [accessed 25.03.2015].

therapy also gives people the opportunity to change their life's narratives," pointing out that "creativity is the birth right of every human being"¹⁷.

Experiential drama therapy and role playing can thus be employed to teach how to express emotions and use body language, which can pave the way for a better control of emotions. Participants learn what emotions are like and also get to know how to act in certain situations. Drama therapy workshops offer individuals with disabilities a safer environment for experimenting with emotions. Another advantage of drama therapy is that it uses many different modalities, such as music, dance, poetry, movement, etc.

Drama therapy/theater therapy

The meaning of both terms is similar¹⁸ and sometimes they are used interchangeably¹⁹. Drama engages both the human mind and spirit. Malchiodi defines drama therapy as "the systematic and intentional use of drama/theater processes, products, and associations to achieve the therapeutic goals of symptom relief, emotional and physical integration, and personal growth"²⁰. This form of therapy uses drama/theatre techniques to stimulate emotional and physical integration, as well as to facilitate personal growth. It enhances the participants' ability to express their feelings and their personal experiences, solve problems, set goals and, above all, it improves their interpersonal skills, as well as the quality of their relationships with others. Drama techniques are useful in: developing enquiry skills, encouraging negotiation, stimulating understanding, and boosting creativity. They can be a useful tool in involving young people with disabilities in active learning and thus improving their social skills. Thanks to their involvement in drama activities the participants' cognitive and communication skills improve and develop. Their creativity and individuality are fostered and physical activity is encouraged, which leads

¹⁷ Ibidem.

¹⁸ A. Stefańska: *Wokół podstawowych haseł teatroterapii*. Cz. 1: *Próba ustaleń terminologicznych*. <http://arteterapia.pl/wokol-podstawowych-hasel-teatroterapii-czesc-i-proba-ustalen-terminologicznych/>. [accessed 10.12.2014].

¹⁹ L. Neumann: *From the German theatre therapy practice*. In: *Arts – Therapies – Communication*. Vol. 3. *European Arts Therapy. Different Approaches to a Unique Discipline Opening Regional Portals*. Eds. L. Kossolapow, S. Scoble, D. Waller. Muenster: Lit Verlag, 2005, pp. 337–339; S. Mitchell: *Therapeutic Theatre: A Paratheatrical Model for Dramatherapy*. In: *Dramatherapy, theory and practice for teachers and clinicians*. Ed. S. Jennings. Vol. 2. London: Routledge, 1992.

²⁰ C.A. Malchiodi: *Expressive Therapies: History, Theorie, and Practice*. In: *Expressive Therapy*. Ed. C.A. Malchiodi. New York: Guilford Publications, 2005, p. 2.

to the strengthening of their self-esteem. Drama therapy is particularly useful in working with people who experience everyday social stigma due to their disabilities. In drama therapy, participants acquire knowledge of themselves by creative and artistic activities, provided they encourage active participation. The degree of involvement in the creative process, to some extent determines the willingness to reveal the realm of their own feelings, passions, and dreams. It often happens that participants take on tasks commonly assessed as exceeding psychophysical capabilities of people with disabilities. The key element of drama therapy with intellectually disabled people is the focus on those who demonstrate the ability to overcome the difficulties of their everyday lives by making independent choices. Hence emphasis is put on workshop activities. Such kind of therapy requires therapists to watch how actors approach the play; how they communicate and interact with other participants; whether they are patient enough to work in a team; how they concentrate during the task, and in what situations they fully indulge themselves in the sheer pleasure of doing something. These types of behaviors lay the foundation for feelings of having a positive impact on the environment and they develop confidence.

Satisfaction with the course is viewed differently by different participants. For some, it is achieving self-acceptance in some extraordinary situations; whereas for others, it is establishing positive relationships with the previously unknown people. In the course of creative activities, some accumulated tension and feelings may get released, causing some impediments of proper experiencing of feelings. The spontaneity of expression in drama techniques reduces the resistance against disclosing one's feelings. It is important that experiencing personal changes in a group, such as a drama group, give hope of transferring those skills into everyday life²¹.

Research problems and purpose

The research presented in this paper focuses on a sense of personal dignity in young people with mild intellectual disabilities. Its main purpose is the verification of the hypothesis that an increase in self-esteem through drama therapy activities may help to prevent or reduce the development of psychological and behavioral problems, which are common in children and adolescents with mild intellectual disabilities. It was also assumed that the findings will be used as methodological advice for the theater and

²¹ I. Yalom, M. Leszcz: *Psychoterapia grupowa. Teoria i Praktyka*. Kraków: Wydawnictwo Uniwersytetu Jagiellońskiego, 2006, pp. 487–491.

therapeutic work which was aimed at shaping and developing a sense of personal dignity in young people (17–19 years old) with mild intellectual disabilities²².

For the purpose of this research the model of theatrical activities in rehabilitation was developed. The formulated hypothesis proposes that theatrical actions will have a positive impact on shaping and developing a sense of personal dignity of the participants. More specifically, it assumes that drama therapy activities will increase the participants' ability to: (1) recognize dignified and undignified behaviors in social situations and (2) understand and plan their own dignified behaviors in particular situations. These situations included:

- defending someone who needs help;
- defending one's own opinion;
- exhibiting loyalty towards others;
- showing ability to admit one's mistake;
- flattering others to achieve some benefits;
- letting oneself to be humiliated;
- exhibiting one's own superiority;
- telling lies.

The following operational definition of dignity was adopted for the purpose of the research. The sense of one's own dignity is a relatively constant belief in one's own value, expressed as opinions and judgments of dignified and undignified behaviors and those of others, and manifested in a relatively constant readiness to react in a given way in a situation requiring a moral choice. The indicators of dependent variable were: (1) the number of recognized dignified and undignified behaviors; (2) correct assessment of dignity behaviors of others; and (3) the ability to plan one's own positive behavior in specific social situations.

Research method

The measurement was done by using a specially designed test – that is, a “test of moral choice in clearly defined social situations”. Participants were shown a film depicting four dignified behaviors and four undignified ones listed above. In the first four scenes, the participant's dignity was preserved thanks to his or her effort, while in the next four, his or

²² The outline of the project was presented in: A. Stefańska: *Wykorzystanie dramaterapii w budowaniu poczucia godności własnej młodzieży z niepełnosprawnością intelektualną*. W: *Arteterapia jako dyscyplina akademicka w krajach europejskich*. Uniwersytet Wrocławski w ECARTE. Red. W. Szulc, M. Furmanowska, J. Gładyszewska-Cylulko. Wrocław: Oficyna Wydawnicza Atut, 2010, pp. 201–202.

her dignity was violated because of the lack of action on his or her part. The participant's level of dignity is expressed as the sum of points obtained for understanding the behavior of others and the ability to plan one's own positive behavior. It results from the assumption that a sense of dignity depends on two factors, namely, the degree of understanding certain social situations that affect the individual's moral status and his or her recognition of moral values. The test results were evaluated by three competent judges.

In order to verify the hypothesis, action research was conducted with the use of a parallel-group technique. Therefore, to assess the sustainability of the impact of the theater activities on planning dignity behaviors, the test was repeated after three months. Selected group of adolescents with mild intellectual disability participated in the theater therapy activities, based on the model developed by the author. The aim was to evaluate the expected desired changes in the participants' behaviors.

The model constructed for the purpose of this research is based on the constantly repeated cycle of different actions, constituting successive stages in theatrical activities:

Stage 1. The exercise points to the acquisition of acting skills while having opportunities to express oneself, as well as learning means of expression commonly used in drama (forms of exercises: body workout, working with the body, voice, space, props, structured games, art activities, singing, playing music, dancing).

Stage 2. The search involves presenting the participants' behaviors in a given situation on stage, looking for motives of such behaviors and expression of judgments and opinions relating to the events presented on stage (forms: individual and team tasks acting, etudes and genre scenes, pantomime exercises).

Stage 3. Integration consists in assuming the role imposed by the screenplay and developing the ability to judge the behavior of the character played (forms: improvised dramatization).

Stage 4. Action is perceived as participation in the process of performance creation.

The method used in the research enabled getting feedback from the respondents. It was conducive to the exchange of different views and the evaluation of the situations in which they were involved.

During the improvised dramatization an observation sheet was used in the following categories of the subject's behavior. It assessed: (1) expressing an opinion on a given situation; (2) exhibiting readiness to dignified behavior; (3) independent dignified action; and (4) evaluation of one's own behavior in a given situation. During the observation the dialogue method was used. The reason for choosing this particular method was its potential to stimulate thinking while participating in the dialogue and to

exchange opinions without judging another person. The proportion of free expression and directed dialogues changed in time, depending on the progress preparations for the performance.

Since the procedures of the study fell within the experimental model, the diagram of the statistical analysis of data was matched to that model. Basic statistics used in the analysis are the tests of the significance of group differences for dependent and independent data. Non-parametric tests were used, that is, the Mann-Whitney test (two independent groups) and the Wilcoxon test (two groups dependent).

The research was conducted on a group of 42 individuals with intellectual disabilities, who attended special classes in Vocational School in Ostrów Wielkopolski and the Special Education Center in Kalisz. The selection of the experimental and control groups was purposeful, so that the two groups meet the criteria of homogeneity. Each group consisted of 21 persons (12 boys and 9 girls).

Research results

The results of the research enable the verification of the hypothesis. The results show that after theatrical activities the group of 17–19 year old girls and boys with intellectual disabilities:

- more accurately recognized the dignified and undignified behavior in some social situations involving moral choice, because they often perceived them as behavior resulting from moral obligations;
- exhibited a higher degree of understanding and demonstrated the ability to plan their own dignified behavior in situations requiring the defense of someone in need; showed willingness to act on behalf of other people, and applied individual standards;
- showed a tendency to more adequately understand the situations requiring them to defend their own opinions, to exhibit greater ability to plan their dignity behavior in such situations, and to be more positive about their actual capabilities of self-defense;
- demonstrated a tendency to better understand the situations requiring loyalty to others and to prove their ability to plan their own dignity behavior in such situations; understand the interdependence of another person's life and their own actions;
- exhibited greater understanding of achieving certain benefits in result of flattery; saw what this involves; noticed other people's problems in situations of indignity and identified with them, although in this respect they only exhibited certain trends in planning their own behavior;
- exhibited a tendency to more adequately understand the situation involving humiliation and exhibited a greater ability to plan their own

dignified behavior in such situation; often declared their readiness to work towards self-motivation;

- showed a tendency to more adequately understand the situation involving superiority and exhibited greater ability to plan their own dignified behavior in such situations; they said that dignity behavior is important for building self-esteem;
- showed better understanding and demonstrated the ability to plan their own dignified behavior in such situations that required the assessments of their own dignity behaviors, which might result from their higher self-esteem.

The analysis of the results of the measurement repeated three months after the final test (t3-t2) indicates that the upward trend in the level of dignity in subjects remained constant (no difference was observed).

As regards analyzing and understanding dignity and indignity behavior of others and planning one's own dignity behavior, after ten months from initial research (t3-t1), it is clear that the differences are statistically significant, and therefore there was:

- a significant increase in understanding the situation of flattering others to achieve certain benefits;
- a significant increase in the respondents' planning their own dignity behavior in relation to the situation of acting in defense of someone in need of assistance (situation 1), exposing others to defending their own opinions (situation 2); loyalty to others (situation 3), ability to admit one's own mistakes (situation 4), and letting oneself to be humiliated by others (situation 6).

The result is very interesting, in particular for the situation of being exposed to the necessity of defending one's own opinion. Before theater activities this situation was poorly recognized by the respondents. Out of eight situations examined, this one revealed greatest difficulties in planning the individuals' own dignity behaviors. After theatrical activities, significant growth was observed at t3. It may indicate that changes in the understanding of such situations and behavior result from both real-life experience or previous knowledge, as well as greater self-esteem developed through drama activities.

This result could indicate that for people with intellectual disabilities social situations that cause negative emotions are easier to recognize and to react to. Situations that bring about strong negative emotional connotations are recognized by them more efficiently than those that arouse positive emotions. Therefore, the subjects were able to determine in a more accurate way what they did not want rather than what they wanted. Thus, a level of understanding may indicate the level and scope of their real-life negative experiences. Similarly, the situation involving telling lies made the subjects show a relatively high degree of understand-

ing and a moderate ability to plan their behaviors. There was a significant decrease as regards the situations in which the subjects' recognized certain behaviors, but did not plan their own actions in reacting to them. Thus, it can be concluded that young people in group E frequently and accurately recognized dignity behavior of other people and were able to plan their own dignity behavior in result of theatrical activities. Clearly, the subjects often planned their own behavior, even when they did not fully understand the dignity behavior of others (e.g., "I do not know whether he does well, but I would do"). There was a significant increase in understanding dignity behavior of others, which may show that there was a comparable increase in the level of the subjects' sense of their own dignity as compared with the initial measurement.

Conclusions

The research results confirm the hypothesis that the improvement of self-esteem acquired or developed through drama activities may have a positive impact on preventing or reducing the development of psychological and behavioral problems that are often observed in children and adolescents with mild intellectual disabilities. Further research is recommended to examine the extent to which social skills of adolescents with mental disabilities can be enhanced through their participation in drama activities aimed at increasing the participants' sense of dignity and self-esteem.

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Theater Therapy for Young People with Intellectual Disabilities

Summary: The aim of this work is to present the therapeutic effect of theatrical activities in the process of shaping and developing a sense of self-respect among young people with mild intellectual disabilities. Psychological and behavioral problems in children and adolescents with intellectual disabilities are very common, and therefore in this paper an attempt is made to show that improving self-esteem plays an important role in dealing with such problems, both potential and already existing ones.

Key words: intellectual disability, personal dignity, theater therapy

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Die Therapie mittels Theaters für die intellektuell leicht behinderte Jugend

Zusammenfassung: Die Arbeit beabsichtigt, die Folgen der therapeutischen Theatertätigkeit im Prozess der Bildung und Entwicklung des Ehrgefühls bei den intellektuell leicht behinderten jungen Menschen darzustellen. Psychologische Probleme und Reaktionsschwierigkeiten treten bei den Kindern und Jugend mit intellektueller Behinderung sehr oft auf und deshalb versucht die Verfasserin zu zeigen, dass die Formung des eigenen Ehrgefühls alle schon bestehenden und auch potentiellen Schwierigkeiten zu bewältigen hilft.

Schlüsselwörter: intellektuelle Behinderung, Ehrgefühl, Erziehung mittels Theaters