

EMOTIONAL REGULATION IN INSTITUTIONALIZED TEENAGERS IN MEXICO CITY: A PILOT STUDY

REGULACIÓN EMOCIONAL EN ADOLESCENTES INSTITUCIONALIZADOS DE LA CIUDAD DE MÉXICO: UN ESTUDIO PILOTO

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Extended Summary

Problematization

The institutions that provide protection and shelter against the vulnerability of teenagers at risk are intended to offer comprehensive care to this population, which for various reasons cannot receive it from their family.

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Based on previous interviews with officials and psychologists of Mexican orphanages it was detected that there are several reasons that have led teenagers to the condition of institutionalization. Some of these reasons are: orphanhood, violence, vagrancy or specific contexts in which the parents cannot meet the basic economic needs of their children and so requested the admission of them to these institutions.

The psychological maturation of this population has been modified by experiences of submission, by the need to start working at a very young age in order to survive or because they have been subjected to early and traumatic sexual activity. At the same time, these teenagers face the challenge of adapting to a context of institutionalization. An attempt is made to ensure their comprehensive care, but from their perspective it can be experienced as a place of deprivation of liberty.

During adolescence, the ability to regulate emotions is often affected, since it is a developmental stage signed by great instability. We understand emotional regulation as the set of heterogeneous processes by which emotions are controlled, either by amplifying them, decreasing them or maintaining the intensity of the reaction. In addition, emotional regulation involves changes in response systems (Gross, 1999).

Institutionalized teenagers carry with them some short, medium and long-term sequelae in the scope of emotional and psychosocial development, which affects adaptation and interpersonal relationships (Duque, 2011; Ampudia-Rueda & Guevara, 2012). It is common for emotions such as anger, sadness and fear to get out of control when anxiety and depressive disorders take place, causing individuals to fail to understand them and regulate them properly (Company et al., 2012).

One of the psychotherapeutic alternatives that has shown its effectiveness in the treatment of depression and anxiety is psychodrama (Lizano, 2017; Gönenir et al., 2018; Reyes, 2013). Psychodrama is based on the dramatic representation of real or imaginary past, present or future stories, experienced by a storyteller as if they were happening in the present. The effectiveness of psychodrama in the face of depression, anguish, post-traumatic stress and deep melancholy has been proven (Benavides, 2017; Biolcati et al., 2017; Gönenir, et al., 2018; Reyes, 2013; Ron, 2018) and as a psychotherapeutic tool that contributes to the reduction of social anxiety levels (Akinsola y Udoka, 2013; Benavides, 2017; Bilge y Keskin, 2017; Biolcati et al., 2017; Tarashoeva et al., 2017; Reyes, 2013; Ron, 2018).

In addition, we can point out researchers that have verified the positive elements of psychodramatic psychotherapy in working with institutionalized children (Cuadrado y Herranz, 2000; Durán et al., 2018; Herranz et al., 2014; Ruiz et al., 1995).

In this research we propose as our goal to analyze the changes in the emotional regulation processes of teenagers in a Mexican orphanage from an intervention with psychodramatic psychotherapy.

We describe below the methodology, phases and type of research.

Methodology

Participants

The research was developed in an orphanage at Mexico City, between September and December 2019. We worked with 13 teenagers of both genders (4 females and 9 males). The mean age of the participants was 14 years. The main reasons for entering the orphanage were: mistreatment, orphanhood, extreme poverty and vagrancy. Six participants previously went through similar institutions. The others entered the institutionalization context for the first time.

Instruments

Quantitative stage

- Inventory of five personality factors for children (FFPI-C) (McGhee, Ehrler & Buckhalt, 2018).
- Depression Inventory for teenagers (Beck et al., 1961).
- Social Anxiety Inventory for teenagers (Reyes & García, 2008).
- Sociometric Method (Moreno, 1978).

Qualitative stage

- Interviews (conducted to psychologists and legal representatives).
- Analysis of drawings (García, 2014). It was used to explore the emotional response of the participants.
- Analysis of masks. Based on the analysis of drawings (García, 2014), It was applied to evaluate the emotional response in the elaboration of the face of the human figure and the use of color.
- Field journal annotations (reports and descriptive letters)

Method

We carried out a quasi-experimental investigation of a single group with a duration of 10 sessions. First, we conducted interviews with psychologists and a group dynamic through art (Gómez, 2019) was carried out with the adolescents to detect the main needs. In pre-test we used the analysis of drawings and constructed masks. We also applied instruments to measure levels of emotional regulation, social anxiety and depression. Second phase was devoted to implementing a psychodramatic psychotherapy intervention program to try to favorably affect the emotional regulation of the teenagers. In this phase we collected qualitative data using descriptive letters and reports for each session. Third phase included another quantitative analysis (post-test) and also the analysis of qualitative data collected in phase two with the goal of understanding and completing the information obtained in the quantitative analysis. We applied the Sociometric Method (Moreno, 1978) both in pre-test and post-test. The independent variable is: psychodramatic psychotherapy and the dependent variable: emotional regulation (taking social anxiety and depression as central categories in the study of emotional regulation).

Among the most important results of the current research, according to the stages, it was found:

Quantitative stage

The Shapiro-Wilk test showed the non-existence of normality, so we proceeded to develop the non-parametric Wilcoxon test. Social anxiety values do show a statistically significant difference and a large effect size $g = .92$ (Sig. < .001). However, the mean values for depression were practically unmodified. There was a significant difference between the values of emotional regulation obtained in pre-test and post-test although the effect size was low $g = .22$ (Sig. < .05).

In addition, we carried out the quantitative analysis of results of the sociometric method (Moreno, 1978). We calculated the reciprocity index for strong couples, for weak couples and the total reciprocity. The formation of 4 islands can be observed in pre-test, while in post-test we only find 1. In pre-test we observed 3 sociometric stars, while in post-test there was only 1 (which does not match any of the stars of pre-test). The chains in pre-test turned out to be very short, in post-test the chains were much longer. In pre-test, the teenagers were grouped on an island and in post-test, a greater openness was observed in external selections.

Qualitative stage

Qualitative analyses were made horizontally and vertically. This allowed a better understanding of the data obtained. We took into consideration the central categories (Emotional Regulation, Anxiety and Depression). As subcategories we considered: Hopelessness, Sadness and Anger (which were connected with Depression); and Negative to relating, Distrust and Fear (which were connected with Anxiety); (Fig 3).

For qualitative analysis of the interviews, the field journal and the reports we used the phenomenological method. We carried out group and individual analyzes. In eleven of the thirteen participants we evidenced a favorable evolution in terms of depression, anxiety and emotional regulation. The other two participants remained stable during all sessions, with slight positive changes.

In the analysis of drawings and masks, the prevalence of the use of graphite, the mistreatment of the human figure, as well as themes that indicate violence and suicidal ideation stand out. In the final combined painting, there is a greater use of color and favorable changes in themes.

We made adaptations to psychodramatic psychotherapy, since the classical form of application could not be implemented. For example, in all sessions we avoided working with stories from the past because the group overflowed when referring to an event previously experienced by the participants. Most of the sessions were devoted to working with elements of the future or the present. It was necessary to use some form of art (mainly music and plastic arts) to be able to perform effective warm-ups.

Finally, as discussion, we highlight the coincidence of our research with the findings of the authors (Reyes, 2013; Akinsola & Udoka, 2013; Benavides, 2017; Bilge & Keskin, 2017; Biolcati, R, et al. 2017; Ron, 2018; Tarashoeva et al. 2017), who argue that psychodrama contributes to the reduction of levels of social anxiety. This reduction is consistent with our qualitative findings, both in individual cases and at the group level. As the sessions progressed, we were able to verify greater participation of the adolescents, greater ability to express emotions in front of the group, and even, willingness to be the protagonists of psychodramatic stories.

The results suggest that the psychotherapeutic intervention had a favorable impact on the emotional regulation of teenagers. There was a positive evolution in the management of emotions such as anger, sadness and fear, which could be verified in several of the stories represented.

Although quantitatively the group had not presented depression, in the application of qualitative instruments we did find the presence of it. Both in the interviews, in the speeches extracted from descriptive letters and reports, as well as in the analysis of individual cases, we identified depression in several participants of the group. This coincides with the findings of (Ruiz & Gallardo, 2002; López-Soler et al., 2012; Fernández-Daza & Fernández-Parra, 2013; Sainero et al., 2015), who stated that depression is one of the most prevalent disorders in this population, which leads to impaired emotional regulation.

Our findings make us wonder whether the Beck inventory is the most appropriate instrument to show the real values of depression in these teenagers, or whether the inventory itself is sensitive enough to be able to capture the presence of depression in this population. We suggest for future research the application of another instrument to measure depression in similar populations. In regards to the Sociometric Method (Moreno, 1978), the achievement of greater group stability stands out, as well as an improvement in openness among participants and a decrease in social anxiety.

Likewise, the qualitative instruments reflect a favorable evolution in terms of emotional regulation, anxiety and depression.

It can be concluded that we met the general objective proposed. The results of the current study confirm those of (Ribero & Vargas, 2013), who state that emotional regulation can improve through psychotherapeutic processes. We agree with (Akinsola & Udoka 2013), who point out the efficacy of psychodrama in treating disorders such as anxiety and depression.