Are More Internal Locus of Control and Well-Ness an Effect of Theater Therapy?

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Abstract

Locus of control affects individual’s future expectations and subjective well-being, thereby determining individual’s psychological health. People feeling themselves responsible for what they do have an internal locus of control. People that hold outside events responsible for what they live, have an external locus of control. Generally, internal locus of control is negatively related to depression and general stress. Theater-therapy, that is theater joint with Positive Psychology could be a good method to improve well-being and increase internal locus of control. In fact, Theater-therapy can stimulate to experiment new skills and problem solving. Furthermore a better knowledge of emotions, experienced through physical actions, should be improve self-efficacy, positively affecting locus of control. In the current study, 8 subjects took part in a research to ascertain if participation to Theater-therapy changes locus of control. The experiment included one-three-hour weekly meeting for six months. Results showed that locus of control of participants become more internal.

Keywords: Theater-therapy, Stanislavkij’s Method, Positive Psychology, Locus of Control.

1 Introduction

Locus of control affects individual’s future expectations and subjective well-being, thereby determining individual’s psychological health (Mutlu et al., 2010). Locus of control refers to people’s premise of controlling their lives. People that hold themselves responsible for what they do have an internal locus of control. People that hold outside events responsible for what they live, have an external locus of control (Phares, 1991). Locus of control affects both physiological and psychological health and could cause psychological problems and hopelessness (Mutlu et al., 2010). Furthermore, Erol (2008) proposed that internal locus of control was negatively related to depression and general stress. Internal locus of control could be fundamental for the ability of shifting one’s perspective in every day behaviour in a positive sense (Seligman, 2004). In order to increase well-being, Theater-therapy could be an effective tool to chance the locus of control in internal mode.

Theater-therapy, that is Theater joint with Positive Psychology (Seligman, 1990; 2004; 2011) could be a good method to improve wellness. In fact, the link between Psychology and Theater is very strong. Despite these two disciplines present different methods and goals, they are actually much closer than the researchers admit. As an example, the major link is observed between Stanislavskij's thought and Psychology, although performance on stage is the goal for the former and individual well-being is the goal for the latter, Stanislavskij (1936; 1938; 1950) claims that the actor must be freed from his personal schemes and, to be credible, he/she must merge with the character he/she plays. Only about one hundred years later, Berne (1967) will talk about personal scripts. Stanislavskij asks to interpret the character “psychologically”, referring to a set of psychological situations coinciding with the actor’s experience. To do this, Stanislavskij draws on different artistic experiences and creates a system of physical exercises to transform the body into a tool ready to accept the psychological nuances of the character. According to the author, the body is the custodian of the actions corresponding both to emotions and states of mind for the theater workshop.

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Stanislavskij’s method is a system in which emotions are produced through the use of actions, analytical research of the given circumstances of the text, and imagination (Bussel, 2012). Hence, these characteristic aspects of Stanislavskij’s method show a psychological value because the body is the mean to join emotions. Through the action, the emotions linked to it reappear in all their cognitive and neuro-autonomic conditions. Thus, one can learn to get familiar with emotions, to get to know them and use them in an adaptive way. Stanislavskij stresses the objectives, which are the character’s goals within each scene (Bussel, 2012). Also, this aspect shows a psychological background. Moving with a pre-fixed goal is crucial to recognize the self and for a more internal locus of control. From another point of view, the creative aspect has been observed to create well-being both as an immediate “activator” of positive emotions and as a process of problem-solving that can be generalized to more than one reality (Hennessey and Amabile, 2010).

Moreover, positive mood is associated with creativity and innovative action (Hennessey and Amabile, 2010). As for the emotional aspects, Fauladi and Shabidi (2016) remarked that creativity plays a primary role in reducing anxiety and depression. Another critical point is the group as a system for experimenting and creating one’s own identity. In this context, Theater-therapy is a typical group activity. In Theater-therapy, the creative process operates simultaneously for every individual involved, as well as for the group. The understanding process is organically synergic (Bickerstaff, 2011).

Theater-therapy based on Positive Psychology approach aims to:

1) increase the experience of positive emotions in participants;
2) develop their own strengths and abilities;
3) find and build a sense of hope into the participants’ perspective;
4) help them to find a sense of well-being;
5) help them to find an optimistic point of view.

Moreover, since creativity is crucial to fulfill the above-mentioned points (Seligman, 2004; 2011), the current study aims to ascertain if participating in Theater-therapy meetings can change locus of control in more internal mode. Specifically, it was studied if Theater-therapy can stimulate to experiment new skills and problem solving. Furthermore, a better knowledge of emotions, experienced through physical actions, should improve self-efficacy, positively affecting locus of control. The current study aims to ascertain if participating in Theater-therapy meetings can modify locus of control. Specifically, after six months the locus of control of participants should become more internal.

2. Method

2.1 Subjects

Eight volunteers (3 male and 5 female) aged 32.7 ± 8.3 years.
Education level was master degree for all subjects. All subjects signed the informant consent for the research.

2.2 Experimental procedure

The experiment included one three-hour weekly for six months. Each meeting was divided into two stages. In the first, the subjects were invited to work on body, voice and narration. An improvisation technique was used (two hours). In the second stage, the subjects were requested to give a feedback of their physical, psychological and emotional feelings felt during the first stage. Moreover, they were requested to tell how they were modifying their lives in order to gain a better wellness as well as an effective goal-oriented behavior, according to a Positive Psychology approach (Seligman, 1990, 2004, 2011) (one hour). In the first day a questionnaire measuring locus of control was administered. Scores range from 1 to 5. A higher scores represent a more internal locus of control.

3. Data Analysis

The data consist of the answers of each subject to the locus of control questionnaire in the two surveys: Test and Retest. In order to verify the differences between Test and Retest periods, and, therefore, to verify changes in locus of control of subjects, a one-way repeated ANOVA was performed.
4. Results

One way ANOVA (repeated design) showed significant increase of locus of control scores. \((F = 5.44; \text{df} = 1/7 \ p<0.05)\).

The Theater-therapy meetings change locus of control. After six months of meetings subjects showed a more internal locus of control (Graph 1).

Graph. 1 The graph show the significant difference between Test period and Retest period for Internal Locus of Control

5. Discussion

Locus of control is based on the control of their own outcomes. People considering themselves able to control their outcomes are considered as possessing internal locus of control. Viceversa, people with external locus of control considered their outcomes beyond out their control (Zaidi and Mohsen, 2011) Erol (2008) suggested that a more internal locus of control was positively and negatively correlated with depression and general stress.

This current study shows a significant increase of locus of control between the beginning and the end of Theater-therapy. That is the participant showed a more internal locus of control after Theater-therapy. This means that Theatre-therapy can be a helpful tool to test oneself and live emotions freely. Furthermore, the group may be a protection both for the single and the group. The link between actions and emotions is helpful to recognize oneself’s emotions as well as the other’s ones. Joining Stanislavskij’s method Stanislavskij 1936; 1938; 1950) with Positive Psychology (Seligman 1990; 2004; 2011) is useful for: (1) an increased experience of positive emotions; (2) a better development of their own abilities and (3) for building a sense of hope and wellness. These aspects affect the individual thought and goals with change of locus of control traits. In fact, the participants learn to place one’s trust in the other and tend to be sensitive towards their own and the other needs. This implies, on the one hand, a greater openness and acceptance of the other and on the a greater openness towards the experiences of life on the other hand. Theater-therapy pushes subjects to test themselves, try emotions and handle psychological conflicts immediately through body, as well as physical actions. Stress and anxiety are less experienced with increased happiness. Moreover, the capability of fulfilling one’s own tasks and goals is improved after Theater-therapy meetings. Finally, also learning to move with a goal implies the responsibility of one own actions outstanding the individual as the only actor of his/her own life.
References


