



## Case Note

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# CHILDHOOD FEARS AS CAUSES OF STEREOTYPICAL HUMAN BEHAVIOR IN ADULTHOOD. CONTINUATION PRACTICES

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### Abstract

*Relevance.* New unpredictable challenges occur every day, generating fear of terrorist attacks, energy disasters. To quickly adapt to the new realities of life, it is necessary to become as whole, psychologically stable and flexible as possible. The confessional tools for this human psyche are required. One of them is meditation.

Purpose of the report: to statistically substantiate the influence of the author's meditation program on overcoming stereotypical behavior of adults caused by their childhood fears and to demonstrate the development of their psychological flexibility.

*Methodology.* Sampl: the experimental (EG) and control (CG) groups of 34 people (21-w,13-m), (age - 21-53), who had similar socio-demographic characteristics and psychological problems

Methods: Five-factor Meindfulness Questionnaire FFMQ; Scales of anxiety and worries STAI; Ambiguity Tolerance Scale MSTAT-I; New Uncertainty Tolerance Questionnaire (NTN, Kornilova T.V. ); SPB Personal Beliefs Survey; PBQ-BPD Dysfunctional Beliefs Questionnaire; K. Ryff's Psychological Well-Being Scale; SCL-90-R Symptomatic Questionnaire; author's Child and Current Fear Scale for Adults.

*Results.* The effectiveness of the author's program of mastering skills of decentered and impartial observation, conscious choice of cognitive and emotional reactions, abilities to "let go" and unresponsiveness has been proved. Such tools of conscious presence of program participants expanded their adaptive resources and improved psychological well-being. The regulatory effects related to the reduction of fears and anxiety occurred at the level of metacognitive functions of their consciousness.

**Keywords:** feeling, "grievances," fear, stereotypical behavior, mindfulness, meditation.

### Relevance

The formation of stereotypes of adult behavior is influenced by various predictors. The noticeable place among them is occupied by features of her primary socialization, including her childhood fears - both normal and pathological. The researchers dealing with fears (A. Zakharova, E. Ilyina, N. Zhukovska, D. Sedok, G. Kaplan, Y. Scherbatykh, R. Ovcharova, Izard,



Ye. Mash, D. Wolf, A. Lahikainen, I. Kraav, T. Kirmanen, T. Olendik, H. Remschmidt, M. Rutter, etc.) have shown that normal fears of the child are a reaction to real dangers, the consequences of which the child evaluates adequately, without overestimating or belittling the consequences. The pathological fears are those which impede the child's development, his or her interaction with peers, inclusion in social life and cause all sorts of mental aberrations. The influence of childhood fears becomes even stronger when they are projected into the future and the adult takes certain steps under the influence of stereotypes formed on the basis of his or her own experience.

**Objective:** to show that with the help of the author's program using meditative practices it is possible to transform negative stereotypes of adult behavior based on childhood fears and improve their subjective well-being.

### Methodology

The study used a formative experiment strategy.

*Sample.* The experimental (EG) and control (CG) groups of 34 people (21-w,13-m), (age - 21-53), who had similar socio-demographic characteristics and psychological problems. The EG participated in a 6-week formative program, during which participants attended group sessions and also worked independently. The CG was not involved in targeted psychological interventions using meditative practices, but was also diagnosed.

*Methods.* The scale of tolerance to ambiguity of several types of stimuli MSTAT-I (McLain, 1993, adaptation of Lukovitska O.G. and Osina E.M., 2010); New questionnaire of tolerance to uncertainty (NTN, Kornilova T.V., 2009) and additionally calculated index of stereotype behavior; Stinginess and anxiety STAI (Spielberger, Gorsuch & Lushene, 1970, adaptation of Hanina Y.L., 1978); SPB (Survey of Personal Beliefs; T. P. Demaria, H. Kassinove & C. A. Dill, 1989); PBQ-BPD (Butler et al., 2002, adapted from M. A. Konina & A. B. Kholmogorova, 2016); Dysfunctional Beliefs Questionnaire; K. Riyff's Scales of Psychological Well-Being (adapted by Zhukovska L.V. and Troshikhina E.G., 2011); Symptomatic Questionnaire SCL-90-R, Anxiety and Phobic Anxiety Scales, General Symptom Severity Index (adapted by N.V. Tarabrin, 2001); author's Scale to determine childhood and current fears.

By means of these tools the diagnostic cuts were carried out for both groups before the beginning of the forming activity and at the end of the program. *During the forming experiment in the EG the dynamics of the formation of conscious presence was regularly monitored using the FFMQ questionnaire.*

On the basis of the analysis of the empirical data of the first ascertaining stage, the program of group sessions for development of psychological flexibility (plasticity) of those participants of research who reported the presence of childhood fears was created. Each session included three obligatory elements:

a) teaching component: mini-lectures, self-diagnosis, discussion of experiences, group discussions;

b) meditation component: variety of approaches so that each participant can choose the practices that suit him/her personally: mindfulness approach, benevolence meditation, guided visualizations, mantra repetition technique, relaxation, simplified elements of yoga, etc;

c) psychological component: psychological exercises, mainly in the context of MF-oriented cognitive-behavioral therapy, as well as lady exercises and techniques for relieving psycho-emotional tension.

In general, meditative practices occupied half the time of the program, and the remaining 50% consisted of training sessions and psychological exercises.

The theoretical basis of the technique includes 8 hierarchical levels of consciousness (mission, motives and values, actions, mentality, thinking, emotions, sensations, physical body). At each of these levels meditation is performed to correct behavioral and cognitive stereotypes.

It is felt as the basis in meditation on which various states are explored and transformed. One's own stresses are experienced in one's internal space through bodily discomforts: discomfort in the chest or throat; trembling; cold/heat all over the body or in parts of it; compression in the kidneys; weakness in the legs, etc.

## Results

In the first stage of empirical research (Spring, 2020, sample of 130 people), we obtained statistically reliable evidence that fears have a direct influence on the stereotyping of personality perception, emotions, thinking and behavior. According to correlation analysis, revealed a number of significant relationships (at the level of  $p \leq 0.001$ ): anxiety and anxiety reactions in response to a wide range of life situations affect phobic components; the expression of conditionally constructive fear is positively correlated with the evaluation of tolerance for uncertainty; provokes increased duties towards themselves; constructive and destructive fears positively correlate with manifestations of intolerance in interpersonal relationships. [Potonska, 2020].

At the second stage the program of psychological correction of consequences of influence of childhood phobias in the form of negative stereotypes of behavior of adults and development of their psychological flexibility was developed and tested (summer, 2021, 68 persons).

On the basis of the analysis of world experience of use of meditation in the therapeutic purposes, and also results of the previous empirical research, the author allocated targets of developing-corrective influence reflecting two levels of mental functioning of the person - at level of conscious presence (processes and skills MF) and at level of steady personal features and properties.

The effective tool for overcoming stereotypes in the work was the meditative approach of Mark Palchik, based on the principles of Taoist and Buddhist traditions (his practices have been adapted in Ukraine since 2006 in business consulting and corporate programs of psychological support of employees). The main idea of the approach is to find the destructive states (helplessness, hopelessness, etc.) and then transform them with the help



of special meditative practices.

The conducted research has shown that stereotypes are formed under the influence of childhood fears. During meditation, people prone to stereotypical behavior noted childhood fears in clear detail - a disgruntled look from a father; a scream from a mother; a wave of a father's hand before hitting; mocking glances from children in class, etc. In this approach these are called "OBJECTS" triggering stereotypical behavior or other destructive states.

The productive meditation involves three basic processes:

1. Tracing - awareness of internal limitations in the form of a localized feeling. It is at this level that people explore the origins of the problem (childhood fears).

2. Transformation - turning destructive states of a person into states of rest or constructive activity.

3. Non-doing - becoming aware of new behavior. After the meditation the person returns to the situation where he or she had stereotyped behavior, for example, a conversation with a female leader ("image"). At the moment of contact with the "image" she becomes aware of her behavior, noting her inner reactions in the form of various sensations. The meditation should be done until the person is completely free of stereotypical behavior, in our case until she can talk to the female leader calmly.

The experience with stereotype has shown that prior to beginning meditation in a person's personal history, it is necessary to identify the cause of the specifically stated discomfort and to search for the images to which the stereotype is triggered. To do this, while maintaining unfocused attention at all stages, it is necessary to

1. Relax your body and unfocus your attention.

2. Recall the stressful situation.

3. localize the sensation in the body.

4. See what moment in the image activates the feeling in the inner space.

5. To unfocus attention around that feeling, and to continue unfocusing until there is a sense that the medium is an extension of it. The important condition here is to maintain awareness so as not to "fall into" a destructive state. The constructive heuristics imply the following awareness: there is an image and my body reacts to it with such sensations in such places (there may be several, but as defocused attention increases, they localize in one city).

6. At the localized point of feeling of the subject of meditation at the expense of unfocused attention it is necessary to strongly expand the space of experience with such a query "Where did I learn such sensations?", to "dive" into this point, consciously accepting the state of discomfort. At the expense of conscious presence, pictures of stressful situations from different periods of one's life appear (this is a special skill that is taught during meditation). It is important at this moment to remain concentrated on the sensations and to retain unfocused attention. All of the aforementioned moments are recorded after the technique is completed.

The next stage is the transformation of the identified states, which requires the

meditator:

1. Relax the body and unfocus attention.
2. Concentrate on sensation with RU (a special skill).
3. To "uncover" the sensation. When defocusing, the meditator may feel the boundary points of the sensation of discomfort, and at the level of sensation, one must release them, "open" them until the sensation disappears altogether.

The meditations described are performed at levels of consciousness that the adult feels and realizes. The obtained meditative skills can be used in yoga classes, in sports training (running, swimming), combined with massage, etc.

### Conclusions

According to the results of this study, it is possible to state with certainty the positive effect of using the program of meditative techniques aimed at developing psychological flexibility in adults and overcoming childhood fears. The results obtained show a significant increase in the EG members' tolerance for uncertainty and a decrease in intolerance; a significant decrease in the expression of fears affecting the individual's life; the elimination of irrational and dysfunctional cognitive distortions. All this was combined with an improvement in the well-being of program participants: their competence in environmental management significantly improved, assessments of personal autonomy and self-acceptance increased.

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