



Research Paper: Effectiveness of Identity-based Psychodrama Educational-therapeutic Program on Identity Styles and Neuroticism



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ABSTRACT

Background: Neuroticism is one of the serious mental health problems of people. No study has been conducted on the impact of identity issues in the treatment of neurotic people.

Objectives: This study aims to formulate, design, and investigate the effect of identity-based psychodrama educational program on identity styles and neuroticism.

Materials & Methods: This research was a quasi-experimental study with a pre-test, post-test design using a control group. The study participants were 40 people aged 15-30 years referred to Pendare Nik Counseling Center in Najafabad City, Isfahan Province, Iran, in 2020. They were selected using a convenience sampling method and randomly assigned into the intervention (n=20) and control (n=20) groups. The data collection instruments were Berzonsky Identity Style Inventory (1992) and McCrae and Costa 5-factor inventory (1992). A Researcher-made Identity-Based Psychodrama Program (2020) was used for the intervention. The collected data were analyzed using ANCOVA in SPSS v. 23.

Results: The educational-therapeutic program significantly affected identity styles and neuroticism ($P < 0.001$). It significantly reduced the neuroticism level of people in the intervention group ($F = 200.71, \eta^2 = 0.84$).

Conclusion: The identity-based psychodrama program reduced diffuse-avoidant, normative, and informational identity styles and neuroticism and promoted the achieved identity style.

Keywords: Neuroticism, Psychodrama, Therapeutics

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Highlights

- Psychodrama educational therapy based on the identity has a significant effect on identity styles and neuroticism.
- Identity-based psychodrama program reduces diffuse-avoidant, normative, and informational identity styles and neuroticism but increases achieved identity style.

Introduction

Neurosis is a mental disorder that causes anxiety, depression, unhappiness, and anger [1]. Neuroticism trait is a chronic non-psychotic disorder that does not involve the main functions of the personality, and the person is aware of it. Its main characteristic is anxiety, which is directly expressed or experienced, or altered by defense mechanisms. Neuroticism is also defined as the experience of negative emotions, which includes anxiety, aggression, depression, shyness, impulsive behavior, and vulnerability. The disease symptoms are distressing, unacceptable, and ego-dystonic for the person [2, 3]. Neurotic individuals generally feel upset, forget their social role, are aggressive toward others or themselves, have sleep disorders and look very tired [3]. Also, they have high levels of negative emotions and suffer from feelings of insecurity, loneliness, lack of control over the environment, and lack of social support [4].

From psychoanalysis to new postmodern methods, researchers have proposed various models and theories to explain and treat the symptoms of neuroticism. These methods include cognitive-behavioral therapies such as dialectical behavior therapy [5], cognitive behavioral analysis system of psychotherapy [6], schema therapy [7], humanistic-existential approaches [8, 9], and psychodrama. Cognitive-behavioral therapies have dealt mainly with symptoms such as impulsivity, harmful behaviors, and perceived interpersonal rejection, while humanistic-existential approaches emphasize symptoms such as hopelessness and stress [5-9].

Positive identity is one of the essential factors in the mental health and emotional stability of individuals [10]. Berzonsky named identity as “self-constructed” [11]. Self-construction includes assumptions, principles, and constructs based on the interaction with the environment and the world. Erikson refers to identity as creating harmony between one’s perception of the self as unique and stable and perception of one’s self by others [12]. Identity is an inner feeling of individuals and includes

a feeling of resemblance to a group of people caused by social life. Identity is a person’s social role and his or her perception [13].

James Marcia proposes four types of identity based on two criteria of exploration and commitment: 1) achieved identity (individuals have passed their identity crisis by their commitment to specific goals), 2) foreclosure identity or normative identity or premature (individuals do not have an identity crisis but are committed to specific goals; are influenced by parents and others’ plans; are inflexible, and have strong religious beliefs), 3) diffuse-avoidant identity (individuals have not gone through a crisis and are not committed to specific goals; they are careless, superficial and incapable of establishing intimate relationships), and 4) moratorium identity or informational identity or postmature (individuals try to achieve their identity and gather information; they are competitive, conflicted, talkative, and willing to have intimate relationships) [14].

Psychodrama is a common method in psychotherapy that incorporates drama, imagination, physical activity, and group dynamics. It is a combination of art, play, emotion therapy, and clear thinking. Psychodrama is an eclectic approach used to increase the level of interactions between people, to show the emotional conflicts of the involved parties in daily life, and to reduce self-centeredness. It helps a person discover the psychological dimension of their problem [15]. Psychodrama and its related components, such as sociodrama and role-playing, were introduced by Jacob L. Moreno in the 1930s. Psychopathology and health are based on three elements of behavior, emotion, and thinking. It can focus on any or all of these domains according to what clients need to experience [15]. During treatment, distorted perceptions, communication failure, poor emotional responses, stereotyped behaviors, impulsive actions, and alienation are examined and altered [16]. Psychodrama is a type of group therapy. People see themselves on the stage, and eventually, self-thinking turns to self-discovery. They become aware of their shortcomings on the stage. They realize that their negative emotions are due to inflexible traits, unwillingness to seek and hear conflicting opin-

ions. They generally understand that their self-constructed (identities) are weak or that they have mistakes in understanding the concept of communication. Through role-playing, psychodrama makes people think about their imaginations and perceptions, and as a result, integrates imaginations and other dimensions [15]. Compared to other dialogue-based psychotherapy methods, psychodrama is effective in gaining insight and understanding the experienced emotions and feelings by role-playing these experiences [17].

A study has shown that psychodrama affects the emotional rehabilitation of bipolar patients [18]. Carbonell et al. showed the significant effect of psychodrama in reducing behaviors such as withdrawal, anxiety, and depression and increasing the sense of competence in female students coping with trauma [19]. Balfour showed that psychodrama techniques could be used to reduce thoughts that provoke violent behaviors [20].

Most studies have focused only on neuroticism in general and the reduction of its symptoms, and there is no comprehensive study on the etiology and treatment of neuroticism. On the other hand, the relationship between positive identity and mental health has been identified. The adolescents who accept themselves and have a positive identity are mentally healthier than those with a negative identity and are not interested in themselves [10].

Since psychodrama and identity have not been used so far for therapeutic purposes, and because of a lack of research to formulate and design identity-based psychodrama, this study was conducted to investigate the effect of identity-based psychodrama educational program on identity styles and neuroticism.

Materials and Methods

This research is a quasi-experimental study with a pre-test, post-test design using a control group. The study population consisted of all people aged 15-30 years referred to Pendar Nik Counseling Center in Najafabad City, Isfahan Province, Iran, in 2020 (n=142). Using a convenience sampling method, 40 samples were selected and randomly assigned to the intervention and control groups. The intervention group was presented with an identity-based psychodrama educational-therapeutic program for ten 90-min sessions, while the control group did not receive any training or treatment during this period.

To design the intervention program, we reviewed the studies on psychodrama, other group psychotherapies, and methods related to psychodrama, including play

therapy and the related interventions performed for individuals and target groups. A qualitative sub-study for analyzing themes affecting identity was also carried out based on Attride-Stirling's thematic analysis [21]. The reliability coefficient of the extracted themes was estimated at 0.85 using Holsti's method. Using some themes and other extracted data, Zolali et al. developed the identity-based psychodrama program [22]. Its content validity index was assessed based on the opinions of 10 experts and was confirmed with a value of 0.72. The program was also tested in a pilot study. Table 1 presents a summary of the protocol of the identity-based psychodrama program.

Data collection tools

The Berzonsky Identity Style Inventory (ISI): Berzonsky developed the Berzonsky Identity Style Inventory (ISI) in 1989 and then revised it in 1992 [11]. It has 40 questions with four identity processing styles of informational, normative, diffuse-avoidant, and commitment. Its Persian version was developed by Aminpour and Zare [23], which has 34 items rated on a 5-point Likert-type scale and has 6 dimensions of normative, achieved, diffuse-avoidant, Individual informational style, collective informational style, and commitment. Aminpour and Zare [23] reported a Cronbach α of 0.72 for the Persian ISI. Using the principal component analysis, they showed that these 6 dimensions explained 37.26% of the total variance of Persian ISI, and the results of confirmatory factor analysis showed that it had good construct validity.

The NEO five-factor inventory of McCrae and Costa: McCrae and Costain developed the NEO 5-factor inventory in 1992 to measure the critical five personality traits of Neuroticism (N), Extraversion (E), Openness (O), Agreeableness (A), and Conscientiousness (C) [24]. Their reported alpha coefficient of NEO inventory ranged from 0.74 to 0.89 with an average value of 0.81. In Bouchard et al. study, these coefficients were 0.85 for neuroticism, 0.72 for extraversion, 0.68 for openness, 0.69 for agreeableness, and 0.79 for conscientiousness [25]. Haghshenasin tested its Persian version on 502 samples by [26]. They reported the Cronbach α coefficients of 0.81 for neuroticism, 0.71 for extroversion, 0.57 for openness, 0.71 for agreeableness, and 0.83 for conscientiousness. The NEO inventory has 240 items rated on a 5-point Likert-type scale, 48 of which measures neuroticism. Patients who typically develop neurotic conditions score higher in the N scale [3]. The collected data were statistically analyzed in SPSS v. 23 software.

Table 1. The protocol of identity-based psychodrama program

Sessions	Descriptions
1	<ul style="list-style-type: none"> - Introduction, acquaintance, building trust, and knowing more about the educational program - Creating a sense of security to prevent the idea of accepting the existing conditions due to fear and doubt - Strengthening the power of imagination, creative thinking, and the sense of seeking to confront conflicts and move forwards
2	<ul style="list-style-type: none"> - Using doubling technique to deepen emotions and express difficult emotions - Dramatic self-presentation, role-playing, and emotional discharge to facilitate the expression of positive and negative emotions - Controlling anger when challenging beliefs and ridicule - Demonstrating emotional conflicts, transparency in emotions, and beliefs without hypocrisy
3 and 4	<ul style="list-style-type: none"> - Strengthening social identity by emphasizing role reversal technique and reducing self-centeredness - Reviewing feelings and perspectives by role reversal technique - Using multiple techniques and increasing flexibility
5	<ul style="list-style-type: none"> - Self-identification, strengthening self-esteem by emphasizing the technique of gold coin exchange, reclaiming good projections onto others, and being different - Preventing self-deprecation and protecting self-esteem by emphasizing the art of dreaming in the present time
6 and 7	<ul style="list-style-type: none"> - Strengthening national identity and rejecting borrowed identity - Expressing ethnic identity and exploring the cultural heritage - Using local dialects with an interlude performance of Shahnameh
8	<ul style="list-style-type: none"> - Teaching to say “no” and being assertive and able to oppose, and strengthening assertiveness - Avoiding the false self by not continuing the previous involuntary followings and using future projection techniques to eliminate panic before an actual conflict - Using critical thinking and problem-focused strategies and avoiding hasty judgments
9	<ul style="list-style-type: none"> - Cohesion and unification of identity through playing multiple roles - Engaging in problems using paradoxical intention technique
10	<ul style="list-style-type: none"> - Learning more about own identity, personality, and emotions - Commitment to striving to maintain positive roles - Strengthening the acquired cases and ending group therapy

Results

Table 2 presents the Mean±SD scores of the ISI tool and N scale of NEO inventory in the two groups before and after the intervention. As seen, the mean scores of diffuse-avoidant, normative, and informational identity styles and neuroticism in the post-test phase decreased in the intervention group, while the mean score of achieved identity style increased. Before determining the significance of these differences using 1-way ANCOVA, its assumptions were tested. Levene’s test was used to check the quality of variances and the Shapiro-Wilk test to determine the normality of data distribution. Their results are presented in Table 3. Box’s M test was also used to check the equality of multiple variance-covariance matrices whose results in the post-test phase show the insignificance of M value (Box’s M=9.62, F=0.86, P=0.52). Moreover, examining the homogeneity assumption of regression slope showed that it was valid, and there was no interaction between pre-test score and group factors. The results of Wilks’

lambda test showed a significant difference between the intervention and control groups in terms of identity styles and neuroticism ($P \leq 0.001$). The effect size (η^2) in this test was 0.937, indicating that about 93% of the difference between the two groups is related to the educational intervention. To examine the difference point, we performed an ANCOVA test on each dependent variable separately (Table 4). As seen, the difference was significant for diffuse-avoidant ($F=9.19$, $P < 0.05$, $\eta^2=0.39$), normative ($F=54.92$, $P < 0.001$, $\eta^2=0.77$), informational ($F=46.28$, $P < 0.01$, $\eta^2=0.47$), achieved identity ($F=10.58$, $P < 0.01$, $\eta^2=0.44$) styles, and neuroticism ($F=200.71$, $P < 0.001$, $\eta^2=0.84$).

Discussion

The study results showed that the identity-based psychodrama educational program significantly affected their identity styles and neuroticism. The educational program reduced diffuse-avoidant, normative, and informational identity styles and enhanced achieved identity

Table 2. Mean±SD scores of identity styles and neuroticism in the two groups before and after the intervention

Variables	Phases	Groups	Mean±SD
Diffuse-avoidant identity style	Pre-test	Intervention	28.4±7.2
		Control	28.44±5.7
	Post-test	Intervention	21.6±4.2
		Control	26.88±3.9
Normative identity style	Pre-test	Intervention	29.6±5.17
		Control	26±3.18
	Post-test	Intervention	17.55±2.55
		Control	26.88±2.25
Informational identity style	Pre-test	Intervention	38.4±8.37
		Control	41.4±7.62
	Post-test	Intervention	25.25±4.56
		Control	40.32±8
Achieved identity style	Pre-test	Intervention	19±3.46
		Control	21±2.72
	Post-test	Intervention	23±3.15
		Control	21±1.98
Neuroticism	Pre-test	Intervention	136.6±11.91
		Control	134.6±13.03
	Post-test	Intervention	90±12.53
		Control	132.16±14.53

style. This result is consistent with the results of Meeus et al. [27]. To adjust the results, we can argue that the intervention group received education about flexibility, assertiveness, and antagonism during the identity-based psychodrama educational program. This package could promote their identity styles by strengthening their national identity.

On the other hand, since people did not exchange negative emotions in psychodrama sessions, it could reduce their confusion and help form their identities. This result is consistent with the results of Askian et al. [28] regarding the effect of psychodrama on discrimination and Mollazamani et al. [29] regarding the effect of role-playing on self-image. Moreover, the identity-based psychodrama educational program, especially its criti-

cal thinking education, helps people develop self-exploration ability and feel integrated. It increases their problem-solving skills and reduces their ineffective attributional styles and cognitive strategies. This result is consistent with Schwartz et al. study, which showed the relationship between critical thinking and different identity styles [30].

The identity-based psychodrama educational program had a significant effect on neuroticism. This result is consistent with the results of Karatas et al. study [31] regarding the effect of psychodrama on reducing aggression, Hama-mci study [32] regarding the effect of integrating psychodrama and cognitive behavioral therapy on reducing cognitive distortions in interpersonal relations, and Balfour [20] regarding the effect of psychodrama on reducing thoughts

Table 3. Results of Levene's and Shapiro-Wilk tests

Variables	Groups	Shapiro-Wilk Test			Levene's Test		
		Statistic	df	Sig.	f	df	Sig.
Diffuse-avoidant identity style	Intervention	0.129	20	0.30	1.45	38	0.24
	Control	0.121	20	0.30			
Normative identity style	Intervention	0.179	20	0.2	0.0005	38	0.941
	Control	0.176	20	0.2			
Informational identity style	Intervention	0.190	20	0.2	2.70	38	0.11
	Control	0.160	20	0.2			
Achieved identity style	Intervention	0.154	20	0.2	0.064	38	0.803
	Control	0.168	20	0.2			
Neuroticism	Intervention	0.291	20	0.022	1.496	38	0.227
	Control	0.275	20	0.034			



that provoke violent behaviors. To adjust the results, we can argue that the identity-based psychodrama educational program helps people become familiar with their conflicts and unexpressed emotions. It also reduces their self-centeredness, helps control their anger, and becomes more familiar with their identity aspects, and consequently achieves emotional stability. It also improves their identity, which reduces their anxiety, conflict, apathy, and depression. Another reason for the effect of the educational program is the advantage of problem-focused strategy over emotion-focused strategy. When people's identity is promoted, their use of problem-focused strategy and responsibility in life increases. Also, it increases their sense of control, postponing judgments and avoiding hasty decisions. Hence, impulsivity, vulnerability, and use of emotion-focused strategies, which are symptoms of neuroticism, decrease. This result agrees with the results of the Ferrer et al. study [33].

One of the limitations of this study was the use of a self-report tool. It is suggested that in future studies, interviews and mental health examinations be used along with questionnaires to obtain more in-depth information. Moreover, it is suggested that future studies focus more on identity, especially national identity. One of the topics welcomed by the participants in the sessions was the issue of national identity, such that at the end of the intervention, a sense of calmness and patriotism was evident in them. National identity has a significant impact on achieving emotional stability and mental health. Therefore, it is suggested that the issue of returning to national identity be at the top of macro policies as soon as possible.

Table 4. One-way ANCOVA results for examining the difference between groups in identity styles and neuroticism

Variables	Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared	Test Power
Diffuse-avoidant identity style	126.56	1	126.56	9.19	0.05	0.39	0.50
Normative identity style	322.87	1	322.87	54.92	0.001	0.77	1
Informational identity style	887.72	1	887.72	46.28	0.01	0.47	0.95
Achieved identity style	136.54	1	136.54	10.58	0.01	0.44	0.85
Neuroticism	7439.04	1	7439.04	200.71	0.001	0.84	1



Conclusion

The identity-based psychodrama educational program can reduce diffuse-avoidant, normative, and informational identity styles as well as neuroticism and promote the achieved identity style. Identity can be used as an essential factor in the treatment of neuroticism.

Ethical Considerations

Compliance with ethical guidelines

All study procedures were done in compliance with the ethical guidelines of the Declaration of Helsinki, 2013. This study obtained its ethical approval from the Research Ethics Committee of the Islamic Azad University of Isfahan, Khorasgan Branch (Code: IR.IAU.KHUISF.REC.1399.183).

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Authors' contributions

Conceptualization, methodology, writing, editing, and review: All authors; Investigation and writing the original draft: Amir Zolali; Supervision: Hamid Atashpour and Il-naz Sajjadian.

Conflict of interest

The authors declared no conflict of interest.

References

- [1] Lahey BB. Public health significance of neuroticism. *Am Psychol.* 2009; 64(4):241-56. [DOI:10.1037/a0015309] [PMID] [PMCID]
- [2] Fenichel O. *The psychoanalytic theory of neurosis.* London: Routledge; 1996. [DOI:10.4324/9780203754436]
- [3] McCann SJH. U.S. state resident big five personality and work satisfaction: The importance of neuroticism. *Cross Cult Res.* 2018; 52(2):155-91. [DOI:10.1177/1069397117723607]
- [4] Muris P, Meesters C, Diederik R. Psychometric properties of the Big Five Questionnaire for Children (BfQ-C) in a Dutch sample of young adolescents. *Pers Individ Dif.* 2005; 38(8):1757-69. [DOI:10.1016/j.paid.2004.11.018]
- [5] Linehan MM. *Cognitive-behavioral treatment of borderline personality disorder.* New York: Guilford Publications; 2018. <https://books.google.com/books?id=2RJqDwAAQBAJ&dq>
- [6] McCullough JP Jr. Treatment for chronic depression using Cognitive Behavioral Analysis System of Psychotherapy (CBASP). *J Clin Psychol.* 2003; 59(8):833-46. [DOI:10.1002/jclp.10176] [PMID]
- [7] Young JE, Klosko JS, Weishaar ME. *Schema therapy: A practitioner's guide.* New York: Guilford Publications; 2006. <https://books.google.com/books?id=pS5uAAAAQBAJ&printsec>
- [8] Eneman M, Vanhee L, Liessens D, Luyten P, Sabbe B, Corveleyn J. Humanistic psychiatry and psychotherapy: Listening to patients as persons in search of meaning. The case of schizophrenia. *J Humanist Psychol.* 2019; 59(2):148-69. [DOI:10.1177/0022167816637291]
- [9] Berra L. Existential depression: A nonpathological and philosophical-existential approach. *J Humanist Psychol.* 2019; 61(5):757-65. [DOI:10.1177/0022167819834747]
- [10] Rice FP, Dolgin K. *The adolescent: Development, relationships, and culture.* Boston: Allynand Bacon; 2005. https://digitalcommons.owu.edu/psyc_books/1/
- [11] Berzonsky MD. Identity style: Conceptualization and measurement. *J Adolesc Res.* 1989; 4(3):268-82. [DOI:10.1177/074355488943002]
- [12] Erikson EH. The problem of ego identity. *J Am Psychoanal Assoc.* 1956; 4(1):56-121. [DOI:10.1177/000306515600400104] [PMID]
- [13] Corsini RJ. *Dictionary of Psychology.* Philadelphia: Routledge; 1999. https://www.abebooks.co.uk/servlet/BookDetailsPL?bi=30079316400&cm_sp=rec_-_pd_hw_i_1_-_bdp&reftag=pd_hw_i_1
- [14] Marcia JE. Identity and intervention. *J Adolesc.* 1989; 12(4):401-10. [DOI:10.1016/0140-1971(89)90063-8]
- [15] Blatner A. An interview with Adam Blatner about psychodrama. *N Am J Psychol.* 2003; 5(1):137-46. https://www.researchgate.net/publication/233761557_An_Interview_with_Adam_Blatner_About_Psychodrama
- [16] Corey G. *Theory and practice of counseling and psychotherapy,* 10th edition. Boston, MA: Cengage Learning; 2016. <https://www.amazon.com/Theory-Practice-Counseling-Psychotherapy-Gerald/dp/1305263723>
- [17] Moore J, Andersen-Warren M, Kirk K. Dramatherapy and psychodrama with looked-after children and young people. *Dramatherapy.* 2017; 38(2-3):133-47. [DOI:10.1080/02630672.2017.1351782]
- [18] Bagheri M, Saadat F, Pouladi F. [The effectiveness of psychodrama on emotional rehabilitation of patients with bipolar I disorder (Persian)]. *J RbsBehav Sci.* 2018; 16(2):175-81. <http://rbs.mui.ac.ir/article-1-597-fa.html>
- [19] Carbonell DM, Partelano-Barehmi C. Psychodrama groups for girls coping with trauma. *Int J Group Psychother.* 1999; 49(3):285-306. [DOI:10.1080/00207284.1999.11732607] [PMID]
- [20] Balfour M. Drama, masculinity, and violence. *Res Drama Educ.* 2000; 5(1):9-21. [DOI:10.1080/135697800114168]

- [21] Attride-Stirling J. Thematic networks: An analytic tool for qualitative research. *Qual Res.* 2001; 1(3):385-405. [DOI:10.1177/146879410100100307]
- [22] Zolali A. [Formulating the psychodrama package based identity and comparison of the effectiveness with psychodrama on identity style and anxiety, aggression, impulsivity and vulnerability from dimensions of neuroticism in people between 15 and 30 years old (Persian)] [PhD. dissertation]. Isfahan: Azad University of Isfahan (Khorasgan); 2021.
- [23] Zare H, Aminpour H. [Psychological tests (Persian)]. Tehran: Aeeizh; 2011. <https://www.adinehbook.com/gp/product/9649703060>
- [24] Costa PT, McCrae RR. Revised NEO personality inventory (neo pi-r) and NEO five-factor inventory (NEO-FFI). Lutz: Psychological Assessment Resources; 1992. <https://books.google.com/books?id=mp3zNwAACA&dq>
- [25] Bouchard G, Lussier Y, Sabourin S. Personality and marital adjustment: Utility of the five-factor model of personality. *J Marriage Fam.* 1999; 61(3):651-60. [DOI:10.2307/353567]
- [26] Haghshenas H. [The five-factor model of personality traits (Persian)]. Shiraz: Shiraz University Press; 2006. <https://www.adinehbook.com/gp/product/9646874688>
- [27] Meeus W, Iedema J, Helsen M, Vollebergh W. Patterns of adolescent identity development: Review of literature and longitudinal analysis. *Dev Rev.* 1999; 19(4):419-61. [DOI:10.1006/drev.1999.0483]
- [28] Askian P, Sanaei-Zaker B, Navabinejad SH. [The effect of psychodrama on differentiation (Persian)]. *Cou Res Dev.* 2008; 7(25):27-42. <https://www.sid.ir/Fa/Journal/ViewPaper.aspx?id=95056>
- [29] Mollazamani A, Fathi-Ashtiani A. [The effect of role-play training on improving self-concept in adolescents (Persian)]. *Beh Sci.* 2008; 2(1):61-6. <https://www.sid.ir/fa/journal/ViewPaper.aspx?id=83054>
- [30] Schwartz SJ, Kartines WM, Montgomery MJ. A comparison of two approaches for facility identity exploration process in emerging adult. *J Adolesc Res.* 2005; 20(3):309-45. [DOI:10.1177/0743558404273119]
- [31] Karatas Z, Gokcakan DZ. [The effect of group-based psychodrama therapy on decreasing the level of aggression in adolescents (Turkish)]. *Turk Psikiyatri Derg.* 2009; 20(4):357-66. [PMID]
- [32] Hamamci Z. The effect of integrating psychodrama and cognitive behavioral therapy on reducing cognitive distortions in interpersonal relationship. *J Group Psychother Psychodrama Sociom.* 2002; 28:3-13. [DOI:10.3200/JGPP.55.1.3-14]
- [33] Ferrer-Wreder L, Lorente CC, Kurtines W, Briones E, Bussell J, Berman S, et al. Promoting identity development in marginalized youth. *J Adolesc Res.* 2002; 17(2):168-87. [DOI:10.1177/0743558402172004]