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EARLY MALADAPTIVE COGNITIVE SCHEMAS AND THE ISSUE OF
INDIVIDUATION-AUTONOMY AMONG HIGHLY GIFTED
ADOLESCENTS SUFFERING FROM PSYCHOGENIC EATING DISORDER
- A PROJECTIVE ANALYTICAL-COGNITIVE STUDY OF CASES PARTICIPATING IN
MSILA'S GENUISES CENTER -

المخططات المعرفية المبكرة الغير متكيفة وإشكالية التفرد - استقلالية لدى المراهقين
المتفوقين عقليا يعانون من اضطراب أكل نفسي المنشأ
- دراسة إسقاطية تحليلية - معرفية لحالات مشاركة في مركز العباقرة بمسيلة -

Thesis Submitted in Partial Fulfillment of the Requirements for the
Master's Degree

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Inspirational quotes:

“Pain and Suffering are always inevitable for a large intelligence and a deep heart”

Fyodor Dostoevsky

“If you succeed in remembering yourself, if you succeed in making a difference between yourself and that outburst of passion, then you discover the self; you begin to individuate”.

Carl G. Jung

DEDICATION

To the spark that dared to rise,
A fleeting dream behind my eyes.

To the battles fought in silent wars,
The unseen scars, the locked-up doors.

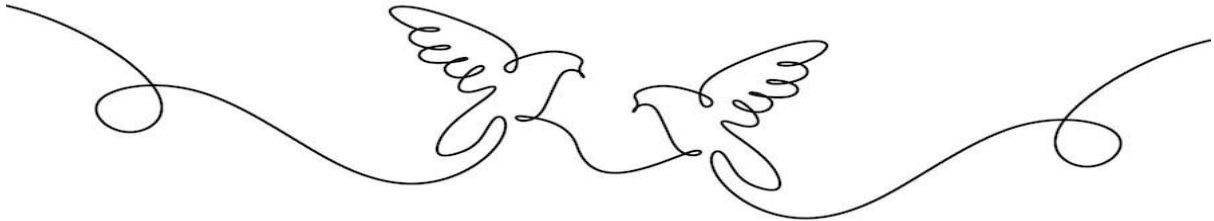
To the nights that spoke in weary sighs,
The whispered hope, the failed tries.

To the hands that held, the words that healed,
The love unspoken, yet always revealed.

To the one who walks, yet never parts,
A shadow etched upon my heart.

This work I give, both fierce and free,
A mirror of all that lives in me.

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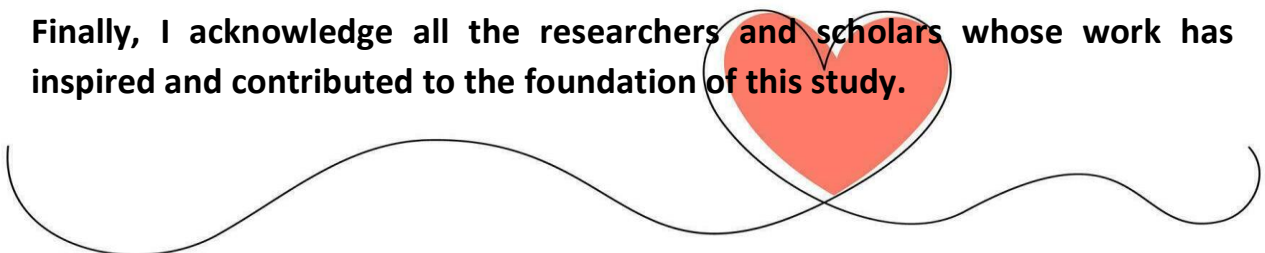
We would like to express our deepest gratitude to our esteemed supervisor, **Dr. Fatima Zahra Boualagua**, for their invaluable guidance, continuous support, and insightful feedback throughout this research journey. Their expertise and encouragement have been instrumental in shaping this thesis.

We extend our sincere appreciation to the **Geniuses Center of M'sila**, for granting us access to conduct this study and for their cooperation in facilitating the research process.

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Finally, I acknowledge all the researchers and scholars whose work has inspired and contributed to the foundation of this study.



Abstract:

Highly gifted adolescents represent a distinct group characterized by exceptional cognitive abilities, yet they often face complex developmental and psychological challenges that hinder the optimal expression of their potential. Among the most prominent of these challenges are difficulties in social and emotional adjustment, compounded by the pressure of high expectations from their environment. Such conditions may contribute to the development of early maladaptive cognitive schemas dysfunctional thought patterns rooted in adverse childhood experiences which significantly influence self-perception and interpersonal relationships, and often result in emotional dysregulation.

Within this context, the issue of individuation and autonomy emerges as a central developmental task during adolescence. Gifted individuals frequently experience internal conflict between the desire for self-determination and the need for acceptance and support from others. When these struggles intersect with the psychological pressures of giftedness, the risk of developing psychogenic eating disorders increases. These disorders often serve as symbolic expressions of inner conflict and a perceived loss of control.

Our study aims to shed light on early maladaptive cognitive schemas and the issue of individuation-independence in highly gifted adolescents suffering from psychogenic eating disorder through a clinical, projective, and analytical-cognitive study.

To achieve this, we utilized: **Clinical interviews, Projective tests, including the Rorschach test and the Thematic Apperception Test (TAT), Jeffrey Young's Maladaptive Cognitive Schemas Scale, The Psychogenic Eating Disorder Scale**, which we applied to **3** cases at Msila's Geniuses center.

Our findings led to the identification of dominant early maladaptive schemas especially emotional deprivation, social isolation, unrelenting standards, and defectiveness/shame across all three cases. These schemas strongly influenced self-image, emotional regulation, and relationships, and were closely linked to disordered eating behaviors as coping mechanisms.

Projective tests revealed identity confusion, reliance on primitive defenses, and disrupted ego boundaries, indicating a fragile sense of autonomy and dependence on external validation.

Despite high cognitive ability, the adolescents showed deep psychological vulnerability, suggesting that maladaptive schemas significantly impair both emotional development and the individuation-autonomy process.

Key words: early maladaptive cognitive schemas, the issue of individuation-autonomy, highly gifted adolescents, psychogenic eating disorder.

ملخص الدراسة:

يعد المراهقون المتفوقون عقلياً فئة متميزة تتمتع بقدرات معرفية استثنائية، إلا أنهم يواجهون تحديات نمائية ونفسية معقدة تعيق في كثير من الأحيان استثمار قدراتهم بالشكل الأمثل. ومن بين أبرز هذه التحديات صعوبات التكيف الاجتماعي والانفعالي، بالإضافة إلى الضغوط العالية الناتجة عن التوقعات المرتفعة من المحيط. قد تسهم هذه الظروف في نشوء المخططات المعرفية المبكرة غير المتكيفة، وهي أنماط فكرية غير وظيفية تتجذر في تجارب سلبية خلال مرحلة الطفولة، وتؤثر بشكل عميق على إدراك الذات والعلاقات مع الآخرين، وغالباً ما تؤدي إلى اختلال في التنظيم الانفعالي.

وفي هذا السياق، تبرز إشكالية التفرد والاستقلالية كمهمة نمائية محورية في مرحلة المراهقة، حيث يعيش المتفوقون صراعاً داخلياً بين الرغبة في تحقيق الاستقلال الذاتي والحاجة إلى القبول والدعم من الآخرين. وعندما تتقاطع هذه الصراعات مع الضغوط النفسية المرتبطة بالتفوق العقلي، تزداد احتمالية تطور اضطرابات الأكل نفسية المنشأ، والتي غالباً ما تعبر عن صراعات داخلية وشعور بفقدان السيطرة. تهدف دراستنا إلى تسليط الضوء على المخططات المعرفية المبكرة غير المتكيفة وإشكالية التفرد-الاستقلالية لدى المراهقين المتفوقين عقلياً المصابين باضطراب الأكل نفسية المنشأ، من خلال دراسة إكلينيكية إسقاطية تحليلية-معرفية. ولتحقيق ذلك، اعتمدنا على المقابلة الإكلينيكية، والاختبارات الإسقاطية بما في ذلك اختبار الرورشاخ واختبار تفهم الموضوع (TAT)، بالإضافة إلى مقياس المخططات المعرفية غير المتكيفة لجيفري يونغ، ومقياس اضطراب الأكل نفسي المنشأ. وقد تم تطبيق الأدوات على ثلاث حالات من مركز العباقرة بولاية المسيلة.

وقد قادتنا نتائج الدراسة إلى تحديد مخططات معرفية مبكرة غير متكيفة سائدة—وخاصة مخطط الحرمان العاطفي، العزلة الاجتماعية، المعايير الصارمة، والعيب/الخزي—عبر الحالات الثلاث جميعها. لقد أثرت هذه المخططات بشكل كبير على صورة الذات، وتنظيم المشاعر، والعلاقات، وارتبطت ارتباطاً وثيقاً باضطرابات الأكل التي ظهرت كآليات للتكيف. كشفت الاختبارات الإسقاطية عن وجود تشوش في الهوية، واعتماد على دفاعات بدائية، واضطراب في حدود الأنا، مما يشير إلى هشاشة في الإحساس بالاستقلالية واعتماد قوي على التقدير الخارجي.

وعلى الرغم من القدرات المعرفية العالية، فقد أظهر المراهقون هشاشة نفسية عميقة، مما يشير إلى أن المخططات غير المتكيفة تؤثر بشكل كبير على النمو العاطفي وتُضعف عملية التفرد والاستقلال.

الكلمات المفتاحية: المخططات المعرفية المبكرة غير المتكيفة، إشكالية التفرد-الاستقلالية، المراهقون المتفوقون عقلياً، اضطراب الأكل نفسي المنشأ.

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Introduction:

During adolescence, psychological well-being is a notably vital aspect in the development of identity, autonomy, and cognition. Notably highly gifted adolescents, despite their cognitive strengths, face certain mental health challenges. Their level of cognitive complexity, in conjunction with a heightened degree of sensitivity, these challenges can negatively affect their individuation- autonomy process. Also, early maladaptive cognitive schemas which Arising out of past events and experiences, have an effect on how people view themselves, others, as well as their capacity for achieving autonomy.

The interaction between early maladaptive schemas along with individuation-autonomy remains as a relatively underexplored area, particularly within the context of most highly gifted adolescents suffering from psychogenic eating disorders. Even though cognitive schemas have been researched at length, limited consideration has been given to their manifestation in highly gifted people, as well as their contribution to autonomy struggles. The lack of knowledge stresses the necessity for a greater study into the mental processes that connect thought patterns with separation problems in this group. This study aims to investigate the nature of early maladaptive cognitive schemas and the individuation-autonomy challenges among highly gifted adolescents suffering from psychogenic eating disorders.

To achieve this, the research is structured into several key sections. we started this study with an introductory chapter that contains the problem and the hypotheses of the study that were formulated in light of the questions of the study, and then Determined the importance and objectives of the study, in addition to previous studies and defined the terms of the study, either for the theoretical aspect, which includes four chapters (early maladaptive cognitive schemas, the issue of individuation-autonomy, highly gifted adolescents, psychogenic eating disorder) that deal with the theoretical background of variables the study, and followed the theoretical side with the practical side, which is an extension of the previous chapters, which consists of two chapters, where the fifth chapter is devoted to the methodological aspect of the study represented in the identification of Study methodology, study sample, and study tools, while the sixth chapter we presented Cases with an analysis of the results obtained from the tools we used .

The Introductory chapter

Research problem:

Highly gifted adolescents face several challenges that hinder their psycho-social and cognitive development. These challenges become particularly difficult during adolescence, a critical stage in an individual's life and crucial to their future growth. One of the key difficulties faced by gifted adolescents is the presence of maladaptive cognitive schemas, deeply rooted patterns of thinking and feeling that originate from early childhood experiences and negatively impact their development.

In addition, they face the issue of individuation–autonomy, which is a fundamental developmental task. It involves building a clear, well-defined personality that is independent from the family and social environment, enabling the adolescent to make personal decisions and take responsibility for them in later stages of life.

Beyond these developmental challenges, studies indicate that highly gifted adolescents often suffer from psychogenic eating disorders. These disorders may be used as a defensive mechanism to cope with their emotional and cognitive mismatch with peers, unmet needs from the family, and the disappointment of failing to meet others' expectations.

Despite the growing interest in the mental health of gifted adolescents, research remains limited regarding the interplay between maladaptive cognitive schemas, individuation-autonomy difficulties, and the development of psychogenic eating disorders. And by providing a deeper understanding of the psychological characteristics of this group, this research seeks to contribute to the development of more effective therapeutic strategies tailored to their specific needs.

From this, the research problem emerges in the following questions:

- **What is the nature of early maladaptive cognitive schemas and the individuation-autonomy process among highly gifted adolescents with psychogenic eating disorders?**
- **What are the common types of maladaptive cognitive schemas among highly gifted adolescents?**
- **Do early maladaptive cognitive schemas significantly contribute to the development of psychogenic eating disorders in highly gifted adolescents?**

- **How do early maladaptive cognitive schemas influence the individuation-autonomy process in highly gifted adolescents?**
- **Which types of maladaptive schemas are most strongly associated with difficulties in autonomy development?**

Hypotheses:

- Standards/Perfectionism, Social Isolation/Alienation are the most common types of maladaptive cognitive schemas among highly gifted adolescents
- Early maladaptive cognitive schemas contribute to the development of psychogenic eating disorders in highly gifted adolescents.
- Early maladaptive cognitive schemas have a significant influence on the individuation-autonomy process in highly gifted adolescents.
- Highly gifted adolescents with strong **dependency schemas** struggle significantly more with autonomy compared to those with other maladaptive schemas.

Study Objectives:

This study aims to explore the psychological and developmental challenges faced by **highly gifted adolescents**, particularly focusing on **early maladaptive cognitive schemas, individuation-autonomy struggles, and psychogenic eating disorders**. The specific objectives are:

1. **To identify** the most prevalent **early maladaptive cognitive schemas** among highly gifted adolescents.
2. **To examine** how these **maladaptive schemas** influence the individuation-autonomy process.
3. **To analyze** the relationship between **individuation-autonomy struggles and psychogenic eating disorders** in highly gifted adolescents.
4. **To provide** insights that can contribute to the development of **effective psychological interventions** tailored to the needs of highly gifted adolescents struggling with these challenges

The importance of the study:

The study's importance can be outlined in the following areas:

Theoretical Contribution

- Expands knowledge on the cognitive and emotional development of highly gifted adolescents.
- Provides insight into how early maladaptive schemas influence individuation-autonomy.
- Contributes to the existing literature by linking giftedness, autonomy struggles, and psychogenic eating disorders.

Practical Implications

- Assists educators and parents in understanding the psychological challenges faced by gifted individuals beyond academic performance.
- Provides psychologists and counselors with a better framework to assess individuation-autonomy difficulties in highly gifted adolescents.

Previous Studies:

- The study of Selen Öcal, Kahraman Güler (2021) titled “**Investigation of the relationship between early maladaptive schemas, psychological resilience and interpersonal relationship style in young adult**”. aims to examine the relationship between early maladaptive schemas, interpersonal relationship style, and psychological resilience. The sample of the research consists of 322(208women / 104 men) from Istanbul, Izmir, and Mugla provinces over the age of 18. Sociodemographic Data Sheet, The Young Schema Questionnaire 3 Short form, Interpersonal Relationship Scale, Psychological Resilience Scale were used as a data collection tool. For the application of data collection tools, The Sociodemographic data form, The young schema questionnaire 3 short form, the Interpersonal relationship scale, Psychological resilience scale. According to the findings, it was found that a weak and positive relationship was found between the approval-seeking schema and the psychological resilience subdimensions. However, significant negative correlations were found with other schema domains. According to those, it was observed that emotional deprivation and imperfection subscales had a positive effect on the frustrative relationship style. The Approval-seeking subscale had a positive effect on the nurturing relationship style, and the imperfection, failure, and suppression of emotions subscales harmed the nurturing relationship styles.
- The study of Stephane Rusinek, Elodie Charbonnier, Abdel- Halim Boudoukha, Pierluigi Graziani and David Dafonseca (2013) titled “Early Maladaptive Schemas among children: A new way to screen for depressed children?” to answer this question: How can children's schemas evolve into

adult schemas that are responsible for depression? the researchers translated Schmidt, Joiner, Young, and Telch's (1995) Early Maladaptive Schema Questionnaire into French and adapted it to children. And administered the questionnaire to two groups of children in the sixth- to ninth-grades (N = 252), one group containing children suffering from depression and the other containing children with no psychiatric disorders. The results provided insight into the structure of depression schemas. In a clinical perspective, we stress the possibility of using this tool to individually or collectively detect "normal" from "abnormal" schemas in children.

- The study of Harold D. Grotevant and Catherine R. Cooper (1986) titled "Individuation in Family Relationships: A Perspective on Individual Differences in the Development of Identity and Role-Taking Skill in Adolescence". The study explores how individuation within family relationships influences identity formation and role-taking skills in adolescence. It adopts a developmental psychology approach, likely using observational studies, self-report measures, or structured interviews to analyze individual differences in adolescents' ability to balance autonomy and emotional connection with their families. The findings indicate that adolescents who successfully individuate while maintaining emotional ties to their families develop stronger identity formation and role-taking abilities. Supportive family environments with open communication foster better individuation, while overly controlling or emotionally distant parenting hinders the process and negatively impacts identity development.

- The study of Manuela Fleming (2005) titled "**Adolescent Autonomy: Desire, Achievement and Disobeying Parents between Early and Late Adolescence**". The study investigates how adolescents perceive and achieve autonomy, focusing on differences between early (12-13 years old) and late (18-19 years old) adolescents. It examines three dimensions of autonomy: desire for autonomy, achievement of autonomy, and disobeying parents as a strategy for gaining autonomy. Using a two-phase methodology with a sample of 994 adolescents, the study first conducted a content analysis to identify behaviors associated with autonomy. A questionnaire based on these behaviors was then administered to measure the frequency of desire, achievement, and disobedience among different age groups and genders. Statistical analysis, including the Chi-Square Test, compared differences between early and late adolescents. The findings indicate that desire for autonomy is present from early adolescence, but achievement lags behind, especially in behaviors related to physical separation from parents. Older adolescents achieve autonomy more frequently, particularly in managing their own money, making independent decisions, and staying out at

night. Males rely more on disobeying parents to gain autonomy compared to females. Conflict with parents plays a significant role in achieving autonomy, highlighting that autonomy is not simply granted but actively pursued by adolescents.

-The study of Miraca U.M. Gross (2009) titled “**Highly Gifted Young People: Development from Childhood to Adulthood**” as part of *the International Handbook on Giftedness*. The study examines the cognitive and affective development of highly gifted children, emphasizing their differences from age peers and the challenges they face in educational and social settings. The research highlights how their cognitive strategies, intrinsic motivation, and social expectations differ significantly from those of their classmates and teachers. The study employs longitudinal methods, tracking the development of highly gifted individuals over time and analyzing the outcomes of various academic acceleration programs. The findings indicate that highly gifted students often experience social and academic challenges due to a lack of appropriate curriculum and grade placement, and that well-monitored acceleration programs yield positive academic and social outcomes. The research also identifies differences in cognitive styles and problem-solving strategies, showing that highly gifted children prefer independent learning and display intrinsic motivation, distinguishing them from their peers.

- The study of Hanna David (2018) titled “**Problems and Challenges of the Gifted Adolescent: School-Related Problems of the Gifted Adolescent**”. The study explores the unique academic challenges faced by gifted adolescents, emphasizing how their learning needs often remain unmet in traditional school settings. Using a qualitative approach, the study analyzes the most frequent school-related issues, including boredom, negative peer attitudes, high expectations, perfectionism, and self-discipline problems. The findings reveal that gifted adolescents struggle with a lack of intellectual challenge, leading to frustration, disengagement, and sometimes behavioral issues. Acceleration and specialized educational programs can enhance both academic and social development, but many gifted students face obstacles in accessing these opportunities. The study underscores the importance of tailored educational environments to prevent underachievement and emotional distress among gifted adolescents.

- The study of Sally R. Beisser & Catherine, W. Gillespie (2021) titled “**An Investigation of Eating Disorders among Gifted Adolescents**”, this study aims to investigate eating disorders of 33 identified gifted adolescents (77% female) in one Midwest state with an online survey using a well-validated

instrument, the Eating Disorder Examination-Questionnaire (EDE-Q), that contains subscales of eating restraint, eating concern, shape concern, and weight concern. Narrative responses were included in the data. Results indicated 20% of the gifted adolescents in this study revealed concerning responses about their weight, shape, and dietary restrictions. Voluntary comments revealed apprehension, concerns, and distress among some respondents. Recommendations are provided for teachers, parents, as well as for students themselves.

- The study of Lauren A. Holland, Lindsay P. Bodell, and Pamela K. Keel (2013) titled “**Psychological Factors Predict Eating Disorder Onset and Maintenance at 10-Year Follow-Up in European Eating Disorders Review**”. The study aimed to identify psychological factors that predict both the onset and maintenance of eating disorders over a 10-year period, focusing on perfectionism, interpersonal distrust, and maturity fears. Using data from a longitudinal epidemiological study on health and eating behaviors, the researchers analyzed 1,320 participants (72% female) with the Eating Disorder Inventory (EDI) subscales. Logistic regression models examined how these traits influenced eating disorder development and persistence. The results showed that higher perfectionism and higher maturity fears predicted increased risk of eating disorder onset, while lower interpersonal distrust was unexpectedly associated with higher risk of developing an eating disorder. Among individuals already diagnosed, only perfectionism predicted the maintenance of an eating disorder at the 10-year follow-up. These findings suggest that different psychological factors contribute to the onset versus the persistence of eating disorders, with perfectionism playing a key role in both. The study underscores the importance of targeted interventions to address these traits in prevention and treatment strategies.

Critique of Previous Studies:

1. Study Environment and Location

The previous studies were conducted in various settings, from schools and research centers to hospitals.

- Some focused on educational contexts, like Hanna David (2018), which explored challenges faced by gifted adolescents in schools. Others, such as Sally R. Beisser & Catherine W. Gillespie (2021), examined eating disorders among gifted individuals in the U.S.

- Clinical and research settings were also common, as seen in Lauren A. Holland et al. (2013), which relied on long-term epidemiological data. Unlike these studies, our research was conducted at the Gifted Center in M'sila, Algeria. This setting provides a unique cultural and educational backdrop that hasn't been extensively explored in previous studies.

2. Research Methodology

Previous research used a mix of qualitative and quantitative methods, depending on the study's focus. While many relied on statistical or longitudinal approaches—like Miraca U.M. Gross (2009), who conducted a long-term study on gifted children—our study takes a different path. We adopted the clinical approach, allowing for an in-depth psychological understanding that goes beyond numbers and trends.

Some studies, such as Stephane Rusinek et al. (2013), used modified questionnaires to compare depressive and non-depressive children, while Manuela Fleming (2005) analyzed autonomy development statistically. In contrast, our study integrates clinical observations with projective and cognitive analytical methods, offering a deeper, more personalized perspective.

3. Research Objectives

The goals of previous studies varied widely. Some explored the relationship between maladaptive schemas and psychological resilience (Selen Öcal & Kahraman Güler, 2021), while others examined cognitive schemas in childhood depression (Stephane Rusinek et al., 2013). Our study stands apart because it brings together three critical aspects: maladaptive cognitive schemas, individuation-autonomy issues, and psychogenic eating disorders in gifted adolescents. While earlier studies touched on these topics separately, none have examined them together in the way we do.

For instance, Harold D. Grotevant & Catherine R. Cooper (1986) studied autonomy but didn't consider the role of cognitive schemas or their link to eating disorders.

4. Sample

Previous studies varied in sample size. Some worked with large groups, like Selen Öcal & Kahraman Güler (2021), which analyzed data from 322 participants. Others, like Sally R. Beisser & Catherine W. Gillespie (2021), focused on a smaller group of 33 gifted adolescents.

Our study takes a more intimate, case-based approach, focusing on three highly gifted adolescents with psychogenic eating disorders. Instead of aiming

for broad generalizations, we focus on deep, individualized exploration, allowing us to capture the complexities of each participant's experience.

5. Research Tools

Many past studies relied on standardized questionnaires, such as Lauren A. Holland et al. (2013), which used the Eating Disorder Inventory (EDI). Others, like Stephane Rusinek et al. (2013), modified existing tools like the Young Schema Questionnaire to fit their research needs.

In contrast, our study combines cognitive and a projective analytical approach with 5 mixed tools (Clinical interview, Rorschach, T.A.T, Young Schema Questionnaire – Short Form, Eating Disorder examination giving us the ability to explore unconscious processes and deeper psychological patterns. This distinguishes our work from studies that primarily depend on self-report measures.

Operationnal Definitions:

Early Maladaptive Cognitive Schemas:

EMCs are structures of emotions, thoughts, and stereotyped knowledge deeply rooted in the individual's mind, originating from childhood traumas and past experiences during childhood and adolescence.

The Issue of Individuation - Autonomy:

The issue of individuation and autonomy refers to a developmental process that individuals undergo during adolescence and early adulthood. In this process, the individual strives to become distinct from others by forming a stable and consistent sense of self. This is achieved through the recognition of personal preferences, values, and goals, along with the ability to make independent decisions, determine one's own path, and take full responsibility for oneself.

Highly Gifted Adolescents:

Those who demonstrate an advanced ability or potential in one or more specific areas when compared to others of the same age, experience or environment. These gifted individuals excel in their ability to think, reason and judge, making it necessary for them to receive special educational services and support to be able to fully develop their potential and talents. Davidson (Davidson Gifted Blog. n.d)

Psychogenic Eating Disorder:

According to the APA Dictionary: An eating disorder is any disorder characterized primarily by a pathological disturbance of attitudes and behaviors related to food, including anorexia nervosa, bulimia nervosa, and binge-eating disorder. Other eating-related disorders include pica and rumination, which are usually diagnosed in infancy or early childhood. (American Psychological Association. 2024).

CHAPTER ONE

Early Maladaptive Cognitive Schemas

- **Definition**
- **early maladaptive cognitive schemas**
- **Characteristics of Early Maladaptive Cognitive Schemas**
- **Sources of Early Maladaptive Cognitive Schemas**
- **Early maladaptive schemas domains**

Definition:

A schema: May be defined as a cognitive structure that includes stable beliefs and assumptions about the self, others, and the world, and functions as a broad organizing principle that directs an individual's cognitive processing in their life events. Schemas can play an important role in the quality of various aspects. (ز.علي مرادي، 2022)

early maladaptive cognitive schemas (EMSs):

Young E. J., Klosko S. J. and Weishaar E. M. define early maladaptive cognitive schemas as a generalised pattern, composed of experiences, feelings, thoughts or psycho- somatisations regarding oneself, others and the personal and behavioural world throughout the years, affecting all the functional areas of an individual. The origins of early maladaptive cognitive schemas are a consequence of basic emotional deprivation. The theoretical- experimental model of Young E. J. and his collaborators has postulated five individual basic emotional needs: secure attachment towards others, personal autonomy, positive abilities and emotions of human identity, assertive development and fundamental feelings, spontaneity and entertainment, rational delimitation and behavioral self-regulation. These are universal motivations, and the development of cognitive schemas is mediated by the four types of early experience in the decision maker's life: detrimental frustration of needs, trauma/victimization, deprivation in developing autonomy and selective interiorization or selective identification with significant persons. The duality of the temperamental components with which an individual is born can also contribute to the development of early maladaptive cognitive schemas, for instance: lability-non-reactivity, dysthymia – maniacal optimism, neuroticism – schizoid, obsession – distraction, passivity – activity, irritability – playfulness, timidity – extraversion. (Delcea C. 2020)

Characteristics of Early Maladaptive Cognitive Schemas:

- Not all schemas originate from trauma, but they serve a purpose. They often develop due to painful experiences that recur consistently during childhood and adolescence.
- Early maladaptive cognitive schemas resist change. Individuals subconsciously seek to maintain them because they represent familiar patterns linked to past painful events. These schemas become ingrained through experiences that trigger them, making change difficult. As a result, they shape the individual's reality, affecting their thoughts,

emotions, and interactions with others, often leading to contradictory and automatic behaviors.

- They emerge during childhood and adolescence, influenced by the individual's environment and early experiences. These schemas push the person to respond to new situations in the same way they reacted to similar past events.
- Over time, the dysfunctional role of these schemas becomes evident, impacting the individual's interactions with others in unhealthy ways. This often leads to coping behaviors aimed at adapting to these schemas, contributing to chronic symptoms linked to mental health issues such as anxiety, depression, addiction, and psychosomatic disorders.
- Schemas vary in scope and intensity. The more situations reinforce a particular schema, the more deeply rooted and magnified it becomes. (Young E. J. Klosko S. J. Weishaar E. M. 2006)
- Schemas have dimensions and vary in levels of intensity and severity.
- Schemas can be positive or negative, early or late, and may be conditional or unconditional. (Kahalé, N. 2009)

Sources of Early Maladaptive Cognitive Schemas:

The emergence of these schemas can be attributed to the following factors:

1: The five core emotional needs:

- 1. Secure attachments to others (includes safety, stability, nurturance, and acceptance)**
- 2. Autonomy, competence, and sense of identity**
- 3. Freedom to express valid needs and emotions**
- 4. Spontaneity and play**
- 5. Realistic limits and self-control**

For instance, as a child grows up, they are largely dependent on their caregivers to meet these emotional needs. Toxic relationships with the caregivers can thus have a strong impact on the way children develop as individuals.

It's important to note, however, that schemas form as a result of *repeated* toxic experiences in childhood or adolescence.

So, if parents fail to meet their child's needs in a certain situation, this is **not** an indicator that the child will develop specific maladaptive schemas. Besides, the child's temperament also plays an important role in his or her development.

On one hand, every child perceives and reacts to the environment in a unique way. On the other hand, the child's personality traits could make him or her more susceptible to triggering specific behaviors (of others) in social contexts.

2: Early life experiences:

One of the harmful factors contributing to the development of maladaptive schemas, particularly those that emerge early in childhood with significant intensity, is the familial system, specifically the parental relationship. When an adult encounters similar situations that reactivate these schemas, they re-experience their childhood family environment in all its complexities, struggles, and painful experiences, including their relationship with their parents.

Additionally, siblings, peers, and classmates from school or the neighborhood can also play a role in the formation of schemas. However, schemas that develop later in life are generally less dominant, pervasive, and intense. For example, the social isolation schema, which typically develops in late childhood or adolescence, may not necessarily reflect the family environment or its dynamics. This is seen in cases where an adolescent experiences family conflict or parental separation, influencing their perception of social relationships.

Young and his colleagues (2003) identified four types of early experiences that contribute to the development of maladaptive schemas:

1) Frustration of Needs: This occurs when a child experiences deprivation, deficiency, or an inability to satisfy basic emotional needs such as stability, understanding, or love. As a result, they may develop schemas such as *emotional deprivation* or *abandonment*.

2) Exposure to Trauma, Abuse, or Mistreatment: In this case, the child becomes a victim of abuse or mistreatment, leading to the development of schemas such as *mistrust/abuse*, *defectiveness/shame*, or *vulnerability to harm or illness*. Research indicates that emotional trauma and painful early life experiences can disrupt a child's natural psychological development, affecting later stages of life.

3) Excessive Need Satisfaction: When parents excessively fulfill their child's basic needs, providing an overabundance of care and protection, the child may develop schemas like *dependence/incompetence*. If parents either overprotect the child or grant them excessive freedom without clear boundaries, the child may develop a *grandiosity/entitlement* schema.

4) Selective Identification with Significant Others: A child may internalize the thoughts, emotions, experiences, and behaviors of a parent through identification. If the parent is aggressive or abusive, the child may adopt similar behaviors. Alternatively, the child may reject certain traits of their parents or selectively incorporate only aspects they perceive as suitable.

3: Emotional Temperament:

Emotional temperament refers to an individual's innate disposition, which plays a crucial role in shaping early maladaptive schemas. Parents often observe differences in their children's temperaments from an early age, as some children tend to be shy and reserved, while others are more energetic or aggressive.

According to Young and colleagues, temperament consists of multiple dimensions that are primarily innate and relatively resistant to change, even through therapeutic interventions.

Young and his colleagues explain that emotional temperament interacts with childhood adversities, shaping schemas in the following ways:

- **Different temperaments expose children to different parental treatments.** An aggressive child is more likely to experience mistreatment from an aggressive parent compared to a passive and calm child.
- **Children respond differently to similar life events based on their temperament.** A shy child with a rejecting mother may withdraw from the world and become overly dependent on her, while a socially inclined child in the same situation may seek connections with others to form positive relationships.
- **A supportive or hostile environment can either reinforce or mitigate emotional temperament.** A secure and nurturing family system can help a shy child develop social confidence in various situations, reducing the impact of their initial temperament. (باباعمي، أداود، 2021)

Early maladaptive schemas domains:

According to **young.J** there are **18 Early maladaptive schemas (EMS's)** grouped into five domains, each representing unmet emotional needs from childhood:

Domain I: Disconnection and Rejection

His domain is closely related to the concept of insecure attachment, mostly because people who have this type of schema lack the ability to form secure bonds with others.

Namely, the needs of love, support, guidance, and belonging were not met by the attachment figures (the caregivers) during early childhood.

Throughout their lives, they continue to believe that these needs will not be met by others.

The schemas in this domain are associated with traumatic childhood experiences. Thus, people who develop these schemas usually come from unpredictable, cold, rejecting, isolated, or abusive families.

Later as adults, they tend to recreate their past traumatic experiences. Specifically in relationships, they usually choose partners that resemble their early childhood relationships with their parents. This domain includes:

- **Abandonment/Instability.**
- **Mistrust/Abuse.**
- **Emotional Deprivation.**
- **Defectiveness/Shame.**
- **Social Isolation/Alienation.**

Domain II: Impaired Autonomy and Performance

Is the second of the five schema domains in Dr. Jeffrey Young's Schema Therapy model.

The maladaptive schemas in this domain relate with a lack of sense of self and self-agency. That is to say, people who develop this type of schema have not formed a stable perception of who they are and how they are as independent individuals.

This typically happens when one grows up in a family where the parents were overprotective, too involved in the child's life, or careless about the

child's development. For instance, such parents might have undermined the child's confidence and not facilitated the child's ability to function independently or perform successfully.

Schemas include:

- **Dependence/Incompetence.**
- **Vulnerability to Harm or Illness.**
- **Enmeshment/Undeveloped Self.**
- **Failure.**

Domain III: Impaired Limits

Impaired limits is the third of the five schema domains characterized by Dr. Jeffrey Young. It can be linked to issues with setting both personal and interpersonal limits.

On a personal level, people with schemas from this domain usually have difficulties controlling their impulses, engaging in goal-directed behavior, taking responsibility, and following rules.

On an interpersonal level, these adults might disregard the needs and rights of others and thus have insufficient capacity to cooperate in social contexts.

Schemas from this domain usually develop in children whose parents did not set enough limits. For example, they spoiled the child, did not provide enough guidance, and did not encourage the child to exercise self-discipline.

Schemas include:

- **Entitlement/Grandiosity.**
- **Insufficient Self-Control/Self-Discipline.**

Domain IV: Other-Directedness

Other-directedness is the fourth domain of the early maladaptive schemas in the *Schema Therapy* model.

Generally, people who have this type of schema typically grew up believing that love is conditional. They became too focused on the reactions, opinions, and approval of others.

In contrast, they didn't pay much attention to their own desires and inclinations. Such individuals think that others will love and accept them if they satisfy others' needs and act in a way that others approve of. Therefore, they suppress their own emotions and needs.

Schemas include:

- **Subjugation.**
- **Self-Sacrifice.**
- **Approval-Seeking/Recognition-Seeking.**

Domain V: Over-vigilance and Inhibition

Overvigilance and Inhibition is the last of the five maladaptive schema domains in Dr. Young's *Schema Therapy* model.

Characteristic of the schemas in this domain is the emphasis on internalized strict rules and moral values as well as the minimization of feelings and emotional expression, often at the cost of one's well-being or interpersonal relationships.

People who develop these schemas were typically brought up in demanding, strict, punitive, or perfectionistic families.

Schemas include:

- **Negativity/Pessimism.**
- **Emotional Inhibition.**
- **Unrelenting Standards/Hypercriticalness.**
- **Punitiveness.**

The 18 Early Maladaptive Schemas

(Based on Young's Schema Therapy)

Domain I: Disconnection & Rejection

1. **Abandonment**
2. **Mistrust/Abuse**
3. **Emotional Deprivation**
4. **Defectiveness/Shame**
5. **Social Isolation**

Domain II: Impaired Autonomy and Performance

6. **Dependence/Incompetence**
7. **Vulnerability to Harm/Illness**
8. **Enmeshment/Undeveloped Self**
9. **Failure**

Domain III: Impaired Limits

10. **Entitlement/Grandiosity**
11. **Insufficient Self-Control/Self-Discipline**

Domain IV: Other-Directedness

12. **Subjugation**
13. **Self-Sacrifice**
14. **Approval/Recognition-Seeking**

Domain V: Overvigilance & Inhibition

15. **Negativity/Pessimism**
16. **Emotional Inhibition**
17. **Unrelenting Standards**
18. **Punitiveness**

CHAPTER TWO

The Issue of Individuation- Autonomy

The concept of Individuation:

- Definition
- The Concept Of Individuation According To D.Winnicott
- Individuation Theories
- Individuation in Adolescence and Young Adulthood
- Impairments in Individuation

The concept of autonomy:

- Definition
- Autonomy during adolescent
- Autonomy as Independence
- Types of Autonomy
- The Importance of Autonomy in Adolescence

The Concept of Individuation:

Definition:

From a lexicological point of view, individuation is synonymous with differentiation. According to **Larousse**, it is the “process by which personality differentiates.” (Larousse. n.d)

Analogically, individuation refers to the development of personality and thus the gap expressed between two living entities. It is the action of making a person different within a society. It is also the act of not resembling others.

The etymology of individuation dates back to the year 1551. Denis Sauvage used this term while translating *The Philosophy of Love* by Léon Hébreu on page 55. J.H. Formey also used it in 1754, adding the word principle, giving us the expression “principle of individuation.”

The term individuation is borrowed from Scholastic Latin: individuation, meaning the process of becoming an individual (what makes a being possess a particular essence), and principium individuationis (13th century). In Scholastic philosophy, each individual differentiates themselves from others through their actions and convictions. (Maizi, M. 2022)

Jungian Definition of Individuation

During the first half of the last century, individuation became the cornerstone and gravitational center of the work of one of the masters of modern psychoanalysis, the Swiss Carl Gustav Jung.

Before him, Aristotle had introduced the problem of entelechy, an idea later taken up by Saint Thomas, Leibniz, and Claude Bernard. Jung provided a new approach to individuation through the lens of depth psychology.

For Jung, individuation refers to the process of organization that leads to the realization of a complete and fully developed individual form. It is an inner evolution of the human being that aims at becoming a whole, distinct from the collective, free from all constraints that prevent self-emancipation and self-acceptance. It is a transcendent force that Etienne Perrot describes as an “adventure.” This force, “guided with lucidity and wisdom, leads to an integration of the superhuman, to a breadth and peace where oppositions and separations that make up our ordinary life are reconciled: consciousness embraces the unconscious, shadow merges with light, good and evil cease their millennia-old struggle.”

C.G. Jung states: “I use the term individuation to designate the process by which a being becomes a psychological individual, meaning an autonomous and indivisible unit, a totality.”

For Jung, individuation is a process of growth and maturation. This growth is not the result of a conscious and voluntary effort; it is involuntary and natural. It is like a “tree, whose slow, vigorous, and involuntary growth follows a well-defined plan.”

Jung explains that individuation is an involuntary drive. He compares it to the growth of a tree—slow, strong, and robust. According to Gilbert Durand, the tree symbolizes ascending evolution, an elevation toward higher levels. He states: “All ascensional symbols appear to us as marked by the concern to reclaim a lost power, a weakened tone degraded by the fall.” This growth is a crucial aspect of Jungian psychology.

The organizing center of this growth is **the Self**. It is like the atomic nucleus of our psyche. It is the inventor, organizer, and source of dream imagery. It contrasts with the Ego, which is only a small part of the psychic system.

For Jung, the process of individuation is an evolution and transformation that occurs within the individual to enable the realization of the Self. The ultimate goal of this process is a new orientation, entirely different in its approach to life. (Maizi, M. 2022).

The Concept Of Individuation According To D.Winnicott:

This question of psychic individuality and separation from the other is also found in D.W. Winnicott’s theory on the early stages of child development. On this subject, the author puts forward the idea—later taken up by M. Mahler—of an innate tendency in maturation processes that require specific environmental conditions to be fulfilled.

Winnicott distinguishes a “primary maternal preoccupation” (Winnicott, 1956), through which the mother dedicates herself to her child via a primary identification with them. This living and specialized adaptation to the infant’s needs is notably mediated by the reflective function of the mother’s face. In fact, D.W. Winnicott (1967) highlights the crucial role of the mother’s face as a mirror of the child’s affective states. While still relatively undifferentiated, this allows the young subject to reclaim their instinctual emotional experiences. By looking at the face of their primary object, the child can find themselves and feel unified within the affective image reflected back at them. This visual

exchange enables the child to establish an initial circumscription of the self, where self-enrichment alternates with the discovery of meaning in the world of perceived things.

Beyond this process of integration, primary maternal preoccupation, which characterizes the "good enough mother" (Winnicott, 1949), also carries out a personalization process. This process fosters a psychosomatic connection, allowing the infant's psyche to inhabit their body. Once the child's self is installed within their bodily space, Winnicott (1963) specifies that an initial distinction between Me and Not-Me can emerge through a specific processual modality. By relying on the simplified version of reality provided by the mother, the child encounters external objects through an experience of creative illusion, as if they had subjectively and omnipotently created them. To facilitate this, the mother arranges objects so that the child finds them exactly where they are capable of perceiving them.

This illusionary space, formed by the coexistence of the objectively found and the subjectively conceived, is what D.W. Winnicott (1951) calls a "transitional space". This space belongs neither exclusively to the child nor to their maternal object. Instead, it represents an intermediate zone of relational experience, where the child's primary bond to external reality takes shape. A first discriminatory function between Me and Not-Me then begins to develop within this creative indifferenciations. As the child gains confidence in their body and their sense of existence, they become open to a gradual process of disillusionment. As the mother's responsiveness gradually falters, the young child can undergo their first self-organizing experience, while remaining anchored in the transitional space that connects them to the other. (Flémal, S. 2011).

Individuation Theories:

First Theory of Separation and Individuation: The Period of Infancy(M.Mahler):

Mahler's separation and individuation theory was supplementary to Freud's libido theory (Mahler et al., 1975) and was also influenced by psychoanalytic ideas, such as Winnicott's theory of the self and Jacobson's formulations of self and object world. Separation cannot be mentioned without the attachment theory. According to Bowlby's attachment theory, the child develops internal models as well as models of what one can expect from relationships on the basis of the first relationship with the mother or the caregivers (Bowlby, 1973). Attachment reflects the quality of the affective bond

between the child and the mother and it can be either secure or insecure. The continued and secure attachment to the primary object was for Mahler, an essential point to the process of separation-individuation because it organizes the internal world of the subject.

According to Mahler's theory (Mahler et al., 1975), the child experiences three crucial phases: **a non-object phase (autism), a pre-object phase (symbiosis) and an object phase (separation-individuation)**. This means that there is a slow intrapsychic transformation that leads, firstly, through separation to a world of pure reality, as regards the child's own deficits and their primary love objects (caregivers/parents) and secondly, as knowledge of his own conquers and characteristics that mark his individuality. **This first hypothesized phase** describes the child without any object, as a merely physiological human being, with no differentiation between internal and external reality (Mahler & La Perriere, 1965) during the first two months of life.

The next phase, namely the "normal symbiotic state", was crucial for Mahler's theory. In this phase, the new-born behaves as though "he and his mother were an omnipotent system—a dual unity within one common boundary" (Mahler et al., 1975). Mahler (1952) started to use the term "symbiosis" from biology, in order to describe the phase of object relationship during infancy (3 months to 1 year), whereby the child acts as a single system with the mother. There is no differentiation between the child and the mother; both self and object are fused in which fusion of the "I" is not yet distinguished from the "not-I". As the child grows, the separation and individuation process continues, with its peak around the age of eighteen months, when the child develops the capacity to walk which physically separates him from the mother. Gradually, the child separates intra-psychically from the mother, as he introjects the self-object unit into both parts, "I" and "not-I". The stable presence of the mother is vital, physically and psychically, as Winnicott described in his concept of "a good-enough mother" (Winnicott et al., 1953). **The phase of separation-individuation** begins at the peak of the symbiotic stage and it consists of two interdependent processes, the individuation and of separation.

It is the child's autonomous movement that takes him both physically and psychologically away from the mother, along with the agonizing fear of losing the mother, which leads him to further internal growth. The outcome of a successful separation-individuation leads to the establishment of a secure sense of identity in the child and the ability to develop non-symbiotic object relationships. This unfolds into the fourth and final phase which is characterized by the "unfolding of complex cognitive functions: verbal communication,

fantasy, and reality testing” (Mahler & La Perriere, 1965). This final phase of Mahler’s observation coincides with Erikson’s (1968) concepts of identity and identity crisis during adolescence. Erikson emphasizes that during that period, the subject must be accepted by the community and be placed in the historical time he belongs. Therefore, the identity is a part of the society and the individual recognizes himself also through the communal culture.

In summary, the child and the adolescent begin gradually to be undifferentiated through sequential phases toward self-other differentiation. This allows the subject to separate himself from his external mother by internalizing her as a psychic/internal representation (Mahler’s theory). It is only when he leaves the past behind that he can find his individuality and forms his identity in the community (Erikson’s theory).

Second Theory of Separation-Individuation: The Period of Adolescence (Blos):

The task of separation during the separation-individuation process is a challenging one for both parents and adolescents. Adolescents are required to continue certain cultural habits, but also need to build upon their own narcissistic forces and behaviors. The passage from childhood to adolescence is not only due to sexuality, as Freud suggested (1905), but also, because of the transformation of childhood understandings, to adolescent notions through the progression of separation-individuation process. Primary individuation is achieved/com- pleted by the age of three (Mahler et al., 1975). However, this self-other differentiation is re-examined in a second individuation process in adolescence (Blos, 1979).

Blos (1962, 1967) writes that adolescence is a period of a second separation - individuation process which is mainly in the intrapsychic procedure. Adolescence is a crucial period because of continuous internal, external and familial changes, as the young person prepares to “leave home”, establishes his own world and becomes an independent adult. Adolescents undergo an internal transition, as they need to explore their roles, create new relationships outside the entourage and gradually begin to work towards developing a robust identity (Blos, 1979; Erikson, 1968). On this developmental trajectory, individuation equips the young person with the ability to function autonomously free from external pressure and control. The fostering of these changes by the family environment supports a healthy separation whilst maintaining existing relationships. Blos (1962, 1967) foresees the necessarily narcissistic dimension of the link to oedipal objects during adolescence, while Mahler only mentions the dyad child/mother. However, this pre-oedipal dyad

benefits Blois in establishing the link between adolescence and regression. According to him (Blois, 1962), even though the adolescent has abandoned the first object of love, she/he regresses later on. By regression, the adolescent goes back to an infantile position. The core is the simple repetition of the first separation-individuation (0 - 3 years old) that can explain the substance use during adolescence as a result of the revival of the primitive relationship with the mother.

On the other hand, interpersonal conflict is a central aspect of adolescence due to the anxiety emanating from separation and a worry around change and loss in the family. Unresolved disagreement may appear and give rise to a range of psychological difficulties. Addiction is one of those presentations whereby a difficulty in negotiating separation from one's parents leads the adolescent to resort to provocative behaviour and withdrawal from relating to others. As the need for individuation emerges, in order to differentiate himself from his family, the young teenager adopts a substance-using need, which can be a form of many indicators. When an adolescent, due to family pressures that occurred during that period, struggles to achieve independence and separation, substance-using behaviour is embraced and rigid family affiliations can be preserved over the years. (Stavrou, P.-D. 2022).

Individuation in Adolescence and Young Adulthood:

The process of individuating from one's parents takes on great importance in adolescence. Ideally, a family will allow a child room to grow and explore aspects of identity, personality, and self (within reason) in order to discover and develop (even when this contradicts with what the family might wish for the child). When parents do not accept the feelings, choices, or identities of their children, the individuation process may be negatively impacted. Further, children who are not allowed to experience challenging emotions such as sadness, worry, or anger may find it difficult to learn to know or trust their own feelings and thus, may not adequately develop a sense of trust in themselves.

Adolescents continue to individuate from their parents as they move into young adulthood. They choose their own schools, friends, hobbies, careers, and travel destinations and make a number of other life choices that may be at odds with the choices of their families and/or what their families want for them. Those who have successfully individuated will likely be able to make these choices with little anxiety. However, the process of individuation may be challenging to some, for a number of reasons, and making choices that veer

from family ideals and values may prove difficult. An inability to individuate, or the suppression or denial of the true self, can both cause distress and negatively impact the development of a defined sense of identity. (Jones et al. 2003).

Impairments in Individuation:

Individuation is a natural phenomenon that is an integral part of a child's development (Mahler, Pine, & Bergman, 1975). According to Mahler's model, the various stages leading to the child's independence and autonomy seem to unfold in accordance with their physical development. However, this differentiation requires the intervention of an external person. A child's individuation can only be achieved with the help of the external partner in the symbiotic unit, as outlined in the separation-individuation process.

Many factors can influence the course of this normal process. These may include harmful biological, environmental, or social elements, whether from the child or the mother. Mahler (1979d, 2001) specifically studied the development of infantile psychoses related to separation-individuation. Meanwhile, Green (1983) focused on the consequences of a mother who is preoccupied and emotionally disengaged from her child.

1: Pathological Development According to Mahler:

Mahler states that a child's survival depends on the sociobiological symbiosis with the mother's organism (Mahler, 1979d, p. 162). Just as the mother's breast is designed to meet the baby's needs, the mother must be available and respond to the child's needs for comfort and security to ensure proper development. Since the baby is predisposed to adapt to its environment, it is possible to conceive that the child modifies its behavior to respond to the mother's reactions, just as she reacts to the signals expressed by the child. Mahler (1979a) asserts that the child, depending on its repertoire of signals, adjusts its behavior to fit the mother's responses in order to have its needs met.

Since the child largely adapts to the mother's personality, the child's responses end up reflecting the mother's emotional needs, which increases the risk of disturbances in the symbiotic unit (Mahler, 1979a). Despite the child's remarkable adaptability, the mother's emotional availability remains essential for overall development, particularly in functions of the ego such as cognition, memory, and motor skills (Mahler, 1979f). The symbiotic relationship can be described as a set of "circular interactions" where each partner adapts, reacts, and responds to the other according to their biological and psychological

capacities (Mahler, 1979a, p. 24). Mahler states that “misinterpretations or misconnections of needs, signals, and responses between the child and the mother would inevitably lead to disturbances in one or both members of the mother-child unit,” thereby increasing “the predisposition or tendency toward psychotic, neurotic, or psychosomatic disorders” (Mahler, 1979f, p. 52; translation by the author).

On the child's side, several factors influence its ability to adapt to the environment: genetic vulnerability (illnesses, malformations, hormonal disorders, etc.), challenging personal characteristics (sensitivity, tolerance, reflexes, etc.), childhood trauma (malnutrition, absence of the mother, physical attacks, etc.), or simply inadequate communication with the mother (Mahler, 2001). These circumstances may prevent the child from using maternal support to structure its still fragile and undeveloped ego, compromising the individuation process and affecting cognitive and socio-emotional development (Mahler, 1979d). Mahler refers to “primary autism” (early infantile autism) to describe the child’s defensive attitude when, unable to rely on the mother's frame of reference for guidance, it withdraws into a restricted, inanimate world, avoiding human interaction and perceiving any change as a source of distress and crisis (Mahler, 2001).

Another disorder in the mother-child relationship identified by Mahler is “symbiotic psychosis,” in which the child is unable to differentiate itself from the primary object, maintaining the illusion of a fused symbiosis and struggling with differentiation (Mahler, 2001). This may result in symptoms such as separation anxiety, emotional crises, mood swings, loss of identity, and fear of disintegration (Mahler, 1979f). In both forms of psychosis, the child fails to confront reality, and the representation of the mother remains undifferentiated, blocking individuation.

Mahler also suggests that a predisposition to psychotic disorders in children can stem from disharmony in the mother-child relationship caused by the mother (Mahler, 1979d). Several maternal attitudes and behaviors can contribute to the development of childhood psychosis, such as unresolved childhood trauma, deep concerns caused by external events, physical illness, or health issues (Mahler, 2001). For example, if a mother struggles to cope with her child's gradual detachment (resisting any separation), she may discourage independent behavior, instilling a deep sense of guilt in the child for attempting individuation, thereby suppressing its need for separation (Mahler, 1979c). Conversely, “instead of promoting gradual separation, the mother may abruptly

push the child toward autonomy,” severing the bond drastically (Mahler, 1979c, p. 44; translation by the author).

Such behaviors can lead the child to develop various defense mechanisms linked to childhood psychotic disorders. The child may reject all external perception and relationships, focusing solely on inanimate objects (Mahler, 2001). It may also lose the ability to recall or react specifically to certain stimuli or develop ambivalence toward different situations (Mahler, 2001).

Although different behaviors, reactions, and defenses related to childhood psychosis can be identified, each symbiotic unit and primary relationship has unique characteristics and challenges that may disrupt the child's individuation and development. Mahler acknowledges the influence of genetics, experience, personality, and the behaviors of both mother and child as key factors in the separation-individuation process and the development of psychoses (Mahler, 2001). Once again, the mother's role is seen as decisive in shaping the quality of the symbiotic relationship. Psychoanalyst André Green, for his part, specifically studied the effects of an emotionally unavailable and disengaged mother.

2/Dead Mother Complex (André Green)

One of the constraints associated with the separation-individuation process of the mother-child unit, identified by psychoanalyst André Green (1983), is the child's identification with a "dead mother." By "dead mother," Green (1983) refers to a mother who is neither available to nor interested in her child due to a depressive state caused by the loss of a loved one, divorce, miscarriage, severe financial problems, etc. This maternal depression has significant consequences on the development of the child's self-concept and individuation process. Green (1983) explains that in the case of the dead mother complex, despite the mother's physical presence, her emotional indifference toward the child creates a profound "void," which the child internalizes. This void manifest later in life through failures in romantic and professional relationships.

The mother's emotional unavailability significantly impacts the child's development. As seen in the previous chapter, the symbiotic relationship is the foundation upon which the child builds their perception of the world. This relationship not only serves as a model for social interactions but also shapes the child's self-concept and cognitive abilities. When a child is exposed to a mother who is emotionally absent, they develop feelings of helplessness and despair, which manifest in various specific behaviors (Green, 1983). The child may interpret the mother's emotional absence as a sudden and incomprehensible

rejection. Believing themselves responsible for the mother's detachment, they may desperately attempt to "fix" what has gone wrong in their object of love. However, this effort is futile since they are not the actual cause of the mother's emotional state (Green, 1983). Consequently, the child experiences repeated failure and an overwhelming sense of powerlessness.

After struggling against the loss of maternal love, the child may develop defense mechanisms, including:

- Deep identification with the dead mother
- Emotional desensitization
- Self-directed aggression
- Detachment from emotional relationships
- Premature intellectual development

A dissociation between body and mind, leading to a search for sensual pleasures without emotional attachment (Green, 1983, pp. 231-233)

To survive their unmet need for love and recognition, the child may feel compelled to sever their emotional connection with the mother and suppress any dependency on her (Green, 1983). As a result, they become the embodiment of the void left by the mother's emotional absence. Since this primary relationship—marked by unmet needs—becomes the reference model for all future interactions and emotional experiences, the child inevitably internalizes the sense of emptiness and develops symptoms associated with this void.

By integrating this void, the child becomes fixated on an endless quest: to repair and revive the dead mother. According to Green (1983), the child's individuation becomes impossible because they remain obsessed with reanimating a mother over whom they have no control, reliving their loss repeatedly:

"The failure of the separation-individuation experience (Mahler), where the young self, instead of becoming the receptacle of new investments after separation, clings to the primary object and repeatedly re-experiences its loss. This results, at the level of the primary self-fused with the object, in a feeling of narcissistic depletion, which phenomenologically translates into a feeling of emptiness, characteristic of depression, which is always the outcome of a narcissistic wound." (Green, 1983, p. 248)

Since identification is the only way to restore the bond with the mother, early identification with the dead mother prevents the child from achieving independence and autonomy (Green, 1983). At best, they may develop intellectual abilities or artistic creativity as a means of keeping the self "alive":

"The compromised unity of the self, now punctured, finds expression either in fantasy—openly leading to artistic creation—or in intellectual development, which fosters rich intellectualization." (Green, 1983, pp. 235, 233)

The child's primary motivation is centered around one singular goal: "reviving the dead mother" (Green, 1983, p. 235). To achieve this, they may employ various strategies, such as competing with the object of the mother's grief or striving to please her by perfectly meeting parental expectations (Green, 1983).

However, the child's desperate attempts are doomed to failure and only lead to deep dissatisfaction, which they also internalize (Green, 1983). As a result, the separation-individuation process remains incomplete. Once the dead mother is internalized, she transforms into a "mad passion of which she is both the subject and object, making her mourning an impossible experience" (Green, 1983, p. 243). She is kept alive through her continuous demand for attention, and the child's emotional experience revolves entirely around her. The need to revive her becomes stronger than anything else. Given the child's innate dependence, they cling to the unavailable, uninterested mother. Once this dead mother is fully internalized, she continues to cause harm through her relentless demand to be revived.

Green (1983) explains that since the child only knows a relationship model in which the mother is emotionally absent, the fear of losing the object of love—even when it is "dead"—forces them to keep the dead mother in that state. If the dead mother were to heal, the child risks losing her again, as she might resume her normal life and abandon them. This places the child in a deep ambivalence, "trapped between two losses: death in presence or absence in life" (Green, 1983, p. 244). Since they cannot bear the risk of losing the mother again, they become reluctant to restore her to life. Instead, they hold her in a state of captivity, reassured that she remains theirs alone—exercising the only form of control they can have over her (a control achievable only through the internalized mother).

Once the damage caused by the dead mother complex is set, it becomes extremely difficult for the adult to confront this ghost from the past, which haunts them unconsciously. The dead mother continues her destructive work,

making it impossible or unsatisfactory for the individual to achieve success in their professional, romantic, and emotional life (Green, 1983). Green (1983) believes that only intense therapeutic work can help process this childhood depression. (Séguin, V. 2007).

The Concept of Autonomy:

Definition:

Autonomy refers to an adolescent's growing ability to think, feel, make decisions, and act on her or his own. The development of autonomy does not end after the teen years. Throughout adulthood, autonomy continues to develop whenever someone is challenged to act with a new level of self-reliance. Autonomy has special meaning during the preteen and teen years because it signifies that an adolescent is a unique, capable, independent person who depends less on parents and other adults. (Russell, S., & Bakken, R. J. 2002).

Autonomy During Adolescence:

Most empirical work on autonomy processes during adolescence has its roots in a somewhat disparate, yet overlapping, set of theoretical frameworks. Much of the early interest in adolescent autonomy development stemmed from psychoanalytic theories that emphasized the need for adolescents to detach from parents and to relinquish childish ties to and conceptions of them (e.g., Freud, 1958). In this view, parent—adolescent conflict was viewed as normative and desirable, whereas, to a certain extent, close emotional ties between adolescents and their parents were considered an aberration. Neoanalytic theorists deemphasized the role of detachment and conflict per se, and instead postulated that healthy adolescence involves a process of individuation, in which teens gradually come to see themselves as separate from parents (Blos, 1967). While Blos did not see individuation as involving detachment from parents, he did propose that teens must relinquish childish dependencies on parents in order to become fully autonomous. Along with individuating from parents, adolescents are also expected to undergo a process of deidealization, during which they begin to view their parents as imperfect versus all-knowing and all-powerful. In contrast to attachment theory, these propositions treat autonomy more clearly as an intraindividual construct, placing emphasis on intrapsychic development within the adolescent versus on the relational processes that surround this development.

However, this intrapsychic process is still being carried out within the interpersonal context of the parent-adolescent relationship, and some recent

conceptualizations of autonomy development have highlighted the interpersonal nature of the autonomy process (Collins & Steinberg, 2006; Collins, 1990; Hill & Holmbeck, 1986). From this perspective, patterns of parent-child interaction are thought to shift as children enter adolescence, and as the underlying beliefs and expectations that surround those interactions change (Collins; Collins & Steinberg; Smetana 1988a, 1988b). These shifts may be seen in the increased conflict that occurs during adolescence, which signals to all the changes that are occurring within the parent-adolescent dyad. Although the process of individuation is still deemed important, this conceptualization places more emphasis on the quality of the relationship between parents and adolescents, and postulates that adolescent autonomy development is facilitated by parenting that is responsive and supportive. In healthy families, parent-adolescent relationships become transformed but not detached.

It should be noted that this perspective is actually quite close to the attachment theory model, in which healthy autonomy is achieved in the context of close and supportive relationships with parents. The normative changes in thoughts, feelings and behaviors that occur during adolescence may serve to "activate" the attachment system in ways that parallel the activation seen from physical separation from caregiver(s) in infancy. Ideally, this activation can act as a signal to parents and adolescents that adjustments need to be made within their relationship to accommodate the changes in teens' needs. Both the parental sensitivity that typically accompanies secure attachment and the level of openness and flexibility specifically with regard to evaluating (and reevaluating) the attachment relationship increase the chances that securely attached teens and their parents can successfully recognize and adapt to these developmental changes. Thus, a secure parent-teen relationship should allow both parent and teen to acknowledge the teen's autonomy strivings and to support them while also maintaining the relationship. Secure adolescents should also be better able to use their parents as a base from which to confidently and autonomously explore the world around them, returning to parents for comfort, support, and advice when the limits of their competence are reached. (McElhaney et al, 2009)

Autonomy as Independence:

Traditionally, within a developmental perspective, autonomy is defined as independent functioning, which is opposed to dependence or reliance on others, and on the parents in particular. This viewpoint is largely rooted in the psychoanalytical portrayal of adolescence as a second phase of separation-individuation (Blos, 1967, 1979). During this process, adolescents are supposed

to transcend their childish internal object-representations, thereby reducing psychological dependence on parental introjects for approval, self-esteem, and standards of conduct (Boles, 1999; Levy-Warren, 1999). As a consequence, the development of an increasing capacity for independence would reflect successful separation-individuation. Because this process should take place in a context of ongoing parental support and involvement (Grotevant & Cooper, 1986; Josselson, 1980), independence does not necessitate severing the ties with parental figures. Instead, it rather involves a transformation of the relationship with the parents

The development towards an increased independent functioning is said to yield emotional, behavioral, and cognitive manifestations (Steinberg, 2002). Herein, we focus on behavioral independence, and more specifically, on independent versus dependent *decision making*, because this is one of the most visible instances of independent functioning during adolescence (Goossens, 2006; Steinberg, 2002). Independent decision making refers to adolescents' increasing tendency to make decisions by themselves without consulting their parents, for instance about how to spend their free time. By contrast, parents' involvement in decision making indicates dependency, with unilateral parental decisions reflecting complete dependence and joint decision making indicating the midpoint between dependent and independent functioning. Adolescent independent vs. dependent decision making has already been intensively studied, thereby often making use of (variations of) the Family Decision Making Scale. This scale taps into the question of who (i.e., parents, adolescents, or both) decides about a wide range of issues and has typically been related to (1) age and/or (2) psychosocial functioning. (Dombusch et al., 1985)

Types of Autonomy

There are three types of autonomy:

1. Emotional autonomy:

Relates to emotions, personal feelings and how we relate to the people around us.

During early adolescence, youth shift from depending on parents to getting emotional support from others, such as peers. At this time, youth begin to see their parents for the first time as "real" people who have faults and strengths. Youth become more deeply involved in relationships with friends, and they begin to develop intimate relationships.

When problems arise, emotionally autonomous teens are more able to look for their own solutions or ask friends or adults outside the family for support rather than relying only on parents. As the figure on peer conformity (above) shows, when adolescents begin to exert their emotional autonomy from parents, they may rely more on their peers than parents. This occurs during the early to middle teenage years. By the late teenage years, adolescents are more self-reliant and do not rely as much on parents or peers.

2. Behavioral autonomy:

Is related to behaviors. It refers to the ability to make decisions independently and to follow through on these decisions with actions.

As young people mature, their styles of thinking also grow and change. They realize there are many ways to view any situation. They begin to seek out the advice of others and are capable of comparing one choice to another. They also think about the results of their decisions. They learn that everyone has their own biases, and they start to feel more confident in their own decision-making abilities.

As with emotional autonomy, it is important to be aware that conforming to peer pressure by teens can sometimes be mistaken for behavioral autonomy from parents. Even though teens may stop asking parents for advice that doesn't mean they are acting on their own accord. They may be relying on friends instead. In this case, the teen is not being autonomous. True behavioral autonomy requires that the teen act on her or his own, rather than simply following along with others, whether those others are parents or friends. Behavioral autonomy is usually achieved between the ages of 15 and 18.

3. Value autonomy:

Means having independent attitudes and beliefs regarding spirituality, politics, and morals.

Adolescents' ability to think in the abstract helps them see the differences between general and specific situations, and to make judgments using higher-level thinking. Development of value autonomy means that teens take time to consider their personal value systems. In this way, teens come to their own independent conclusions about their values, rather than simply accepting the values of their friends or values that they were brought up to follow.

Autonomy develops at different times for different people. Not all 15-year-olds have the same level of behavioral autonomy. Similarly, one type of autonomy may develop more quickly than the other type. For example, an

adolescent may be good at thinking independently, but may not feel comfortable taking action on those thoughts.

The Importance of Autonomy in Adolescence:

Adolescents develop autonomy through their relationships in their families and with people outside of their families. Generally, during the preteen and teen years, they begin to have more opportunities to govern their own behavior. In today's world, many adolescents spend a great deal of time outside of direct supervision by adults. As parents and communities struggle to meet the demands of work and family, it is critical for adolescents to develop healthy self-governance of their behavior. Three types of self-governance include:

- **Decision-making**
- **Self-reliance**
- **Conformity**

Decision-making abilities improve as we get older. During adolescence, we become able to think in the abstract, weigh options, and look ahead to see the possible consequences of our actions. We begin to recognize the value of advice from others. We also begin to realize that advice from others may be influenced by their personal opinions.

Feelings of self-reliance also generally increase with age. However, there is an interesting catch: youth often think they are acting on their own accord, but adults may believe that a youth's decisions are being influenced by others.

Conformity is also an important issue during the teenage years. Conformity is sometimes thought of as "peer pressure." It means following along with the behaviors or opinions of friends or others. Youth are most prone to peer conformity during the middle adolescent years—in about seventh and eighth grades. Younger adolescents are usually more influenced by parents. Peer pressure increases as teens grow older, but eventually, most teens are less affected by peer pressure because they learn to make decisions independently of their peers. (Russell, S., & Bakken, R. J. 2002).

Figure 1: Displays changes in susceptibility to parental and peer pressure, and the increasing strength of peer pressure from preadolescence to late adolescence.



CHAPTER THREE

Highly Gifted Adolescent

- **Definitions**
- **Levels of Giftedness**
- **Characteristics of Highly Gifted Adolescents**
- **Challenges Faced by Gifted Children and Adolescents**
- **Gifted Adolescents in Psychoanalysis**

Highly Gifted Adolescent:

Definitions:

People who have exceptionally high intellectual abilities are referred to as “gifted.” Many researchers have tried to explain what gifted means, but there is still no agreement on a single definition to date. In the past, *giftedness* and *talents* were used interchangeably, but nowadays, researchers agree they have distinct meanings. Currently, the most accepted definition for giftedness is having exceptional natural abilities in a specific area. (Canadian Psychological Association. n.d.).

Alternatively, **In Gifted Children: Myths and Realities, Ellen Winner** defines giftedness with these three atypical characteristics:

1. Precocity – “They begin to take the first steps in the mastery of some domain at an earlier-than-average age. They also make more rapid progress in this domain than do ordinary children, because learning in the domain comes easily to them.”
2. An insistence on marching to their own drummer – “Gifted children not only learn faster than average or even bright children but also learn in a quantitatively different way.”
3. A rage to master – “Gifted children are intrinsically motivated to make sense of the domain in which they show precocity.” (Winner, E. 1996).

A third approach (The National Association for Gifted Children (NAGC) defines giftedness as the following:

“Gifted individuals are those who demonstrate outstanding levels of aptitude (defined as an exceptional ability to reason and learn) or competence (documented performance or achievement in top 10% or rarer) in one or more domains. Domains include any structured area of activity with its own symbol system (e.g., mathematics, music, language) and/or set of sensorimotor skills (e.g., painting, dance, sports). (National Association for Gifted Children.n.d.)

Levels of Giftedness

Giftedness is averaged to make up well less than 5% of the general population, and within that small number, there are subclassifications: mild, moderate, high, exceptional and profound giftedness. The latter three types make up only a very small portion of that less than 5%. The relatively little that has been written about the experience and cognition of the highly, exceptionally or profoundly gifted is proportionally consistent with the incidence of the

phenomena, but the unfortunate result is that the net is cast wide in the existing literature on giftedness.

With various levels and concepts of “giftedness” often grouped together into a one-size-fits-all description, the highly, exceptionally and profoundly gifted are misrepresented in important ways. We all know that a mild or moderately gifted person can feel a strong sense of being an “alien” in a group of non-gifted people; so too can a highly, exceptionally or profoundly gifted person feel a strong sense of being an “alien” in a group of mild or moderately gifted people (the same is true between profoundly and highly gifted too, and so on).

According to Jennifer Harvey Sallin, He sought to understand and explore the cognitive process and phenomenological experience of how gifted people at various “levels” take in, make sense of, see, and “feel” the world – as well as the sometimes vast differences between the experience of average (non-gifted) cognition and gifted cognition at the various levels. For the sake of simplicity, He focused on what refers to as average (non-gifted) cognition, mild+ gifted cognition (mild and moderate giftedness), and high+ gifted cognition (high, exceptional, and profound giftedness). This is not to make the same mistake in misrepresenting or under-representing the exceptionally and profoundly gifted among us, by lumping them into lower categories. In considering their experience, it appears that their cognitive pattern is very similar to that of the highly and exceptionally gifted, but simply more extensive and speedy.

Table (1): Displaying Levels of giftedness along with IQ Range and Prevalence.

Level	IQ Range	Prevalence
Mildly (or basically) Gifted	115 – 129	1:6 – 1:44
Moderately Gifted	130 – 144	1:44 – 1:1,000
Highly Gifted	145 – 159	1:1,000 – 1:10,000
Exceptionally Gifted	160 – 179	1:10,000 – 1:1 million
Profoundly Gifted	180 +	Fewer than 1:1 million

(Gifted Consortium. n.d.)

Characteristic of highly gifted adolescents:

According to **clark (2008)**, here is the commun characteristics of highly gifted adolescents , based on **four** different areas:

1. Intellectual abilities:

1. Intellectual curiosity and eagerness to explore new concepts
2. Large vocabulary .
3. Voracious and early reader
4. Persistent, goal-directed behaviour
5. Independence in work and study
6. Interest in problem-solving and applying concepts
7. Quick learning and ability to grasp complex ideas

2. Creativity and imagination:

1. Intuitiveness and ability to generate novel ideas
2. Ability for fantasy
3. Keen sense of humour
4. Flexibility
5. Creativeness and inventiveness
6. Openness to stimuli, broad interests
7. Comfortable with unconventional approaches to challenges

3. Motivation and task commitment:

1. Constantly asks questions
2. Insatiable curiosity
3. Mood changes, especially related to perceptions of failure
4. Can be impulsive, eager and spirited
5. High expectations of self and others often leading to feelings of frustration
6. Need for consistency between abstract values and personal actions

4. Social and emotional aspects:

1. Experience emotions deeply and intensely
2. Idealism and sense of justice
3. Advanced levels of moral judgment

4. Heightened self-awareness, accompanied by feelings of being different
5. Highly energetic – needs little downtime
6. High levels of frustration – particularly when having difficulty meeting standards of performance (either imposed by self or others) (Clark, B. (2008).

Challenges Faced by Gifted Children and Adolescents:

Gifted children and Adolescents may have some special needs in one or more aspects of their development and many experiences with special stresses and difficulties. Some of them are:

- extra pressure from parents and teachers to be continually successful,
- increased fear of failure when they are not” successful”,
- developing high demands and expectations of others,
- frustration caused by having skills at different stages of development,
- difficulties relating to other children at the same age and finding same age friends.

As a separate entity, the gifted are prone to take risks, are more sensitive to the expectations and feelings to others, very early show idealism and sense of justice, independent and competitive. They have a tendency for perfectionism, selfcriticism. Their interpersonal problems related with their self-concept, self-esteem, self-acceptance, all of which leads to the development of healthy coping strategies or to those dysfunctional maladaptive (Margolis, H. @ McCabe, P. P., 2006).

The literatures on depression support a correlation between high IQ and depression among children and adolescents (Baker, K. E., 1997). All empirical studies examing depression among gifted children has found that they have high levels of depression than their non-gifted peers (Mash, E. J. @ Barkley, R. A. (Eds.), 1996).

Personality theorists have suggested that management of anxiety plays a primary role in a positive adjustment. Dirkes (1993) suggested that anxiety might be more prevalent among gifted children. ”Although all children are faced with anxiety, the gifted must often deal with it at younger ages than other children and with a keener sense of the possibilities open to them”. She added that gifted children's anxiety may be proportional to be acceptance they receive for their unique abilities and to the coping skills they can use. Also she

suggested that this anxiety may accumulate and become more manifest during adolescence.

On the other hand, some empirical studies suggest that gifted children are better adjusted than their non-gifted peers are. It is clear that giftedness protect them from maladjustment; that the gifted are capable of greater understanding of self and others due to their cognitive capacities and come better with stress, conflicts, and developmental disharmony (Parker, W., 1996). But the other group of researchers support that gifted children are "more" at risk for adjustment problems than their non-gifted peers, because giftedness increases a child's vulnerability to adjustment difficulties (Mash, E.J. @ Barkley, R. A. (Eds.),1996).These children are more sensitive to interpersonal conflicts and experience; greater degrees of alienation and stress than their peers.

Also giftedness is risk of psycho-social isolation, because extremely gifted children viewed themselves as more introverted, less socially accept and more inhibited. They think that their peers saw them as much less popular, less socially active and less active in leading the crowd. So the gifted children's social and emotional problems are closely related to their level of giftedness. (Stankovskg et al. 2013).

While every gifted child's experience is different, two of the main terms associated with the emotional development of gifted children are intensity and asynchrony.

Intensity as described by Christine Fonesca is, "how gifted individuals approach life. At its best, intensity is the driving passion that enables some people to achieve amazing things – in any domain. But at its worst, it is the turmoil that has the power to consume these same individuals from time to time as they learn how to manage that aspect of their personality." Linked to emotional development, intensity in gifted children may manifest when their peers or the world at large fail to align with their inner compass for how the world ought to be in their eyes. Examples may include feeling troubled over ethical issues, rigid rule-following at play time, a vivid imagination, and even existential questioning at a very young age. Highly gifted children often struggle to express this intensity and may either direct this energy inwardly, presenting as moodiness or anxiety, or direct this energy outwardly as tantrums or yelling and outbursts.

Asynchrony is also closely linked to the gifted child's emotional development. Asynchronous development in gifted children means that their growth, academically, emotionally, physically, or socially, is not uniform.

Profoundly gifted children in particular may be intellectually operating at a 10th grade level at age 9 but have not mastered riding a bike or handwriting at the same time. In the emotional domain, gifted children experience the frustration of an intellect that is miles ahead of their physical self and their educational setting. Furthermore, asynchrony can mean that gifted children may lack the emotional coping skills to process their big feelings and rich inner life. (Davidson Institute. n.d.).

Gifted Adolescents in Psychoanalysis:

1: The Narrow "out-of-the norm" Band of The Gifted:

According to Danielle Lévy, psychoanalyst (2007), "Being intelligent means identifying within a mass— or within a system already structured by a certain desire— the elements that will allow one to fulfill their own desire." Among young adults, a common distinction is made between the "well-gifted" (IQ between 130 and 140) and the highly gifted (IQ above 140). This latter category represents barely 0.4% of the population. The difficulties of adaptation increase as IQ rises, and their schooling always presents challenges (Roux-Dufort, 1985).

According to Chiland (1976), these children generally learn to read earlier than others and are ahead in their studies. They never need external stimulation. Does this desire to learn stem from a faster rate of acquisition, or is this passion— particularly for reading— a nearly compulsive way to fill an anxiety-inducing void that creates intense "adaptive" tension?

The role of parents must also be considered. S. de Mijolla (2004) suggests the hypothesis that a gifted child fulfills a parental narcissistic wish— the wish to achieve heroic status, a grand destiny. The child would then bear an overwhelming desire that is not their own. According to this author, there is always a trauma at the root of precocity. This scar generates a lack of being and knowing, coupled with "depressive boredom," which is overcompensated by cognitive excess. The parental fantasy of having a gifted child— as a way to hide or erase some wound— would impose itself upon the child. The business of private psychologists is often fueled by consultations about the hypothetical intellectual abilities of children. Psychoanalysts see this as a family symptom (Terrassier, 1981).

Are gifted individuals well-adjusted and happy? There is certainly a positive correlation between high intellectual levels and academic, then social, success. However, the level of academic success already did not reach,

according to C. Kohler & M. Maer (1963), what one might expect given these children's intellectual abilities. According to D. Marcelli (2004), parents want their child to be gifted, and children seek to satisfy their parents' desires. But is this unconscious exchange always suited to the realities of school and the workplace?

According to S. Lebovici (1960), genuine intellectual gifts do not come without a certain fragility: "Well-gifted children do not automatically adapt to school life (...). In adulthood, the highly gifted often develop a character neurosis with obsessive symptoms (compulsions, rituals, lack of interest in emotional sharing, etc.), which they tolerate well but which torment those around them. They are also often chronically depressed, although socially active (...), and their sex lives tend to be particularly poor." The anxiety maintained by adaptive disharmony absorbs much of these individuals' energy. They display a certain inability to achieve self-fulfillment, despite their abilities. Severe character disorders and antisocial behaviors can also emerge.

Some researchers (Roux-Dufort, 1982) go so far as to question whether there might be a correlation between psychosis (where the formality of the letter becomes absolute and takes precedence over the relationship with reality) and intellectual performance in gifted children. Do these gifted individuals engage in certain "virtualization" processes to mask or compensate for their anxieties? This author wonders: "The issue of the relationship between extreme intelligence and psychological fragility arises particularly for these children." Are they doomed to be, to varying degrees, socially maladapted individuals struggling with functional disharmonies? Or, on the contrary, are they better equipped than others for success in life, and would simply require better recognition to fully express their potential?

Psychoanalysis generally perceives "giftedness" as a defensive mechanism through intellectualization—a cognitive overinvestment in external reality meant to distance or even neutralize overwhelming emotions and conflicts. In *The Rat Man* (Freud, 1909), a case of obsessive neurosis is described, where mental rumination appears as the primary symptom of obsessive thought—relentlessly seeking solutions to all that worries and causes doubt. Freud suggests that sexuality, which fuels thought in unconscious childhood processes, changes its object and redirects the drive toward the very act of thinking. The satisfaction experienced upon reaching a cognitive outcome is perceived as a form of sexual activity. The thinking apparatus thus becomes an autonomous, sexualized organ, generating repetitive and compulsive thoughts—true toxic objects with destructive power. Sexual curiosity and

intellectual curiosity become one. In obsessive neurosis, there is an almost absolute necessity for an "intellectual solution" in adulthood. The gifted child carries the early signs of this compulsion, but they still play and take pleasure in their "discoveries."

2: Instinctual Mechanisms and Sublimation: The Sources of Giftedness:

Among the different defense mechanisms highlighted by authors such as Bergeret (1994) and Anna Freud (1936), psychoanalysts emphasize sublimation, which serves as a means of "escape" into intellectualization beyond real-world conflicts, protecting the ego, the pilot of conscious activity and personal integrity.

The gifted individual would protect themselves before they shine. Freud (1905) defines sublimation as "the redirection, in whole or in large part, of the sexual drive forces toward other ends; a process through which powerful components are acquired, intervening in all cultural productions." From a psychoanalytic perspective, the desire for knowledge and the appetite for understanding the world is therefore not a neutral or sanitized act. The mystery of origins and sexuality generates unconscious instinctual processes that unify, in a single vision, the objects of the world and the maternal body. The Oedipal questioning is projected onto any inquiry, which—through this displacement—becomes an object of knowledge.

According to Freud (1908), the first epistemophilic drive—the drive for knowledge—manifests in the child's questions about conception and birth. Around the age of three, faced with the real or perceived arrival of younger siblings, the child begins to question the origins of life and develops a partial infantile sexual theory, inspired by some real elements and imaginary fantasy-based additions, which they refine and restructure as their knowledge expands. Some children, often only children or the youngest in a sibling group, focus their fantasies around the desire to know.

During the "latency period" (sexual latency), the child "forgets" the instinctual impulses of infantile sexuality, which previously directed them toward a familial object choice. This is the suspensive phase of school life. The sexual drives separate from the ego drives, which then move toward thought, reasoning, judgment, and morality. The libido gradually shifts outward, anticipating sexual activity, but in some cases, it takes on a sublimated form.

In his 1927 work, Freud clearly illustrates, through his study of Leonardo da Vinci, the continuity between infantile investigative drive and the later overdevelopment of intellectual curiosity. In the case of Leonardo, we can

clearly see both creativity and a highly developed thirst for knowledge, acting as a drive. This overactivated drive had already taken root in early childhood, sealed by the impressions of infantile life. Freud adds:

"Observation of men's daily lives shows that most of them succeed in redirecting significant portions of their sexual drive forces toward their professional activity." This perfectly aligns with sublimation, which is one of the most important defense mechanisms protecting the ego's fragilities.

The creative genius escapes the inhibition of ideas through a particular disposition, functioning like a neurotic compulsion to think. Through displacement, the libido evades repression by sublimating itself into an intense thirst for knowledge, reinforcing a powerful scopophilic (visual curiosity) drive for representation. The reconstructive investigation of images and models of reality becomes a substitute for sexual activity.

The displacement of underlying psychic processes conceals the traces of infantile sexual investigation. The drive can then operate freely in the service of intellectual function. These same mechanisms could direct an individual toward religious, artistic, or cultural practices. (Drillon, D., & Botet Pradeilles, G. 2014).

CHAPTER FOUR

Psychogenic Eating Disorders

- **Definition of Psychogenic Eating Disorders**
- **The Causes of Psychogenic Eating Disorders**
- **The relation between psychogenic eating disorders and gifted adolescents**
- **The relation between psychogenic eating disorders and Individuation-Autonomy**
- **Psychoanalysis in Eating Disorders**

Definition of Psychogenic Eating Disorders:

Psychogenic eating disorders are behavioral conditions characterized by severe and persistent disturbance in eating behaviors and associated distressing thoughts and emotions. They can be very serious conditions affecting physical, psychological and social function. Types of psychogenic eating disorders include anorexia nervosa, bulimia nervosa, binge eating disorder, avoidant restrictive food intake disorder, other specified feeding and psychogenic eating disorder, pica and rumination disorder. (American Psychiatric Association. n.d.).

We talk about a psychogenic eating disorder if an abnormal eating behavior represents the main symptom of a psychological disorder. It is not just a "bad habit", but a disorder that is associated with severe psychosocial limitations (e.g., thoughts, feelings, and activity focusing on food-related issues), increased mortality, physical complications (e.g., cardiovascular problems and renal insufficiency), and psychiatric symptoms like episodes of depression. A psychogenic eating disorder is a complex compulsion to eat in a way that disturbs mental and physical health as well. The eating may be too limited (i.e., restricting) or excessive (i.e., compulsive, over-eating); it may include normal eating punctuated with episodes of purging or cycles of bingeing and purging. The three most common psychogenic eating disorders are anorexia nervosa, bulimia nervosa, and binge eating disorder. (Kirch, W. (Ed.). 2008).

Anorexia Nervosa:

According to the DSM-IV (Diagnostic and Statistical Manual of Mental Disorders, published by the American Psychiatric Association), the leading symptom of anorexia nervosa is a body weight of 85% of that expected or, according to ICD-10 (International Statistical Classification of Diseases and Related Health Problems), a **body-mass-index (BMI = weight [kg]/height² [m²])** at or below 17.5. Further characteristics are a distinct fear of weight gain despite being underweight, a distorted body image with regard to shape and weight or their disproportionate importance for self-evaluation, as well as amenorrhea. The disorder of the body scheme manifests itself in a distorted body perception in which one's own body is perceived as not thin or even as too fat despite being underweight. This perception is accompanied by a disorder of visceral processes, so that hunger, satiety, and the emotions associated with them can no longer be correctly identified. The aspired weight loss is mainly achieved by avoiding high-caloric food, self-induced vomiting, laxative and diuretic abuse, and excessive exercise. The above-mentioned amenorrhea is

mostly a consequence of weight loss or the ensuing reduced production of the hormone estrogen. Furthermore, the classification systems specify two types of anorexia nervosa: the restrictive type without active measures to reduce weight and the "purging" type, which uses active methods to reduce weight.

Even though individual symptoms of abnormal eating behavior, like restricted eating or bouts of binge eating, are frequent phenomena among women in adolescence or young adult women, the complete clinical picture of anorexia nervosa is far more uncommon. The prevalence of anorexia nervosa for young women between 14 and 20 years of age ranges, depending on the study, between 0.2% and 0.8%. The majority of these disorders is diagnosed before the age of 25. The ratio of women to men is 10:1. Though individual studies suggest an increase in psychogenic eating disorders, there is also evidence to the contrary. Recent studies, however, accept an overall increase (Pawluck and Gorey 1998).

As with the majority of psychological disorders, psychogenic eating disorders are assumed to have multiple causes. These could be complications during pregnancy and birth (e.g., genetic factors, gender, premature birth) as well as risk factors during childhood (e.g., early health problems, conflicts around eating and meals) or youth (e.g., early onset of puberty, diet behavior). The individual cause can usually be found within this framework, but not all of these factors have to play a role in an individual case. Apart from the predispositions and risk factors mentioned above, a comprehensive model will also have to consider familial, socio-cultural, and biological factors.

In clinical practice, different elements of therapy are combined to treat anorexia nervosa. Even though nowadays there are a number of successful therapeutic approaches available, the prognosis for anorexia is still rather unfavorable. For mainly short-term results, behavior-therapy interventions to increase body weight and alter the distorted body perception have proved effective. For adolescents, a therapeutic method involving the family seems to be the method of choice. Medications can at best be used to stabilize a previously accomplished change and should be limited mainly to female patients with distinct symptoms of comorbidity. (Kirch, W. (Ed.). 2008).

Bulimia Nervosa and Binge Eating Disorder:

Bulimia nervosa is characterized by bouts of binge eating and counteracting behavior like vomiting or the use of laxatives. During binge eating attacks, excessive quantities of food are consumed over a very short time. These binge eating episodes are accompanied by a feeling of lack of control,

often preceded by feelings of tension, fear, boredom, or loneliness. The bouts of binge eating can relieve these negative emotions short-term but often generate feelings of shame, guilt, and self-hatred. Self-induced vomiting is frequently used as a means of compensation. The use of laxatives is less frequent. As with anorexia nervosa, patients are preoccupied with weight, shape, and food. The majority of patients with bulimia nervosa have a normal body weight; overall, the diagnosis describes a group of patients with normal weight or overweight with a high intensity of episodes of binge eating and compensating behavior.

Patients with **binge eating disorder** show bouts of binge eating but lack consistent compensating behavior. Most people with binge eating disorders are overweight and show a considerable amount of stress and psycho-social impairment. The patients suffer from their eating behavior, their weight, and the failure of their purely dietetic approaches.

The prevalence of bulimia nervosa in western countries is estimated to be 1-2% for young women and 0.2% for young men. Studies regarding lifetime prevalence resulted in 1.1% for women and 0.1% for men. Even though some studies report a drastic increase also for bulimia nervosa, there is not sufficient evidence to indicate an increase in the number of cases (Fairburn and Beglin 1990; Garfinkel et al. 1995; Sullivan et al. 1998). The prevalence for binge eating disorders among adult women is 3% and 1% among men. Though psychogenic eating disorders can be found in all cultures researched so far; however, bulimia nervosa is mainly found in western industrialized countries, particularly among competitive athletes, ballet dancers, and people in the fashion business. Patients with bulimia nervosa and binge eating disorders often show a number of other disorders, such as depression, obsessive-compulsive disorders, anxiety disorders, substance abuse, and personality disorders. (Kirch, W. (Ed.). 2008).

The causes of psychogenic eating disorders:

Weight Concerns:

Based on two comprehensive reviews of risk factors for disordered eating, weight concerns emerged as a potent risk factor that has been well-replicated in the literature. In a four-year longitudinal study of high school girls, Killen et al. provided the first robust evidence that weight concerns prospectively predicted the onset of psychogenic eating disorder not otherwise specified. Overall, 4% of girls developed a partial syndrome psychogenic eating disorder over the 4-year follow-up period. Comparing girls in the top versus bottom quartile of their weight concerns measure, 10% of girls with high weight

concerns developed psychogenic eating disorders compared to 0% of girls with low weight concerns. In addition to prospectively predicting the onset of disordered eating, decreases in weight concerns prospectively predicted declines in psychogenic eating disorder risk as individuals transition from their 20s to their 40s. Recently, Jacobi et al. reported that 11.2% of college-age women who endorsed high weight concerns developed a psychogenic eating disorder over a three-year follow-up period, independently replicating previous work regarding the risk of psychogenic eating disorder onset in this high-risk group. Importantly, given that only 10% of those with elevated weight concerns develop a psychogenic eating disorder, the majority of psychogenic eating disorder risk is not explained by weight concerns. The following sections explore additional psychosocial risk factors that have been examined in longitudinal studies with the goal of understanding not only their independent association with psychogenic eating disorder risk but also how they may work in concert to influence risk.

Personality Traits

Among psychological variables, personality traits contribute to how we perceive, relate to, and interact with our environment. Thus, they represent an interface between a cultural environment that is shared by many and individual differences that increase susceptibility to cultural risk factors in only a few. Personality traits may contribute to why only some girls living in a weight-obsessed culture develop weight concerns and why only some girls with weight concerns develop psychogenic eating disorders. Negative emotionality is a broad personality construct that includes several subdomains, including the tendency to experience dysphoria, negative self-evaluation, and low self-esteem, each of which have been posited to contribute to psychogenic eating disorders. Perfectionism, a personality trait characterized by a tendency to strive to achieve flawlessness, has also been posited to increase the risk for developing psychogenic eating disorders. Importantly, perfectionism can have positive and negative aspects, and clinical or maladaptive perfectionism has been theorized as most relevant to psychogenic eating disorder risk. Fear of mistakes, belief that only perfection will lead to social acceptance, and pressure to achieve unrealistic ideals leading to inevitable failure and negative self-evaluation connect maladaptive perfectionism to the larger construct of negative emotionality. Several longitudinal studies have evaluated whether negative emotionality and perfectionism prospectively predict psychogenic eating disorders.

A latent factor representing negative emotionality, body dissatisfaction, depression, ineffectiveness, and poor interoceptive awareness prospectively predicted the onset of eating pathology in a four-year longitudinal study of adolescents. Similarly, in case-controlled retrospective recall studies, both negative self-evaluation and perfectionism emerged as specific risk factors for the development of AN and BN, as compared to general psychiatric and healthy controls. In a large longitudinal study of adolescents making the transition from elementary school to middle school, negative urgency (characterized by the tendency to engage in potentially harmful behaviors when distressed) predicted increased expectancies that eating would alleviate distress, which predicted increases in binge eating. In a prospective follow-up study of 7th to 10th grade girls followed for 8 years, elevated perfectionism was a significant risk factor for an anorexic syndrome, and negative emotionality was a significant predictor of bulimic syndrome.

According to Jacobi et al., negative emotionality represents a nonspecific risk factor for the development of psychogenic eating disorders, while Stice concluded that negative affect was a risk factor for eating pathology with particularly robust associations for bulimic symptoms. Conclusions regarding the role of perfectionism in contributing to risk for eating pathology differed between the comprehensive reviews, despite significant overlap in studies evaluated. According to Stice, perfectionism represented a significant risk factor for eating pathology, while Jacobi et al. characterized perfectionism as a correlate. Key differences in interpretation appeared to depend on whether conclusions were drawn from univariate analyses or multivariate analyses and likely reflect the use of a meta-analytic approach in one review and a qualitative approach in the other. Moreover, both negative emotionality and perfectionism demonstrate associations with weight concerns, such that weight concerns may represent a final common pathway through which perfectionistic striving and negative emotionality become funneled into distress about an inability to achieve the thin ideal. As such, the significance and specificity of negative emotionality and perfectionism as risk factors for psychogenic eating disorders may be masked by weight concerns in multivariate models if weight concerns mediate associations between these personality traits and psychogenic eating disorder development. In addition, these personality traits may contribute to psychogenic eating disorders via their influence on social environments. Personality traits not only provide the lens through which cultural messages are interpreted but also influence what environments are sought and what is elicited from those environments. Peer selection represents an example of the powerful influence personality can have on environment.

Peers:

Colloquially phrased, "birds of a feather flock together," homophily reflects the extent to which we choose to socialize with individuals who share similar views and values and thus actively participate in the construction of our social environment. As a consequence, adolescents attending the same school do not necessarily share the same social environment. Individuals with higher levels of negative emotionality and perfectionism may be drawn to others who share these traits, which then creates a social environment in which insecurity about weight and shape and the importance of achieving the thin ideal become magnified.

Zalta and Keel conducted a longitudinal study in a college sample to examine similarities among selected peers (friends selected to be randomized as a block to an upper-class house), unselected peers (housemates with whom participants dined as frequently as with selected peers but who ended up in the same houses due to randomization), and non-peers (members of other upper-class houses with whom participants did not dine regularly). The authors evaluated how similarity for self-esteem, perfectionism, and bulimic symptoms varied by exposure. Results indicated that neither length of contact nor a period of separation influenced the extent to which participants were significantly more similar to their selected peers than they were to either unselected or non-peers on self-esteem or perfectionism. Findings thus supported an effect of personality variables on peer selection rather than peer influences on personality variables. By contrast, greater similarity among selected peers on bulimic symptoms depended on length of contact with selected peers and disappeared after a period of separation from selected peers. Unselected and non-peers demonstrated no greater similarity to one another on bulimic symptoms than expected by chance. Thus, results suggest that personality factors influence peer selection and that selected peers exert a social influence on bulimic symptoms. Reinforcing the importance of peer selection in this process of socialization, Crandall demonstrated that sorority members became more similar on binge eating over time, particularly within friend groups, whereas Meyer and Waller found that randomly assigned college freshman rooming groups demonstrated divergence on bulimic symptom levels over time. Taken together, these studies suggest that personality factors contribute to the selection of peers who share similar traits, and this selected environment contributes to the socialization of bulimic symptoms.

Longitudinal studies support that exposure to friend dieting significantly predicted higher body dissatisfaction, use of unhealthy and extreme weight

control behaviors (e.g., fasting and self-induced vomiting), and binge eating/loss of control eating in girls at 5-year follow-up. In a 10-year follow-up of a college-based sample, Keel et al. found that roommate dieting frequency prospectively predicted maintenance of drive for thinness, bulimic symptoms, and purging status. Moreover, roommate dieting frequency in college doubled the likelihood of purging through the use of self-induced vomiting, laxative, or diuretic misuse for women in their 30s, despite substantial changes in women's social environments. Given that college represents a time when adult identity is being formed, exposure to peers who reinforce the cultural thin ideal through their own behaviors may contribute to the internalization of the thin ideal, which contributes to disordered eating throughout later adulthood. Importantly, these prospective associations also reflect that women who had roommates who dieted less frequently or who never dieted demonstrated the greatest declines in their own drive for thinness and bulimic symptoms, suggesting that peer environment in late adolescence may present an important opportunity for intervention. (Keel, P. K., & Forney, K. J. 2013).

The relation between psychogenic eating disorders and gifted adolescents:

The intellectual functioning of people with psychogenic eating disorders was measured in a number of studies. Dally and Gomez (1979) observed that 90% of their adolescent psychogenic eating disordered patients had an IQ of 130 or more. Rowland (1970) found that one third of the psychogenic eating disordered patients in his study had IQs of 120 or above. These findings suggest that there is a correlation between high intellectual functioning and eating disorders. Other researchers, however, (Touyz, Beumont, and Johnstone, 1986) have found that the IQs of eating disordered patients have not differed from the statistical distribution one finds in the population.

David Garner (1991) reviewed the literature on the relationship between psychogenic eating disorders and intellectual functioning and argued that being gifted may render some people vulnerable to the patterns associated with eating disorders, especially during adolescence. Specifically, Garner suggests that early labeling of children as gifted may increase parental expectations for performance, contributing to perfectionist behaviors. Or, parents may overvalue their gifted child and intensify the child's expectations to meet parental needs, which can especially create problems during adolescence. Perfectionism, competitiveness, and high performance expectations from others are characteristics of the gifted that are viewed as possible contributors to the onset of psychogenic eating disorders. (Neihart, M. 1999).

The relation between psychogenic eating disorders and Individuation-Autonomy:

Dependency and self-criticism are common in both anorexic and bulimic adolescents (Speranza et al., 2003). This is not surprising since one of the major problems of adolescents with eating disorders is a struggle for autonomy and self-definition that may reflect incomplete separation-individuation during earliest childhood. Anorexic adolescents show high dependency features. Self-critical depression seems a more specific feature of bulimic patients and may reflect the fragility of their identity and their difficulties regulating self-esteem. As Heatherton and Baumeister (1991) have emphasized, the motivation for binge eating may be an attempt to escape negative aspects of self-awareness and to control the dysphoric states associated with borderline-level personality organizations. (Vittorio Lingiardi, & McWilliams, N. 2017).

Psychoanalysis in eating disorders:

Early Contributions in Eating Problems: Freud's Studies

Sigmund Freud is widely recognized as the founder of psychoanalytic theory. His ideas were shaped by the cultural context of his time and had a profound impact on subsequent perspectives in psychology. In an era dominated by modernism and an emphasis on rationality and conscious thought, Freud challenged the prevailing notions by asserting the decisive role of unconscious processes in human life. He emphasized the significance of early childhood experiences and unconscious conflicts, positing that psychopathologies and symptoms were rooted in these internal conflicts (Roudinesco, 2016).

Psychoanalytic studies on eating problems gained significant attention after the 1930s, however, it is worth noting that Freud had already considered anorexia as a symptom of hysteria prior to this period (Gürdal Küey, 2013). Although Freud did not specifically discuss eating disorders in his work, he made references to problematic eating behaviors in relation to unconscious and infantile fantasies (Caparrotta & Ghaffari, 2006). Notably, Freud highlighted the connection between anorexia nervosa and orality and sexuality (Breuer & Freud, 1895; Freud 1892, 1893, 1898; as cited in Gürdal Küey, 2013). These early insights by Freud laid the groundwork for further exploration of eating problems within the psychoanalytic framework.

One of Freud's early studies on eating disturbances was the case of Frau Emmy Von N, in which he referred to the issue as "mental anorexia." In this study, Freud observed that the patient's refusal to eat was connected to her early

memories of being forced to eat and the repulsive eating behaviors she witnessed in her family. He argued that her symptoms were a manifestation of unresolved traumatic experiences and the expression of negative emotions (Freud, 1893; as cited in Caparrotta & Ghaffari, 2006). This study highlights the significance of early experiences and their impact on the development of eating problems, providing insight into Freud's early understanding of anorexia.

According to Freud's correspondence with Wilhelm Fliess in that period, he drew a connection between anorexia and melancholia, which he described as a longing for something lost. He suggested that anorexia, specifically in young girls, could be viewed as a form of melancholia where sexuality remains undeveloped, as he remarked in two steps in one of his letter:

- 1) The effect corresponding to melancholia is that of mourning- that is, longing for something lost. Thus in melancholia it must be a question of a loss-a loss in instinctual life.
- 2) The nutritional neurosis parallel to melancholia is anorexia. The famous anorexia nervosa of young girls seems to me (on careful observation) to be a melancholia where sexuality is undeveloped. The patient asserted that she had not eaten, simply because she had no appetite, and for no other reason. Loss of appetite-in sexual terms, loss of libido. (Freud, 1895/1966, p.200)

In this regard, Freud observed that these patients claimed to have no appetite without any other reason, attributing the loss of appetite to a decrease in sexual desire or libido. Therefore, Freud highlighted the correlation between underdeveloped sexuality and the lack of appetite in both melancholia and loss of appetite.

In another significant case study, Dora, Freud examined the symptoms of Dora, which provided valuable insights into the understanding of hysteria. Dora's relationship with her father and the couple, Herr K and Frau K, who were family friends, played a crucial role in the case. It was revealed that Dora's father had an affair with Frau K. Additionally, Herr K displayed a romantic interest in Dora. Although Dora did not openly express her feelings, Freud interpreted her reactions as a love affair to Herr K, and he considered that these were unconscious manifestations of her Oedipal desires (Freud, 1905/1953). In the case, he mentioned that Dora has difficulties in eating after an encounter with Herr K. Before Freud put down on paper the case of Dora, he had before mentioned to Fliess in his letter in 1899:

Do you know, for instance, why X.Y. suffers from hysterical vomiting? Because in phantasy she is pregnant, because she is so insatiable that she cannot

put up with not having a baby by her last phantasy-lover as well. But she must vomit too, because in that case she will be starved and emaciated, and will lose her beauty and no longer be attractive to anyone. Thus the sense of the symptom is a contradictory pair of wish-fulfilments. (Freud, 1899/1966, p.278).

In this letter to Fliess, he pointed out that psychogenic vomiting is linked to unconscious phantasy of oral pregnancy. Freud interpreted the act of vomiting not only as an unconscious fantasy expression but also as a defense mechanism that represents a compromise formation. When discussing the act of vomiting, Freud pointed to the symptoms as rather than oral fixation, and he considered these symptoms as defensive regression against positive Oedipal desires (Farrell, 2000).

In Freud's Three Essays on the Theory of Sexuality (1905), theories of sexuality in children (1908), and the history of infantile neurosis (1918), he expressed concern about anorexia in puberty and proposed that the symptoms related to nutrition could be an expression of a resistance to sexuality. He suggested that eating disturbances are hysterical symptoms and he linked them to Oedipal issues (Caparrotta & Ghaffari, 2006). Additionally, Freud identified the redirection of sexual desires from the genitals to the oral region and acknowledged the presence of the unconscious association between the mouth and the vagina. These conceptualizations have served as a framework for comprehending anorexia and bulimia in various studies conducted during the Twentieth century (Greenacre, 1950, 1952; Fraiberg, 1972; Sperling, 1973, as cited in Farrell, 2000).

Eating Problems in Psychoanalysis After Freud

After Freud, early psychoanalytic authors proposed that the unconscious solution to conflicts arising from fantasies of oral and poisonous impregnation led to a defensive avoidance of genital sexuality, which could be a contributing factor in the development of eating disturbances (Caparrotta & Ghaffari, 2006; Chassler, 1994). The transition from a genital-level conflict to an oral-based conflict can be seen as the ego's attempt to exert control over a genital conflict by shifting the battle to a safer and more familiar and controllable ground (Ritvo, 1984, as cited in Farrell, 2000). This transformation offers a pathway for understanding anorexia as a defense mechanism against the desire for impregnation (Farrell, 2000).

Karl Abraham, a prominent psychoanalyst and colleague of Freud, followed Freud's arguments by linking the eating disturbances to the unconscious infantile meaning of pregnancy by mouth. In 1924, Abraham made

the subdivision of the oral stage in infantile development into the sucking stage (libidinal) and the biting stage (oral-sadistic). The biting stage, which corresponds to the teething period, was believed by Abraham to be crucial for the development of ambivalence. He suggested that during these stages, the presence of both libidinal pleasure and aggression towards a single object gives rise to conflicted feelings, leading to ambivalence (as cited in Caparrotta & Ghaffari, 2006). Moreover, Abraham proposed that in the context of identifying with a masculine ideal, the body in anorexia nervosa becomes associated with the penis through its extreme thinness (Abraham, 1924, as cited in Farrell, 2000). Lewin (1933) expanded on this notion by suggesting that vomiting in bulimia represents a partial identification with a phallus engaged in ejaculation or urination. Additionally, Sperling (1983), Wilson (1983), and Sarnoff (1983) proposed that the anorexic's desire for a flat stomach reflects a retreat to a phallic ideal, serving as a defense against the feminine wish to be impregnated by the father in fantasy and thus competing with the mother (as cited in Farrell, 2000).

Similarly, in 1940, Waller, Kaufman, and Deutsch proposed that the symptoms of anorexia nervosa could be seen as symbolic representations of fantasies related to pregnancy. They suggested that anorexia could stem from a desire to become pregnant through oral mechanisms, leading to compulsive feeding behaviors. They further theorized that the ensuing sense of guilt could then manifest as food refusal. They posited that the absence of menstruation could be a way of rejecting sexuality. Besides, they remarked that the need for reorientation during puberty revealed the repressed the conflicts centering around the family constellation, and in a patient with neurotic patterns, development of sexuality and entering the biological womanhood could lead conflicts.

Additionally, Waller et al. emphasizes that the patient's relationship with her mother has a prominent role in anorexia nervosa. The authors highlighted the specific and significant role of the relationship between the mother and the patient, as well as the mother's own relationship with food (Waller et al., 1940). This perspective holds significant importance as it underscores the influence of the mother-child relationship on the development and manifestation of eating problems.

The first case report in psychoanalytic studies on eating disorders was made by Maria Oberhozler in 1929 in the Swiss Psychoanalytic Society. This case report focused on the analysis and treatment of a 13-year-old patient who refused to eat. In this case, refusal to eat was discussed with the desire of having

a penis (Oberhozler, 1930; as cited in Gürdal Küey, 2013). Regardingly, Farrell (2000) argues that the classical understanding of the positive Oedipus complex involves a wish for a baby from the father, equating it with a penis. However, Farrell draws attention that Freud identified a negative Oedipal position, which precedes the positive Oedipal position in development. In the negative position, individuals desire to have a penis and identify with the masculine. In the positive position, the focus is on replacing the mother and having a child with the father. In the context of eating disturbances, the anorexic or bulimic individual identifies with the father and engages in phallic competition for the possession and sexual control of the mother. On the other hand, some authors remarks that in eating problems, food is perceived as a symbolic representation of the paternal phallus unconsciously, consuming which is seen as a way to overcome castration fears and symbolically give birth to the Oedipal baby (Waller et al., 1940; Schwartz, 1986).

Schwartz (1988) provides a distinction between anorexics and bulimics who have normal weights. He highlights that bulimics with normal weight acknowledge their lack of a penis despite their masculine identifications and ideals. In contrast, anorexics, through their self-starvation, engage in a fantasy where they become a penis, eliminating the need for a father or a man in their lives. According to Farrell (2000), this idea suggests that the differentiation lies in the desire to compete with the father to replace him in the affection and bed of the mother, wishing for a penis as a means of achieving this. On the other hand, there is an omnipotent desire to control the mother by becoming a penis, effectively erasing any acknowledgment of the father and the potential for triangulation in the relationship.

To conclude, early psychoanalytic explanations of anorexia nervosa focused primarily on the oral aspect of the disturbance and its symbolic meaning. The syndrome was interpreted as a defensive mechanism in response to deeply rooted unconscious oral fantasies that were highly driven by instinctual forces (Chassler, 1994). In due course, there has been a shift in the understanding of anorexic and bulimic behavior, moving away from viewing them solely as manifestations of repressed sexual and aggressive drives at the Oedipal level. Instead, there is an increased focus on examining the earlier, pre-Oedipal relationship between the mother and child as a significant factor in these problems. (Tezerişir, A. 2023).

Methodological Section

Introduction:

Clinical psychologists face significant difficulties in examining the cognitive and developmental characteristics of highly gifted adolescents, particularly when psychological disorders such as psychogenic eating disorders emerge. Research focusing on the interplay between early maladaptive cognitive schemas and individuation-autonomy in this population remains limited. A clear methodological framework is necessary to systematically investigate these relationships and contribute to the development of effective psychological interventions.

A mixed-method approach is adopted to capture both the quantitative and qualitative dimensions of the research problem. The study employs standardized psychological assessment tools to measure early maladaptive schemas and individuation-autonomy, alongside clinical interviews to gain deeper insight into the lived experiences of participants. The sample consists of highly gifted adolescents diagnosed with psychogenic eating disorders, selected based on specific inclusion criteria to ensure the validity of the findings.

By integrating multiple data sources, this study seeks to provide a comprehensive understanding of the nature of early maladaptive cognitive schemas and the development of individuation-autonomy issue in this unique population. The findings aim to inform clinical practice and contribute to tailored therapeutic interventions that address the specific needs of highly gifted adolescents struggling with psychogenic eating disorders.

And after delving into the theoretical side of our research entitled Early Maladaptive Cognitive Schemas and The Issue of Individuation -Autonomy Among Highly Gifted Adolescents Suffering from Psychogenic Eating Disorder, we will delve in this chapter into the methodology and tools used in this research from the chosen research method and the study sample, to the tools and techniques used in it.

Research Methodology:

The researcher's scientific selection of the appropriate research method that aligns with the nature of the study is crucial for ensuring its success and obtaining accurate and valuable scientific results. The scientific method refers to a systematic approach to thinking and working, which researchers adopt to organize, analyze, and present their ideas, ultimately leading to findings and facts about the studied phenomenon.

In clinical psychology, research methods vary depending on both theoretical and applied fields. Since our study aims to examine early maladaptive cognitive schemas and understand the individuation-autonomy issue among highly gifted adolescents suffering from psychogenic eating disorders, we have adopted the clinical method. This approach is the most suitable, as it seeks to study and understand the individual as a holistic and indivisible entity, analyzing their conflicts, concerns, expectations, and tendencies, whether normal or pathological, by collecting comprehensive data and information on individual cases or groups of cases.

The clinical method has been defined as:

"A cognitive process for mental application, aiming to construct a mental structure of psychological phenomena, where the individual is the source of these phenomena." (R. Perron, G., 1979).

Based on this perspective, the clinical method is the most appropriate for this study, as it relies on two theoretical frameworks: the projective-analytic approach and the cognitive approach. These approaches have been integrated clinically to achieve the study's objectives and test its hypotheses, thereby contributing to reaching the main research goal. Given the nature of our study, which requires in-depth and precise analysis, we have adopted a method that allows for an objective and detailed exploration of the psychological dimensions of the participants.

Research Delimitations:

Population Delimitation: The study included a sample of three highly gifted adolescents suffering from psychogenic eating disorders.

Temporal Delimitation: The study was conducted during the period (2024/2025)

Spatial Delimitation: The study was carried out at the Geniuses Academic in M'sila, Algeria.

Research Tools:

1- Clinical Interview:

In this study, we relied on clinical interviews due to their importance in psychological research and studies. The clinical interview is considered one of the tools used by clinicians to get closer to the subject and understand them better, as it is a direct method for obtaining information from the subject,

conducted face-to-face. The aim is to listen to the subject and create an atmosphere of interaction to gather information. Therefore, we used semi-structured clinical interviews, as they are the most suitable for the study's topic, allowing the subject some freedom in answering the questions.

According to John and Rita Sommers-Flanagan Clinical interviewing is a flexible procedure that mental health professionals from many different disciplines use to initiate treatment. (Sommers-Flanagan, J., & Sommers-Flanagan, R. 2016).

James Morrison believe that “clinical interviewing is little more than helping people talk about themselves, which most people love to do. In the field of mental health, we ask patients to reveal something of their emotions and their personal lives. Practice teaches us what to ask and how to direct the conversation toward the information we need to help the patient best. Developing this ability is important: In a survey of practicing and teaching clinicians, comprehensive interviewing was ranked the highest of 32 skills needed by mental health practitioners.” (Morrison, J. 2014).

2- Rorschach Test:

Overview:

The Rorschach projective personality test was named after its creator, the Norwegian psychiatrist Hermann Rorschach (1884-1922). The test helps in understanding aspects of emotional life and intellectual maturity, as well as revealing the nature of psychological conflicts. It consists of ten plates: the first is black, the second and third are black and red, the fourth, fifth, sixth, and seventh are black, while the last three are colored (D. Anzieu & C. Chabert, 1987).

The individual's interaction with the card and its ambiguous content brings up old conflicts attempting to surface into consciousness. This process can trigger anxiety and aggression; therefore, obtaining the client's consent before administering the test is essential after explaining its objectives and application method. It should be clarified that there are no right or wrong answers.

The test is administered to children, adolescents, and adults through the following stages:

First Stage:

The examiner presents the ten plates sequentially, one by one, and records the examinee's responses along with their reactions, gestures, and behaviors. The examiner records the following:

- **Reaction time:** The time taken to respond to each card, i.e., the duration between seeing the card and giving the first response.
- **Card duration:** The total time from the presentation of the card to the last response.
- **Card positioning:** The orientation of the card during the response, which is initially presented in its standard position.
- **Inquiry phase:** The examiner reintroduces the plates one by one to determine the basis and characteristics of the response or to obtain additional answers.
- **Boundary testing:** This is used when common responses are absent, such as "a bat" for the fifth card or "people" for the third card, or when a particular processing style is missing, such as the absence of color, movement, or spatial determinants.
- **Choice test:** At the end of the test, the examiner asks the client to identify their two most and least preferred cards and records the reasons for these choices.

Instructions:

The instructions for the Rorschach test vary depending on the test phase. The original instruction is:
"What might this be?" (D. Anzieu & C. Chabert, 1987).

However, the instruction used in this research, as per C. Chabert (1983), is:
"I will show you ten plates. You have to tell me what they make you think of and what you can imagine from the plate."

Second Stage: Inquiry Phase

The instruction for this phase is:

"Now we will go through the images again together. Try to tell me where you saw what you previously described and what you relied on to give your response. Of course, if other ideas come to mind, you can share them." (Chabert, 1983).

First: The Underlying Meanings of the Cards

Several authors have proposed symbolic interpretations of the Rorschach test plates, among them C. Chabert, who identified the following meanings:

- **Card I:** Represents the embodiment of the primary relationship. Depending on the case, it may generate anxiety about the unknown, dependency on adults, or various defense mechanisms.
- **Card II:** The sexual card, reflecting castration anxiety within a pre-Oedipal and Oedipal relational model.
- **Card III:** Represents the parental couple and/or self-representation in relation to a similar figure.
- **Card IV:** Symbolizes the relative power of the father; this image carries the force of law. It serves as a reference card for identification among males in the selection of a libidinal object.
- **Card V:** Expresses a sense of completeness and clarifies self-concept.
- **Card VI:** A sexual card that reveals the instinctual energetic dynamics utilized by the individual.
- **Card VII:** A maternal card that conveys deprivation, emptiness, and insecurity in the mother-child relationship.
- **Card VIII:** Represents the need for internal bodily representation and is particularly related to the loss of physical integrity.
- **Card IX:** A symbolic card expressing the image of the pre-reproductive mother or primitive sexual representation. It may elicit inhibitions or refusals.
- **Card X:** Encourages playful functions, enabling the discovery of the objective world, creativity, and imaginative activity in children. It also helps uncover symbols and contents derived from the primary mother relationship, granting them subjective meaning.

B- The Rorschach Test Analysis Framework

1. General Observations on the Protocol

Before analyzing the Rorschach protocol, the specialist conducts a thorough and careful reading of the entire protocol to assess the characteristics of discourse in terms of coherence, continuity, or disruption. These observations assist in qualitative analysis and help generate hypotheses that can later be verified.

The second step is scoring (cotation), where the specialist marks specific responses with symbols or indicators. This process transforms verbal responses into symbols or coded marks.

2. Quantitative Analysis

H. Rorschach established three dimensions for scoring responses in the Rorschach test:

- **Location:** The section of the inkblot that corresponds to the response.
- **Determinants:** Factors including shape, color, and movement.
- **Content:** Includes human and animal figures, among others.

Scoring provides a reference framework for evaluating responses and linking factors for further analysis.

The psychogram represents the quantitative analysis of the data. It is a scoring grid based on specific criteria that facilitates response evaluation. Below is a model of the average psychogram criteria established by C. Chabert (2020).

Table (2): Displaying Rorschach Normative Data for Adolescents (13–24 years)

Indicator	Average	Normal Range	Standard Deviation
R (Total responses)	26	[16 – 36]	±10
Response time (T/R)	37.5 sec	[20 – 55 sec]	±17.5 sec
Latency time	13.2 sec	[4 – 22 sec]	±9.3 sec
G% (Global responses)	43%	[25% – 61%]	±18%
D% (Common details)	44%	[29% – 59%]	±15%
Dd% (Unusual details)	10%	[2% – 18%]	±8%
Dbl% (Double details)	3%	[0% – 7%]	±4%
F% (Form only)	61%	[44% – 78%]	±17%
F+% (Good form quality)	65%	[51% – 79%]	±14%
A% (Animal content)	44%	[28% – 60%]	±16%
H% (Human content)	16%	[6% – 26%]	±10%
RC% (Affective control)	35%	[26% – 44%]	±9%

index)			
Number of common responses	5	[3 – 7]	±2

The Intimate Return Pattern (TRI) and Its Types:

- **Introversive Pattern ($\Sigma K > \Sigma C$ - L'introversif):** Prefers thinking and internalization.
- **Extratensive Pattern ($\Sigma K < \Sigma C$ - L'extratensif):** More flexible, facilitates emotional expression.
- **Ambiequal Pattern ($\Sigma K = \Sigma C$ - L'ambiéqual):** An ideal, balanced type encompassing two fundamental human attitudes. (C. Chabert, 1998)

Qualitative Analysis:

The qualitative analysis is conducted through:

Types of Responses:

- **Global Responses (G):** The subject uses the entire card to form perceptions.
- **Large Partial Responses (D):** The subject uses a large or small part of the card that is easily separable from the whole.
- **Small Partial Responses (Dd):** Detailed and small responses.
- **White Space Responses (Dbl):** The subject utilizes the white space of the card to form perceptions.

Determinant Factors:

- **Form Characteristics (F):** Divided into three types:
 - **F+:** Positive forms well-suited to the card's space.
 - **F-:** Forms that do not fit the inkblot.
 - **F±:** When the content is ambiguous, the form is poorly defined, or the subject hesitates. Based on the list of positive and negative forms identified by C. Beizman.
- **Color Responses (C):**
 - **C** is marked when referring to chromatic colors, e.g., red in cards II or III.

- **C'** is used for achromatic colors like black, white, and gray (e.g., cards V, VI).
- **Shading (E)**: Marked when the subject uses color gradients, particularly gray, depth impressions, texture, or diffusion.
- **Light-Dark Responses (Clob)**: Consideration of total or large partial responses and the emergence of discomforting emotions like fear or threat.

Movement Responses:

- **Large Movement (K)**: Associated with human content.
- **Small Movement (Kan)**: Associated with animal content.
- **Object Movement (Kob)**.
- **Partial Movement (Kp)**.

Content Categories:

- **Human Content (H)**: Includes human or quasi-human representations (H- or Hd for partial human features).
- **Animal Content (A)**: Animal or quasi-animal representations (A- or Ad for partial animal features).
- **Other Content Types:**
 - **Anatomical (Anat)**.
 - **Botanical (Bot)**.

Characteristics of Rorschach Analysis in This Study:

Like other projective tests, the Rorschach test can be used for various purposes, whether in clinical assessment or scientific research, depending on the study's objectives and hypotheses. In this study, the Rorschach test helps assess an individual's adaptation to their external reality based on several indicators.

Referring to theoretical frameworks and experts in projective testing, several indicators can signal maladjustment. M. Emanuelli mentioned several adaptation factors through the Rorschach test:

- **The ratio of positive forms (F+).**
- **The ratio of human content (H).**
- **The ratio of animal content (A).**

- **The ratio of common responses (Ban).**

If these factors appear at sufficient levels in a protocol, following the average standard model proposed by C. Chabert (1998), it suggests good adaptation and a strong connection to reality. Conversely, lower levels of these indicators may suggest maladjustment.

From a qualitative perspective, C. Chabert (1983) highlighted that analyzing movement responses can reveal an individual's adaptation to reality. Specifically, maintaining a positive form determinant in movement responses is key—each time a subject provides a movement response while preserving a positive form, it is considered an indicator of reality adaptation. Since movement responses are projective, they balance perception and projection.

Through both quantitative and qualitative analyses, maladjustment can be identified. Low levels of positive form responses, human and animal content, and common responses, as well as the loss of positive form in movement responses, may indicate poor adaptation to reality. (سي موسي، بن خليفة، 2008)

3- Thematic Apperception Test Test (T.A.T)

Overview:

The Thematic Apperception Test (T.A.T.) is considered one of the most widely used projective tests, as it is extensively applied in psychological clinics and in applied studies.

The first publication about this test was by "Morgan" and "Murray" in 1935.

The test consisted of 31 pictures presented to the subject individually, and they could be distributed into groups directed at specific categories such as adults (men and women), boys, and girls, with 10 pictures exceeding these categories.

These pictures depict different characters in ambiguous situations, and some images contain historical elements representing battlefields, while others depict natural scenes that are relatively orderly.

The subject is invited in this test to imagine a story for each picture, based on the possibility that this story is a projection of his or her own psychological experiences, taking into account past, present, and future considerations, along with the emotions of the characters depicted in the story. "Murray" preferred that the subject be in a future-oriented situation to provide an appropriate measure of aspirations above and beyond existing realities. Moreover, notes

were allowed to be recorded in order to assess the subject's responses more thoroughly. As much as possible, the material aspect regarding latent conflicts was taken into account.

Murray presented his theory on personality in 1938 In the "Personal Apperception Test," where the hypothesis is presented that the story's protagonist (the hero) expresses his needs, while the surrounding characters express the needs of others. Individuals seek to understand their environment by sensing tension aimed at fulfilling their needs.

Afterward, the third and final version of the test was published in 1943, accompanied by its practical manual. This version includes three lists of fundamental personality variables:

- A list of motives or needs of the protagonist in the story, totaling 20 needs categorized into 9 groups.
- A list of internal factors related to psychological systems (pillars) described in psychoanalysis (as per the views of the primary and secondary guides).
- A list of general traits associated with the states and emotions experienced by the individual.

The credit for reviewing the test goes to "Bellak" (L. Bellak, 1954), who brought it back to its psychoanalytic origins. He emphasized the dual-expected theory (id-ego-superego), focusing on the role of the ego, its functions, resistances, and defenses. Alongside Bellak's attempts, other efforts were made to modify "Murray" by introducing new classifications of needs, yet these remained tied to the formal aspect of the test without developing a specific analysis of its content. The reason for this is the adherence to the perspective of ego psychology.

Since the beginning of her work on the Thematic Apperception Test (T.A.T.), "Mucchielli" observed that most of these attempts focused heavily on the ego's responses in relation to the stimulus while neglecting the conscious aspects. She argued that consciousness only emerges when an action leads to the revelation of instinctual and latent stored content. This stored information must be communicated and extracted to determine the individual's motives. Based on this, she proposed the hypothesis that what is intended in the T.A.T. protocol is the way an individual responds in a conflictual situation presented by the material, which combines educational and objective aspects. The expectation is that the defensive mechanisms preventing free formation in the conscious ego will be bypassed. (سي موسي، بن خليفة، 2008)

Test Description:

The Thematic Apperception Test (T.A.T.), symbolized by its English initials, is one of the personality tests. It is a projective test that helps reveal different aspects of personality, including tendencies, desires, conflicts, and defense mechanisms. This test allows for diagnosis, understanding the individual's mental process, and determining their psychological structure by identifying the defense mechanisms used by the individual.

This test was developed in 1935 by the American biochemist Henry Murray at Harvard University. In its original version, it consists of 31 cards, presented to men, women, and children starting from the age of fourteen in two sessions. On the back of each card, a number indicates its order among the other test images, and English letters indicate the category to which the card is assigned. These categories are as follows:

- **B:** Presented to young boys
- **G:** Presented to young girls
- **M:** Presented to adult males (men)
- **F:** Presented to adult females (women) (Ridouane Zegar, 2001)

(ع. سي موسي، ر. زقار ، 2002)

Presentation of Cards:

Each card presents clear topics and complete suggestions. These suggestions will form the basis of projection, revealing dominant motives, analytical perspectives, and factors involved in conflicts.

Table (3): Represents the cards that are administered to Young Boys and Young Girls, with a total of 14 cards per category.

Category	Cards														Total
Young Boys	1	2	3BM	4	5	6BM	7BM	8BM	10	11	12BG	13B	19	16	14
Young Girls	1	2	3BM	4	5	6GF	7GF	9GF	10	11	12BG	13B	19	16	14

Cards:

Card 1:

Manifest Content: A boy, with his head in his hands, looks at a violin placed in front of him.

Latent Content: Refers to infantile helplessness:

- Based on the emphasis on functional immaturity (it is a child), the image is organized around a current experience of helplessness associated with castration anxiety, with different outcomes depending on the quality of identificatory movements.
- The child's solitude, combined with the narcissistic wound imposed by his immaturity, may reactivate a more or less intense anxiety of loss. Recognition and elaboration of the castration issue presuppose that the differentiation between subject and object is well established. When identificatory processes are disturbed, the emphasis is on the difficulty or inability to form a unified representation of the subject facing an object whose integrity is not threatened. In such cases, the fragility of internalization mechanisms—due to the difficulty of integrating object loss—leads to considerable alterations in oedipal structuring.

Card 2:

Manifest Content:

Countryside scene. In the foreground, a young girl with books; in the background, a man with a horse, and a woman leaning against a tree (gender difference is present, but no generational difference).

Latent Content: Refers to the Oedipus complex:

- Despite the lack of generational difference at the manifest level, the plate evokes the Oedipal triangle—father-mother-daughter. It tests the strength and structuring nature of Oedipal organization: the girl's attraction to the man, rivalry with the woman, recognition of the taboo, renunciation of Oedipal love, nostalgia, and the decline of the Oedipus complex.
- The taboo and the forced renunciation are experienced as an impossible separation from the original objects. The subject remains “stuck” to the couple, refusing to acknowledge sexual attraction; exclusion from the couple is felt as a massive and unbearable rejection. (Chabert et al., 2020)

Card 3BM:

Manifest Content: A person slumped, leaning at the foot of a bench (gender and age undetermined, unclear object on the floor).

Latent Content: Refers to the depressive position expressed through the body:

- In an Oedipal context, depressive guilt is activated. Solitude is bearable, renunciation is accepted, and investment is redirected toward possible new objects.
- The issue of object loss, which is central, tests the subject's mourning capabilities, the reversibility of depressive affects, and the opening toward future desires.
This plate is essential to reveal the subject's ability to link depressive affects with representations of loss. (Chabert et al, 2020)

Card 4:

Manifest Content: A woman close to a man who is turning away (gender difference present, no generational difference).

Latent Content: Refers to instinctual ambivalence in romantic relationships:

- Both instinctual drives are activated in their opposing poles: aggression/tenderness, love/hate. In an Oedipal context, a third-party reference (war, a rival, another woman...) may determine the male character's possible departure.
- The plate evokes not only romantic conflict and sorrow but also separation and abandonment anxiety. (Chabert et al, 2020)

Card 5:

Manifest Content: A middle-aged woman, hand on a doorknob, looks into a room.

Latent Content: Refers to a feminine/maternal figure who enters and looks:

- In an Oedipal context, the plate revives guilt linked to sexual curiosity and primal scene fantasies, with the mother figure appearing both seductive and prohibitive.
- In another register, it touches on more archaic ambivalent movements related to the anxiety of losing the object's love, with different reactions depending on the subject (narcissistic, depressive, or persecutory aspects). (Chabert et al, 2020)

Card 6BM:

Description of Card: An elderly woman is standing parallel to a window. Behind her is a younger man with his face down. He is holding onto his hat.

Frequent Plots: This picture typically elicits stories of a son who is either presenting sad news to his mother, or attempting to prepare her for his departure to some distant location.

Card 6GF:

Manifest Content: A young woman seated in the foreground, turning toward a man who is leaning over her (slight generational difference, gender difference).

Latent Content: Refers to sexual seduction within the conflictual opposition between desire and defense:

- In an Oedipal context, this plate evokes a seduction fantasy in its hysterical form: the older man (the father or his substitute) is the seducing agent, which preserves the young woman's innocence.
- The issue of object loss is less clearly expressed in this plate. It may be underlying in the Oedipal relationship with the father (difficulty in renouncing him) or with the mother (fear of losing her love due to rivalry). However, in some cases, it becomes evident that the father figure takes a central place and fulfills a reparative function when the mother figure is strongly associated with abandonment. (Chabert et al, 2020)

Card 7BM:

Manifest Content: Two men (only their heads are visible), close to one another (generational difference, no sex difference).

Latent Content: Refers to father/son closeness:

- In an Oedipal context, the image evokes the ambivalence of the relationship with the father in both aspects: rivalry and/or attraction.
- Like all scenes of apparent closeness, the image reactivates representations of separation. (Chabert et al, 2020)

Card 7GF:

Manifest Content: A woman holding a book leans toward a dreamy-looking little girl who is holding a doll in her arms (generational difference, no gender difference).

Latent Content: Refers to the mother/daughter relationship:

- In an Oedipal context, the plate evokes identification movements of the daughter toward the mother, which may either allow or block access to a feminine and maternal identity.

- In other contexts, the conflict is intensified by the reactivation of ambivalence in the mother/child relationship—expressed through closeness and rejection, love and hate.(Chabert et al, 2020)

Card 8BM:

Manifest Content: In the foreground, an adolescent and a rifle. In the background, a man lying down, and two men bent over him with an instrument (surgical scene) (no sex difference, generational difference).

Latent Content: Refers to aggression and castration in male relationships (contrasting active/passive positions):

- In an Oedipal context, parricidal desire, guilt, castration threat, and ambivalence toward the father are all activated.
- On a deeper level, aggressive drives with destructive valence revive fantasies of deadly attacks against objects and the accompanying anxiety of loss. (Chabert et al, 2020)

Card 9GF:

Manifest Content: In the foreground, a young woman stands behind a tree, watching another young woman running downhill in the background (no difference in sex or generation).

Latent Content: Refers to relationships between women:

- In an Oedipal context, the rivalry between the two women is centered around a shared object of desire.
- Beyond rivalry, a more intense aggression—potentially persecutory or even deadly—may emerge in the attack on the other, possibly leading to her disappearance. .(Chabert et al, 2020)

Card 10:

Manifest Content: A couple embracing (no generational difference; the gender difference is unclear and ambiguous).

Latent Content: Refers to separation and reunion within a couple:

- In an Oedipal context, the possibility (or impossibility) of linking tenderness and sexual desire is questioned, with the incestuous reference being more or less present.
- Beyond that, the threat of separation remains either underlying or explicitly expressed. (Chabert et al, 2020)

Card 11:

Manifest Content: Chaotic landscape with sharp contrasts of shadow and light, featuring steep drops.

Latent Content: The plate induces very strong regressive movements, revealing specific pregenital issues, generally associated with archaic imagos. (Chabert et al, 2020)

Card 12BG:

Manifest Content: A wooded landscape along a body of water, with a tree and a boat in the foreground. Vegetation and background are vague. The overall atmosphere is airy with a light color dominance. No human figures are present.

Latent Content: Refers to absence:

- In an Oedipal context, it refers to the **fantasy of the primal scene**, evoked through suggestions of tender or eroticized relationships.
- Beyond that, **depressive and/or narcissistic dimensions** emerge through the reactivation of an issue of **loss or emptiness**—such as the absence of significant objects or the self's fragility in their absence. (Chabert et al, 2020)

Card 13B:

Manifest Content: A small boy sits on the doorstep of a ramshackle cabin with loose wooden boards.

Latent Content: Refers to the **capacity to be alone**:

- In an Oedipal context, the plate reactivates the child's feeling of **abandonment** by the parental couple.
- Beyond that, the dominant issue concerns the **ability to be alone** in a precarious environment, putting to the test the **quality of maternal support** and its psychological effects. (Chabert et al, 2020)

Card 19:

Manifest Content: A "surreal" image featuring a house under snow, a boat in a storm, and a vehicle.

Latent Content: Tests the boundaries between inside/outside, good/bad, and reactivates archaic depressive and/or persecutory issues, depending on the subject's capacity for containment and differentiation.

Card 16:

Manifest Content: A blank card—free for the subject to imagine.

Latent Content: Refers to the way the subject structures internal and external objects and organizes their relationships with them.

4-Young Schema Questionnaire – Short Form:

Overview:

The original version of the Schema Questionnaire (205 items) was developed by Young to measure early maladaptive schemas. The Schema Questionnaire-Short Form (SQ-SF) was designed (Young, 1998) to measure 15 maladaptive schemas and is a shorter instrument (75 items). Factor analytic research with the SQ-SF has supported the schemas proposed by Young (Welburn, Coristine, Dagg, Ponterfact, & Jordan, 2002).

The scale items are distributed across fifteen schemas, which are as follows: Emotional Deprivation; Abandonment and Instability; Mistrust and Abuse; Social Isolation and Alienation; Defectiveness and Shame; Failure; Dependence and Incompetence; Vulnerability to Harm and Illness; Enmeshment and Undeveloped Self; Subjugation; Self-Sacrifice; Emotional Inhibition; Unrelenting Standards and Hypercriticalness; Entitlement and Grandiosity; Insufficient Self-Control and Self-Discipline. These 15 schemas are further classified into five major domains, each encompassing several sub-schemas. The five domains and their schemas are as follows:

Domain of Disconnection and Rejection: It consists of 5 schemas which are (Emotional Deprivation, Neglect and Instability, Mistrust and Abuse, Social Isolation and Alienation, Feelings of Inferiority and Shame).

Domain of Impaired Autonomy and Performance: It contains four schemas which are (Failure, Dependence and Incompetence, Fear of Illness and Danger, Enmeshed Relationships and Lack of Self-Maturity).

Domain of Excessive Focus on Others: It includes two schemas which are (Subjugation, Self-Sacrifice).

Domain of Hypervigilance: It includes two schemas which are (Excessive Emotional Control, High Standards).

Domain of Impaired Limits: It includes two schemas which are (Control, Lack of Emotional Self-Control). (Bouvard, 2002)

Scoring and Interpretation:

Each item is rated according to a Likert scale with six alternatives, where the item scores range from 1 = Not at all true (Does not apply at all) to 6 = Completely true (Applies completely). The total scores on the scale obtained by the subject range between a minimum of 75 points and a maximum of 450 points.

Table (4): Distribution of items across domains and dimensions of early maladaptive schemas

Domain	Dimensions (Schemas)	Number
Disconnection and Rejection	Emotional Deprivation	1-5
	Neglect/Instability	6-10
	Mistrust/Abuse	11-15
	Social Isolation	16-20
	Feelings of Inferiority/Shame	21-25
Impaired Autonomy and Performance	Failure	26-30
	Dependence/Incompetence	31-35
	Fear of Illness or Danger	36-40
	Enmeshed Relationships	41-45
Excessive Focus on Others	Subjection	46-50
	Self-Sacrifice	51-55
Hypervigilance and Inhibition	Excessive Emotional Control	56-60
	High Standards	61-65
Impaired Limits	Control	66-70
	Lack of Emotional Self-Control	71-75

Regarding the levels of impact of early maladaptive schemas as mentioned by Young (Young and Klosko, 2003) they were classified into five levels for each schema, as shown in Table (5), which are:

Table (5): Raw scores and average scores for the levels of impact of early maladaptive schemas.

Schema	Score (Average Score)

The schema does not affect the individual.	5-9 (1-1.5)
The schema affects in some circumstances.	10-14 (1.6-2.4)
The schema represents a problem for the individual.	15-19 (2.5-3.2)
The schema plays an important role in the individual's life.	20-25 (3.4-4)
The schema is fundamental in organizing the individual's personality.	26-30(4.1-5)

Where the evaluation according to the scores for the levels of impact of early maladaptive schemas is classified into five levels: Score from 5 to 9 (1.5-1) The schema does not affect the individual, Score from 10 to 14 (2.4-1.6) The schema affects in some circumstances, Score from 15 to 19 (3.2-2.5) The schema represents a problem for the individual, Score from 20 to 24 (4-3.4) The schema plays an important role in the individual's life, Score from 25 to 30 (5-4.1) The schema is fundamental in organizing the individual's personality (Young et al, 2003).

Psychometric Properties of the Early Maladaptive Schemas Scale:

Several studies have been conducted to verify the validity of the Early Maladaptive Schemas Scale in its original version, including a study by Matichand, Lachenal-Chevallet, and Cottraux (2011), using the validity of contrasting groups. The study found statistically significant differences between the control group and the clinical group, confirming the test's ability to distinguish between pathological and non-pathological categories.

The reliability of the scale, according to a study by Dozois and Tremblay (2009), was estimated using Cronbach's alpha coefficient for the scale (0.87). The values of Cronbach's alpha coefficients for the dimensions ranged between 0.75 and 0.94. In its adapted version for the Arabic environment, the scale demonstrated good psychometric properties. The internal consistency validity of the scale was assessed by finding correlation coefficients between the score of each dimension and the total score of the scale (ranging between 0.89 and 0.55). The correlation coefficients for the dimensions ranged between 0.80 and 0.65. Meanwhile, the correlation coefficients between the domains of the scale and its total score fluctuated between 0.84 and 0.50. In calculating reliability, Cronbach's alpha coefficients for the dimensions ranged between 0.85 and 0.62.

Using the split-half method, the value was 0.71. This indicates that the scale achieved an acceptable level of reliability. (Young et al, 2003).

The Eating Disorder Examination (EDE-Q):

Overview:

The Eating Disorder Examination Questionnaire (EDE-Q) is a 28-item self-report questionnaire, adapted from the semi-structured interview, the Eating Disorder Examination (EDE). The questionnaire is designed to assess the range, frequency and severity of behaviours associated with a diagnosis of an eating disorder. It is categorised into 4 subscales (Restraint, Eating Concern, Shape Concern and Weight Concern) and an overall global score, with a higher score indicating more problematic eating difficulties.

There are several adaptations of the EDE-Q including the Eating Disorder Examination for Adolescents (EDE-A), the Youth Eating Disorder Examination Questionnaire (YEDE-Q), the Eating Disorder Examination Questionnaire Short (EDE-QS) and the Eating Disorder Examination Questionnaire Parent Version (EDE-Q-PV), all listed below in ‘Other versions’.

Scoring and Interpretation:

The EDE, and its self-report version, the EDE-Q, generate two types of data. First, they provide frequency data on key behavioural features of eating disorders in terms of number of episodes of the behaviour and in some instances number of days on which the behaviour has occurred. Second, they provide subscale scores reflecting the severity of aspects of the psychopathology of eating disorders. The subscales are Restraint, Eating Concern, Shape Concern and Weight Concern. To obtain a particular subscale score, the ratings for the relevant items (listed below) are added together and the sum divided by the total number of items forming the subscale. If ratings are only available on some items, a score may nevertheless be obtained by dividing the resulting total by the number of rated items so long as more than half the items have been rated. To obtain an overall or ‘global’ score, the four subscales scores are summed and the resulting total divided by the number of subscales (i.e. four). Subscale scores are reported as means and standard deviations.

The EDE-Q is scored using a 7-point, forced-choice rating scale (0–6) with scores of 4 or higher indicative of clinical range. The subscale and global

scores reflect the severity of eating disorder psychopathology. (Jennings, K. M., & Phillips, K. E. 2017).

Subscale Items (the numbers are the item number on the EDE-Q):

Restraint

- 1 Restraint over eating
- 2 Avoidance of eating
- 3 Food avoidance
- 4 Dietary Rules
- 5 Empty stomach Eating Concern

Eating Concern

- 7 Preoccupation with food, eating or calories
- 9 Fear of losing control over eating
- 19 Eating in secret
- 21 Social eating
- 20 Guilt about eating Shape Concern

Shape Concern

- 6 Flat stomach
- 8 Preoccupation with shape or weight
- 23 Importance of shape
- 10 Fear of weight gain
- 26 Dissatisfaction with shape
- 27 Discomfort seeing body
- 28 Avoidance of exposure
- 11 Feelings of fatness

Weight Concern

- 4 Weight Concern
- 22 Importance of weight
- 24 Reaction to prescribed weighing

8 Preoccupation with shape or weight

25 Dissatisfaction with weight

12 Desire to lose weight

Psychometric properties :

Property	Definition	Measure name
Internal consistency	Degree to which similar items within a scale correlate with each other.	Internal consistency for the four EDE-Q subscales has been found to be acceptable for both men and women; Rose et al. (2013) reported a Cronbach's α ranging from .74 (Restraint) to .89 (Shape Concern) for men and .75 (Restraint) to .93 (Shape Concern) for women. Similar results have been found in other studies (e.g., Bardone-Cone & Boyd, 2007; Luce & Crowther, 1999).
Construct validity	Degree to which the questionnaire actually measures the specific trait or attribute it is intended to measure.	Researchers propose different factor structures for the EDE-Q, with the original four-factor structure receiving limited support. Grilo et al. (2015) suggested a modified seven item, three- factor structure; the three factors were dietary restraint, shape/weight overvaluation, and body dissatisfaction. Carey et al. (2019) described a three-factor structure with eighteen items for females and sixteen for males, with factors being shape and weight concern, preoccupation and eating concern, and restriction. More recently, Rand-Giovanetti (2020) evaluated twelve models of EDE-Q factor structure and suggested a four-factor model with factors of dietary restraint, preoccupation and restriction, weight and shape concern, and eating shame.
Test-retest reliability	Degree to which the same respondents have the same score after period of time when trait shouldn't have changed.	Test re-test reliability was high for the four subscales ($r = 0.75$ to 0.91) and global score ($r = 0.92$) for both men and women in a college sample (Rose et al., 2013). In patients with binge eating disorder, Reas et al. (2006) reported good short term test re-test reliability for the four subscales ($r = .66$ to $.77$) and global score ($r = .76$).
Convergent validity	Degree to which two measures of constructs that theoretically should	The EDE-Q has high convergent validity with the more recently developed ED-15 (Accurso & Waller, 2020).

	be related are in fact related.	
Concurrent validity	Correlation of the measure with others measuring same concept.	The EDE-Q has moderate to high concurrent validity with the Eating Problems Checklist (Dalle Grave et al., 2018).
Discriminant validity	Lack of correlation with opposite concepts.	The EDE-Q was found to be highly accurate in discriminating between individuals with and without an eating disorder (Mond et al., 2004; Aarndoom et al., 2012) and moderately accurate in discriminating between individuals with binge eating disorder from those with obesity (Aarndoom et al., 2012).

(Child Outcomes Research Consortium. n.d.).

Presentation and Analysis of the Study Findings

First Case Mika:**1- Results of The Eating Disorder Examination (EDE-Q):***Table (6): Displaying EDE-Q results for the first case Mika*

Questions	Subscales	Degrees
1-2-3-4-5	Restraint	4.40
7-9-19-20-21	Eating Concern	2.60
6-8-10-11-23-26-27-28	Shape Concern	4.88
4-8-12-22-24-25	Weight Concern	5.40
Overall Score		4.32

Table Commentary:**1. Weight Concern (5.40)**

- Highest score among subscales, indicating extreme preoccupation with body weight, fear of weight gain, and likely frequent weighing behaviors.
- This is a core feature across anorexia nervosa, bulimia nervosa, and binge-eating disorder (BED).

2. Shape Concern (4.88)

- Reflects severe distress about body shape, potentially including body-checking behaviors, avoidance (e.g., mirrors), or excessive exercise.
- Often associated with body dysmorphia and restrictive/binge-purge cycles.

3. Restraint (4.40)

- Suggests significant dietary restriction, including strict food rules, fasting, or rigid eating patterns.
- Common in anorexia nervosa (restrictive type) or orthorexia.

4. Eating Concern (2.60)

- Indicates moderate anxiety around eating, such as guilt after meals or fear of losing control.
- While lower than other subscales, it still suggests disordered eating thoughts.

Clinical Implications:

The profile reveals severe eating disorder symptoms, with weight and shape concerns being most dominant.

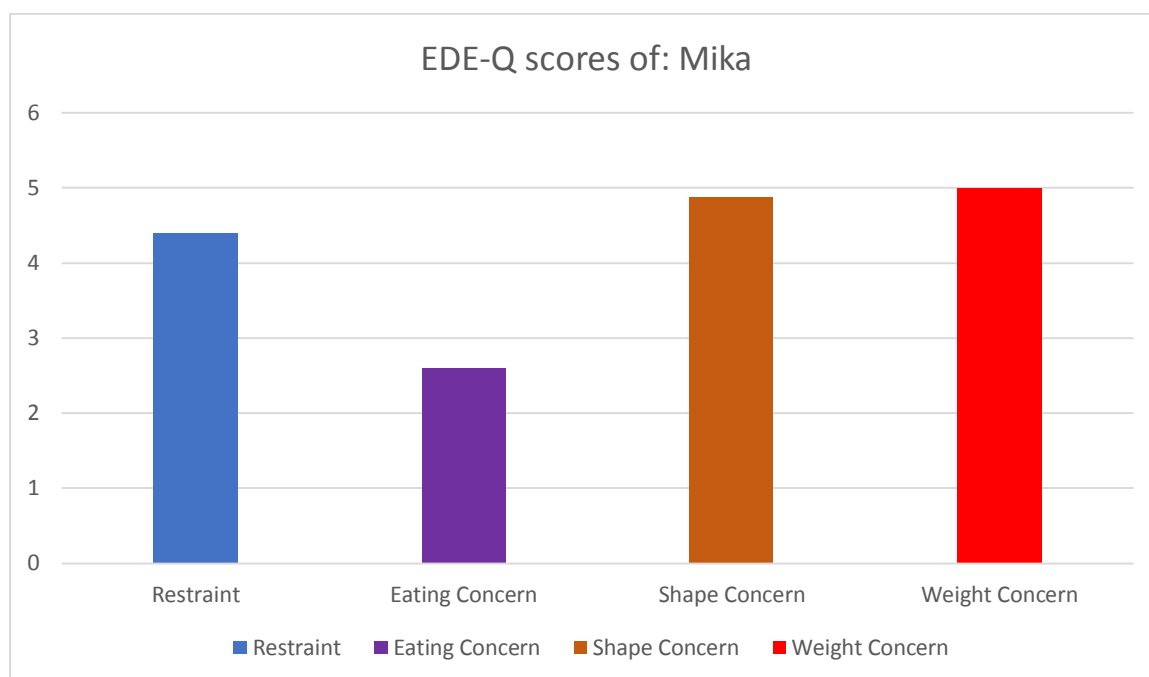


Figure 2: displaying the results of the EDE-Q Subscale scores of Mika

2- Clinical Interview: Psychodynamic Case Report: "Mika"

1. Personal History and Developmental Conflicts

Mika is a 14-year-old male student in his third year of middle school, born and raised in M'sila, Algeria, where both his parents are native residents. He reports having had a “good childhood” and describes his adolescence positively as well, balancing his time between studying, playing, praying, and reading the Qur'an. However, he subjectively views childhood as better than adolescence.

This shift in valuation may reflect the beginning of internal conflict typical of adolescence, as the ego contends with rising libidinal demands and superego expectations. His retrospective idealization of childhood suggests a nostalgic defense and a possibly repressed struggle with developmental challenges in the present phase.

2. Academic Performance and Cognitive Inhibitions

Mika maintains strong academic performance, with annual averages between 16–17. He reports consistent success but notes persistent difficulties in foreign languages—especially Arabic and English—though improvement in the

latter is noted recently. His preferred subjects are mathematics, physics, and natural sciences. He aspires to become a surgeon.

His linguistic struggle could be indicative of symbolic inhibitions—languages often being linked to the maternal function and emotional articulation. His preference for the hard sciences may serve as a defense against affective ambiguity, with rational structures offering a sense of mastery and control. The desire to become a surgeon could symbolize an unconscious wish to repair or master inner wounds.

3. Parental Relationships and Internalized Object World

Mika lives with both parents. His father (50) works as a school inspector and returns home daily, while his mother (37) is a homemaker. Both are reportedly in good health. Mika perceives his parents' relationship as harmonious, with his father assuming a dominant role in the household. He considers himself close to his father, particularly because his father offers advice—an act Mika has internalized and now replicates by advising others.

This identification with the father as a moral and rational authority suggests a strong introjection of the paternal imago. The father likely constitutes the model for Mika's superego, while the absence of conflict or rebellion in this relationship may indicate repression or overidealization. The maternal figure is more distant emotionally—he identifies with her in appearance, but not in behavior—suggesting a clear split between emotional and normative identifications.

4. Sibling Dynamics and Narcissistic Balance

Mika is the eldest of five siblings (two sisters aged 12 and 9, and two brothers aged 8 and 3). He describes his relationships with all siblings as positive, with a particular closeness to his 8-year-old brother due to frequent communication.

This emotional investment in the younger brother suggests horizontal identification and a possible compensatory role as caregiver, reinforcing his ego-ideal. His birth order (firstborn) may further intensify his sense of responsibility and normative self-worth. No rivalry or jealousy is reported, which may point to either successful narcissistic regulation or suppression of competitive impulses.

5. Physical Health and Somatic Regulation

Mika reports no history of serious illness, surgical procedures, or accidents. His appetite is open for preferred foods but moderate otherwise. He

sleeps well, unaffected by noise, and has no issues with smoking, caffeine, or substance use. He had previously followed a diet.

The absence of somatic symptoms and a generally stable physiological profile suggests successful somatopsychic integration. However, the act of dieting in early adolescence may also reflect unconscious efforts at control or conformity with an ideal self-image—especially in the context of a developing ego and body schema.

6. Pregenital Traits: Control and Oral Gratification

Mika shows a dual orientation toward money: he tends to be spendthrift with small sums (on snacks and juices) but saves large amounts. He reports being able to control his spending when necessary.

This suggests a balanced anal organization—demonstrating both impulsivity and self-regulation. His enjoyment of snacks could indicate retained oral fixations, possibly serving as mild self-soothing behaviors. His ability to delay gratification and exert control reflects well-developed ego functions and moderated pregenital conflicts.

7. Genitality and Emotional Development

Mika denies any romantic relationships. This may reflect developmental latency, cultural/religious internalizations, or defense against emerging genital impulses. The absence of relational experimentation could also suggest dependency on the family unit as a primary libidinal investment, delaying the shift toward external object choices.

From a psychoanalytic perspective, this may signal deferred Oedipal resolution or repression of genital conflicts, typical of adolescents navigating between familial loyalty and individuation.

8. Oneiric Life and Unconscious Activity

Mika describes his dream life as inconsistent. He sometimes remembers both good and bad dreams, but often forgets them entirely. He reports no recurring dream content.

This suggests that dream material is either not being symbolized adequately or is being censored at the level of preconscious access. The lack of consistent oneiric memory may reflect a stable ego structure with effective repression, but also hints at underutilized symbolic processing—potentially indicating latent conflict or inhibition in affective elaboration.

9. Social Relations and Object Representations

Mika reports having real friends and distinguishes them from mere acquaintances. His close friends include a childhood companion and a newer peer. Most of his social engagement occurs through school and mosque interactions. He enjoys sports (football, basketball, running), video games (Free Fire), and drawing. He identifies drawing as a personal talent. He clearly prefers living among others rather than alone.

This rich and differentiated social landscape indicates good object constancy and the capacity to form enduring relationships. His artistic ability suggests sublimative channels for libidinal expression. His preference for social life over solitude reflects secure attachment patterns and minimal narcissistic withdrawal.

10. Self-Image and Ego Ideals

Mika views his primary strength as consistency in prayer and Qur'an reading—spiritual practices aligned with internalized moral ideals. He does not perceive any specific flaw in himself.

Such moral self-definition suggests a superego heavily informed by religious and cultural norms. His lack of identified internal conflict may reflect either genuine ego integrity or an overuse of repression and idealization to maintain internal harmony. The absence of critical self-reflection could also point to latent perfectionistic defenses.

Psychodynamic Summary

Mika presents with a well-structured neurotic personality organization, marked by a predominance of repression and moral idealization. His superego appears to be firmly rooted in paternal identification and religious values, shaping both self-image and behavior. The pregenital traits (oral and anal) are moderated and integrated, suggesting well-regulated drive expression.

While he shows no overt signs of psychopathology, latent conflicts may reside in the avoidance of romantic intimacy and ambiguous dream content. His strong attachment to family and peers, combined with a sense of responsibility and self-discipline, points to an ego that is resilient but potentially over-controlled. The absence of significant affective distress may reflect not only psychic stability but also underexplored inner emotional life.

3- Results of Young's Early Maladaptive Schemas Questionnaire (Short Version):

Table (7): Displaying YSQ-SF results for the first case Mika

Number	Dimensions (Schemas)	Degrees
1-5	Emotional Deprivation	11
6-10	Neglect/Instability	8
11-15	Mistrust/Abuse	12
16-20	Social Isolation	9
21-25	Feelings of Inferiority/Shame	9
26-30	Failure	11
31-35	Dependence/Incompetence	8
36-40	Fear of Illness or Danger	12
41-45	Enmeshed Relationships	8
46-50	Subjection	9
51-55	Self-Sacrifice	18
56-60	Excessive Emotional Control	13
61-65	High Standards	12
66-70	Control	12
71-75	Lack of Emotional Self-Control	15
	Total Score	167

Young's Early Maladaptive Cognitive Schemas:

The total score: 2.22

The total score falls within the range of 1.6-2.4 on the Likert scale, which, according to the scale's interpretation, indicates that the schema affects some circumstances.

Table Commentary:

From the table, it appears that the core schemas in shaping the subject's personality were as follows:

The **Self-Sacrifice** Schema ranked first with a score of (18), and then it's followed by the **Lack of Emotional Self-Control** schema with a score of (15), and then the **Excessive Emotional Control** schema with a score of (13).

As for the schemas that play an important role in the subject's life, they are as follows:

The Control, High Standards, Fear of Illness or Danger, Mistrust/Abuse Schemas ranked equally with a score of (12).

The schemas that present a problem for the subject were as follows:

The **Emotional Deprivation** and **Failure** schemas with a score of (11), followed by the Social Isolation, Feelings of Inferiority/Shame, Subjection schemas with a score of (9).

The schemas that play a significant role in the subject's life are as follows:

The Neglect/Instability, Dependence/Incompetence, Enmeshed Relationships schemas ranked equally with a score of (8).

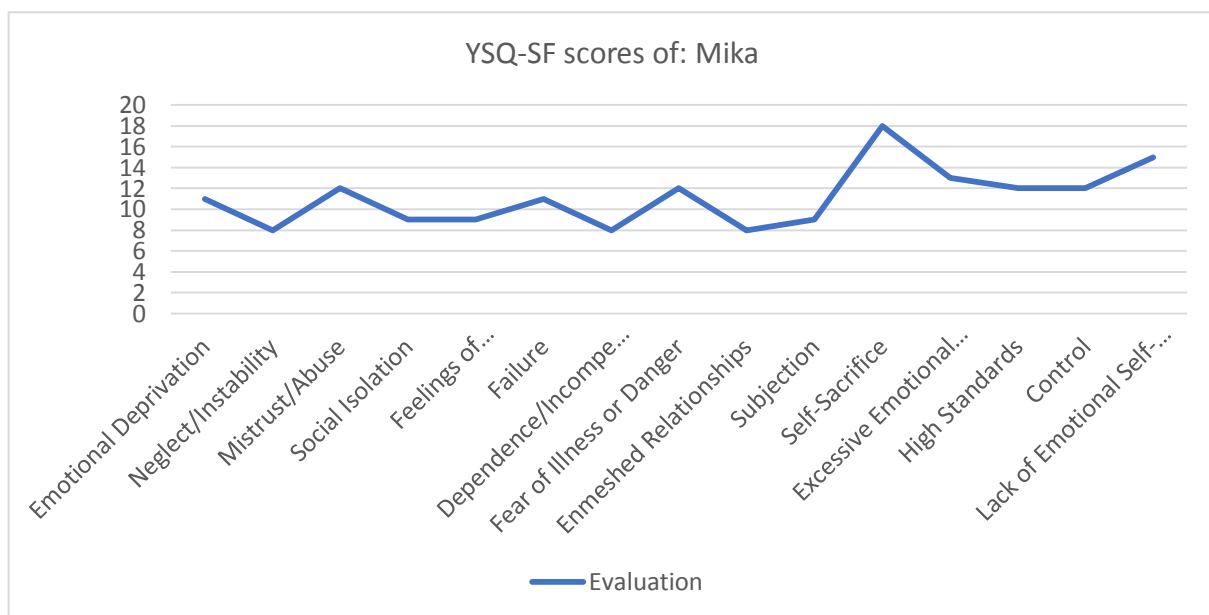









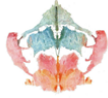


Figure 3: displaying the results of the YSQ-SF evaluation of Mika

4-Presentation and Analysis of Mika's Rorschach Protocol Results:

Protocol Results:

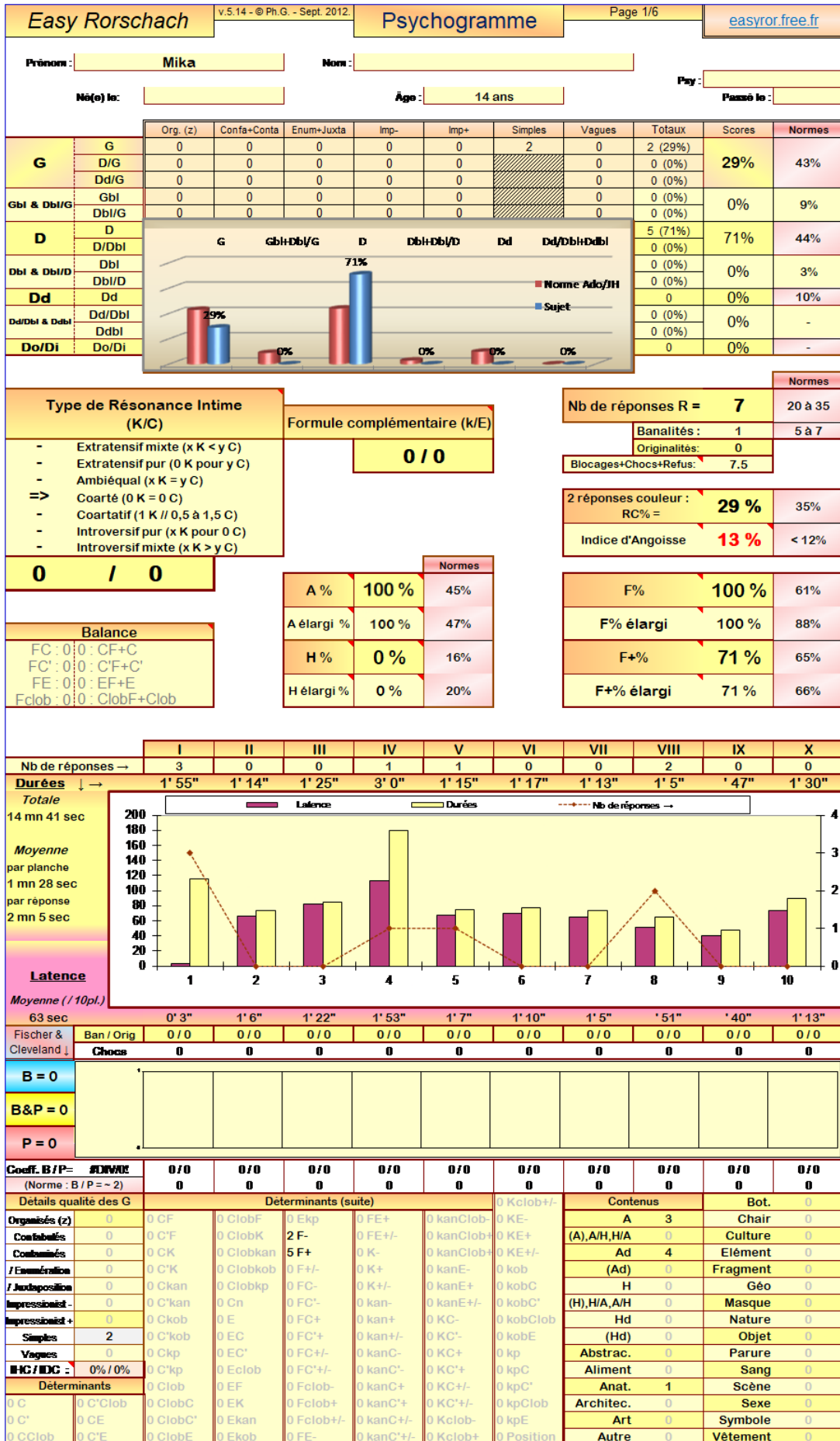
Cards	Responses	Inquiry	Coding
Card I 	03s – 1:55m. 1- Bat 2- Butterfly 3- Animal Skin	<ul style="list-style-type: none"> - It looks like it has wings like this, I saw it as if it had two identical ones like this, as if these were its wings. - The same thing because of the wings. - So, anything you see, you imagine something? Like anything, for example, this one? <p>Examiner: Yes.</p> <ul style="list-style-type: none"> - And this one also looks like a fox's face <p>R+ Dd14 F- Ad</p> <ul style="list-style-type: none"> - This whole thing looked to me like animal skin. 	1- D4 F+ Ad 2- D4 F+ Ad 3- G F- Ad
Card II 	1:06m – 1:14m. It didn't remind me of anything.	<ul style="list-style-type: none"> - It looks like a face of some kind of animal. <p>R+ D5 F+- Ad</p> <p>Examiner: What kind of animal?</p> <p>Examinee: I don't know, I can't describe it, I forgot.</p>	Refusal due to shock from the black and red.

		- it looks like a bear's face. R+ Ddo17 Ad F+-	
Card III 	1:22m – 1:25m. Nothing came to mind	I didn't see anything here. Examiner: Even when you tried to make something out of it, nothing came to your mind? Examinee: Yeah, nothing came to mind.	Refusal due to shock from the black and red. → Refusal
Card IV 	1:53m – 3:00m. Examinee: How can I answer this card? Examiner: When you look at the card, what image comes to your mind? 4- I saw some kind of animal like... I forgot its name.	It looks like some kind of animal face. Examiner: What kind of animal? Examinee: I don't know.	4- D2 F+ Ad
Card V 	1:07m. – 1:15m. 5- It looks like a bat.	It's like it has its wings along with the face it looks like a bat, like it completely resembles it.	5- G F+ A Ban Choice+
Card VI 	1:10m – 1:17m. Nothing came to mind.	I didn't see anything. Examiner: You couldn't think of anything, couldn't imagine anything? Examinee: Yeah.	Refusal due to shock from the black → Refusal
Card VII 	1:05m – 1:13m. Nothing. Examiner: There's nothing ? Examinee: Nothing.	Again, nothing came to mind.	Refusal Shock. Choice- → Refusal

<p>Card VIII</p> 	<p>51s – 1:05m. 6- This is a bull. 7- The ribcage of a wolf.</p>	<p>- This looked like a bull to me. - This looks like a wolf's ribcage. - And this looks like a wolf's face. R+ DDo F- Ad</p>	<p>6- D2 F- A 7- D5 F+ Anat / A Choice+</p>
<p>Card IX</p> 	<p>40s – 47s. Nothing</p>	<p>- These looked to me like gazelle horns. R+ D6 F- Ad</p>	<p>Refusal due to shock from the colors.</p>
<p>Card X</p> 	<p>1:13m – 1:30m. I'm not seeing anything. Examinee: Do you have their answers? Examiner: There aren't any fixed answers. It all depends on the person—how each one sees them. Also, there's no right or wrong answer."</p>	<p>This looks like a type of sea creature—it looks like a seahorse, something like that. R+ D9 F+- A</p>	<p>Refusal due to shock from the colors. Choice-</p>

Choices + (VIII.V)

Choices - (VII.X)



General Analysis of Mika's Protocol:

Time and Productivity:

The brief responses, which did not exceed $R = 7$, were delivered in a reserved linguistic context dominated by inhibition. The examinee frequently turned to the examiner or criticized themselves as incapable, reflecting the difficulty of the projective testing situation and their tendency toward repressive responses. The number of card refusals reached 6 cards: **II, III, VI, VIII, IX, X**, along with a tendency toward partial refusal (**Refusal: 3**) in specific parts of cards **III, VI, VII**. These brief responses were given in a total time of 14 minutes and 1 second, indicating discomfort with the projective situation and a desire to escape it, despite the long response latency indicating a kind of distressed reflection.

Cognitive Contexts:

The way perceptions were approached was limited to two types of responses: global (G) and large-detail (D), while small-detail responses (Dd) and white-space responses were absent. This suggests that the examinee avoided any detailed cognitive effort that might expose inner conflict.

The global responses came in at $G = 29\%$, within the normative range (25%–61%), serving as a way to control the stimulus and often linked with form-dominant determinants (GF2). Although normative, these responses lose their symbolic value in favor of a controlling function that shields the self from internal exposure. For example, in Card I, saying "animal skin" as a distorted percept (GF-) could symbolize the psychological envelope, perhaps indicating an early developmental rupture or threat—like early emotional exposure or maternal disappointment.

Another example is in Card V, where the response "it looks like a bat" came after a latency of 1 minute and 7 seconds, signaling perceptual and psychological hesitation in front of an image that should be easily grasped. This long delay reflects an internal conflict concerning self-image, especially in a card related to narcissism and identity. The cautious expression ("looks like") reveals a defensive distance between the examinee and the stimulus.

The large-detail responses (D) dominated the protocol as a preferred perceptual strategy, at 71%, exceeding the normative range (29%–59%). This is seen as a sign of over-adaptation to reality and as a protective mechanism shielding the self from unconscious content or anxiety tied to holistic representations. These responses were mostly associated with accurate

perceptions (4DF+), reflecting a basic adaptation to objective reality and a strong drive to remain grounded in it.

Form Determinants:

The dominance of form-based perception confirms rigid defenses and reliance on external, tangible reality as a way to block any creative link between inner and outer experience. [**Félar = 100%**]. The perceptions overall were linked at a rate of 71% to positive form quality [**F+élar**], confirming the strength of internal control, despite a minor lapse seen in the poor form response in Card I. The absolute dominance of pure form determinants (**F = 100%**) points to a conservative cognitive and psychological style, based on strict stimulus control and clear emotional and instinctual repression. This structure reflects a defensive fixation on form, enhancing excessive realism and disconnection from internal psychological life.

Conflict Dynamics:

The internal echo pattern showing a tendency toward constriction [**TRI: 0K/0C**], and the secondary form also indicating closure [**FC: 0/0kan/0E**], reflect emotional suffocation and inhibition in engaging with internal reality. This may represent a rejection of interaction with early relational objects and the fragile psychic structure they imply.

We also observe the absence of color responses (C), indicating strict psychological repression of emotional and instinctive expression. This suggests a defensive style centered on cognitive control and emotional detachment. Dynamically, it reflects a disconnection from internal life and a reduced ability of the ego to transform affect into symbolic representation. This emotional closure may also manifest in relationships as dry communication—conservative and avoiding intimacy or emotional escalation.

Content:

There was limited thematic variety, with responses confined to animal content (A) at 100%, and anatomical content (Anat) at 14%, with a complete absence of human content (H). This reflects a defensive pattern relying on projecting relationships onto primitive, reflexive, and instinctual imagery. This may be a strategy to avoid emotional exposure or conflict tied to representations of the human other.

The presence of anatomical content reinforces the hypothesis of a reduced interaction with the body, either from a narcissistic or deconstructive perspective. This structure points to a superficial and controlled relational mode,

avoiding complex symbolic investment and preferring dominance through reduction and animalistic distance.

- Presentation and Analysis of Mika's Thematic Apperception Test (T.A.T):

Protocol Results:

Card 1:

"14... A long story or just like a sentence? (slight smile)

Examiner: The story that comes to your mind.

He's trying to memorize, he's focused on memorizing so he can understand well... "11" so he doesn't hear the noise coming from those in front of him...

"14" he also covers his ears like this and keeps memorizing to himself, for example, what he's been studying or so. "1'08"

Contextual Dynamics: After a period of silence (CI-1), which reflects fear of entering directly into expression, the examinee began by asking the examiner a question with a slight smile (D3 + D1+). This was followed by the examiner's response (CI-3), which confirmed the initial silence. Then the examinee proceeded to focus on the daily, the realistic, and on actions (CF-1), despite the content being inappropriate for the stimulus (E2-1). The examinee did not specify the motives of the conflict nor identify the characters (CI-2).

After that, there was noticeable silence within the story again (CI-1), followed by unknown characters (CI-2) and a focus on sensory details, as well as sensitivity to contradictions (CN-2). This was followed once again by a noticeable silence within the story (CI-1), then rumination (A3-1), and a return to focusing on personal experience and the daily, factual aspects (CN-1 + CF-1).

After a long response latency (CI-1), there were unspecified conflict motives with unknown characters, along with a tendency toward restriction and narcissistic details with a positive value and idealization (CI-2 + CI-1 + CN-3+).

Latent Issue: Faced with the issue of childhood helplessness, the examinee reflects a sensory and psychological withdrawal in response to a vague external threat, using primitive defenses aimed at protecting the self from loss or exposure.

The isolation and poor narrative indicate a fragility in self-differentiation and a weakness in representational processes, which may suggest a disturbance in forming a cohesive self-image.

Card 2:

"26... With the circumstances she's in, she tries to study." "29."

Contextual Dynamics: After a long response latency (CI-1), there were unspecified conflict motives involving unknown characters, along with a tendency toward restraint and narcissistic details with a positive value and idealization (CI-2 + CI-1 + CN-3+).

Latent Issue: Faced with the Oedipal scene dilemma, the examinee avoided representing the Oedipal triangle by reducing the image to a lonely girl engaged in a non-emotional activity (studying). This indicates a difficulty in recognizing what is forbidden, and an implicit refusal to acknowledge attraction or loss, along with a tendency to neutralize emotion and blur tension.

Separation from the original objects is not possible and is experienced passively and without symbolic representation.

Card 3BM:

"22... From so much failure and boredom, he fell asleep like this." "27."

Contextual Dynamics: After a long response latency (CI-1), there were unspecified conflict motives involving unknown characters, along with narcissistic details carrying a negative value (CI-2 + CN-2-).

Latent Issue: The examinee perceived the issue of the depressive state with a bodily translation, manifesting as a physical and emotional withdrawal, expressing a sense of failure that was neither understood nor linked to a previous relationship.

The absence of environment and relationships, combined with a focus on psychic extinction, points to a depression that has not been symbolically processed, where loss is experienced without transformation and without opening toward new object investment.

Card 4:

"15... It's like he's angry like that." "20."

Contextual Dynamics: After a somewhat long response latency (CI-1), the examinee used verbal precaution (A3-1), followed by isolation between representations or between representation and emotion, and expression of emotions (A3-4 + B1-3).

Latent Issue: Faced with the conflict of opposing drives in a romantic relationship, there is a clear inability to represent the dyadic relationship and its emotional tension. The scene is reduced to an undefined anxiety, with the emotional other absent.

The conflict between love and aggression is missing, and the beloved object is erased, indicating a defensive flattening against psychological duality.

Engagement in the dynamics of separation or abandonment is avoided, and anxiety is presented as a general mood rather than as a result of a relationship.

These indicators reflect difficulty in representing emotional conflict within intimate relationships, and closure at the level of emotional representation.

Card 5:

"26... It's like he peeked at the door, peeked to see what was there—I didn't understand this one. "30.

Contextual Dynamics: After a long response latency (CI-1), the examinee initiated with verbal precaution (A3-1), followed by rumination involving identity confusion, role overlap, and the evocation of something negative—persecutory themes (A3-1 + E-1 + E2-2).

He then tended toward refusal and directed criticism (CI-1 + D3).

Latent Issue: Faced with a card that evokes the issue of the gazing maternal image, it becomes evident that there is a difficulty in symbolically representing sexual curiosity and the oedipal emotions associated with it, accompanied by the use of defenses such as denial or perceptual blocking.

The oedipal anxiety appears in a confused form, pushed to the background behind a neutral observer stance, reflecting avoidance of confronting repressed content and fear of losing the object or internal exposure.

Card 6BM:

"22... I didn't understand anything in it. "24.

Contextual Dynamics: After a long response latency (CI-1), the refusal came immediately, accompanied by verbal precautions and criticism of the tool (CI-1 + A3-1 + D3).

Latent Issue: Faced with the mother–son issue in a context of grief, there is a clear avoidance of the emotional and symbolic content of the image, through a complete denial of its capacity to suggest or be interpreted.

This points to a severe difficulty in representing the maternal relationship within an Oedipal context laden with loss and guilt.

The gap between the self and the mother appears here as a threatening zone, one that cannot be thought about or represented, reflecting a breakdown in the assimilation of the Oedipal object and a vague fear of losing maternal love or transgressing the forbidden.

This fear is met with a primitive defense: the total negation of meaning.

Card 7BM:

"53... There's no story at all. "54.

Contextual Dynamics: This time, the response latency was longer than in the previous cards, reaching 53 seconds (CI-1), followed immediately by refusal, accompanied by verbal precautions and criticism (CI-1 + A3-1 + D3).

Latent Issue: Faced with the issue of closeness between father and son, the paternal relationship is symbolically nullified through the refusal to represent the scene or turn it into a story.

This response indicates an Oedipal difficulty in identifying with the paternal image, expressing an inner conflict between attraction and rejection, or a fragility in representing masculine identity associated with the father.

The complete denial reflects a symbolic withdrawal from the relationship with the paternal object, and possibly a fear of exposure or threat resulting from an unstable identification.

This reveals a difficulty in establishing the relationship with the father as a source of authority or psychological boundary.

Card 8BM:

"18... They're treating him, performing surgery on him. "28.

Contextual Dynamics: After a long response latency (CI-1), the examinee did not identify the characters nor specify the motives of the conflict, and instead focused on sensory and realistic details (CI-2 + CF-2).

Latent Issue: Faced with the issue of aggression and castration in male relationships, the examinee shows a clear difficulty in representing the symbolic scene evoked by the card, by flattening the violent and castrating content into a neutral, functional narrative.

This points to a problem in processing male aggressive impulses and the anxiety stemming from castration threat within Oedipal relationships.

A neutralizing defense is used to distance the self from the situation, dismantling the symbolic dimension of the intergenerational male conflict.

Violence remains repressed and unrepresented, and the anxiety over losing the object emerges in a flat, unexamined form.

Card 10:

"18... I didn't understand anything in it. "20.

Contextual Dynamics: After a long response latency (CI-1), the card was immediately refused, accompanied by verbal precautions and criticism of the tool (CI-1 + A3-1 + D3).

Latent Issue: Faced with the issue of separation and reunion between partners, the examinee completely avoids confronting the intimate emotional scene, responding to the symbolic representation of attraction and separation with total emptiness.

This indicates a difficulty in integrating the duality of tenderness and desire within a mature marital relationship, and an inability to conceive of separation as a symbolic, non-catastrophic event.

The defense here takes the form of erasing meaning, revealing a deficit in imagining emotional relationships within an Oedipal or post-Oedipal framework, where the connection to the other remains repressed or unrepresented out of fear of involvement or loss.

Card 11:

"33... Nothing. "35.

Contextual Dynamics: After a long response latency of 33 seconds (CI-1), the card was refused with verbal precautions and criticism (CI-1 + A3-1 + D3).

Latent Issue: The examinee encountered significant difficulty when faced with a card that revives pre-genital issues and primitive anxiety. The absence of any productive response indicates a severe difficulty in engaging with symbolic content tied to deeply regressive psychological levels.

The card is experienced as a threatening, chaotic, and unrepresentable space, suggesting a problem in organizing the primary representations of self and reality, and a weakness in processing sensory–primitive content.

This points to a disturbance in the pre-genital stage, prompting the examinee to adopt a purely defensive response: emptiness.

Card 12BG:

"27... It's like someone went on a walk or something and left his things behind.
"38.

Contextual Dynamics: After a long response latency (CI-1), the examinee began with verbal precautions (A3-1), followed by sensory perceptions—misperceptions—and unknown characters, as well as the insertion of characters not present in the image (E1-3 + CI-2 + B1-2).

Latent Issue: Faced with the issue of absence, the examinee processes the scene by reducing the relationship to mere physical traces, without invoking

emotion or meaning. This indicates a difficulty in representing loss as the inability to turn toward an internal restorative object.

This appears as an inability to incorporate the absent figure into an emotional narrative structure, reflecting either a flattened depressive dynamic or a weakness in relying on a reassuring internal object.

Absence is understood here as an incomplete emptiness, highlighting narcissistic fragility and a rupture in the relational chain.

Card 13B:

"25... Sitting in front of the door like this, looking outside."33.

Contextual Dynamics: After a long response latency (CI-1), the examinee focused on sensory details, showed sensitivity to contradictions, and left the characters unidentified (CN-2 + CI-2).

Latent Issue: Faced with the issue of the ability to be alone, the examinee processes the scene of isolation through a neutral description devoid of psychological impact, indicating a difficulty in representing solitude as an internal state with emotional significance.

There is an absence of feelings of abandonment or oedipal marginalization, and the self appears as an external observer without engagement, reflecting either a lack of internal maternal support, or a resort to evacuative defenses that protect the ego from collapse when confronted with loneliness.

Card 19:

"45... I didn't see anything at all."46.

Contextual Dynamics: After a long response latency of 45 seconds (CI-1), the examinee refused the card, criticized the tool, and used verbal precautions (CI-1 + D3 + A3-1).

Latent Issue: Faced with the issue of testing the boundaries between inside and outside, good and evil, and the revival of old depressive concerns, the examinee's empty response reflects an inability to engage with a card that challenges psychological capacities for differentiation and containment.

The absence of any perception indicates a structural difficulty in distinguishing between inner and outer worlds, and between safety and threat, suggesting a disruption in early mechanisms of containment and psychological boundaries.

Here, the defense takes the form of symbolic emptiness, serving to avoid collapse in the face of chaotic, unrepresentable internal content.

This reveals a primitive anxiety, either depressive or persecutory in nature, that has not been integrated or processed symbolically.

Card 16:

"10... Like a game (smiles), kids playing in the neighborhood or maybe studying at school, or someone reviewing lessons at home, or maybe someone eating, someone training—doing sports..."⁵ one is praying, reading the Quran. 48."

Contextual Dynamics: After a short response latency (CI-1), the examinee smiled (D1+), followed by verbal precautions (A3-1). This was then followed by a noticeable pause within the story (CI-1), and subsequently by identity confusion and role overlap, with a focus on daily reality and actions—a reality-based frame of reference accompanied by descriptive details, sometimes with or without justification, as well as social cues, general moral sense, or ethical references. This was followed by unknown characters and disintegration of temporal, spatial, or causal logic (E3-1 + CF-1 + A1-1 + A1-3 + CI-2 + E3-3).

Latent Issue: Despite the richness of the discourse, the examinee reveals a difficulty in organizing internal themes within a coherent relational structure.

An external world filled with actions is presented, yet lacking emotional or narrative connections, which reflects a disturbance in integrating self and others into a meaningful relational network.

This also points to internal fragmentation, where representations are constructed as isolated scenes, in the absence of emotional or narrative unity—indicating a fragile psychological structure and difficulty in connecting the self with its objects in a cohesive and mature way.

Summary of Defensive Contexts – TAT:

Series A	Series B	Series C	Series D	Series E
A1-1= 1	B1-1=	CI-1= 24	D1= 2	E1-1=
A1-2=	B1-2= 1	CI-2= 7	D2=	E1-2=
A1-3= 1	B1-3= 1	CI-3= 1	D3= 7	E1-3= 1
A1-4=	B1= 2	CI= 32	D= 9	E1= 1
A1= 2				
A2-1=	B2-1=	CF-1= 3		E2-1= 1
A2-2=	B2-2=	CF-2= 1		E2-2= 1
A2-3=	B2-3=	CF-3=		E2-3=
A2-4=	B2-4=	CF= 4		E2= 2
A3-1= 11	B3-1=	CL-1=		E3-1= 1
A3-2=	B3-2=	CL-2= 2		E3-2=

A3-3= A3-4= 1 A3= 12	B3-3=	CL-3= CL-4= CL= 2		E3-3= 1 E3-4= E3= 2
		CN-1= 1 CN-2= 2 CN-3= 2 CN-4= CN-5= CN= 5		E4-1= E4-2= E4-3= E4-4=
		CM-1= CM-2= CM-3= CM-4= CM-5=		
A= 13	B= 2	C= 43	D= 9	E= 5

Defensive Contexts:

An examination of the network of contexts used by the examinee reveals the most frequently recurring ones, notably repressive contexts, especially phobic defenses (CI-1 = 24, CI-2 = 7), followed by control contexts (A3-1 = 11, A3-4 = 1). Other contexts appear with moderate frequency, either within the same phobic register (D3 = 7, D1 = 2) to reinforce it, or as cognitive defenses (CF-1 = 3, CF-2 = 1), and narcissistic contexts (CN-2 = 2, CN-3 = 2).

1. Phobic Contexts (CI = 32):

The examinee overused CI-1 and CI-2, which indicate difficulty engaging with the material and forming coherent ideas. Frequent verbal pauses appear in every card, acting as breaks to either continue the same image or dissociate images from emotions. A tendency toward partial refusal (5) or total rejection (cards 6BM, 7BM, 10, 11, 19) reveals heightened sensitivity to these cards. These contexts serve to distance and soften the underlying conflict. Remaining phobic contexts support this avoidant and withdrawn attitude in the face of internal tension.

2. Obsessive Contexts (A3 = 12):

Marked by repetitive rumination and verbal hesitation (A3-1), present in most cards. This reflects compulsive repetition and doubt as an attempt to cling

to one idea to avoid conflict and manage helplessness. These are accompanied by hesitation between interpretations, revealing inner conflict between instinctual drives and defenses. This remains internalized and is managed by invoking other defenses—especially control mechanisms—such as isolation (A3-4).

3. Narcissistic Contexts (CN = 5):

These appear through focus on personal experience (CN-1) and idealized or self-referential details (CN-3). They function as withdrawal responses when the examinee cannot face anxiety or conflict, especially in cards related to loneliness and loss (e.g., 3BM, 1). These are reinforced by related contexts (CN-2).

4. Primitive Contexts (E = 5):

Their scarcity shows an attempt to suppress fantasy material and avoid overt conflict. Nonetheless, some minimal references to negative content appear, such as persecution themes in card 5, or inappropriate stimulus-response matching (E2-1) in card 1, and spatiotemporal disintegration (E3-3) in card 16. These reflect a lack of stable narrative structure and may suggest a fragile psychic organization.

5. Cognitive/Reality-Bound Contexts (CF = 4):

These show through a focus on everyday events (CF-1, CF-2), attempting to strip stories of fantasy tone. However, this is often a defensive distortion, with unconscious content still influencing the story but not successfully represented. Similar functions are served by externalizations (D3, D1) to avoid activating deep anxieties (e.g., in card 11).

6. Absurd/Fantasy Contexts (B = 2):

These are nearly absent, with only one instance of adding characters not present in the image (B1-2) in card 12BG—interpreted as an unstructured displacement of loss into physical form, rather than emotional presence. This reveals difficulty in imagining the other as a stable internal object. Although the expression in card 4 was short and flattened, one instance of emotional expression (B1-3) signals the possibility—albeit fragile—of naming emotions, even if the source of anxiety remains unclear.

General Conflict Dynamics:

The intensive and simultaneous use of repressive and control-based contexts reveals varied psychological organization. In every instance, the

examinee tries to avoid and resist the stimulus's latent cues, maintaining ambiguity in its psychological use.

The examinee relies on inhibition and avoidance to avoid mentally engaging with conflict, choosing a withdrawn, pre-genital position where fusion, immaturity, and fear of instinctual danger dominate. This results in undeveloped psychic structure, passivity toward objects, and vulnerability to fantasies of persecution.

At the same time, the examinee attempts to access a slightly more organized level by invoking control mechanisms—not as tools for transforming anxiety into symbol, but as rigid limits meant to restrict imagination. However, this remains weak and temporary, showing no real capacity to think through conflict, only the desire to evade it.

In this framework, control functions as a false stabilizer, acting as a defensive curtain shielding the self from instinctual collapse—but without the strength to symbolically restructure experience.

The core issue in the discourse is a tension between primitive inhibition and anxious control, where conflict is reduced to withdrawal or defensive response, blocking the emergence of mature, imaginative relational dynamics. What recurs is the absence of explicit relational representations, replaced by defensive positions that either eliminate or marginalize the other—via denial or emptiness of meaning.

This recurring withdrawal, at times accompanied by disjointed insertions or thematic flattening, points to an inability to form stable symbolic relationships with internal objects. The self does not engage with the object but empties or distorts it through a stylized, narcissistic, reality-based narrative.

Thus, Mika is positioned within a pre-oedipal psychic structure, shaped by pre-genital, withdrawn references, where differentiation cannot stabilize, and relationship content remains hostage to anxieties of castration, loss, or exposure, without symbolic transformation.

Summary of Rorschach And TAT Findings:

Mika's projective protocols from both the Rorschach and T.A.T tests reveal significant disturbances in the process of individuation and autonomy. In the Rorschach, the limited number of responses ($R = 7$) and the high rate of card refusals indicate a clear tendency toward psychological withdrawal and inhibition. This defensive stance reflects difficulty in engaging with internal material, a fear of exposure, and a fragile sense of self-boundaries. His

responses rely exclusively on form, with no presence of color or emotional determinants, which suggests a rigid, over-controlled cognitive style that avoids emotional expression and inner experience. The absence of human content and the dominance of animal and anatomical imagery reveal a primitive level of relational representation, where others are not symbolized as differentiated human figures, but rather reduced to instinctual or fragmented forms. These features highlight Mika's struggle to form integrated and autonomous internal representations of the self and others.

In the T.A.T, Mika's stories are sparse, repetitive, and emotionally flat. The content is dominated by themes of withdrawal, inhibition, and refusal, with little evidence of relational or emotional elaboration. His narratives frequently bypass the relational conflicts typically stimulated by the cards, especially those involving parental figures. Scenes that evoke maternal or paternal dynamics are often rejected, distorted, or emotionally neutralized, indicating unresolved early conflicts and a refusal to symbolically engage with themes of separation, desire, or loss. The overall tone of the stories lacks emotional depth and continuity, showing an inability to represent inner conflict or to structure affectively meaningful relationships. This is consistent with a pre-Oedipal fixation, where the internal world remains undifferentiated and dominated by primitive defenses.

Taken together, the findings from both tests suggest that Mika exhibits a fragile and underdeveloped sense of individuation. There is a marked difficulty in achieving psychological separation from primary objects and in constructing a stable, autonomous identity. His defensive functioning relies heavily on avoidance, suppression, and denial, reflecting deep anxieties around differentiation, loss, and self-cohesion. These elements point to a core impairment in the individuation-autonomy process.

Summary of Mika's Case:

Mika scored highly on the Young Schema Questionnaire in unrelenting standards, social isolation, and defectiveness/shame. These indicate a perfectionistic, rigid, and self-critical inner system. He withdraws socially and suppresses emotion to avoid feelings of inadequacy unless meeting high standards. The EDE-Q showed high restraint in eating, significant body dissatisfaction, and obsessive concern with shape and control. These behaviors function as a symbolic extension of his need for emotional control and fear of failure.

In the Rorschach, Mika exhibited cognitive rigidity, weak affective contact, and reliance on intellectual defenses. He gave overly structured responses, showed poor emotional engagement, avoided fantasy, and showed no human content, suggesting a difficulty with symbolic thinking. His TAT responses were emotionally flat, centered on performance, duty, and suppressed conflict. Themes of internal void, isolation, and rejection recurred, reflecting deep unmet needs and suppression of emotional experiences.

In the individuation-autonomy process, the projective tests revealed a marked detachment from affective identity and relational representations. Mika fails to symbolically process separation or assert personal agency. He defines himself through control and achievement, not authentic expression, showing impaired individuation and reduced autonomous functioning.

Second Case Ayato:

1- Results of The Eating Disorder Examination (EDE-Q):

Table (8): Displaying EDE-Q results for the first case Ayato

Questions	Subscales	Degrees
1-2-3-4-5	Restraint	5.60
7-9-19-20-21	Eating Concern	3.20
6-8-10-11-23-26-27-28	Shape Concern	4.50
4-8-12-22-24-25	Weight Concern	4.60
Overall Score		4.47

Table Commentary:

1. Restraint (5.60)

- Highest score among subscales, showing extreme dietary restriction behaviors.
- The individual likely follows strict food rules, skips meals, or fasts regularly, common in anorexia nervosa (restrictive type).

2. Weight Concern (4.60)

- Reflects obsessive worry about body weight, fear of gaining weight, and frequent weighing.
- A core feature in anorexia, bulimia nervosa, and binge-eating disorder (BED).

3. Shape Concern (4.50)

- Indicates significant distress about body shape, possibly with body-checking or avoidance behaviors (e.g., mirrors, certain clothing).
- Often linked to body dysmorphia and eating disorder severity.

4. Eating Concern (3.20)

- Suggests moderate anxiety around eating, including guilt after meals or fear of losing control.
- While lower than other subscales, it still points to disordered eating thoughts.

Clinical Implications:

The profile reveals severe eating disorder symptoms, with restriction and weight/shape concerns being most prominent.

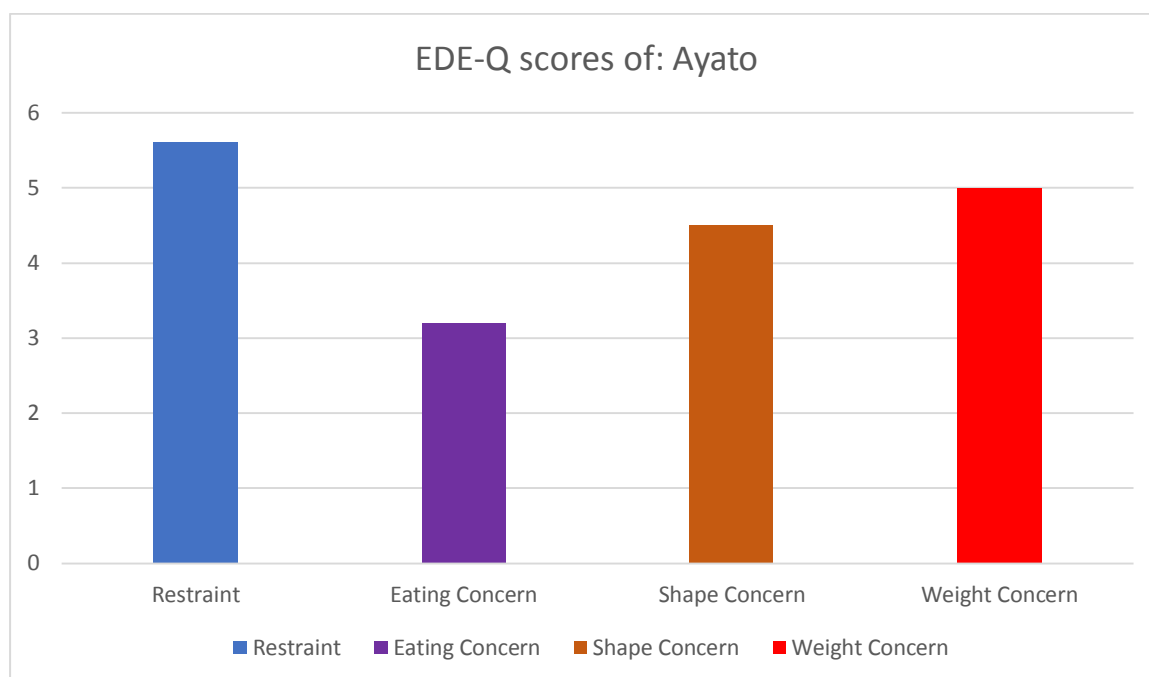


Figure 4: displaying the results of the EDE-Q Subscale scores of Ayato

2-Clinical Interview:Psychodynamic Case Report: "Ayato"

1. Personal History and Developmental Conflicts

Ayato was born in M'sila, a city in which both his parents are native residents. He describes his childhood as ambivalent—containing both positive experiences such as play, and negative ones centered on familial conflict. According to psychodynamic theory, such early relational ambiguity often lays the groundwork for later affective instability and internal conflict. His claim that adolescence was "better" may reflect not only a less conflictual environment but also the development of ego defenses capable of coping with unresolved early anxieties.

2. Academic Performance and Inhibitions

Ayato's academic record reveals an initial trajectory of success that deteriorates as he advances: high performance in middle school (grades 16–17) declines in secondary school (grades 9–11). While he attributes this to inexperience and youth, this suggests a symbolic regression—possibly an unconscious reaction to rising internal conflict, expectations, or perceived inadequacies. The reported procrastination and initiation difficulties are

indicative of ego inhibition and potentially unconscious resistance fueled by perfectionistic superego standards.

3. Parental Relationships and Internalized Objects

Ayato's father is described as easily angered and physically punitive, yet financially generous. His mother is emotionally reactive, especially when encountering disorder. These dynamics reflect a split internal object world, wherein caregivers are experienced as both critical and supportive—leading to confusion and ambivalence in the subject's emotional life. The father likely forms the prototype of Ayato's punitive superego, while the mother instills a demand for order and control.

Though Ayato claims his relationship with both parents has remained unchanged, this stasis may signal emotional stagnation or repression rather than true continuity. His neutral stance "neither parent dominates" may mask a deeper conflict about authority and emotional dependence. Psychoanalytically, this suggests ambivalent attachment and unresolved Oedipal residues.

4. Sibling Dynamics and Narcissistic Injuries

With three brothers and one sister, Ayato's sibling relationships are marked by competition, invalidation, and emotional distance. He reports that his family often sees him as "a failure," despite his belief in his own competence "I do things better than them." This discrepancy hints at narcissistic vulnerability and a compensatory ideal ego structure, as described in Kohutian self-psychology. His isolation from siblings and the emotional volatility in these relationships parallel his broader difficulty with emotional trust and expression.

5. Physical and Somatic Symptoms

Ayato's height and weight are within normal limits, and he reports no chronic illness. However, his experiences of sleep paralysis, non-restorative sleep, and disturbing, recurrent dreams (e.g., being chased, falling) reflect unconscious conflict and ego-superego tension. The paralysis episodes suggest a metaphorical immobilization—caught between unconscious impulses and the paralyzing weight of internalized expectations. These symptoms serve as somatic expressions of repressed emotional states, aligning with the psychoanalytic understanding of conversion and displacement.

6. Pregenital Traits: Order, Cleanliness, and Control

Ayato shows strong anal-retentive traits: he values cleanliness, order, and is disciplined in money matters. These features likely serve as a defense against inner chaos and emotional unpredictability—an effort to master what could not

be controlled during early development. His preoccupation with neatness and budgeting further reflects a need to assert control in an affectively unstable world, potentially shaped by critical parental attitudes.

7. Emotional Repression and Superego Harshness

Ayato openly admits he does not like to express emotions and finds no one suitable to share them with. This emotional closure reflects deep repression and suggests that any expression of vulnerability might threaten his fragile psychic equilibrium. His self-judgment ("sometimes I scream, sometimes I talk too much") and need to affirm value ("I'm not stupid") suggest the operation of a harsh superego that reinforces shame and doubt while permitting only limited ego validation.

8. Social Avoidance and Object Relations

Ayato reports having only one close friend and prefers solitude, often walking alone or reflecting on past decisions. He avoids engaging deeply with others and cuts off relationships at signs of betrayal. These patterns are consistent with avoidant object relations, marked by withdrawal to protect the self from further injury. While this strategy may reduce anxiety, it also deprives him of authentic relational nourishment and reinforces internal object poverty.

9. Oneiric Life and Unconscious Themes

Ayato's dreams—repeatedly involving being chased or forced to jump—point to deep-rooted anxieties and symbolic reenactments of internal danger. These dreams often awaken him in distress, indicating dream work failure where repressed material breaks through the ego's defenses. The aggressive content (chasing dogs) and fall imagery may symbolize persecutory guilt or fear of superego punishment.

10. Self-Image and Ego Integrity

Ayato's self-description combines emotional volatility (anger, anxiety) with intellectual self-protection ("I'm not stupid"). This oscillation suggests a conflicted ego, caught between striving for competence and feeling inherently flawed. His defensive stance—asserting intelligence while denying emotion—may reflect an identity still being negotiated under pressure from both internalized ideals and critical self-representations.

Psychodynamic Summary

Ayato exhibits a neurotic personality structure, with strong elements of pre-genital fixation (oral and anal stages), harsh superego dynamics, and

ambivalent internalized object relations. His psychic defenses—particularly repression, isolation, and withdrawal—serve to protect a vulnerable ego from emotional overload and relational disappointment. His somatic symptoms and dream life offer further insight into latent conflicts that are yet to be worked through consciously.

3- Results of Young's Early Maladaptive Schemas Questionnaire (Short Version):

Table (9): Displaying YSQ-SF results for the second case Ayato

Number	Dimensions (Schemas)	Degrees
1-5	Emotional Deprivation	16
6-10	Neglect/Instability	7
11-15	Mistrust/Abuse	18
16-20	Social Isolation	15
21-25	Feelings of Inferiority/Shame	5
26-30	Failure	11
31-35	Dependence/Incompetence	7
36-40	Fear of Illness or Danger	16
41-45	Enmeshed Relationships	6
46-50	Subjection	7
51-55	Self-Sacrifice	7
56-60	Excessive Emotional Control	9
61-65	High Standards	19
66-70	Control	12
71-75	Lack of Emotional Self-Control	18
	Total Score	173

Young's Early Maladaptive Cognitive Schemas:

The total score: 2.30

The total score falls within the range of 1.6-2.4 on the Likert scale, which, according to the scale's interpretation, indicates that the schema affects some circumstances.

Table Commentary:

From the table, it appears that the core schemas in shaping the subject's personality were as follows:

The High Standards Schema ranked first with a score of (19), and then it's followed by **the Lack of Emotional Self-Control, Mistrust/Abuse** schemas with a score of (18).

As for the schemas that play an important role in the subject's life, they are as follows:

The Fear of Illness or Danger, Emotional Deprivation schemas ranked equally with a score of (16), followed by **Social Isolation** schema with a score of (15).

The schemas that present a problem for the subject were as follows:

The Control schema ranked with a score of (12), followed by **the Failure** (11), and right after comes **Excessive Emotional Control** schema with a score of (9).

The schemas that play a significant role in the subject's life are as follows:

The **Neglect/Instability, Dependence/Incompetence, Subjection, Self-Sacrifice** schemas ranked equally with a score of (7), followed by **Enmeshed Relationships** schema with a score of (6), and finally **Feelings of Inferiority/Shame** schema with a score of (5).

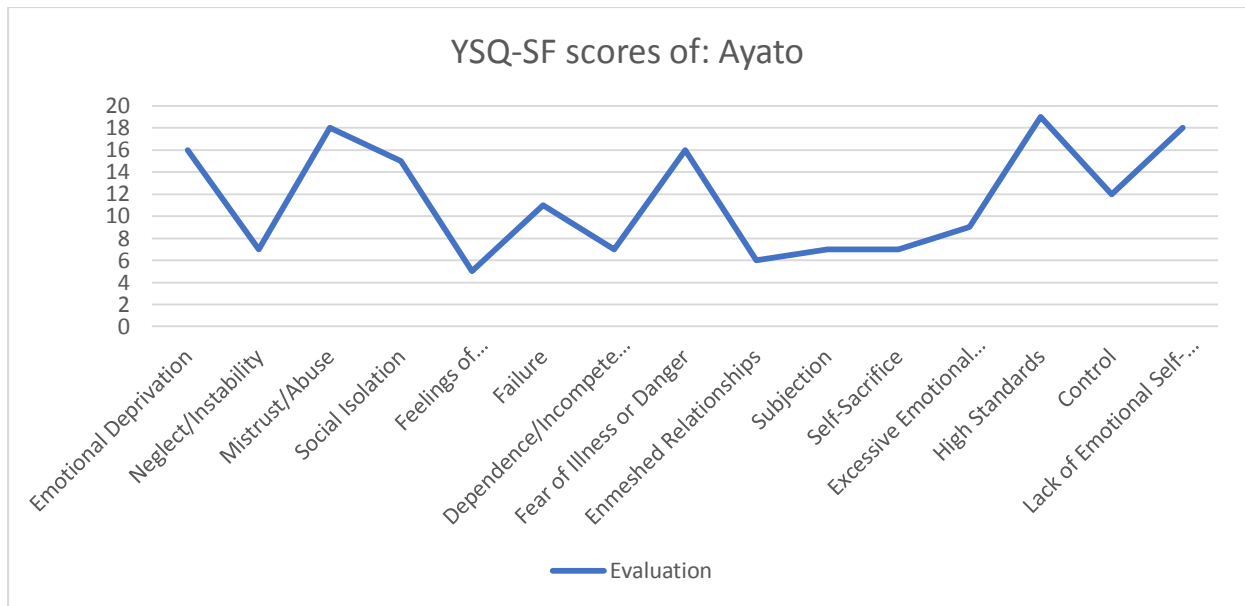









Figure 5: displaying the results of the YSQ-SF evaluation of Ayato




4- Presentation and Analysis of Ayato’s Rorschach Protocol Results:

Protocol Results:

Cards	Responses	Inquiry	Coding
Card I 	12s - 2:02m 1-A woman with wings... as if it's a woman who has wings... raising her hands 2-A wolf	“There’s her head, here are her hands raised, and these are wings.”	1- Dd14 Dd 13 Kp- H 2- Dd F- A Choix +
Card II 	13s - 3:23m 3-A bear 4-A small baby, an infant 5-A chicken's or rooster's head 6-A rabbit, a rabbit's head 7-Like two people clapping their hands together	This is the bear and this is + a gorilla - R+ D FC’- A This is a rabbit, and this is also a rabbit’s head, but it's puffing (blowing air) R+Dd Kp- A Here are people they are raising their hands	3- D F+ A 4- D F- H 5- Dd F+ Ad 6- Dd F Ad 7- Do Kp+ Hd

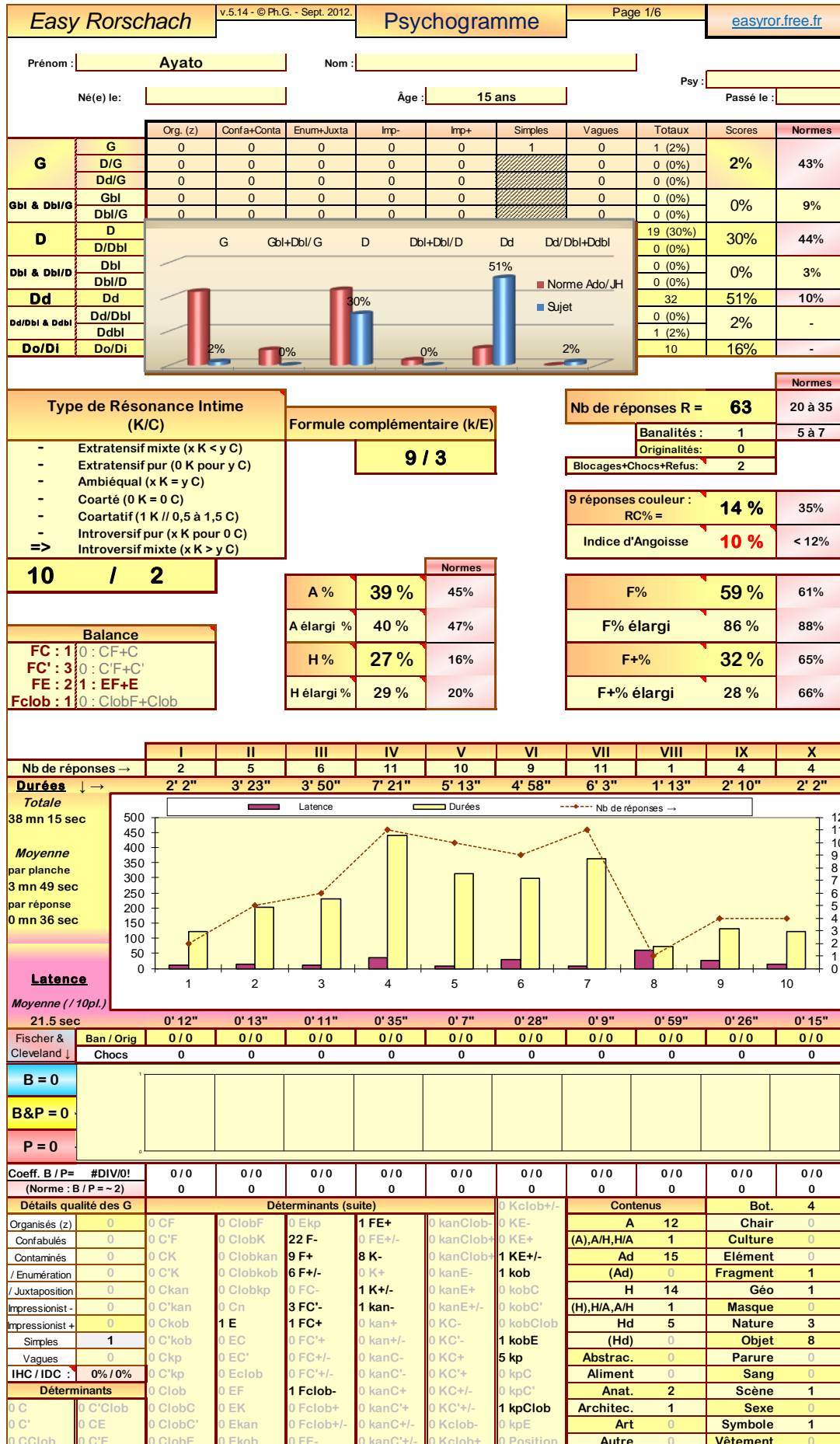
		R+Dd Kp- H Two people slapping their hands together, I only saw their hands	
Card III 	11s - 3 :50m 8-A scary person's face or someone screaming 9-A monkey like this 10-A sword 11-A tree branch 12-A horse 13- A sickle	this is a monkey and this is a monkey + the head of an old woman R + Dd Fclob- Hd A fish R + Dd F- A	8- D4 Kpclob ⁺⁻ Hd 9- D F ⁺ A R. Sym 10- D F ⁻ Obj 11- D F ⁺ Bot 12- Dd F ⁻ A 13- Dd F- Obj Choix-
Card IV 	35s - 7 :21m 14-A human face 15-Like a ram with horns 16-A sword between two mountains 17-A girl bending over a mirror 18-There's an animal's head but I couldn't identify it 19-A scorpion's tail 20-Like a person peeking from one eye, hiding and watching 21-Someone shouting 22-A human hand 23-A crow's head 24-A frog's head... a goat, a goat	+ Eagle head R + Dd F- Ad + Camel head R + Dd F- Ad	14- Dd F- Hd 15-Dd12 F- A 16- Do F- Obj/Pays 17- Ddo K _{ref} - H 18- D F ⁺ Ad 19- D F ⁻ Ad 20-Dd K _{st} - H 21-Dd K ⁻ H 22- Dd F ⁻ Hd 23- Dd FC ^{'-} Ad 24- Dd F ⁺ A Choix-
Card V 	7s - 5 :13m 25-A person with a wing 26-A crocodile, a crocodile's head 27-Like a bird opening its beak, the	a person with wings + An ant's head	25- Do F ⁺ (H) 26- D F ⁺ Ad 27- D Kp ⁺ Ad 28-Do FC ^{'-} Ad 29- Do F ⁻ H/obj 30- D F ⁺ Geo 31- Dd Fclob ⁻

	<p>kind that flies... a sea bird</p> <p>28-An ant</p> <p>29-A veiled woman wearing a niqab</p> <p>30-A mountain</p> <p>31-A tree branch without leaves</p> <p>32-A person with a beard opening his mouth</p> <p>33-Someone hitting with a sword</p> <p>34-A bird</p>		<p>Bot</p> <p>32- Ddo kp- H</p> <p>33- Do K⁻</p> <p>H/Obj</p> <p>34- G F⁺ A Ban</p>
<p>Card VI</p> 	<p>28s - 5 :16m</p> <p>35-Grass</p> <p>36-A person as if hitting</p> <p>37-A duck's head</p> <p>38-A dragon's head</p> <p>39-A butterfly, butterfly wings</p> <p>40-A goose's head</p> <p>41-A five-pointed star</p> <p>42-A sword stuck in a tree... or a rock... embedded</p> <p>43-A mouse's head</p>		<p>35- Dd F⁻ Bot</p> <p>36- D K⁺ H</p> <p>37- Dd F⁻ Ad</p> <p>38- Dd F⁻ (A)</p> <p>39- D F⁺ Ad</p> <p>40-Dd F⁻ Ad</p> <p>41- D F⁺ Geom</p> <p>42- D kob_{st}⁺ Obj</p> <p>43- Dd F- Ad</p>
<p>Card VII</p> 	<p>9s - 6:03m</p> <p>44-Butterfly</p> <p>45-A human head</p> <p>46-A dog's head and neck</p> <p>47-Smoke</p> <p>48-An elephant, an elephant's head</p> <p>49-A bull standing on two legs...</p> <p>50-Mountains with a river between them</p> <p>51-Someone climbing</p>	<p>A person walking with smoke behind them</p>	<p>44- D F⁺ A</p> <p>45- Dd F-Hd</p> <p>46-Dd F- Ad</p> <p>47-Dd E- Frag</p> <p>48- D F⁺ Ad</p> <p>49- Dd Kan- A</p> <p>50- D FE⁺ Pays</p> <p>51- Ddo K- H/Pays</p> <p>52- Dd Kp- A</p> <p>53- Ddblo K- H/arch</p> <p>54- D KE⁺-</p>

	<p>a mountain</p> <p>52-A snake with its mouth open</p> <p>53-A person walking between two walls in a narrow place</p> <p>54-A person with fog behind them</p>		H/Obj
<p>Card VIII</p> 	<p>59s - 1:13m</p> <p>55- Something being torn... fabric</p>		<p>shock from the colors.</p> <p>55- D</p> <p>KobE_{cl}ob+-Obj</p>
<p>Card IX</p> 	<p>26s - 2:10m</p> <p>56-A fish</p> <p>57-An old woman chasing a small child</p> <p>58-A monkey's head</p> <p>59-A white dove</p>		<p>56- Dd F- A</p> <p>57- Dd K- H/ Scene</p> <p>58-Dd F- Ad</p> <p>59- Dd FC' - A</p>
<p>Card X</p> 	<p>15s - 2:02m</p> <p>60-Coral</p> <p>61-A skull with two horns coming out</p> <p>62-Fishes</p> <p>63-A person standing on their hands, crawling</p>		<p>60- D FC+ Bot</p> <p>61- D F- Anat</p> <p>62- Dd F+- A</p> <p>63- Dd K - H</p> <p>Choix +</p>

CHOICES + (I.X)

CHOICES - (IV.III)



General Analysis of Ayato's Protocol:

Time and Productivity:

The examinee's productivity was marked by notable quantitative richness, providing 63 responses over a total duration of 38 minutes and 15 seconds, averaging 36 seconds per response.

However, this quantitative richness reflects a dysregulated flow or disturbance in inhibition and psychological control mechanisms, especially since it was associated with distorted perceptions (22F-).

The simplicity and lack of richness in responses show the examinee's tendency to avoid engaging deeply with the task, instead approaching it distantly. This appears in short, fragmented answers and in naming the form without exploring the imaginal dimension through description or commentary.

Repeated hesitation and revisiting the cards indicate anxiety and discomfort with the material. The verbal style is clear, with a tendency toward brevity and verbal restraint, expressed as "as if."

The protocol shows repeated answers such as "mountain" in cards V and VII and "sword" in cards IV, V, and VI. These phallic answers indicate castration anxiety. Persistence in responses like "woman... raising her hands" in card I and "here you have people raising their hands" in card II suggests withdrawal and loss of communication. No card rejections were recorded in the protocol.

Cognitive Contexts:

The processing of perception patterns indicates a weakness in the ability to join reality, as shown by the near-complete absence of comprehensive (G) responses, which are familiar (2%) on one hand. On the other hand, there is a lack of coherence in their quality, as the only comprehensive response in the protocol appeared distorted (1G) in card (V) in the form of a "bird," reflecting the ego's difficulty in perceiving the whole and unifying it into a coherent representation. It also often reflects a narcissistic tension fluctuating between the desire for release and the anxiety of fragmentation. The symbolism of the "bird," although apparently light, hides an internal struggle about self-stability and the total representation of the self.

The large partial response (D) in the protocol came at a rate of (30%) consistent with the norm (59% - 29%), in an attempt by the examinee to demonstrate adaptive abilities with reality, which is often reflected by its

association with the positive formal determinant (+DF11). It also reflects good adaptation and clinging to reality.

Small partial responses (Dd) dominated the protocol at a rate of 51%, exceeding the norm (2% – 18%) as the examinee's preferred perception pattern, reflecting a perceptual tendency to avoid contact with the symbolic whole of the stimulus, preferring deconstructive processing as a defensive mechanism against internal exposure. This reveals difficulties in maintaining a coherent perceptual representation and reflects a breach in the ego's perceptual control. The Dd responses were random and showed confused thought movements; this was evident in the strangeness of extracted locations and the poor quality of form (29DdF-), reflecting a thinking pattern lacking shareable organizational references and highlighting a failure in primary identifications. They also express the examinee's paranoid and persecutory concerns.

The protocol shows the presence of inhibitory partial responses (Do/3Ddo/1Ddblo6) in rare parts of the blot, often linked to distorted perceptions (8F-), reflecting emotional inhibition processes as an indicator of affective restriction and symbolic perceptual distortion, which often reflects internal conflict or fear of losing control.

In the determinants, formal responses (F) dominated at 59%, consistent with the norm (78% - 44%), indicating a clear tendency to control the projective material. This is also indicated by the (Felar=86%) rate, where the examinee prefers to hold on to the apparent form of the blots rather than engaging in their symbolic meanings. This reflects a perceptual style characterized by restraint and psychological discipline, referring to strict internal censorship that limits the flow of imagination and instinctual drives. This prevents the emergence of the hallucinatory or libidinal world, but this censorship failed to control completely, as seen in the thought slips (22F-) from a profound imbalance in symbolic psychological equilibrium, where the ability for coherent representation is absent, and tension appears between the desire for control and unconscious release.

These responses express an accumulation of primary psychological conflicts, which find their outlet in the blot without sufficient symbolic filtering. This indicator may signal a relative fragmentation in ego functioning and weakness in symbolic and affective processing operations. It also appears in sensory impressions (FC3) that came with a negative formal quality (3FC-) with a melancholic tone in both panel (II) in the statement "And this is a gorilla," and in panel (IV) "Crow with crow's head," and in panel (V) "Ant," reflecting the examinee's depressive tendencies. Also, the formal predominance in the

responses (1FE.3FC.1KE) is evidence of the will to control impulses and regulate them.

Conflict Dynamics

A mixed introversive regression pattern (L'introversif Mixte) was recorded due to the minimal presence of color responses in the protocol compared to the dominance of human movements (9k/2c). This also appears strongly (20K/3E) in the secondary equation (F.sec), reflecting clear tendencies toward internal focus and mental activity at the expense of emotional openness and direct sensory interaction with reality. It also reflects the inhibition, closure, and high control the examinee imposes on impulses.

There is a large presence of human movements (K) in the examinee's protocol (8K) at an estimated rate of (15%), often linked to distorted perceptions (8K-). For example, in cards (IV) and (IX), they express themes with a clear persecutory nature, embodied in a disguised and lurking figure "one working peeks with one eye hidden" in card (IV), and a chasing figure "an old woman chasing a small child" in card (IX). This repetition of representing the other as watcher or threat reflects a relational structure marked by anxiety and exposure. It reveals internal conflicts revolving around control, surveillance, and threat either from outside or from internal subjective components (a harsh superego, persecutory maternal representations). These images dynamically express fragility in psychological boundaries and difficulty in building a secure relationship with others.

Also, representations such as "one strikes with a sword (V)" or prepares to strike "one working diamond like this working strikes" indicate a symbolic representation of an aggressive act directed within a projective position expressing internal conflict. In card V, the act reflects an unconscious desire for resolution or control within a tense narcissistic context, while in card VI it appears as a defense against an obscure internal stimulus or one heavily charged emotionally. This repetition points to a psychological structure seeking to regulate tension through identification with power or aggression, with the possibility of strict paternal representations or a fragmented self-image requiring reconstruction through action.

The examinee's responses in card VII show human kinetic representations (K) of a conflictive nature, reflecting unconscious attempts at disengagement, liberation, or confrontation with relational pressure. Climbing in "one climbs a mountain," passing between walls in "a person working walks between two walls in a narrow place," and "a person behind whom there is fog"

form a symbolic sequence expressing a psychological path burdened by attempts to overcome a suffocating or insufficiently nurturing maternal relationship. The projected dynamic here suggests fragility in psychological differentiation, tension between the need for integration and fear of dissolution, reflecting a disturbed relational structure centered on an insecure maternal theme.

In minor kinetic responses, human partial movements dominate (6Kp), mostly with negative and distorted perceptions (4Kp-), carrying representations of physical affect and ineffective emotional exposures. For example, in card (I), the examinee gave a response of type KpF- depicting a woman with wings raising her hands. This representation carries clear narcissistic symbolism, showing an imaginary identification with an ideal feminine figure characterized more by stillness and exposure than action or control. It reflects internal activity around self-positioning, between emotional identifications and the search for containment. The negative movement (kp) also suggests fragility in symbolic initiative, a desire for recognition within a still-forming self-image.

“Two people clapping hands” in card (II) indicates an unresolved conflict that does not transform into direct action but remains in a circle of ambiguous interaction. The “open mouth” in card (V), whether on the bird or the bearded man, expresses a repressed desire to receive without the ability to act. The sequence ends with “a snake opening its mouth” in card (VII) as a symbol of ambiguous feminine threat. This repetition in kp responses dynamically translates into a self-image that receives and is affected but lacks agency. It reflects a sensitive narcissistic structure threatened by exposure, seeking recognition without risking interaction. The examinee’s position between the desire for integration and anxiety about dissolution shows fragility in psychological boundaries and a deep conflict between identification and containment. The failure to perceive the human in its complete image reflects fear of encounter as avoidance of the imitative image.

Responses of type (clob) appear to express fears around ambiguous topics, but the dominance of judgmental tendencies in these fears (4Fclob) relatively limits their release, keeping them repressed and emerging as phobic symptoms. Their association with negative formal or symbolic content (4Fclob-) reveals a projective structure sensitive and charged with disguised emotions. Although the form is perceptually controlled, what is projected carries a fragile or deteriorated physical character: a frightened face, an old woman, a dead branch, torn cloth... all symbols of internal exposure, loss of containment, or emotional decay.

5- Presentation and Analysis of Ayato's Thematic Apperception Test (T.A.T):

Card 1:

"31'... his Family beat him, so he went and sat alone... sitting and contemplating. 36"

Contextual Dynamics: After a long initial latency period (CI1), he began his narration in an undefined form (CI2), evoking the theme of persecution (E2.2), remaining self-sufficient (CN1), and emphasizing internal conflicts (A2-4).

Latent Issue:

The examinee's response reflects a clear representation of childhood helplessness, which is central to the card. The child appears as a victim of familial violence, indicating a sense of inadequacy and threat in the face of a harsh paternal authority. This reactivates castration anxiety and feelings of insecurity.

Solitude and contemplation suggest a retreat into the self. They indicate primitive defense mechanisms such as withdrawal and dissociation, due to an inability to symbolically process loss or confront conflict. The response also shows fragile Oedipal structure and weak identifications. These factors hinder the formation of a stable psychological identity and reduce adaptive capacity.

Card 2:

15' ...she ran away from her home to study... ran like from a farm... oh, she went to study... to learn.

Contextual Dynamics: After a period of silence (CI1), he begins his undefined narrative (CI2) by presenting an action detached from emotional content (B2.3), followed by repetition (A3.1), then a verbal hesitation or reservation (A1.3), followed again by repetition (A3.1), all within a framework of constructing the unknown (CI2).

Latent Issue:

The subject's narrative about "running away from home" reflects a symbolic attempt to detach from the familial structure, specifically the oedipal triangle. However, this separation is defensive in nature—an escape rather than a mature disengagement—which suggests unresolved dependency and emotional conflict.

The emphasis on "learning" and "reading" reveals a sublimation of libidinal energy toward intellectual goals. This indicates a compensatory strategy to bypass oedipal tensions by redirecting desire into socially acceptable forms of self-development.

Yet, the absence of any reference to emotional bonds, attraction, or rivalry points to a repression of sexual and oedipal content. This repression likely operates through denial or displacement, signaling a defensive psychological style that avoids direct engagement with inner conflicts.

Such a pattern suggests a fragile ego structure, relying on retreat into thought and learning rather than confronting interpersonal or intrapsychic tensions directly.

Card 3BM:

"35 'He was playing and fell.'

Contextual Dynamics:

After a long latency period (CI1), in a simplified passive narrative (CI2), the subject shows denial (A2.3) in a narrative inappropriate to the stimulus (E2.1), with a general tendency to omission (CI1)."

Latent Issue:

The subject's response reflects a superficial and fragmented representation of the core issue in the card, which revolves around the depressive state and the capacity for symbolic representation of loss and grief.

The reduction in the narrative indicates a lack of emotional and meaningful connection with representations of loss. The physical situation is interpreted merely as a physical fall during play, showing the use of a defensive mechanism of dissociation or simplification. This pattern may indicate difficulty in acknowledging depressive feelings or grief related to a symbolic loss or failure. It reveals a psychological structure resisting entering a mourning state through denial or minimizing the emotional meaning of the scene.

Thus, the response reflects an inability to link physical representations with the underlying emotional state, which may suggest a regression or deficiency in the capacity to process loss or to invest in new symbolic alternatives.

Card 4:

"17 '...They fought, so he left the house... and she followed him.'

Contextual Dynamics: After a long silent pause (CI1), the subject mentions unknown characters in an undefined conflict (CI2), follows them silently within the story (CI1), continues the narrative in a passive construction (CI2), representing an action unrelated to an emotional state (B2.3), with a general tendency to omission (CI1).

Latent Issue:

The subject's response clearly represents the card's issue, which centers on the tense emotional relationship marked by a duality of love and aggression. The visible conflict ("they fought") reflects the activity of two opposing drives: aggression and attachment.

The man leaving symbolizes separation or abandonment, activating anxiety about loss and rejection, and the woman following him reveals desperate clinging and refusal to accept separation, indicating unbalanced attachment.

The response shows a psychological structure sensitive to loss and separation, with difficulty detaching from the theme of love. This aligns with an unresolved Oedipal dynamic and clinging to the original object despite pain. Therefore, the response indicates anxious and fragile attachment patterns, fluctuating between attachment and aggression, and difficulty symbolizing feelings of separation maturely.

Card 5:

"1:01' ...She looks at her son... she looks at her son or her daughter. 1:06"

Contextual Dynamics:

After a long initial latency period (CI1), the subject begins a passive narrative (CI2), representing an action unrelated to an emotional state (B2.3). The subject introduces people not present in the scene (B1.2), focusing on relationships between them (B1.1). The narrative fluctuates between different interpretations (A3.1) with a general tendency to omission (CI1).

Latent Issue:

The response shows a controlling maternal image reflecting a protective function while avoiding complex emotions like curiosity, intrusion, or threat. This suggests repression or denial of the emotional burden linked to intrusion or spying scenes. It indicates a psychological structure that evades Oedipal conflict by adopting an idealized, neutral maternal image, with no signs of guilt, curiosity, or conflicting feelings. This may reveal defense mechanisms based on denial or adaptive escalation, or a psychological organization where the mother-

child relationship has not undergone sufficient symbolic questioning or breakdown.

Card 6BM:

"18' ...Two or one? I have two stories...

Examiner: As you like.

Examinee...An old woman throws something during the lesson while he is attending...Or maybe his mother... he is going somewhere... he came to say goodbye to her as he went to work somewhere.

1:00"

Contextual Dynamics: After an initial silent pause (CI1), the subject expresses a need to ask a question (CI3). Then begins a narrative with unidentified characters (CI2), focusing on daily life (CF1) in a context inappropriate to the stimulus (E2.1). This is followed by a short pause (CI1), showing verbal caution (A3.1), emphasizing relationships between people (B1.1). Then the subject offers another interpretation (A3.1) representing an action linked to an emotional state (B2.3), followed by continued focus on the action (A3.1), reinforcing the daily life aspect (CF1).

Latent Issue:

The response reflects a defensive and implicit representation of the mother-son relationship within a context of emotional separation and quiet farewell, matching the card's core issue. The narrative shows a relationship between a young man and an older woman without overt tension but with disguised sadness and controlled affection, especially in the farewell scene. Calling the woman "his mother" suggests the subject recalls a real or imagined maternal figure, revealing strong emotional attachment calmly resisted. through the "work" context, indicating a mature attempt to detach without conflict. The absence of forbidden or internal conflict aspects, expected in Oedipal dynamics, points to repression or denial of unconscious desires or guilt linked to mother-son representations. This suggests a psychological structure prone to softening or defensive escalation in primary relationships.

Card 7BM:

"14'

... They are learning ... maybe they did an experiment and saw some observations ... they learn, study ... 30""

Contextual Dynamics:

The subject begins with a long initial latency (CI1) and proceeds with a passive narrative (CI2) about a topic unrelated to the stimulus (E2.1), focusing on daily life (CF1). After a pause (CI1), the subject continues cautiously (A3.1) with detailed descriptions (A1.1), then abruptly stops (A3.1) before reaffirming the daily action (CF1) and showing a general tendency to omission (CI1).

Latent Issue:

The response reflects a neutral representation of a relationship expected to be emotionally charged. The scene is cast in a neutral scientific framework, revealing a defense mechanism based on cognitive escalation. The answer lacks any indication of conflict or the emotional dual relationship between the characters, which, in latent content, represents the father-son dynamic with its aspects of identification or rivalry.

The subject transforms the relationship into one of "learning and experience," suggesting a displacement of emotional load toward psychologically safer areas. And the absence of emotional representations like closeness, desire, tension, or separation implies that the father relationship, symbolic or real, may be unclear or neutralized to avoid feelings of conflict or vulnerability linked to it.

Card 8BM:

"37' It didn't remind me of anything... nothing."

Contextual Dynamics: The subject shows a long latency (CI1) and then expresses rejection of the card (CI1) along with criticism (D3).

Latent Issue:

This represents a clear refusal to engage in interpreting the scene or even recalling a symbolic representation of it, indicating a regressive defense or strong avoidance.

The response reflects a deep denial or repression mechanism in the face of a scene that calls for intense Oedipal conflict or threatening aggressive fantasies, showing difficulty in symbolically processing violent instinctual content.

Card 10:

"1:08 '... She only gives her advice... her daughter keeps giving her advice... she keeps giving her daughter advice... to a woman 1:25"

Contextual Dynamics: After a long response time (CI1), the subject begins a passive narrative (CI2) with a story unrelated to the stimulus (E2.1), focusing on the positive function of the subject (CL3+). This is followed by a noticeable

pause within the story (CI1), then the subject resumes the narrative, emphasizing the relationship between the people involved (B1.1) followed by repetition or rumination (A3.1).

Latent Issue:

The card's content shifts from a marital or romantic relationship to a mother/daughter relationship dominated by educational and caregiving aspects. this shift appears as a defense mechanism.

It indicates the subject's difficulty connecting emotion with desire or reconciling sensory representations within relationships. there may be unconscious denial of perceptions linked to desire or physical closeness, replaced by an idealized image of the relationship.

Card 11:

11" ...A meteor hit the ground and... something fell from the sky... and... a mountain collapsed on two people who were climbing..." 26

Contextual Dynamics After a significant initial latency period (CI1), the respondent begins their narrative with a depiction of actions related to a disaster (B2.3), emphasizing with quantitative accuracy (A1.2) two unidentified persons (CI2) in a representation associated with a catastrophic scenario (B2.3).

Latent Issue:

The response reflects a strong and intense representation of a catastrophic scene embodying a state of disruption and collapse. the images used (meteor impact, mountain collapse) indicate deep activation of primal fears linked to loss, destruction, and the risk of psychological fragmentation. this scene expresses a psychological regression reflecting internal instability and severe tension.

The response also shows the use of primitive defenses such as projection and symbolic disintegration, where the internal reality transforms into an image of external violence and chaos that represents unresolved and unorganized psychological conflicts.

Card 12BG:

10' "...a place for someone who likes... to rest alone and work... aaa... contemplates as work." 23

Contextual Dynamics: After an initial latency period (CI1), the subject begins a passive-voice narrative (CI2), introducing a person absent from the scene

(B1.2), showing self-sufficiency (CN1) in a cautious manner (A3.1), focusing on internal conflicts (A2.4) with a general tendency toward brevity (CI1).

Latent Issue:

The subject depicts the place as a private space belonging to someone who loves solitude, indicating a strong need for isolation as a psychological refuge to escape external or internal conflicts. This voluntary solitude often reflects a desire to withdraw from relational or emotional tensions.

The use of the word "contemplates" suggests an attempt at self-reflection and introspection as a way to reorganize psychologically. This shows a tendency to restore inner balance after experiences of anxiety or emotional pain. The absence of characters and reliance on a still natural scene reflect a state of emotional emptiness or difficulty in recalling supportive internal figures or external psychological safety. This aligns with the latent theme of the card, linking the absence of emotional support to advanced psychological stages of lost security.

Card 13B:

9"... uh maybe he's watching children playing... or... maybe they're leaving their home... saying goodbye... in it... and maybe he's watching... looking at nature in front of him like that... or... saying goodbye to a relative who's leaving and left him..."⁴⁸

Contextual Dynamics: After an initial latency period (CI1), the subject begins with a passive construction (CI2), introducing people who are not present in the card (B1.2), in a representation of an act tied to emotion (B2.3). This is followed by a brief pause (CI1), after which he continues the narrative with a different interpretation (A3.1), then adds another interpretation (A3.1), again introducing other figures not present in the image (B1.2), representing acts related to emotion (B2.3).

Latent Issue:

The repeated imagery of farewell and abandonment reflects a sense of emotional loss and feelings of being left behind. This suggests internal fears of separation or rejection, which are central to the card's psychological theme—a test of one's capacity to endure solitude and vulnerability.

The focus on watching and saying goodbye implies the subject is experiencing the scene as an observer or someone passively waiting, rather than an active participant. This points to a sense of helplessness or resignation in the face of isolation, and it reflects an unstable relationship with familial presence or emotional support.

Card 19:

30' "... Someone built his house in isolation... and there were things surrounding it... around his house... there are dogs, wolves... a place with sheep and rams..."
42

Contextual Dynamics: After a long response latency (CI1), the subject begins a narrative in the passive voice (CI2), in a subjective impressionistic context (CN-1), introducing a character not present in the image (B1.2).

The narrative is unrelated to the stimulus (E2.1), invoking negative content and themes of persecution (E2.2), with descriptive detail but no justification for interpretation (A1.1).

Latent Issue:

The subject's depiction clearly reflects the theme of protection versus threat, and the boundary between a safe interior and a threatening exterior.

The house symbolizes a secure psychological space or protected self, while the dogs and wolves represent external fears, surrounding threats, or possibly internal disturbances with a hostile or persecutory tone. The presence of sheep alongside wolves highlights a contrast between innocence/vulnerability (sheep) and danger (wolves), possibly reflecting an internal conflict between feelings of weakness and the desire for protection, or between opposing psychological components.

The scenario drawn by the subject expresses a sense of isolation and alienation, faced with tangible or imagined threats surrounding the psychological shelter.

This reflects deep psychological conflicts tied to personal boundaries and the ability to distinguish between what is internal/safe and what is external/threatening.

Card 16:

Examinee: "Should I make it up from my head?"

Examiner: "Yes."

Examinee: "... uh... a small child... like... he was being humiliated by his parents... and he loved studying... something like that... he keeps studying until he succeeds and becomes something important."

Contextual Dynamics: After a long initial hesitation (CI1), the subject shows the need to ask a question (CI3), followed by a pause (CI1). Then, the subject begins narrating in a self-referential, impressionistic tone (CN1), introducing negative content and themes of persecution (E2.2).

This is accompanied by narcissistic elements with positive value that elevate the self above the persecution (CN3+), focusing on everyday aspects (CF1), and reaffirming the same positive narcissistic view (CN3+).

Latent Issue:

The subject's response, portraying a child being humiliated by his parents and then striving for success as a compensatory goal, reveals a projective dynamic. It reflects an inner conflict between narcissistic injury and the need for recognition and self-worth.

The child symbolizes the wounded self, seeking to restore its dignity through effort and achievement. This indicates a dominant defensive mechanism of sublimation or compensation. The parents in the scene represent the source of humiliation, suggesting an underlying psychic wound linked to early experiences of frustration, criticism, or emotional neglect. In contrast, the child becomes a symbol of psychic survival, turning emotional pain into motivation for success within a tense relationship with internal parental figures. The internal scene shows relatively mature defensive structures (ambition, persistence), yet these are grounded in emotional content charged with feelings of inadequacy and humiliation. This implies a "weakness–strength" duality in the self-image, and a persistent need to prove self-worth through achievement.

Summary of Defensive Contexts – TAT:

Series A	Series B	Series C	Series D	Series E
A1-1= 2	B1-1= 3	CI-1= 26	D1=	E1-1=
A1-2= 1	B1-2= 5	CI-2= 14	D2=	E1-2=
A1-3= 1	B1-3=	CI-3= 2	D3= 1	E1-3=
A1-4=	B1= 8	CI= 42	D= 1	E1= 0
A1= 4				
A2-1=	B2-1=	CF-1= 5		E2-1= 5
A2-2=	B2-2=	CF-2=		E2-2= 3
A2-3=1	B2-3= 8	CF-3=		E2-3=
A2-4= 2	B2-4=	CF= 5		E2= 8
A2= 3	B2 = 8			
A3-1= 12	B3-1=	CL-1=		E3-1=
A3-2=	B3-2=	CL-2=		E3-2=
A3-3=	B3-3=	CL-3= 1		E3-3=
A3-4=	B3=0	CL-4=		E3-4=
A3= 12		CL= 1		E3= 0
		CN-1= 3		E4-1=

		CN-2= CN-3= 2 CN-4= CN-5= CN= 5		E4-2= E4-3= E4-4=
A= 19	B= 16	C= 53	D= 1	E= 8

General Contexts:

In a protocol marked by this level of inhibition and reduction, we can observe multiple contexts, especially from the **phobic register (CI = 42)**, which dominate the stories and reduce them to short texts composed of simple sentences that lack expansion in describing scenes, often limiting themselves to recounting superficial events and appearances.

This type of restricted narrative is accompanied by control contexts (A = 19) that work to contain and limit the texts, especially by controlling and repressing conflicts, thus integrating them into a rigid obsessive register. Other inhibition contexts (CN-5, CF-5) appear in low to moderate levels, reinforcing avoidant strategies against conflict. In addition, flexibility contexts (B = 16) are notably present in the protocol.

1. Phobic Contexts (CI = 42):

We record a strong presence of initial long silences, a general tendency toward trivialization and reduction, verbal hesitations, and the avoidance of identifying characters to prevent identification (CI = 26). These elements contribute to narrowing the scope of fantasies and keeping them within a loop overshadowed by silence, which acts as a means to conceal the internal world and preserve it as an internal secret.

These phobic avoidant contexts are spread across almost all the cards, especially those that bring libidinal conflict to the foreground, such as 8BM, 4, 2, where we notice an attempt to build a story, but the overwhelming fear of releasing fantasies hinders their expression. This reflects castration anxiety and the weight of prohibition, particularly in the rejection of card 8BM, which suggests the fantasy of killing the father.

2. Control Contexts (A = 19):

They appear in several types, with some dominating others. On their surface, there are signs of potential exploitation of internal conflict (A2-4 = 2) and denial (A2-3 = 1) to a lesser extent, but these were not effective in resolving the conflict.

Therefore, the conflict is directed toward obsessive-compulsive patterns (A3 = 12), which manifest as intensive rumination and verbal precautions across all the cards. The subject also fluctuates between different interpretations (A3-1 = 12), all aimed at isolating and suppressing emotions from the narrative.

3. Practical Contexts (CF = 5):

The subject relies on contexts related to describing external reality and focusing on daily life (CF1 = 5). These responses function as a central defense mechanism. They discharge emotional charge by projecting it onto daily, functional frames (learning, work, advice). This reflects cognitive escalation and symbolic neutralization of conflict. This pattern indicates difficulty in imagination and engagement in symbolic representation. It shows a tendency toward denial and repression to maintain fragile internal cohesion and avoid facing Oedipal tensions or feelings of loss and aggression.

4. Narcissistic Contexts (CN = 5):

Narcissistic contexts show a defensive pattern based on withdrawal (CN1) and self-reliance as a safe refuge against a threatening or absent other. This appears in repeated representations of isolation and contemplation, excluding live emotional relationships.

These serve more as avoidant withdrawal methods from relational conflict than as attempts to invest in the self. The discourse is dominated by silence (CI1), neutral narration (CI2), cognitive escalation (CF1), and denial of emotional content (A2.3). This indicates defensive narcissism that protects the self from collapse anxiety but hinders mature psychological dynamics based on differentiation, conflict, and integration.

5. Absurdity Contexts (B = 16):

These contexts reveal a reserved, emotionally depleted relational pattern. He use verbs lacking emotional charge (B2.3 = 8) such as “learn” and “give advice,” reflecting emotional flattening and a defensive organization to avoid emotional tension or attachment. Relationships appear functional or idealized (B1.1 = 3), as in the mother-daughter scene presented as harmonious without conflict or differentiation, attempting to fix a safe, threat-free model.

The subject also calls on absent characters (B1.2 = 5), indicating a tendency to displace relationships into a more controlled internal space. This relational setup points to difficulty engaging in direct emotional relationships and the use of defenses that protect the self from exposure and emotional involvement.

6. Primary Contexts (E = 8):

Primary contexts in Ayato's protocol show repeated contact with threatening or primitive scenes, either through superficial narration unsuitable to the scene (E2.1 = 5) or strong representations of persecution and aggression (E2.2 = 3).

These contexts reveal difficulty in forming coherent psychological representations and a primitive anxiety surfacing in the discourse without mature symbolic transformation. This indicates a fragile psychological organization using primary defenses that try to contain internal content not yet symbolized.

General Problem:

Ayato's protocol reveals a fragile psychological structure dominated by inhibition as a central defense.

There is a structural deficit in the capacity to form symbolic representations of basic emotional and relational conflicts.

This problem appears in recurring narrative contexts marked by brevity, ambiguity, and symbolic emptiness.

There is a clear tendency to neutralize emotions and transfer them to neutral daily domains, reflecting the ego's failure to receive and process instinctual content, especially loss, desire, and Oedipal identifications.

The long initial latency, narration based on the unknown, withdrawal or flattening of scenes show that Ayato's inhibition mechanisms not only block tension but also prevent the emergence of meaning and symbolic engagement.

Ayato tends to clinical inhibition that masks deficits under a cover of neutral narration or cognitive intelligence.

Ayato lacks the ability to symbolically represent the Oedipal triangle in mature dramatic forms.

Mother themes appear as uncharged functional symbols (watchful, advising), while the father is either completely excluded from symbolic presence or reduced to a teaching or daily function.

This dynamic resembles Mika's model, but Ayato empties the scene not by refusal but through continuous neutralization and blurring of role distinctions.

When facing scenes of grief or farewell (3BM, 6BM, 8BM), Ayato struggles to represent separation as a symbolic event capable of transformation.

Instead, the scene is simplified or turned into a functional activity, indicating the absence of symbolic mourning and disturbance in transforming loss into internal narrative.

Clear object images or mature generational and sexual differentiations are absent.

The other appears either unknown or as a mere "agent" in an undefined scene. Roles merge or disappear, pointing to difficulty in fixing a coherent internal image of self or other, blocking the formation of a mature symbolic relationship.

Summary of Rorschach And TAT Findings:

Ayato's projective protocols reveal a psychological profile marked by structural fragility and profound difficulties in the individuation-autonomy process. In the Rorschach, his high productivity (63 responses) reflects a surface richness but conceals a lack of internal coherence. The majority of his responses are fragmented, poorly organized, and often distorted, indicating weak ego boundaries and a struggle with symbolic integration. The overwhelming reliance on partial details (Dd = 52%) and a single, poorly formed global response reflect a fragmented perceptual style and a failure to form cohesive internal representations. Symbolic thinking is often replaced by literal or vague interpretations, showing the psyche's retreat from affective involvement.

The predominance of form-based responses (F = 58%) and the frequent presence of distorted form quality (F- = 67%) suggest rigid control mechanisms accompanied by symbolic disorganization. Although Ayato avoids complete refusal, he often distances himself from the material emotionally, using cognitive detachment and flattening of affect. Color responses are rare and mostly negative in tone (FC-), reflecting depressive tendencies and affective

blunting. Human figures are present but frequently distorted or persecutory, indicating an insecure relationship with internalized others. Movements often involve hiding, watching, or ambiguous action, suggesting internalized anxiety around exposure, vulnerability, and unresolved relational conflict—particularly regarding maternal and authority figures.

In the T.A.T, Ayato's narratives confirm these patterns through emotionally flat, fragmented, or overly neutralized storytelling. Many of his stories rely on vague descriptions, repeated themes of isolation or separation, and emotionally sterile interpretations of highly charged scenes. When confronted with relational or Oedipal imagery, he avoids direct emotional engagement by shifting the narrative into functional or cognitive spaces (e.g., education, advice, work). This intellectualization is used as a defensive mechanism to neutralize affective tension, revealing a fragile inner world shielded by control and detachment.

Themes of abandonment, maternal disappointment, and attempts to compensate through achievement or control are recurrent. Yet, Ayato often fails to represent interpersonal conflict symbolically. Instead, relationships are flattened, roles are blurred, and the other is often reduced to a distant or threatening presence. There is little sign of internalized, secure object representations, and the Oedipal constellation appears muted, avoided, or idealized rather than elaborated symbolically.

In sum, Ayato exhibits a pre-autonomous structure where differentiation, separation, and stable identity formation remain incomplete. His responses are shaped by defensive avoidance, intellectualization, and a profound need to maintain psychic boundaries against emotional intrusion. The inability to represent full relationships, manage loss, or maintain internal cohesion under tension reflects a failure in achieving psychological individuation and autonomy.

Summary of Ayato's Case:

Ayato scored high in emotional deprivation, mistrust/abuse, social isolation, and unrelenting standards on the YSQ. These reflect internalized insecurity, distrust, isolation, and perfectionism. The EDE-Q confirmed very high restraint (5.60), weight concern (4.60), and shape concern (4.50), suggesting obsessive regulation of body as a way to regain control and worth.

In the Rorschach, his responses were fragmented, ambiguous, and emotionally flat. He relied on form and partial detail while avoiding elaboration.

Emotional content and symbolism were minimal, showing defensive detachment and fear of exposure. In the TAT, he avoided relational complexity and reduced emotionally charged scenes to logical, sterile narratives. Characters were portrayed as passive or resigned.

These projective results indicate weak symbolic capacity and an inhibited sense of self. In the context of individuation-autonomy, Ayato avoids asserting a differentiated identity. His narratives lack self-agency and emotional assertion, suggesting arrested individuation. He retreats into perfectionism and intellectual defense rather than forming autonomous relational patterns or authentic self-definition.

Third Case Cyno:

1- Results of The Eating Disorder Examination (EDE-Q):

Table (10): Displaying EDE-Q results for the third case Cyno

Questions	Subscales	Degrees
1-2-3-4-5	Restraint	5.40
7-9-19-20-21	Eating Concern	3.40
6-8-10-11-23-26-27-28	Shape Concern	4.00
4-8-12-22-24-25	Weight Concern	5.00
Overall Score		4.45

Table Commentary:

1. Restraint (5.40)

- Highest score among subscales, indicating severe dietary restriction behaviors.
- The individual likely engages in strict food rules, fasting, or rigid eating patterns, which are common in anorexia nervosa (restrictive type) or orthorexia.

2. Weight Concern (5.00)

- Reflects extreme preoccupation with body weight, fear of weight gain, and frequent weighing.
- This is a key feature in anorexia nervosa, bulimia nervosa, and binge-eating disorder (BED).

3. Shape Concern (4.00)

- Suggests significant distress about body shape, possibly including body-checking behaviors or avoidance (e.g., mirrors, tight clothing).
- Often linked to body dysmorphia or restrictive/binge-purge cycles.

4. Eating Concern (3.40)

- Indicates anxiety around eating, guilt after meals, or fear of losing control over food.
- Common in **bulimia nervosa and BED**, but also seen in restrictive disorders.

Clinical Implications:

The profile suggests severe eating disorder symptoms, with restriction and weight preoccupation being the most dominant.

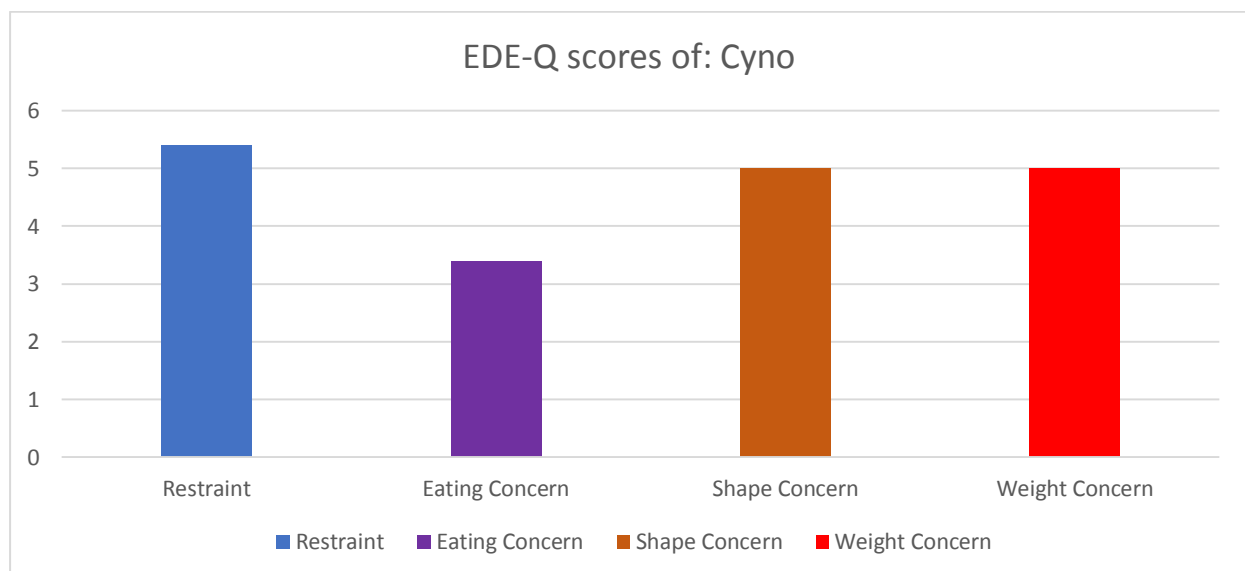


Figure 6: displaying the results of the EDE-Q Subscale scores of Cyno

2- Clinical Interview: Psychodynamic Case Report: "Cyno"

1. Personal History and Developmental Conflicts

Cyno was born in Ouergula to Kabyle parents and experienced a nomadic childhood, moving through four cities by age ten. Despite this instability, he reports a “very good” childhood filled with enjoyment and academic engagement. Psychodynamically, such early environmental change can disrupt the continuity of object relations and ego integration, but Cyno’s positive narrative suggests either resilient adaptation or defensive idealization. His preference for adolescence—despite calling it more difficult—may reflect a defense of reaction formation, transforming the hardships of individuation into experiences of pride and mastery (e.g., travel, purchasing technology). The achievement orientation and retrospective coherence point to ego strength, though potentially compensating for unconscious instability.

2. Academic Performance and Inhibitions:

Cyno maintains high academic performance (average 16–17) but reports abrupt disengagement from subjects taught by disliked teachers. This avoidance reflects a selective inhibition pattern and a likely projection of internalized authority conflicts onto academic figures. His academic functioning is therefore not purely cognitive but filtered through relational transference. Psychodynamically, this suggests latent ambivalence toward authority, and possible unresolved Oedipal dynamics manifesting as resistance to symbolic paternal figures.

3. Parental Relationships and Internalized Objects

The subject describes both parents as emotionally present, non-authoritarian, and humorous. The mother, formerly a lawyer, is now constantly available at home, which may have facilitated secure early attachment and an introjection of a containing maternal object. His stronger identification with the mother implies a libidinal investment in the nurturing, receptive object, which may shield against the more conflictual aspects of individuation.

The absence of parental conflict and the subject's egalitarian portrayal of their relationship may indicate a denial of ambivalence, or a defensive fusion of parental objects into a singular, idealized dyad. The result is a stable but potentially fragile internal object world—free of overt splitting but vulnerable to deidealization under emotional strain.

4. Sibling Dynamics and Narcissistic Injuries

Cyno is the firstborn among four, with two deceased siblings (one neonatal death, one postnatal death). Such early confrontations with loss, though minimally elaborated, constitute narcissistic injuries and potential sources of unconscious death anxiety. His bond with his younger sister is

ambivalent—marked by mutual teasing and affection—suggesting oscillation between identification and rivalry, a dynamic common in narcissistically organized fraternal structures.

The survival of one sibling and loss of others may also lead to internal guilt, often unprocessed, which can manifest in compulsive or perfectionistic behaviors aimed at maintaining self-worth.

5. Physical and Somatic Symptoms (Santé actuelle du sujet):

The subject previously suffered from jaundice and immunodeficiency, especially around exam periods. This suggests conversion or somatization of performance anxiety, where ego-superego conflict manifests physically. The disappearance of symptoms after dietary change and weight loss reflects improved ego control, but the earlier pattern implies a psychosomatic compromise formation.

His previous overeating (every 30 minutes) and current restraint show a developmental trajectory from oral impulsivity to anal mastery—a shift from pleasure-driven consumption to control-based regulation. These transitions suggest successful—but still fragile—defensive reorganizations.

6. Pregenital Traits: Order, Cleanliness, and Control (Prégenitalité):

Cyno exhibits strong anal-retentive characteristics: cleanliness, punctuality, financial discipline, and a compulsion toward order. He occasionally feels that not cleaning may bring misfortune—indicating magical thinking and obsessive traits rooted in unconscious guilt or need for control.

His relation to money—saving rigorously to buy electronics—reveals libidinal displacement onto material objects and a defensive organization based on control over gratification. This constellation reflects an ego that defends against internal chaos through rigid order and external mastery, compensating for affective unpredictability.

7. Genitality and Objectal Investment (Génitalité):

The subject denies any romantic or sexual involvement. Given his age, this may be developmentally appropriate; however, his preference for solitude and self-reliance may also point to avoidant object relations. The absence of libidinal investment in others may function as a defensive retreat from the risks of dependence or emotional exposure—characteristic of early genital conflicts left unresolved.

8. Oneiric Life and Dream Symbolism (Tonirisme):

Cyno remembers dreams vividly, with some persisting for over five years—suggesting strong oneiric fixation and active unconscious processes. Recurrent themes include flying in airplanes, sudden explosions, falling, and being rescued by flying cars. These images reveal catastrophic anxieties, likely tied to ego fragility or superego pressure.

The “exploding plane” may symbolize ego disintegration, while the flying car appears as a narcissistic restoration or omnipotent fantasy of salvation. This dynamic parallels Klein’s depressive position: a collapse of psychic integrity followed by reparative fantasy.

9. Social Relations and Object Choice (Les rapports sociaux):

Cyno maintains a small but emotionally significant social circle, including online friends. He is socially competent but expresses a preference for solitude, which he uses for introspection and hobbies. This aligns with a narcissistic withdrawal, where object relations are avoided to preserve psychic equilibrium.

While this strategy protects against emotional vulnerability, it also reflects a fragile self-object matrix, where others are tolerated only within emotionally safe zones. His leisure activities (gaming, anime, music, fitness) provide structured outlets for drive expression, suggesting mature sublimation mechanisms alongside regressive traits.

10. Ego Ideal and Superego Conflicts (Reflections and Self-Perception)

When asked about what he values in himself, Cyno identifies his willpower and self-determination. His behavior follows a rigid principle: “If I get an idea in my head, I must complete it or I won’t be satisfied.” This reveals a strong ego ideal, possibly compensating for internal doubt or vulnerability.

His confrontational response to aggression (“If someone hits me, I hit back”) indicates unresolved aggressive impulses and possible failure of superego integration, where justice is equated with retaliation. These dynamics reflect borderline defenses around self-worth, dependent on symmetrical reactions rather than integrated conflict resolution.

Psychodynamic Summary:

Cyno presents with a **neurotic personality structure** characterized by:

- Dominant **anal-retentive defenses** (order, control, discipline),
- Moderately repressed **oral traits** (past overeating, need for emotional safety),

- Functioning **ego strengths** (academic performance, goal-directedness),
- Yet underlying **narcissistic vulnerabilities** (early sibling loss, emotional inhibition),
- And signs of **avoidant object relations** (solitude preference, conditional intimacy).

His superego appears structured but can be bypassed by reciprocal aggression, revealing areas of immature ego functioning. Dreams, compulsions, and his selective inhibition of emotions and subjects suggest latent internal conflicts that are not fully resolved, though currently managed through sublimation, displacement, and isolation.

Compared to Ayato, Cyno displays greater ego stability and less object-splitting but shares similar emotional defensiveness and perfectionistic tendencies. His psychic development appears to be at a transition point—holding the potential for emotional integration, yet still vulnerable to regression under stress or relational disappointment.

3- Results of Young's Early Maladaptive Schemas Questionnaire (Short Version):

Table (11): Displaying YSQ-SF results for the first case Cyno

Number	Dimensions (Schemas)	Degrees
1-5	Emotional Deprivation	10
6-10	Neglect/Instability	15
11-15	Mistrust/Abuse	21
16-20	Social Isolation	20
21-25	Feelings of Inferiority/Shame	16
26-30	Failure	14
31-35	Dependence/Incompetence	10
36-40	Fear of Illness or Danger	26
41-45	Enmeshed Relationships	15
46-50	Subjection	9
51-55	Self-Sacrifice	14

56-60	Excessive Emotional Control	14
61-65	High Standards	19
66-70	Control	19
71-75	Lack of Emotional Self-Control	18
	Total Score	240

Young's Early Maladaptive Cognitive Schemas:

The total score: 3.2

The total score falls within the range of 2.5-3.2 on the Likert scale, indicating, according to the scale's interpretation, that the schema represents a problem for the individual.

Table Commentary:

From the table, it appears that the core schemas in shaping the subject's personality were as follows:

The **Fear of Illness or Danger** Schema ranked first with a score of (26), and then it's followed by the **Mistrust/Abuse** schema with a score of (21), and then the **Social Isolation** schema with a score of (20).

As for the schemas that play an important role in the subject's life, they are as follows:

The **High Standards, Control** Schemas ranked equally with a score of (19), and right after comes the **Lack of Emotional Self-Control** with a score of (18), and finally the **Feelings of Inferiority/Shame** with a score of (16).

The schemas that present a problem for the subject were as follows:

The **Neglect/Instability** and **Enmeshed Relationships** schemas with a score of (15), followed by the **Self Sacrifice, Failure, and Excessive Emotional Control** schemas with a score of (14).

The schemas that play a significant role in the subject's life are as follows:

The **Emotional Deprivation, Dependence/Incompetence** schemas ranked equally with a score of (10), and lastly comes the **Subjection** schema with a score of (9).

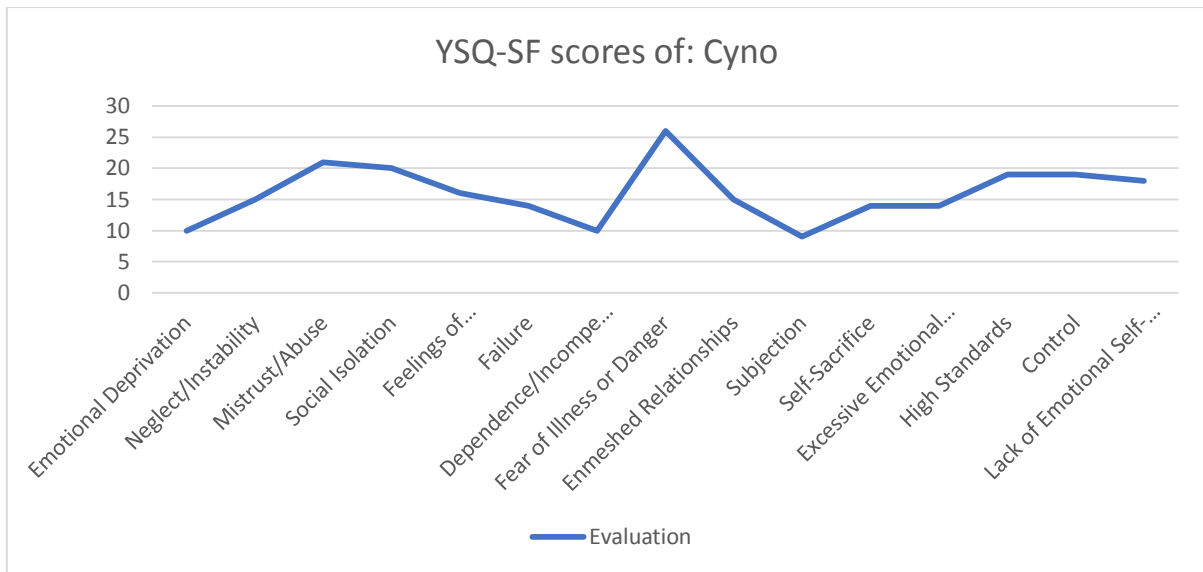












Figure 7: displaying the results of the YSQ-SF evaluation of Cyno

5- Presentation and Analysis of Cyno’s Rorschach Protocol Results:

Protocol Results:

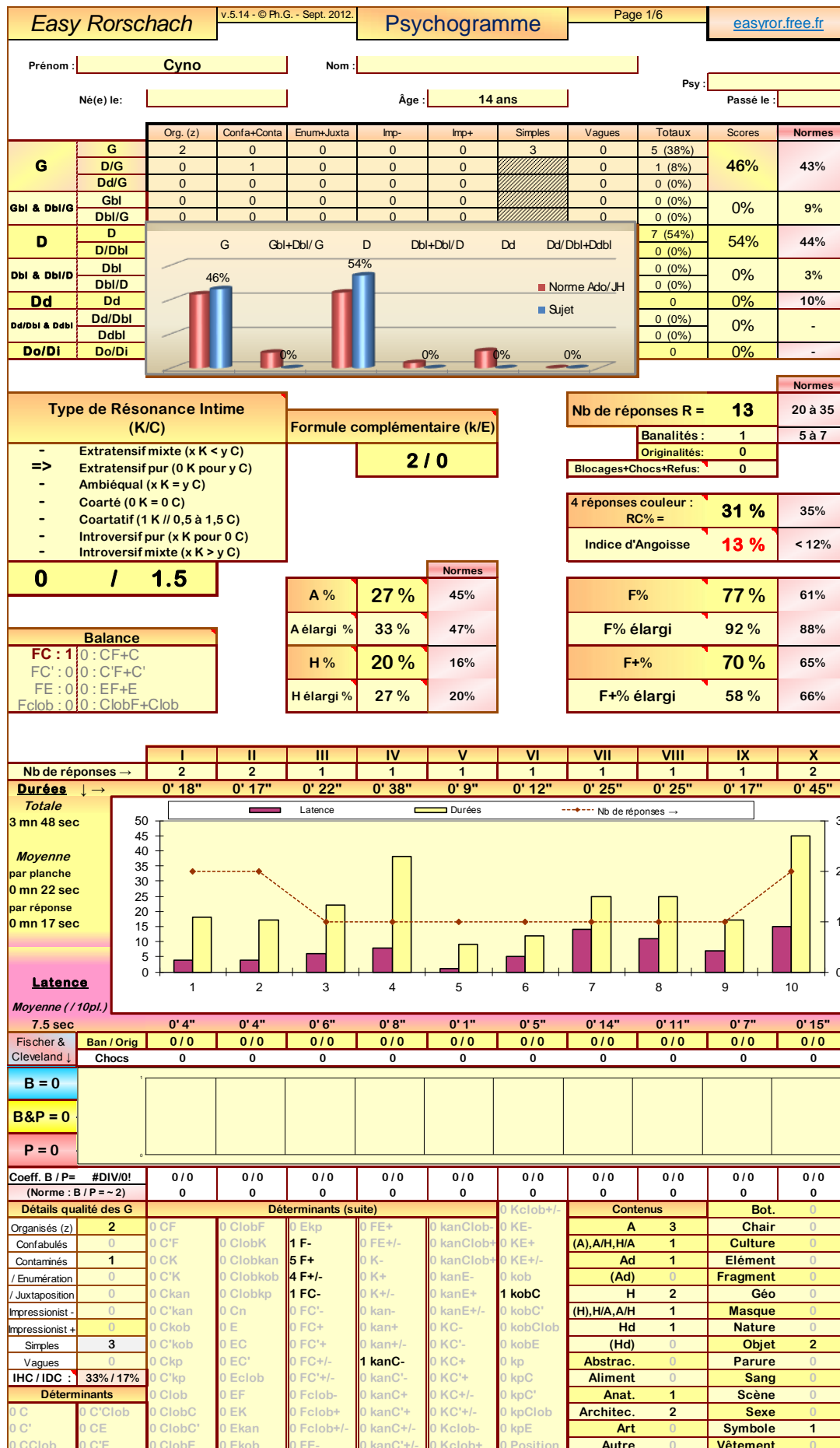
Cards	Responses	Inquiry	Coding
Card I 	4s -18s 1-A dragon skull or the skull of some creature 2-A mask like this for a person	The skull of the creature or a mask for a person Examiner: What could this creature be? – A bird from the avian family	1- G F+ (A) 2- D F+ Obj / H
Card II 	4s-17s 3-Two roasted pigs 4-The nervous system of a creature— something like this	Two roasted pigs and the nervous system of a creature — it’s unclear exactly what it is	3- D2 F+ A 4- D F+- Anat
Card III 	6s-22s 5-A geometric shape like this... an architectural form like this... a person doing uh... as if it were decoration.	Architectural Structure Examiner : What does the architectural structure remind you of? Examinee: It reminds me of a statue or a figure — like a creature they used to worship in ancient times...	5- D2 F+- Arch

		Back then, people used to worship anything... maybe they also used it as decoration.	
Card IV 	8s-38s 6- This is a large creature like this... or... or a decoration in an abandoned place, an abandoned house... A decoration or a large monster...	A large monster, or — A burnt bird, heavily charred R+ D FC' - A	6- D F+- (H)
Card V 	1s-9s 7- Bat... This is a bat	This is a bat, its whole body."	7- G F+ A Ban
Card VI 	5s-12s 8- A crocodile mixed with a cat mixed with a bird	A dragon mixed with a cat mixed with a bird... The three together form a creature A crocodile mixed with a cat and a bird, a blend."	8- G/D F+- A
Card VII 	14s-25s 9- Two hands... One hand like this, facing down...	"Hands on top of each other... This is a normal hand, and this one is bent here, and this one here is a fist. This is a fist, and this one is a crooked 'like'. And this one is a normal 'like'."	9- Gz F- Hd
Card VIII 	11s-25s "10- A state flag... like Algeria's, the crescent and so on... the same idea.	Yes, a state flag — when the body comes mixed like this with colors, it looks like a state flag. Examiner: A flag of which country? Examinee: A country from East Asia."	10- G F+ Symb
Card IX 	7s-17s "11- Uhh... A mask of a person	A mask from which blue fire is coming out Psy: What does this mask	11- Gz Kob C- Obj/ H

	emitting blue fire	remind you of? A mask of an emperor who had many occupied nations and was oppressive to them Psy: Have you come across this in a story? Yeah, a lot about the Mongols."	
Card X 	15s-45s 12- A castle... a big castle like this, built by someone Uhh...in a place where they defend... 13- And from below, it looks like a crocodile... like a crocodile with its mouth open."	"A castle with places where they defend. And below, there is the shape of a crocodile with its mouth open. Where they defend — this entire area here, the blue, yellow, orange, and green — are the defense centers. The crocodile with its mouth open — that's all the red part."	12- Dz FC- Arch 13- D7 kan c- Ad

Choices + (I.V)

Choices - (IV.IX)



General Analysis of Cyno's Protocol:

Time and Productivity

The protocol showed an acceptable level of productivity, with a total of 13 responses, considering the short overall duration of 3 minutes and 48 seconds, averaging 17 seconds per response. This suggests the examinee experienced discomfort with the projective situation and attempted to avoid it.

As for the nature of the discourse, it was clear, yet characterized by a general tendency toward brevity, verbal restraint, and hesitation (e.g., the use of phrases like "as if", "or"). There was a weak presence of chromatic sensory impressions, indicating inhibition. A short initial reaction time was recorded for cards I, II, III, IV, and V, reflecting impulsivity in the subject's behavior.

The protocol revealed red-related anxiety in Card II (DF+), particularly in the response "two grilled pigs", which points to castration anxiety. No card rejections were recorded in the protocol.

Cognitive Contexts:

The examinee relied on two types of perceptual modes based on the structural configuration of the inkblot: the global response (G) and the large detail response (D), with a complete absence of other perceptual types (Dd, Dbl). This reflects a cognitive processing style aimed at organizing the perceptual field in a coherent manner, while avoiding fine or scattered details—indicating an avoidance of mental effort that might reveal internal conflict.

Global responses (G) appeared in 46% of the protocol, aligning with the standard range (25% – 61%). These responses served as a basis for stimulus control and were mostly associated with the form determinant (GF5), in service of obsessive tendencies. They varied between simple and complex responses, with simple global responses more frequent and linked to appropriate perceptions (3GF+) as a mature defensive function based on control and regulation. These reflect an integrated ego capable of clear differentiation between internal and external reality. In contrast, complex global responses (GZ) were tied to distorted perceptions (2GZF-) in cards VII and XI, reflecting a mental effort to integrate parts of the blot that failed to achieve their regulatory goals.

Large detail responses (D) accounted for 54% of the protocol, placing them within the normative range for adolescents (29%–59%) and indicating a preferred mode of perceptual organization. This suggests an adaptive attempt to manage the complexity of the stimulus by segmenting it into controllable units, reflecting a need for internal coherence. However, this organization remains

fragile, as evidenced by the presence of several ambiguous and fluctuating form responses ($\pm 3DF$) and inaccurate form responses ($2DF-$), pointing to an internal conflict between the desire for perceptual mastery and difficulties in maintaining stable control.

Form Determinants:

As for determinants, form-based responses (F) dominated the protocol at 77%, matching normative standards (44%–78%). This reflects a strong attachment to formal perceptual control and a desire to manage the projective dimension of the blots, blocking access to fantasy and instinctual material under strict internal censorship. The quality of these form responses ($5F+$) supports ego success in anchoring itself in reality and using it as a defense against conflict. However, this occurred without total closure to fantasy, which found limited expression through failed chromatic impressions ($2FC-$) in cards X and IX, representing an attempt to regulate emotions in favor of perceptions that serve obsessive tendencies, though without complete success.

Additionally, the presence of ambiguous form responses ($\pm 4F$) at 40% points to confused thinking, difficulty setting cognitive boundaries, doubt, hesitation, and caution in situations requiring decision-making and participation.

Conflict Dynamics

The internal return pattern (TRI) is marked by a slight predominance of colors ($0k/2c$) over movements, but the secondary formulation (F.sec) contradicts this and points in the opposite, internal direction ($2K/0E$). This indicates a hidden conflict the examinee tries to suppress but projects excessively onto the external world, either through dramatization or manic defense. The protocol shows withdrawal tendencies, evident in the weak presence of minor movements ($1Kan$, $1Kob$), the total absence of chromatic responses (C), human movement ($0k$), and distortion responses ($0E$), which expresses a tendency toward closure and inhibition. The examinee avoids activating deep conflicts—both cognitive and emotional. The dominance of form determinants (F) reflects strong reliance on concrete reality and tight control over instinctual drives.

A single banal response ($1Ban$) appeared at a low frequency of 7% (within the expected 5–7%), indicating weak connection with objective and social reality, and insufficient reflection and sociability, supported by the absence of popular responses, suggesting resistance to tradition and social norms. This appeared in card V, accompanied by a positive form perception ($GF+ A Ban$), in the phrase “a bat...” after a short latency ($1s$), which reveals a fast, unconsidered reaction. This may express either perceptual impulsivity or

an unconscious desire to avoid imagination and symbolic risk. Though perceptually coherent, this stereotyped response may mask a defensive dynamic based on inhibition, symbolic withdrawal, and the need to stabilize the self through safe perceptual conformity.

The examinee's response on card VII "hands on top of each other"—shows a partial and reserved representation in a card that usually evokes maternal imagery and early relational experiences. The narrow focus on "hands" and absence of deeper emotional or symbolic content reflect a defensive posture, avoiding contact with intimate or nurturing material. It suggests an early disrupted relationship with the maternal figure, characterized by ambiguity, contradiction, and possible insecurity.

Content-wise, the protocol reflects a certain psychological richness and mental adaptability. Human content (2H, (H)1, 1Hd) appeared at 20%, within the 6–26% range. The responses avoided gender identification, as seen in card II: "a mask like one person," and card IX: "a mask of one blowing blue fire," suggesting fragile identifications and difficulty imagining oneself in a clearly defined relational framework. Animal content (3A, (A)1, 1Ad) appeared at 27%, slightly above human content and within the 27–60% norm. This indicates rejection of conflict-laden human imagery and the use of animal content as a defensive mechanism to avoid emotional relationships, representing a rigid, superficial form of adaptation.

5- Presentation and Analysis of Cyno's Thematic Apperception Test (T.A.T):

Protocol Results:

Card 1:

1'... That's the thing they play music with... There was a child who wanted to play, but they didn't let him... He got upset and started crying...16"

Contextual Dynamics: With a direct entry into expression (B2-1), the examinee made gestures (D1+), then evoked something negative without specifying the motives of the conflict or identifying the characters (E2-2 + CI-2), accompanied by intense or exaggerated emotions (B2-2).

Latent Issue: Faced with the issue of childhood helplessness, the examinee's response to this card reflects a childhood narcissistic issue linked to powerlessness and early deprivation, where frustrated desire emerges without a clearly defined object of prohibition—indicating a difficulty in processing and representing castration anxiety.

The intense emotional reaction (crying) expresses a narcissistic wound resulting from the inability to fulfill a basic personal desire, without the capacity to transform the frustration into a symbolic or narrative structure.

This dynamic points to fragility in the processes of internalization and differentiation between self and object, with a tendency toward defensive withdrawal and inward collapse when facing loss or restriction.

Card 2:

7'... Like, umm... back in the day people used to use... horses and slaves for farming and such, and the women would watch them. 13"

Contextual Dynamics: After a short response latency (CI-1), the examinee used verbal caution (A3-1), then proceeded to invoke literary or cultural references (A1-4), showing a focus on sensory and realistic details and emphasizing sensory perception (CF-2), along with sensitivity to contradictions (CN-2). The examinee did not specify the motives of the conflict nor identify the characters (CI-2).

Latent Issue: Faced with the Oedipal content of the card, the examinee avoids representing the Oedipal triangle by relocating the scene into a neutral socio-historical space, where the relationship is reduced to functional roles (men working, women watching).

This points to difficulty in confronting Oedipal content and the emotions tied to it (desire, rivalry, exclusion), with a strong neutralization mechanism that prevents the self from symbolic or emotional involvement.

This can be understood as a difficulty in acknowledging sexual attraction and a resistance to the necessary separation from original objects, leaving the self attached to an external, passive position in front of a relationship it is forbidden or unable to enter.

Card 3BM:

5'... This guy wanted to commit suicide or something... someone like that wanted to kill himself but couldn't... he felt hopeless. 18"

Contextual Dynamics: With a direct entry into expression (B2-1), the examinee engaged in dramatization (B2-1), then used imagination or dream-like elements (A2-1), followed by rumination (A3-1), and finally evoked intense or exaggerated emotions (B2-2).

Latent Issue: Faced with the depressive-themed card with a bodily translation, the examinee shows a clear focus on a severe depressive state that has not been symbolically processed.

Loss is expressed through self-directed desire, with no capacity for mourning or representing the loss.

There is an evident inability to associate sadness with a specific object, or to transform the loss into narrative or meaning.

This response reflects a difficulty in completing the mourning process or reinvesting desire into new objects, pointing to fragility in the depressive structure, with a looming threat of psychological extinction in the face of separation or loss.

Card 4:

5'... One guy was about to fight with another one, and this one grabbed one of them... She was trying to separate them, but ended up holding onto one of them. 18"

Contextual Dynamics: With a direct entry into expression (B2-1), the examinee did not identify the characters (CI-2), and also mentioned quantitative precision (A1-2). This was followed by dramatization and verbal rumination (B2-1 + A3-1). He then introduced characters not present in the image (B1-2) and evoked poetic language and intense, raw expressions linked to aggressive themes (E2-3).

Latent Issue: Faced with the issue of conflicting drives in a romantic relationship, the examinee reveals a conflict-driven approach to the emotional scene, where the relationship is emptied of emotional content and presented as a physical confrontation between two males over a woman who intervenes but is not experienced as a beloved object—instead, she acts as a separating element. This reflects a difficulty in representing emotional duality (love/aggression) within dyadic relationships, along with a struggle to grasp separation or preference as symbolic realities.

Feelings of threat or exclusion are expressed through unexplained physical actions, pointing to a limited capacity to engage with Oedipal emotional tensions and to understand their psychological significance.

Card 5:

7'... So, umm, a woman was sleeping at night and saw that the light in the room went out, so she went... like that. 15"

Contextual Dynamics: After a short response latency (CI-1), there was disruption in sentence construction, with no identification of characters, and ambiguity and lack of clarity in speech, followed by sensory perceptions and misperceptions (E4-1 + CI-2 + E4-2 + E1-3).

Latent Issue: Faced with a card that evokes the issue of the maternal image that gazes, the examinee showed a clear difficulty in representing the tension associated with sexual curiosity and Oedipal guilt.

The woman is presented in a disjointed, meaningless scene, merely as a physical actor reacting to the situation, rather than as a loaded internal object.

The discourse reflects strong resistance to representing the primal scene or to acknowledging desire and surveillance, with a complete absence of emotional expression or narrative analysis.

This suggests a primitive anxiety tied to the loss of maternal love or a threat of symbolic castration, met with symbolic withdrawal and representational extinction.

Card 6BM:

5'... Someone is fighting with his mother or an old woman. 18"

Contextual Dynamics: With a direct entry into expression (B2-1), the examinee internalized intense representations—raw expressions linked to aggressive themes, followed by a focus on interpersonal relationships, while failing to specify the motives of the conflict, and then oscillating between different interpretations (E2-3 + B1-1 + CI-2 + A3-1).

Latent Issue: Faced with the mother–son issue in a context of grief, the response reflects a primitive and direct translation of maternal–Oedipal tension, where the maternal relationship is expressed through a vague physical conflict, without any feelings of loss, sadness, or longing.

This reveals a difficulty in acknowledging incestuous dynamics, and a rejection of the Oedipal transformation that requires separation from the mother as a libidinal object.

The response exposes a weakness in the ability to represent the maternal relationship as an internal symbolic bond, leading instead to engagement through a raw aggressive mode, indicating early anxiety over losing maternal love or experiencing psychological separation without a substitute.

Card 7BM:

4'... This one is a company manager or something, sitting and explaining a plan... their strategy to one of his workers. 10".

Contextual Dynamics: With a direct entry into expression (B2-1), the examinee engaged in rumination (A3-1), followed by a focus on interpersonal relationships and an emphasis on daily, realistic scenarios (B1-1 + CF-1).

Latent Issue: Faced with the issue of closeness between father and son, the examinee's response reflects a difficulty in representing the paternal relationship as a complex emotional bond.

The father (or his substitute) is transformed into a neutral, functional manager, and the relationship is reduced to a rational, organizational level.

This reveals a struggle with identifying with the paternal image, either due to its absence as an internal object or as a means of avoiding conflict and closeness with it.

The response demonstrates a cognitive defense against Oedipal tension dynamics, replacing the emotional-symbolic dimension with a formal-functional view that conceals the contradictions in the father-son relationship.

Card 8BM:

10'... They were trying to treat someone, and the child was the one responsible for him being sick like that... He's the one who caused this, he's tormented, and the doctors came to treat him...24"

Contextual Dynamics: After a short response latency (CI-1), there was disruption in sentence structure, followed by the perception of deteriorated objects or sick characters. The examinee did not identify the characters nor specify the motives of the conflict, and also mentioned narcissistic details with a negative value, followed by intense emotions and raw expressions linked to aggressive themes (E4-1 + E3-4 + CI-2 + CN-3- + E2-3).

Latent Issue: Faced with the issue of aggression and castration in male relationships, the examinee's discourse reveals an indirect confrontation with the card's content, as aggressive desire is projected onto "the child," who is assigned responsibility for causing harm.

This points to a difficulty in integrating destructive impulses toward the male other (a potential father figure), accompanied by the use of projective defense to avoid involvement in Oedipal guilt.

The anxiety linked to castration or guilt is managed through the construction of a "restorative scene" (the doctors), reflecting a partial attempt to repair the self after symbolic transgression, without full internal acknowledgment of the conflict.

This reveals a fragmented aggressive dynamic, steeped in guilt and disconnected from the ego through defensive mediation.

Card 10:

8"... A brother is kissing his sister. 10."

Contextual Dynamics: After a short response latency (CI-1), the examinee began their narrative with transparent symbolism, followed by a focus on interpersonal relationships (B3-2 + B1-1).

Latent Issue: Faced with the issue of separation and reunion between partners, the examinee presents a scene with a clear Oedipal charge—a brother in an intimate situation with his sister—without any evident defensive response, indicating difficulty integrating incestuous themes within emotional and sexual representations.

This reflects a blurring of relational representations between familial affection and physical desire, and a fragility in distinguishing psychological roles within early relationships.

The absence of guilt or tension suggests a deficit in recognizing the symbolic norms that govern relational taboos, leaving space for immature representations of desire and attachment.

Card 11:

6"... Umm... a tsunami... a tsunami happened on the coast of some village like that. 15."

Contextual Dynamics: After a short response latency (CI-1), the examinee made gestures (D1), accompanied by sensory misperceptions and representations of actions, either related or unrelated to emotional states such as fear, catastrophe, or dizziness. This indicates a mismatch between the content and the stimulus (E1-3 + B2-3 + E2-1).

Latent Issue: Faced with a card that revives pre-genital issues and primitive anxiety, the examinee's discourse reveals significant difficulty in confronting the surreal and regressive content of the image.

The primitive anxiety evoked by the card is externalized into a natural disaster scene, stripped of emotional or symbolic depth.

This response indicates a failure to represent primitive regressive movements, and difficulty in processing the anxiety linked to the breakdown of psychic boundaries or internal collapse.

The scene is emptied of self-reference, reflecting a primitive defensive pattern against fears of psychic disintegration or primary loss.

Card 12BG:

5"... Umm... someone someone was going to migrate by boat... then, like, he stopped near a tree and left. 21."

Contextual Dynamics: After a direct entry into expression (B2-1), the examinee engaged in rumination, did not identify the characters, and introduced characters not present in the image (A3-1 + B1-2 + CI-2), followed by oscillation between conflicting desires (B2-4).

Latent Issue: Faced with the issue of absence, the examinee's discourse reflects a faded and fragmented representation of loss and absence, where actions are narrated without emotional or symbolic connection, and loss is experienced as a mechanical movement toward nothingness.

This discourse shows difficulty in representing loss as an internal relationship with a missing or absent object, with no presence of a “restorative object” that can be relied upon.

It reveals a non-transformed narcissistic or depressive dynamic, where abandonment is managed through emotional withdrawal and representational emptiness, rather than by transforming grief or seeking inner support.

Card 13B:

8'... A poor child sitting like that... sitting in front of that house to catch some shade. 15."

Contextual Dynamics: After a short response latency (CI-1), the examinee clung to narcissistic details with a negative value (CN3-), did not identify the characters (CI-2), and also focused on sensory aspects and sensitivity to contradictions (CN-2).

Latent Issue: Faced with the issue of the ability to be alone, the examinee's response portrays a scene of intense isolation, in which the child is depicted as a passive, poor figure, waiting for shade as an indirect source of protection.

This reflects a fragility in the internal supportive structure and difficulty in accessing a restorative maternal object.

In this card, loss appears as a total absence of protection, with no capacity for expression or action, pointing to a narcissistic gap and a lack of internal resilience to withstand solitude.

This can be understood as an inability to transform relational experience into secure internal dependency, making aloneness feel like emptiness or endless waiting.

Card 19:

14'... I don't know, I didn't really understand it. 16."

Contextual Dynamics: After a short response latency (CI-1), the examinee rejected the card and expressed criticism (CI-1 + D3).

Latent Issue: The examinee encountered significant difficulty when faced with the challenge of testing the boundaries between inside and outside, revealing a temporary breakdown in the capacity for symbolic thought or representation, triggered by unbearable primitive anxiety.

A simple and direct defense is used: *"I don't know,"* indicating fragility in the differentiation between self and object, and between internal and external realms, in response to a chaotic image that tests the very foundations of psychic organization.

This response is understood as a sign of a temporary failure in the containing function (*fonction contenant*) when confronted with surreal content that reactivates old depressive or persecutory fears, which cannot be processed within a stable psychological structure.

Card 16:

I' Examinee: "The card is empty—should I make a story from it?"

Examiner: "Yes."

Examinee: "...A completely empty world, there's only whiteness... a world that's white and completely empty, nothing is there at all. 27".

Contextual Dynamics: After a direct entry into expression (B2-1), the examinee addressed a request to the examiner (D3), followed by the examiner's response (CI-3). Then came a brief initial silence (CI-1), followed by rumination (A3-1), which ultimately led to a tendency toward refusal (CI-1).

Latent Issue: In the face of the card's emptiness, the examinee reveals a deep symbolic void and a fragility in the psychic structure that organizes internal and external representations.

He is unable to fill the empty space with any symbolic content, indicating a difficulty in organizing self and relationships within a cohesive internal framework.

This collapse in the ability to imagine or narrate exposes a psychic bare spot, where no representational links or internal objects can be summoned, pointing to a fragile narcissistic structure marked by representational and relational rupture in the face of emptiness or nothingness.

Summary of Defensive Contexts – TAT:

Series A	Series B	Series C	Series D	Series E
A1-1=	B1-1= 3	CI-1= 10	D1= 2	E1-1=
A1-2= 1	B1-2= 2	CI-2= 8	D2=	E1-2=
A1-3= 1	B1-3= 1	CI-3= 1	D3= 2	E1-3= 2

A1-4= 1 A1= 3	B1= 6	CI= 19	D= 4	E1= 2
A2-1= 1 A2-2= A2-3= A2-4= A2= 1	B2-1= 9 B2-2= 2 B2-3= 1 B2-4= 1 B2= 13	CF-1= 1 CF-2= 1 CF-3= CF= 2		E2-1= 1 E2-2= 1 E2-3= 2 E2= 4
A3-1= 8 A3-2= A3-3= A3-4= 1 A3= 9	B3-1= B3-2= 1 B3-3= B3= 1	CL-1= CL-2= CL-3= CL-4= CL=		E3-1= E3-2= E3-3= E3-4= 1 E3= 1
		CN-1= CN-2= 2 CN-3= 2 CN-4= CN-5= CN= 4		E4-1= 1 E4-2= 1 E4-3= E4-4= 2
		CM-1= CM-2= CM-3= CM-4= CM-5=		
A= 13	B= 20	C= 25	D= 4	E= 9

General Contexts:

The defensive contexts are generally distributed across all registers, with the exception of a few (CM, CL). The starting point is the phobic register, seen through frequent verbal pauses and failure to identify characters (CI-1, CI-2), followed by flexible contexts (B1-1, B1-2, B1-3, B2-1, B2-2, B2-3, B2-4, B3-2), and then rumination and verbal precautions (A3-1 = 8).

Primitive contexts also appear in a varied way, mostly represented by (E2-3, E4-4), followed by E2-1, E2-2, E3-4, E4-1, E4-2. Narcissistic contexts are present as well, mostly involving a focus on personal experience and narcissistic detail (CN-2, CN-3).

1. Phobic Contexts (CI = 19):

There is a notable presence of verbal pauses (CI-1 = 10), which function to narrow the scope of fantasy and maintain silence as a way to conceal and protect the inner world. The presence of unspecified conflict motives and anonymous characters (CI-2) further serve the ego by suppressing drives and distancing them from consciousness.

These avoidant phobic defenses are present in nearly all cards, especially those that bring instinctual conflict to the foreground—such as cards 2, 4, and 8BM—where an attempt is made to build a story, but fear of unleashing fantasies inhibits it. This reflects castration anxiety and the weight of the forbidden.

2. Control and Absurdity Contexts (B = 20, A = 13):

These two types alternate in expressing the conflict dynamic between instinctual impulses and their repression.

The abundance of "absurd" contexts reflects a wide range of symbolic strategies that both invest in relationships to structure conflict (B1-1 = 3, B1-2 = 2) and amplify emotions in those relational settings (B2-2 = 2, B2-4 = 1, B2-3 = 1).

Rumination and verbal precaution (A3-1 = 8) appear in almost all cards, indicating the weight of internal imagery and the cognitive effort invested to keep it from surfacing.

3. Primitive Contexts (E = 9):

Although relatively scarce, these contexts allow primitive fantasies to erupt under pressure, especially through intense emotional responses and violent, aggressive imagery (E2-3), along with the emergence of negative themes (E2-2), which exaggerate and dramatize the situation.

4. Narcissistic Contexts and Adherence to External Reality (CN = 4, CF = 2):

Faced with internal fears, the examinee fluctuates between rigid and flexible defenses. In some cases, a narcissistic avoidance strategy is used via self-referential and sensory detail (CN-2 = 2, CN-3 = 2), representing a return to the self to invest in illusions and establish relative psychological boundaries from a threatening external reality.

This is further supported by external-reality-based contexts (CF-1, CF-2), which translate the image into a simple daily representation, used to neutralize symbolic tension and prevent the eruption of internal conflict.

General Problem:

Most of the central conflicts were approached in a direct and transparent manner, mainly revolving around Oedipal struggles, clearly or densely portrayed in triangular scenes or intense dyadic ones.

The repression and inhibition related to castration fantasies result from direct confrontation with primal scenes, often involving incestuous themes. These fantasies were handled either through rigid obsessive defenses or exaggerated hysterical ones.

Phobic and avoidant defenses serve to support hysterical strategies in fending off deep-rooted Oedipal fantasies.

The primal scene involving incestuous proximity was persistently evoked by the examinee, both implicitly (cards 5, 6BM, 8BM, 11) and explicitly (card 10), which prevented symbolic integration of Oedipal conflict or successful gender identification. The punitive residues from these incestuous Oedipal ideas remained vivid in the examinee's mind, often transformed into dramatic punishments, masking a deeper sexual fear—suggesting the possibility of traumatic traces.

All of this points to the examinee's inability to overcome the initial shock of facing the primal scene, where desire is confused with fear, attraction with guilt, and pleasure with threat, without being able to symbolically organize these forces.

Thus, the Oedipal conflict dynamic remains strongly present, but has not evolved toward a stable neurotic structure or integrated sexual identification.

Summary of Rorschach and TAT findings:

Cyno's projective protocols reveal a defensive structure that maintains psychic cohesion through intellectualization, denial, and emotional withdrawal. In the Rorschach, while his response production is quantitatively moderate (13 responses), the protocol is marked by speed and brevity, suggesting discomfort with the projective setting and a need to quickly escape from internal contact. His responses are predominantly form-based ($F = 76\%$), with minimal color

usage and no human movement, reflecting a high level of emotional inhibition and tight cognitive control. The dominance of structured global and large-partial perceptions ($G = 30\%$, $D = 69\%$) suggests an effort to impose order and control on the stimulus, avoiding fragmentation and ambiguity.

Although some responses are positive in form quality ($F+ = 70\%$), others are vague or contradictory ($F\pm$, $F-$), indicating internal inconsistencies and difficulty maintaining stable mental representations. Human content is present ($H = 23\%$) but remains ambiguous in gender and function—often portrayed as masks or depersonalized figures—reflecting weak or confused self/other representations. Animal content ($A = 30\%$) slightly surpasses human content, suggesting that relational dynamics are projected more comfortably onto non-human figures, allowing for symbolic distance and defensive control. Notably, aggressive or threatening imagery is present in the responses, including burned birds, sharp objects, and fantastical beasts, pointing to a background of internal conflict and unprocessed primitive anxieties.

In the T.A.T, Cyno's narratives confirm a fragile symbolic structure in the face of emotionally charged scenes. Many stories involve intense imagery—violence, suicide, humiliation, disaster—yet are handled either superficially or with exaggerated dramatization. When facing relational or Oedipal themes, Cyno frequently resorts to distancing defenses such as generalization, neutralizing historical narratives, or casting characters into mechanical, functional roles. The symbolic gap is most evident in his handling of separation and loss, which are often met with depersonalization, avoidance, or narrative collapse.

Themes of incest, maternal conflict, and paternal authority appear directly or indirectly but are not worked through in a symbolically integrated manner. The representation of boundaries between self and other, inside and outside, male and female, remains blurred or unstable. Scenes that should evoke identification, mourning, or psychic transformation often end in confusion, flattening, or escape into action or catastrophe. The inability to maintain consistent emotional engagement, symbolic elaboration, or differentiated representations of relationships reflects deep-rooted issues in the individuation process.

In sum, Cyno's protocols reveal a defensive psychic organization that prioritizes control and distance over emotional integration. His relationship to self and others is marked by masking, avoidance, and a fragmented inner world. While cognitive functioning appears intact, emotional development is restricted, and symbolic elaboration of early relational experiences—especially around separation and autonomy—remains blocked. These dynamics point to a

disruption in the individuation-autonomy process, where the self struggles to emerge as distinct and coherent in the face of primitive anxieties and unresolved Oedipal conflicts.

Summary of Cyno's Case:

Cyno's YSQ scores were high in vulnerability to illness, mistrust/abuse, social isolation, unrelenting standards, and control. These schemas reveal hypervigilance, perfectionism, and emotional withdrawal. The EDE-Q showed severe restraint (5.40), high weight concern (5.00), and shape concern (4.00), reflecting extreme need for control and fear of emotional chaos.

In the Rorschach, Cyno gave responses marked by fantastical, violent, or ambiguous content. Symbolic imagery was disorganized, with minimal affective depth. His responses often dehumanized figures, showing a defensive strategy against emotional closeness. In the TAT, he presented dramatic or chaotic scenes but dealt with them through emotional detachment, collapse of meaning, or avoidance of resolution. Narratives lacked integration of loss, separation, or self-development.

In terms of individuation-autonomy, both projective tools indicate fragile self-structure, limited emotional differentiation, and avoidance of symbolic separation. Cyno fails to represent an individuated self or engage with autonomous themes. His control mechanisms and cognitive rigidity act as defenses against psychological separation and relational engagement. His individuation process remains blocked by fear, suppression, and symbolic collapse.

General Conclusion:

Based on the results obtained from the application of Jeffrey Young's Early Maladaptive Schemas Scale and the Eating Disorder Examination Questionnaire, in addition to the findings of the projective tests (Rorschach and Thematic Apperception Test), and supported by the clinical interview data, we concluded the following:

The analysis of the cognitive schemas revealed a clear dominance of the emotional deprivation, social isolation, unrelenting standards, and defectiveness/shame schemas. These patterns appeared consistently and intensely across all three cases, reflecting deeply ingrained dysfunctional beliefs. They significantly affected the participants' self-perception, emotional regulation, and interpersonal relationships. The persistence of such schemas contributed to inner tension, harsh self-judgment, and emotional suppression,

thereby weakening adaptive psychological development and hindering the formation of a stable and independent self-identity.

The Eating Disorder Examination Questionnaire (EDE-Q) results confirmed the presence of restrictive eating behaviors, heightened concern over body weight and shape, and an excessive need for control. These behaviors were consistent with the internal cognitive structures identified by the Early Maladaptive Schemas (EMS). For instance, the unrelenting standards schema matched the compulsive dietary restraint, driven by perfectionistic tendencies and fear of failure. The defectiveness/shame schema aligned with body dissatisfaction and feelings of unworthiness, while the emotional deprivation schema correlated with using food control as a substitute for unmet emotional needs. The overlap between these behavioral symptoms and maladaptive schemas suggests that disordered eating patterns served as a coping mechanism for deeper emotional and cognitive conflicts.

The Rorschach and TAT protocols presented converging clinical indicators. Across all three cases, we observed signs of internal tension, poor integration between self and others, limited emotional insight, and reliance on primitive defense mechanisms such as avoidance, detachment, and intellectualization. The symbolic content across protocols consistently revealed themes of anxiety, rejection, failure, isolation, and unresolved relational trauma. These psychological elements pointed to difficulties in affective processing, identity cohesion, and personal agency.

These same protocols also revealed a notable disruption in the individuation–autonomy process. All three adolescents demonstrated challenges in separating from internalized authority figures, and struggled to assert their personal values and independent decisions. There was a marked dependency on external validation and a pervasive fear of abandonment, which led to identity confusion and inhibited self-differentiation. The inability to establish clear personal boundaries and to sustain autonomous functioning highlighted a developmental blockage in the path toward psychological individuation, a process that should normally emerge during adolescence.

Discussion of the Hypotheses in Light of the Study Results and Previous Studies:

First Hypothesis

Standards/Perfectionism and Social Isolation/Alienation are the most common types of maladaptive cognitive schemas among highly gifted adolescents.

The results supported this hypothesis. All three cases showed a high presence of unrelenting standards and social isolation schemas in the Young Schema Questionnaire. These schemas were reflected in the participants' perfectionistic attitudes, intense fear of failure, difficulty accepting mistakes, and withdrawal from social contexts. The findings are consistent with Öcal & Güler (2021), who found a significant correlation between perfectionism and maladaptive schemas in young adults, and with Hanna David (2018), who reported that gifted adolescents often experience isolation and high expectations that increase internal stress.

Second Hypothesis

Early maladaptive cognitive schemas contribute to the development of psychogenic eating disorders in highly gifted adolescents.

This hypothesis was confirmed through the overlap between EMS and EDE-Q results. Schema domains such as defectiveness/shame and emotional deprivation were strongly related to symptoms of body dissatisfaction and restrictive eating. The desire to compensate for emotional voids and perceived inadequacy through control over food and body was evident. These findings are aligned with Holland et al. (2013), who identified perfectionism and low self-worth as key predictors of eating disorder onset and persistence.

Third Hypothesis

Early maladaptive cognitive schemas have a significant influence on the individuation-autonomy process in highly gifted adolescents.

Projective test results (Rorschach and TAT) showed identity confusion, fear of separation, and dependence on external validation, which directly reflect an impaired individuation process. Emotional deprivation and abandonment schemas appeared to hinder the psychological separation needed for individuation. These results are consistent with Grotevant & Cooper (1986), who emphasized the role of emotional security and identity boundaries in supporting healthy individuation. Similarly, the findings reflect Winnicott's view on the need for a stable emotional base to develop autonomy.

Fourth Hypothesis

Highly gifted adolescents with strong dependency schemas struggle significantly more with autonomy compared to those with other maladaptive schemas.

Although the sample was limited, the findings partly confirmed this hypothesis. Participants with high scores in dependency-related schemas (e.g., emotional deprivation, abandonment) showed the most difficulty in expressing independent thought and decision-making. They showed emotional reliance on internalized others and hesitated to define personal boundaries. This aligns with Manuela Fleming's (2005) findings, where emotional dependence reduced autonomy achievement during adolescence, especially in emotionally over-involved family systems.

Conclusion:

This study emerged from a central research question focused on identifying the nature of dominant early maladaptive cognitive schemas and the process of individuation–autonomy among highly gifted adolescents suffering from psychogenic eating disorders. A deep clinical analysis was conducted on three individual cases, using a diverse set of diagnostic tools: the clinical interview, Young Schema Questionnaire, Eating Disorder Examination Questionnaire, and two projective tests (Rorschach and Thematic Apperception Test).

The findings revealed that, despite their high intellectual capacity, the adolescents exhibited psychological vulnerability, emotional rigidity, and inner conflict. The clinical interviews showed anxiety, emotional detachment, difficulty in self-expression, and tension related to self-worth and social expectations.

The Young Schema Questionnaire indicated the dominance of specific maladaptive schemas, notably emotional deprivation, social isolation, unrelenting standards, and defectiveness/shame. These schemas shaped a negative and conditional self-image, reinforced the need for external approval, and disrupted affective relationships.

The Eating Disorder Examination Questionnaire confirmed that disordered eating behaviors were consistently present and functioned as symbolic coping mechanisms. Food restriction, excessive concern with body image, and compensatory control behaviors were used to manage inner anxiety and suppressed emotional needs.

Projective tests (Rorschach and TAT) provided deeper insight into unconscious dynamics, revealing disturbed ego boundaries, unresolved attachment conflicts, and identity fragmentation. All three participants showed difficulty in the individuation process, as they struggled to psychologically

separate from internalized authority figures and establish a stable, autonomous identity.

Overall, the results demonstrated that early maladaptive cognitive schemas play a central role in undermining the individuation-autonomy process and contribute to the emergence of psychogenic eating disorders as psychological defenses.

Scientific Perspectives and Suggestions

1. Integration of Clinical Approaches

Mental health professionals working with gifted adolescents should combine cognitive schema therapy with projective and psychodynamic methods to explore unconscious conflicts.

2. Preventive Screening

Institutions working with gifted students should implement early screening for maladaptive schemas and emotional distress to reduce the risk of developing eating disorders or identity disturbances.

3. Family-Based Interventions

Since many schemas originate in early caregiving experiences, involving parents in therapeutic work may help reconstruct healthier emotional narratives and support autonomy development.

4. Educational Programs for Counselors and Teachers

Training school staff to recognize the emotional needs of gifted adolescents—beyond academic performance—can foster healthier self-perception and social integration.

5. Future Research Directions

- Expand the sample size to explore schema patterns in more diverse gifted profiles.
- Examine gender differences in schema expression and autonomy challenges.
- Conduct longitudinal studies to assess the evolution of schema-based distress across developmental stages.

This research highlights the importance of understanding the complex inner world of gifted adolescents and calls for multidimensional therapeutic strategies tailored to their unique cognitive and emotional architecture.

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Appendix

بروتوكول رورشاخ لميكا:

البطاقات	التمرير	التحقيق	التنقيط
<p>Planche I</p> 	<p>1:55 – 3</p> <p>1 – خفاش</p> <p>2 – فراشة</p> <p>3 – جلد نع حيوان</p>	<p>- شغل عندو جنحين</p> <p>هكذا، بانتلي كعادو</p> <p>عندو زوج كيف كيف</p> <p>هكذا شغل جنحين،</p> <p>زعما كشلغل هادو</p> <p>جنحيه.</p> <p>- كيف كيف على</p> <p>الجنحين</p> <p>- يعني أي حاجة</p> <p>تشوفها تنخيل حاجة؟</p> <p>أي حاجة مثلا</p> <p>هاذي؟</p> <p>الفاحص: نعم</p> <p>- وهاذي ثاني وجه</p> <p>تع ثعلب</p> <p>R+ Dd14 F-</p> <p>Ad</p> <p>- هادي كامل بانتلي</p> <p>جلد نع حيوان</p>	<p>1- D4 F+ Ad</p> <p>2- D4 F+ Ad</p> <p>3- G F- Ad</p>
<p>Planche II</p> 	<p>1:14 – 1:06</p> <p>ما فكرتني في حتى حاجة</p>	<p>- تبان وجه هكذا تع</p> <p>كشما حيوان</p> <p>R+ D5 F+-</p> <p>Ad</p> <p>الفاحص: وشن</p> <p>حيوان؟</p> <p>المفحوص: معلباليش</p> <p>منغدرش نوصفو نسيتو</p> <p>- تبان وجه دب</p> <p>R+ Ddo17 Ad</p> <p>F+-</p>	<p>Refus Choc</p> <p>au noir et</p> <p>rouge</p>

Refus Choc au noir et rouge → Refus	مبانلي والو هنا الفاحص: مام كحاولت تفصل فيها مجاك والو في بالك؟ ايه مجاني والو	1:25 – 1:22 مجانى والو	Planche III 
4- D2 F+ Ad	- تبان كشما وجه تع حيوان الفاحص: وشمين حيوان؟ المفحوص: معلباليش	3:00 – 1:53 المفحوص: كفاه نغدر نجابوب على اللوحة هاذي؟ الفاحص: كي تشوف اللوحة وشي هي الصورة لجي في راسك؟ 4- جاني وحد الحيوان هكذا نسييت اسمو	Planche IV 
5- G F+ A Ban Choix +	- شغل عندو جنحين تاوعو مع الوجه يشبه للخفاش شغل كمبلي يشبهلو	1:15 – 1:07 5- تشبه لخفاش	Planche V 
Refus Choc au noir → Refus	مبانلي والو، الفاحص: مغدرت تتفكر والو مغدرت تتخيل والو؟ ،الحالة: ايه	1:17 – 1:10 مجانى والو	Planche VI 
Refus Choc Choix- → Refus	ثاني مجاني والو	1:13 – 1:05 والو الفاحص: مكايين والو؟ المفحوص: والو.	Planche VII 
6- D2 F- A 7- D5 F+ Anat / A Choix+	- هاذي بانتلي ثور - هاذي تبان ققص صدري تع ذيب - وهاذي تبان وجه تع ذيب R+ DDo F- Ad	1:05 – 51 6- ثور هذا 7- ققص صدري تع ذيب	Planche VIII 
Refus Choc au c	- بانولي هاذا قرون تع غزالة R+ D6 F- Ad	47 – 40 والو	Planche IX 

Refus Choc au c Choix-	- هذا بيان يشبه نوع من أنواع كائنات البحر بيان حصان البحر هكذا R+ D9 F+- A	1:30 – 1:13 ماني نشوف في والو، المفحوص: عندك الإجابات تاعهم؟ الفاحص: مكانش فيهم إجابات ضرك على حساب الشخص كل واحد كفاه يشوفهم وثاني مكانش إجابة صحيحة و غالطة.	Planche X 
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بروتوكول T.A.T لميكا:

الإشكالية	السياقات الدفاعية	القصص	اللوحات
امام إشكالية العجز الطفولي، يعكس المفحوص انسحابا حسيا ونفسيا في مواجهة تهديد خارجي مبهم، مع استخدام دفاعات بدائية تهدف إلى حماية الذات من الفقدان أو الانكشاف. تشير العزلة والسردي الفقير إلى هشاشة في التمايز الذاتي، وضعف في العمليات التمثيلية، ما قد يدل على اضطراب في تكوين صورة موحدة للذات.	بعد زمن صمت (CI-1) الذي يمثل خوفا من الدخول المباشر في التعبير، بدأ المفحوص بسؤال الى الباحث مع ابتسامة خفيفة (D3+D1+) بعدها تأتي إجابة الباحث (CI3) والذي يؤكد الصمت الاولي، بعدها باشر في التركيز على اليومي، الواقعي، الأفعال (CF-1) مع عدم ملاءمة الموضوع للمحفز (E2-1) كما ولم يحدد دوافع الصراع ولم يعرف بالشخصيات (CI- (2)، بعدها كان هناك صمت ملحوظ ضمن القصة (CI-1)، لتأتي بعدها شخصيات مجهولة (CI-2) والتركيز على الحسية، الحساسية للتناقضات (CN-2)، ليأتي	"14... قصة طويلة ولا كشغل جملة؟ (ابتسامة خفيفة) الفاحص: القصة لجيك في راسك. يحاول يحفظ هاو مركز على لحفاظة باش يفهم مليح....."11 باش ميسمعش الضجيج تع لقدامو هذوك... "14 ثاني سكر وذنيه هكذا ويقعد يحفظ على روحو مثلا وش راه حافظ ولا. "08'1	1 

	بعدها صمت ملحوظ ضمن القصة -CI) (1، ثم يليها اجترار (A3-1)، وقام بالتركيز على التجربة الذاتية والتركيز على اليومي، الوقاعي (CN-1+CF-1)		
امام إشكالية اللوحة الاوديبية، قام بتجنب تمثيل مشهد المثلث الأوديبى عبر اختزال اللوحة إلى فتاة منعزلة في نشاط غير عاطفي (الدراسة). هذا يشير إلى صعوبة في ادراك ما هو ممنوع، ورفض ضمني للاعتراف بالانجذاب أو الخسارة، مع ميل إلى تحييد العاطفة وتميع التوتر. الانفصال عن الموضوعات الأصلية غير ممكن، ويعاش بشكل سلبي غير ممسرح.	بعد وقت استجابة طويل (CI-1)، كان هناك دوافع صراع غير محددة مع شخصيات مجهولة وكان هناك ميل إلى التقييد وتفاصيل نرجسية بقيمة إيجابية مع مثالية -CI) (+3-CN-1+CI-2)	"26.... مع ظروف لراهي عندها تحاول تقرا. "29.	2 
ادرك المفحوص إشكالية الوضعية الاكتئابية مع ترجمة جسدية كعرض انسحابي جسدي وعاطفي تعبيراً عن فشل لم يفهم أو يربط بعلاقة سابقة. غياب المحيط والعلاقات، مع تمركز على الانطفاء، يشير إلى اكتئاب غير معالج رمزيا، حيث فقدان	بعد وقت استجابة طويل (CI-1)، كان هناك دوافع صراع غير محددة مع شخصيات مجهولة مع تفاصيل نرجسية بقيمة سالبة -CI) (-2-CN-2+2)	"22.... من كثرة الفشل والملل رقد وهو داير هكذا. "27	3BM 

<p>يعاش دون تحويل، ودون فتح نحو إعادة استثمار موضوعي.</p>			
<p>امام إشكالية تناقض الدوافع في العلاقة العاطفية، هناك عجز واضح عن تمثيل العلاقة الثنائية وما تحمله من توتر وجداني، حيث يختزل المشهد في قلق غير محدد، دون وجود للآخر العاطفي. يغيب الصراع بين الحب والعدوان، ويلغى حضور الموضوع المحبوب، مما يشير إلى دفاع تسطيحي ضد الازدواجية النفسية. يتم تجنب الانخراط في دينامية الانفصال أو الهجر، ويقدم القلق كمزاج عام بدلا من أن يكون نتيجة لعلاقة. هذه المؤشرات تعكس صعوبة في تمثيل الصراع العاطفي داخل علاقة حميمية، وانغلاقا على مستوى التمثيل الانفعالي.</p>	<p>بعد وقت استجابة طويل نوعا ما (CI- (1)، قام باحتياط كلامي (A3-1)، ومن ثم العزل بين التمثيلات او بين التمثيل والعاطفة والتعبير عن العواطف (A3- 4+B1-3)</p>	<p>"15.... شغل راه متقلق هكذا. "20.</p>	<p>4</p> 
<p>امام لوحة تبعث إشكالية الصورة الامومية التي تنظر، تبين لنا انه توجد صعوبة في التمثيل الرمزي للفضول الجنسي والمشاعر الأوديبية المرتبطة به، مع استخدام دفاعات من نوع الإنكار أو الحجب</p>	<p>بعد وقت استجابة طويل (CI-1)، بادر باحتياط كلامي (A3-1)، ليقوم بعدها باجتراء مع ارتباك الهوية وتداخل الأدوار واستحاضر الشيء السيء، مواضيع الاضطهاد (A3- 1+E-1+E2-2)،</p>	<p>"26.... شغل ظل على الباب ظل وشراه كاين مفهمتهاش هاذي. "30</p>	<p>5</p> 

<p>الإدراكي. يظهر القلق الأوديبي بشكل مشوش، ويهמש خلف مراقبة محايدة، تعكس تجنباً لاقتحام المحتوى المكبوت وخوفاً من فقدان الموضوع أو انكشاف داخلي.</p>	<p>ليميل بعدها الى الرفض وتوجيه انتقادات (CI-1+D3)</p>		
<p>امام إشكالية الام والابن في سياق الحزن، هناك تجنب للمحتوى العاطفي والرمزي للوحة، عبر إنكار شامل لقدرتها على الإيحاء أو التفسير. هذا يشير إلى إشكالية حادة في تمثيل العلاقة الأمومية ضمن سياق أوديبي محمل بالفقدان والذنب . الفجوة بين الذات والأم تظهر هنا كمنطقة مهددة، لا يمكن التفكير فيها أو تمثيلها، مما يعكس انقطاعاً في استيعاب الموضوع الأوديبي وخوفاً مبهماً من فقدان الحب الأمومي أو من التعدي على المحظور، يواجه بدفاع بدائي هو الإلغاء التام للمعنى.</p>	<p>بعد وقت استجابة طويل (CI-1)، اتى الرفض مباشرة باحتياطات لفظية ونقد للاداءات (CI-1+A3-1+D3)</p>	<p>"22.... مفهمت فيها والو "24.</p>	<p>6BM</p> 
<p>امام إشكالية التقارب بين الاب والابن، تم الغاء وجود العلاقة الأبوية رمزيا من خلال رفض تمثيل المشهد أو تحويله إلى قصة. هذه الاستجابة تشير إلى إشكالية</p>	<p>هذه المرة وقت الاستجابة كان أطول من اللوحات الماضية حيث وصل وقت الكمون الى 53 (CI-1)، ليأتي الرفض مباشرة باحتياطات لفظية</p>	<p>"53.... مكين حتى قصة "54.</p>	<p>7BM</p>





<p>أدبية في التماهي مع الصورة الأبوية، تعبر عن صراع داخلي بين الانجذاب والرفض، أو عن هشاشة في تمثّل الهوية الذكورية المرتبطة بالأب . الإنكار الكامل يعكس انسحاباً رمزياً من العلاقة مع الموضوع الأبوي، وربما خوفاً من الانكشاف أو التهديد الناتج عن التماهي غير المستقر. تظهر هنا صعوبة في تثبيت العلاقة بالأب كمصدر سلطة أو حد نفسي.</p>	<p>ونقد (CI-1+A3-1+D3)</p>		
<p>امام إشكالية العدوانية والإحصاء في العلاقة بين الرجال، يظهر المفحوص صعوبة واضحة في تمثيل المشهد الرمزي الذي تستدعيه اللوحة، عبر تسطيح المحتوى العنيف والخصائي في خطاب محايد وظيفي. هذا يشير إلى إشكالية في معالجة الميول العدوانية الذكورية والقلق الناتج عن التهديد بالخصاء داخل العلاقات الأوديبية. كما وتم اعتماد دفاع تحييدي يبعد الذات عن</p>	<p>بعد وقت استجابة طويل (CI-1)، لم يعرف بالاشخاص ولم يحدد دوافع الصراع كما قام بالتعلق بالتفاصيل الحسية والواقعية (CI-2+CF-2)</p>	<p>"18.... قاعدين يداو فيه يديرولو في عملية. 28"</p>	<p>8BM</p> 

<p>الموقف، ويفكك البعد الرمزي للصراع بين الأجيال الذكورية. يظل العنف مكبوتا، غير ممثل، ويظهر القلق من فقدان الموضوع في شكل مسطح وغير مفكر فيه.</p>			
<p>امام إشكالية الانفصال واللقاء بين الزوجين، يتجنب المفحوص بالكامل مواجهة المشاهد العاطفي الحميمي، ويقابل التمثيل الرمزي للجاذبية والانفصال بفراغ تام. هذا يدل على إشكالية في إدماج ثنائية الحنان والرغبة داخل علاقة زوجية ناضجة، وصعوبة في تمثيل الانفصال كحدث رمزي لا كارثي. الدفاع هنا يتخذ شكل إلغاء للمعنى، ما يكشف عن قصور في تخييل العلاقة العاطفية ضمن سياق أوديبى أو ما بعده، حيث تظل العلاقة بالآخر مقموعة أو غير ممثلة خوفا من التورط أو الفقدان.</p>	<p>بعد وقت استجابة طويل (CI-1)، تم رفض اللوحة مباشرة مصاحب باحتياطات لفظية ونقد للاداءات (CI-1+A3-1+D3)</p>	<p>"18.... مفهمت فيها والو" 20.</p>	<p>10</p> 
<p>وجد المفحوص صعوبة امام إشكالية اللوحة التي تعيد احياء إشكالية قبل تناسلية والقلق البدائي، حيث تدل</p>	<p>بعد وقت استجابة طويل الذي دام 33ث (CI-1)، تم رفض اللوحة باحتياطات لفظية ونقد (CI-1+A3-1+D3)</p>	<p>"33.... والو" 35.</p>	<p>11</p>

<p>استجابته الخالية من أي إنتاج على صعوبة قصوى في التفاعل مع محتوى رمزي يعود إلى مستويات نفسية نكوصية عميقة. اللوحة تستقبل كمساحة مهددة، فوضوية وغير قابلة للتمثيل، مما يفترض وجود إشكالية في تنظيم التمثيل الأولي للذات والواقع، وضعف في استيعاب المحتوى الحسي- البدايي. هذا يشير إلى اضطراب في المرحلة ما قبل التناسلية، ما يدفعه إلى تبني دفاع محض: الفراغ.</p>			
<p>امام إشكالية الغياب، يعالج المفحوص المشهد عبر اختزال العلاقة إلى مجرد آثار مادية، دون استدعاء الانفعال أو المعنى، ما يشير إلى إشكالية في تمثيل فقدان القدرة على التوجه نحو موضوع داخلي مرمم. يظهر ذلك كعجز عن إدخال الغائب في بنية سردية وجدانية، ما يعكس دينامية اكتئابية مسطحة أو ضعفا في اعتماد الموضوع المطمئن. يفهم الغياب هنا كفراغ غير متكامل، ما يبرز هشاشة</p>	<p>بعد وقت استجابة طويل (CI-1)، باشر باحتيطات لفظية (A3-1)، ليأتي بعدها ادراكات حسية-ادراكات خاطئة وشخصيات مجهولة كما وادخل شخصيات لا تظهر في الصورة -E1) 3+CI-2+B1-2)</p>	<p>"27... شغل واحد كشما راح نزهة يدور وخلي حوايجو. 38"</p>	<p>12BG</p> 

<p>نرجسية وانقطاعا في السلسلة العلائقية.</p>			
<p>امام إشكالية القدرة على البقاء وحيدا، يعالج المفحوص مشهد العزلة من خلال وصف حيادي خال من الأثر النفسي، ما يشير إلى إشكالية في تمثيل الوحدة كحالة داخلية ذات معنى وجداني . يغيب الشعور بالهجر أو التهميش الأوديبى، وتظهر الذات في موقف مراقب خارجي دون تفاعل، مما يعكس إما غياباً في الاتكاء الأمومي الداخلي، أو لجوءاً إلى دفاعات إفراغية تحمي الأنا من الانهيار عند مواجهة العزلة.</p>	<p>بعد وقت اسجابية طويل (CI-1)، ركز الحسية، الحساسية للتناقضات وترك الأشخاص مجهولين (CN-2+CI-2)</p>	<p>"25.... قاعد قدام الباب هكذا يوشف البرا. 33"</p>	<p>13B</p> 
<p>امام إشكالية اختبار الحدود بين الداخل والخارج، والخير والشر، وإحياء قضايا الاكتئاب القديمة، تدل استجابة المفحوص الفارغة على تعذر التفاعل مع لوحة تمتحن قدرات التفريق والاحتواء النفسي. غياب أي إدراك يدل على إشكالية بنوية في التمييز بين الداخل والخارج، وبين الأمن والمهدد، ما يشير إلى اختلال</p>	<p>بعد وقت استجابة طويل قدر ب 45 ث (CI-1)، قام برفض اللوحة وبتوجيه انتقادات للاداءات مع احتياطات لفظية (CI-1+D3+A3-1)</p>	<p>"45.... مبانثلي حتى حاجة 46"</p>	<p>19</p> 


<p>في آليات الاحتواء والحدود النفسية المبكرة. الدفاع هنا يأخذ شكل فراغ رمزي دفاعي، يهدف إلى تجنب الانهيار الناتج عن محتوى داخلي فوضوي غير قابل للتمثيل. يظهر بذلك قلق بدائي من نوع اكتئابي أو اضطهادي لم يتم دمجها أو التفكير فيه.</p>			
<p>رغم غنى الخطاب، يكشف المفحوص عن صعوبة في تنظيم موضوعاته الداخلية ضمن بنية علائقية مترابطة. يقدم عالما خارجيا مزدهما بالأفعال، لكن دون روابط وجدانية أو سردية، مما يعكس خلافا في تركيب الذات والآخر ضمن شبكة علاقات لها معنى. كما ويشير ذلك إلى تشتت داخلي، حيث تبنى التمثيلات كمشاهد معزولة، في غياب وحدة وجدانية أو سردية، ما يدل على هشاشة في البناء النفسي وصعوبة في الربط بين الذات وموضوعاتها بطريقة متماسكة وناضجة.</p>	<p>بعد وقت استجابة قصير (CI-1)، قام المفحوص بالابتسام (D1+)، يليها احتياطات لفظية (A3-1)، ليأتي بعدها صمت ملحوظ ضمن القصص (CI-1)، ويليه ارتباك في الهوية-تداخل الأدوار مع التركيز على اليومي الواقعي، الأفعال-مرجعية متمسكة بالواقع ووصف بتفاصيل، مع أو بدون تبرير للتفسير وإشارات اجتماعية، حس عام أو إشارات أخلاقية ليلها اشخاص مجهولين وتفكك زمني، مكاني، أو سببي منطقي (E3-1+CF-1+A1-1+A1-3+CI-2+E3-3)</p>	<p>"10... مباريات هكذا تع (ابتسام) أطفال هكذا يلعبون في الحي ولا كشما راهم يقرأوا في ليكول ولا واحد راهو يراجع في الدار هكذا ولا كشما واحد راه ياكل واحد راه ينظريني يدير في السبور...."5" واحد يصلي يقرأ قرآن. "48.</p>	<p>16</p>

البطاقات	التميرير	التحقيق	التنقيط
Planche I 	4 ث / 18 ث 1- مجموعة تينين مجموعة تع كائن هكذا 2- قناع هكذا تع واحد	مجموعة تع وحد الكائن او قناع لشخص وش يقدر يكون هذا الكائن ؟ - طائر من فصيلة الطيور	1- G F+ (A) 2- D F+ Obj / H
Planche II 	4 ث / 17 ث 3- زوج خنازير مشويين 4- وجهاز عصبي تع كائن هكذا	خنزيرين مشويين وجهاز عصبي تع كائن هكذا منيش محددو	3- D2 F+ A 4- D F+- Anat
Planche III 	6 ث / 22 ث 5- شكل هندسي هكذا.....شكل معماري هكذا واحد يخدم كلي زينة	بناء معماري Psy بم يذكرك البناء المعماري ؟ يفكرني مجسم زعما لكائن كانوا يقدسوه بكري ولا ... بكري يعبدو أي حاجة... دايرونو زينة	5- D2 F+- Arch
Planche IV 	8 ث / 38 ث 6- هذا كائن كبير هكذا... ولا كشما ... ولا زينة جاية في بلاصة مهجورة دار مهجورة..... زينة ولا وحش كبير	وحش كبير ولا - طائر محروق فحموه تع الصح R+ D FC'- A	6- D F+- (H)

7- G F+ A Ban	هذا خفاش جسمو كامل	1ث / 9 ث 7- خفاش... هذا خفاش	Planche V 
8- G/D F+- A	تنين مخلط مع قط مخلط مع طائر ... في ثلاثة يجملو كائن تمساح مخلط مع قط وطائر مزيج	5 ث / 12 ث 8- تمساح مخلط مع قط مخلط مع طائر	Planche VI 
9- Gz F- Hd	ايدي جاين فوق بعضاهم ... هذي يد نورمال و هاذي مدورة منا و هذي هنا قبضة هذي قبضة يد وهذي لايك معوج وهذي لايك نورمال	14 ث / 25 ث 9- يدين.... يدين واحد هكذا لتحت.....	Planche VII 
10- G F+ Symb	اه شعار دولة الجسم اكل كي يجي مخلط هكذا بالألوان بيان شعار دولة Psy شعار لاي دولة ؟ دولة من شرق آسيا	11 ث / 25 ث 10- شعار تع دولة كيما تع دزاي الهلل وهكذا ... نفس الحاجة	Planche VIII 
11- Gz Kob C- Obj/ H	قناع يخرج منو نار زرقة Psy وش يفكر	7ث / 17 ث 11- قناع تع واحد مخرج نار زرقة	Planche IX 

	<p>هذا القناع ؟ قناع امبراطور كان عندو دول كبيرة محتلة وهو متسلط على جد هم اكل Psy مرت عليك في قصة ؟ اه بزاف تاع المغول</p>		
<p>12- Dz FC- Arch 13- D7 kan c- Ad</p>	<p>قلعة فيها وين يدافعو وملتحت كاين شكل تمساح حال فمو وين يدافعو هذو لي هنا اكل الأزرق الأصفر البرتقالي و الأخضر مراكز الدفاع تمساح فاتح فمو لحمر هذاك اكل</p>	<p>15 ث / 45 ث ماااا 12- قلعة... قلعة هكذا كبيرة تع واحد هكذاك بانيتها في اا وين يدافعو 13- ومالتحت هكذا جاي كلي تمساح... جاي كي تمساح فاتح فمو</p>	<p>Planche X</p> 

بروتوكول T.A.T لسينو:

الإشكالية	السياقات الدفاعية	القصص	اللوحات
<p>امام إشكالية العجز الطفولي، تعكس استجابة المفحوص في هذه البطاقة إشكالية نرجسية طفولية مرتبطة بالعجز والحرمان</p>	<p>مع دخول مباشر (في التعبير -B2) (1، قام المفحوص بايماءات (D1+)، ليستحضر بعدها</p>	<p>'1.. هذا ذاك لي يعزفو بييه ... وحد الطفل هكذا كان حاب يعزف ومخلاو هش... غاضو الحال ووراه بيكي "16..."</p>	<p>1</p> 

<p>المبكر، حيث تظهر الرغبة المحبطة دون وجود موضوع واضح للمنع، ما يدل على ضعف في استيعاب قلق الخصاء وتمثيله. الانفعالية الحادة (البكاء) تعبر عن إصابة نرجسية نتيجة عجز في تحقيق رغبة ذاتية أساسية، دون وجود قدرة على تحويل الإحباط إلى بنية رمزية أو سردية. تشير هذه الدينامية إلى هشاشة في عمليات الاستماج والتمييز بين الذات والموضوع، مع ميل للانغلاق والانكفاء الدفاعي عند مواجهة فقدان أو تقييد.</p>	<p>الشيء السيء كما ولم يحدد دوافع الصراع ولم يعرف بالشخصيات (E2-2+CI-2)، مع مشاعر قوية او مبالغ فيها (B2-2).</p>		
<p>امام إشكالية اللوحة الأوديبية، يتجنب المفحوص تمثيل المثلث الأوديبى عبر نقل اللوحة إلى فضاء اجتماعي تاريخي محايد، حيث تختزل العلاقة في أدوار وظيفية (رجال يعملون، نساء يراقبن). هذا يشير إلى إشكالية في مواجهة المضمون الأوديبى والانفعالات المرتبطة به (الرغبة، التنافس، الاستثناء)، مع اعتماد آلية تحييد</p>	<p>بعد وقت استجابة قصير (CI-1)، باحتياط لفضي (A3-1)، ليقوم بعدها باستحضار الإشارات الأدبية او الثقافية (A1-4) مع التعلق بالتفاصيل الحسية والواقعية والتركيز على الحسية (CF-2)، الحساسية للتناقضات (CN-2) كما ولم يحدد دوافع الصراع ولم</p>	<p>7'.... بلي هذاك اممم.. بلي بكري كانوا الناس يستخدمواا .. الأحصنة والعبيد باهياا لزراعة وكذا، وكانو النساء يتفرجو فيهم. 13 "</p>	<p>2</p> 

<p>قوية تجنب الذات التورط الرمزي أو الوجداني. يفهم ذلك كصعوبة في الاعتراف بالجاذبية الجنسية، ومقاومة لانفصال ضروري عن الموضوعات الأصلية، ما يبقي الذات ملتصقة بموقع خارجي غير فاعل أمام علاقة يمنع الدخول إليها.</p>	<p>يعرف بالشخصيات (CI-2)</p>		
<p>امام إشكالية اللوحة الاكتئابية مع ترجمة جسدية، يبين المفحوص تمرزا صريحا حول وضعية اكتئابية حادة غير معالجة رمزيا، حيث يعبر الفقدان عن نفسه من خلال رغبة موجهة ضد الذات دون قدرة على الحداد أو تمثيل الخسارة. يظهر عجز عن ربط الحزن بموضوع محدد، أو عن تحويل الفقدان إلى سرد أو معنى. تعكس هذه الاستجابة صعوبة في إنجاز الحداد أو إعادة استثمار الرغبة في موضوعات جديدة، وتشير إلى هشاشة في البنية الاكتئابية، مع تهديد بالانطفاء النفسي في حال الانفصال أو الخسارة.</p>	<p>مع دخول مباشر في التعبير (B2- 1)، قام المفحوص بالتمسرح (B2- 1) ليستخدم بعدها الخيال أو الحلم (A2-1) ليأتي بعدها الاجترار (A3- 1) ومن ثم استحضار مشاعر قوية أو مبالغ فيها. (B2-2)</p>	<p>'5 ... هذا واحد حاب ينتحر ولا كذا.... واحد هكذا كان حاب ينتحر ومقدرش.. جاه اليأس. " 18</p>	<p>3BM</p> 

<p>امام إشكالية تناقض الدوافع في العلاقة العاطفية، يكشف المفحوص عن معالجة صراعية للمشهد العاطفي، حيث تفرغ العلاقة من محتواها الوجداني وتقدم كساحة مواجهة جسدية بين ذكرين حول امرأة تتدخل لكنها لا تعاش كمحبوبة بل كعنصر فاصل. يعكس ذلك إشكالية في تمثيل الازدواجية العاطفية (الحب/العدوان) ضمن العلاقات الثنائية، مع صعوبة في استيعاب الانفصال أو التفضيل كواقع رمزي. تتجسد مشاعر التهديد أو الإقصاء عبر أفعال بدنية غير مشروحة، ما يشير إلى محدودية في القدرة على الولوج إلى التوترات العاطفية الأوديبية وفهم معانيها النفسية.</p>	<p>مع دخول مباشر في التعبير (B2-1)، لم يعرف بالشخصيات (CI-2) كما وذكر دقة كمية (A1-2) مع تمسرح واجترار في الكلام (B2-1+A3-1) ليدخل بعدها شخصيات لا تظهر في الصورة (B1-2) ويستحضر شاعر وتمثيلات شديدة-تعبيرات خام مرتبطة بمواضيع عدوانية (E2-3)</p>	<p>5 '... واحد كان راح يتعافر مع وحدوخر ووهاذي حكمت واحد منهم... تفصل مبيئاتهم.. ز عما جاية تفصل مبيئاتهم ولات شدت واحد. 18 "</p>	<p>4</p> 
<p>امام لوحة تبعث إشكالية الصورة الامومية التي تنظر، اظهر المفحوص صعوبة واضحة في تمثيل التوتر المرتبط بالفضول الجنسي، والذنب الأوديبية، حيث تقدم المرأة في</p>	<p>بعد وقت استجابة قصير (CI-1)، كان هناك اضطراب في بناء الجملة مع عدم التعريف بأشخصيات وغموض وعدم وضوح في</p>	<p>7 '... فالأ وحدة كانت في الليل راقدة وشافت الضو طفات الشميرة راحت .. هكذا. 15 "</p>	<p>5</p> 

<p>مشهد غير مترابط المعنى، كمجرد فاعل جسدي ينفعل بالظرف ولا يمثل كموضوع داخلي محمل. يعكس الخطاب مقاومة شديدة تجاه تمثّل المشهد البدائي أو الاعتراف بالرغبة والمراقبة، مع غياب تام للتعبير الانفعالي أو التحليل السردي. هذا يشير إلى قلق بدائي يرتبط بخسارة الحب الأمومي أو بتهديد بالخصاء الرمزي، يواجه بانسحاب رمزي وانطفاء تمثيلي.</p>	<p>الكلام يتبعها ادراكات حسية- ادراكات حسية خاطئة (E4- 1+CI-2+E4- 2+E1-3)</p>		
<p>امام إشكالية الام والابن في سياق الحزن، تمثّل الاستجابة ترجمة بدائية ومباشرة للتوتر الأمومي - الأوديبى، حيث يعبر عن العلاقة الأمومية عبر صراع جسدي غامض، دون مشاعر فقدان أو حزن أو حنين. يظهر ذلك صعوبة في الاعتراف بالمحارم، ورفضاً للتحول الأوديبى الذي يفرض الانفصال عن الأم كموضوع ليبيدي. تكتشف الاستجابة عن ضعف في القدرة على تمثيل</p>	<p>مع دخول مباشر في التعبير (B2- 1)، قام باستدخال تمثيلات شديدة- تعبيرات خام مرتبطة بمواضيع عدوانية ليليها التركيز على العلاقات بين الأشخاص كما ولم يحدد دوافع الصراع ليليها التردد بين تفسيرات مختلفة (E2-3+B1- 1+CI-2+A3- 1)</p>	<p>5'... واحد يتعافر مع مو ولا لعجوز. 18"</p>	<p>6BM</p> 

<p>العلاقة الأمومية كعلاقة داخلية رمزية، مما يدفع إلى التعامل معها من خلال نمط عدواني خام، ينم عن قلق أولي من فقد الحب أو من الانفصال النفسي دون بديل.</p>			
<p>امام إشكالية التقارب بين الاب والابن، تعكس استجابة المفحوص صعوبة في تمثيل العلاقة الأبوية كعلاقة وجدانية معقدة، حيث يحول الأب (أو بديله) إلى مدير وظيفي محايد، وتختزل العلاقة في مستوى تنظيمي عقلاني. يكشف هذا عن إشكالية في التماهي مع الصورة الأبوية، تتمثل إما في غيابها كموضوع داخلي، أو في تجنب الصراع والتقارب معها. تظهر الاستجابة دفاعا معرفيا ضد دينامية التوتر الأوديبي، واستبدالاً للبعد الرمزي العاطفي برؤية شكلية-وظيفية تخفي تناقض العلاقة الأب/ابن.</p>	<p>مع دخول مباشر في التعبير -B2) (1، باشر المفحوص في الاجترار -A3) (1، ليقوم بعدها على التركيز على العلاقات بين الأشخاص والتركيز على اليومي، الواقعي (B1-1+CF- 1)</p>	<p>4 ' ... واحد هذا مدير تاع شركة ولا قاعد يقول لواحد من عمالو خطة... استراتيجية ديالهم. 10 "</p>	<p>7BM</p> 
<p>امام إشكالية العدوانية والإخفاء في العلاقة بين الرجال، يظهر خطاب المفحوص مواجهة غير مباشرة</p>	<p>بعد وقت استجابة قصير (CI-1)، كان هناك اختلال في بناء الجملة ليليتها ادراك أشياء</p>	<p>10 ' كانوا يحاولو هذاك انو يعالجوا واحد والطفل هذا هو المسؤول انو مريض هكذا... هذا هو لي قلب هذا متعذب</p>	<p>8BM</p>

<p>مع محتوى اللوحة، حيث يتم إسقاط الرغبة العدوانية على "الطفل" الذي يحمل مسؤولية إحداث الضرر. هذا يشير إلى إشكالية في استيعاب الرغبة التدميرية تجاه الآخر الذكوري (الأب المحتمل)، مع تفعيل دفاع إسقاطي يتجنب التورط في الذنب الأوديبوي. يتم التعامل مع القلق الناتج عن الخصاص أو الذنب عبر إنتاج مشهد إصلاحي (الأطباء)، مما يعكس محاولة جزئية لترميم الذات بعد التعدي الرمزي، دون القدرة على الاعتراف الداخلي الكامل بالصراع. تتجلى بذلك دينامية عدوانية غير متكاملة، محفوفة بالذنب، ومفصولة عن الأنا بواسطة دفاعية.</p>	<p>متدهورة أو شخصيات مريضة كما ولم يعرف بالاشخاص ولم يحدد دوافع الصراع وذكر أيضا تفاصيل نرجسية بقيمة سالبة ليليتها مشاعر وتمثيلات شديدة-عبيرات خام مرتبطة بمواضيع عدوانية -E4) (E4-1+CI-3-2+CN-3-+E2-3)</p>	<p>والطبا جايين يعالجوه ... " 24</p>	
<p>امام إشكالية الانفصال واللقاء بين الزوجين، يقدم المفحوص مشهدا ذو حمولة أوديبية واضحة - علاقة أخ بأخته في وضعية حميمية - دون تفعيل دفاعي واضح، مما يشير إلى صعوبة في إدماج المحارم</p>	<p>بعد وقت استجابة قصير المفحوص سرده برمزية شفافة ليليتها بالتركيز على العلاقات بين الاشخاص (B3-2+B1-1).</p>	<p>" 8أخ قاعد بيوس في ختو. 10 "</p>	<p>10</p> 



<p>ضمن التمثيلات العاطفية والجنسية. هذا يدل على تداخل في التمثيلات العلائقية بين الحنان العائلي والرغبة الجسدية، وعلى هشاشة في التمييز بين المواقع النفسية داخل العلاقات الأولية. غياب الذنب أو التوتر يشير إلى قصور في إدراك المعايير الرمزية التي تنظم المحرمات العلائقية، ما يترك المجال مفتوحاً أمام تمثيلات غير ناضجة للرغبة والارتباط.</p>			
<p>امام إشكالية اللوحة التي تعيد احياء إشكالية قبل تناسلية والقلق البدائي، يظهر خطاب المفحوص صعوبة كبيرة في مواجهة المحتوى السريالي- النكوصي للوحة، حيث يحول القلق البدائي الذي تثيره إلى مشهد كارثة طبيعية خارجية دون مضمون وجداني أو رمزي. هذه الاستجابة تدل على فشل في تمثيل الحركات الارتجاعية البدائية، وعلى صعوبة في استيعاب القلق الناتج عن تفتت الحدود</p>	<p>بعد وقت استجابة قصير (CI-1)، قدم المفحوص ايماءات (D1)، رافقها ادراكات حسية خاطئة وتمثيلات لافعال مرتبطة او غير مرتبطة بحالات عاطفية مثل الخوف او الكارثة او الدوخة وهذا يبين عدم ملاءمة الموضوع للمحفر (E1-3+B2-3+E2-1)</p>	<p>" 6 ...أمم..تسونامي ااا .. تسونامي صرا على احد السواحل هكذا تاع قرية ... 15 "</p>	<p>11</p> 

<p>النفسية أو الانهيار الداخلي. يتم اللجوء إلى إفراغ المشهد من الذات، مما يعكس نمط دفاعي بدائي ضد مخاوف من نوع الذوبان أو الفقدان الأولي.</p>			
<p>امام إشكالية الغياب، يعكس خطاب المفحوص تمثيلاً باهتا ومجزأ لموضوع الغياب والفقد، حيث تسرد الأفعال دون رابط عاطفي أو رمزي، ويعاش الفقد كتحرك ميكانيكي نحو العدم. يظهر هذا الخطاب صعوبة في تمثيل الفقدان كعلاقة داخلية مع موضوع غائب أو مفقود، مع انعدام وجود "موضوع مرمم" يمكن الاعتماد عليه. هذا يكشف عن دينامية نرجسية أو اكتئابية غير متحولة، حيث يتم التعامل مع الهجر من خلال انسحاب وجداني وفراغ تمثيلي، بدلا من تحويل الحزن أو طلب النجدة من الداخل.</p>	<p>بعد دخول مباشر في العتير (B2-1)، قام بالاجترار كما ولم يعرف المفحوص بالشخصيات وادخل شخصيات لا تظهر في الصورة (A3-1+B1-2+CI-2)، ليقوم بعدها بالتذبذب بين رغبات متناقضة. (B2-4)</p>	<p>5 " 11.. واحد واحد ز عما راح يهاجر بقارب.. و لا كيما حبس الل ومبعد هو قارا قدام شجرة وراح. 21 "</p>	<p>12BG</p> 
<p>امام إشكالية القدرة على البقاء وحيدا، تمثل استجابة المفحوص مشهد</p>	<p>بعد وقت استجابة قصير (CI-1)، تمسك المفحوص</p>	<p>8'.... طفل فقير قاعد كذا قاعد قدام هذيك الدار باه يجيه ظل. 15 "</p>	<p>13B</p>

<p>عزلة مكثفة، يعرض فيها الطفل ككائن سلبي، ينتظر ظلاً كمصدر حماية غير مباشر، ما يدل على هشاشة في البناء الداخلي المتكئ، وصعوبة في استدعاء موضوع أمومي مرمم. يظهر فقدان في هذه اللوحة كغياب تام للحماية، دون قدرة على التعبير أو الفعل، مما يشير إلى فجوة نرجسية وافتقار إلى قدرة التحمل الذاتي للوحدة يفهم ذلك كعجز في تحويل التجربة العلائقية إلى اعتماد داخلي آمن، ما يجعل الوحدة تُعاش كفراغ أو انتظار دون نهاية.</p>	<p>بتفاصيل نرجسية بقيمة سلبية (-CN3)، كما ولم يعرف بالأشخاص (CI-2)، وقام أيضاً بالتركيز على الحسية، الحساسة للتناقضات (CN-2)</p>		
<p>وجد المفحوص صعوبة أمام إشكالية اختبار الحدود بين الداخل والخارج، حيث تكشف عن انهيار مؤقت في القدرة على التفكير أو التمثيل الرمزي، نتيجة استثارة قلق بدائي لا يحتمل. يتم اللجوء إلى دفاع بسيط ومباشر: "معرفتش"، ما يشير إلى هشاشة في التمايز بين الذات والموضوع، وبين الداخل والخارج،</p>	<p>بعد وقت استجابة قصير (CI-1)، قام المفحوص برفض اللوحة والانتقاد (CI-1+D3).</p>	<p>14'.....معرفتش مفهمنهاش مليح. 16"</p>	<p>19</p> 

<p>أمام صورة فوضوية تمتحن أساسات التنظيم النفسي. تفهم هذه الاستجابة كعلامة على فشل مؤقت في وظيفة الحاوية (fonction contenante) في مواجهة محتوى سريالي يعيد تنشيط مخاوف اكتئابية أو اضطهادية قديمة، لا يمكن استعابها داخل بنية نفسية ثابتة.</p>			
<p>اما فراغ اللوحة، يكشف عن فراغ رمزي عميق وهشاشة في البنية النفسية المنظمة للممثلات الداخلية والخارجية. يعجز عن ملء الفضاء الخالي بأي محتوى رمزي، مما يدل على صعوبة في تنظيم الذات والعلاقات ضمن بنية داخلية متماسكة. هذا الانهيار في القدرة على التخيل أو السرد يكشف عن نقطة عري نفسية حيث لا توجد روابط تمثيلية أو موضوعات داخلية قابلة للاستدعاء، ما يشير إلى بنية ذات نرجسية هشة تعاني من انقطاع تمثيلي وعلائقي أمام الفراغ أو العدم.</p>	<p>بعد الدخول المباشر في التعبير (B2- 1)، قام المفحوص بتوجيه طلب الى الفاحص (D3)، ليأتي بعدها جوابه (CI-3)، ثم صمت اولي قصير (CI-1)، ليأتي بعدها اجترار (A3- 1)، ليأتي بعدها ميل الى الرفض (CI-1).</p>	<p>1 " اللوحة فرغانة نخدم منها قصة ؟ الفاحص : نعم ...عالم فرغان خلاص كاين برك بياض..عالم لونو بيض وفرغان خلاص حتا حاجة كاينة. 27 "</p>	<p>16</p>

بروتوكول الوروشاخ لاياتو:

البطاقات	التمرير	التحقيق	التنقيط
Planche I 	12ث / 2:02 د 1- مم مرآة بجنحين... كشغل مرآة عندها جناح ... مطلعة يديها 2- ذيب	- هاهو راسها هاهم يديها طالعين وهذو جنحين	1- Dd14 Dd 13 Kp- H 2- Dd F- A Choix +
Planche II 	13ث / 3:23 د 3- دب 4- طفل صغير رضيع 5- راس جاجة ولا ديك 6- أرنب رأس أنب 7- شغل زوج يخطو في يديهم	هذا هو الدب +وهذي غوريلا - R ⁺ D FC ^{'-} A هذا ارنب وهذا ثاني راس ارنب بصح ينفخ R+Dd Kp- A + عندك ناس مطلعة يديه R+Dd Kp- H زوج يخطو يديهم بانلي غير يديهم	3- D F+ A 4- D F- H 5- Dd F ⁺⁺ Ad 6- Dd F ⁻ Ad 7- Do Kp ⁺ Hd
Planche III 	11ث / 3:50 د 8- وجه تاع واحد يخلع ولا يعيط 9- قرد ولا 10- سيف 11- غصن شجرة 12- حصان	هذا قرد وهذا قرد + رأس مرآة كبيرة عجوزة R+ Dd	8- D4 Kpclob ⁺ - Hd 9- D F ⁺ A R. Sym 10- D F ⁻ Obj 11- D F ⁺ Bot

12- Dd F ⁻ A 13- Dd F ⁻ Obj Choix-	Fclob ⁻ Hd + عندك حوتة R+ Dd F- A	13 - منجل	
14- Dd F ⁻ Hd 15-Dd12 F ⁻ A 16- Do F ⁻ Obj/Pays 17- Ddo K _{ref} ⁻ H 18- D F ⁺ Ad 19- D F ⁻ Ad 20-Dd K _{st} ⁻ H 21-Dd K ⁻ H 22- Dd F ⁻ Hd 23- Dd FC ['] Ad 24- Dd F ⁺ A Choix-	+ راس نسر R ⁺ Dd F ⁻ Ad + راس جمل R ⁺ Dd F ⁻ Ad نسي اين شاهد يد الانسان	35ث / 7:21 د 14- وجه تاع انسان 15 - شغل خروف بقرون 16- سيف بين زوج جبال 17- طفلة دنق في مراية 18- كاين راس تع حيوان بصح شغل معرفتوش 19- ذيل تع عقرب 20- شغل واحد يدنق بشق عين متخبي ويدنق 21- واحد يعيط 22- يد تع انسان 23- غراب رأس غراب 24- ورأس تع ضفدع معزة معزة	Planche IV 
25- Do F ⁺ (H) 26- D F ⁺ Ad 27- D Kp ⁺ Ad 28-Do FC ['] Ad 29- Do F ⁻ H/obj 30- D F ⁺ Geo 31- Dd Fclob ⁻ Bot 32- Ddo kp- H 33- Do K ⁻	شخص عندو جنحين راس نملة	7ث / 5:13 د 25- شخص عندو جناح..... 26- تمساح راس تع تمساح..... 27- شغل عصفور فاتح فمو بصح هذاك لي يطير.....تاع لبحر 28- نملة 29- مرآة منقبة لابسة نقاب 30- جبل 31- غصن شجرة بلا أوراق 32- شخص عندو لحية فاتح فمو 33- واحد يضرب بسيف	Planche V 

<p>H/Obj 34- G F⁺ A Ban</p>		<p>34- طائر</p>	
<p>35- Dd F⁻ Bot 36- D K⁺⁺ H 37- Dd F⁻ Ad 38- Dd F⁻ (A) 39- D F⁺ Ad 40- Dd F⁻ Ad 41- D F⁺⁺ Geom 42- D kob_{st}⁺ Obj 43- Dd F- Ad</p>	<p>نسي اين شاهد الاوزة سيف بين زوج حجرات</p>	<p>28 ث / 4:58د 35- حشيش 36- شغل واحد ماسي هكذ شغل يضرب 37- رأس بطة 38- رأس تنين 39- فراشة جنحين فراشة 40- رأس إوزة 41- نجمة خماسية 42- سيف حاصل في شجرة III حجرة ... شغل مغروس 43- رأس تع فأر</p>	<p>Planche VI </p>
<p>44- D F+ A 45- Dd F-Hd 46- Dd F- Ad 47- Dd E- Frag 48- D F+ Ad 49- Dd Kan- A 50- D FE+ Pays 51- Ddo K- H/Pays 52- Dd Kp- A 53- Ddblo K- H/arch 54- D KE₊- H/Obj</p>	<p>-نسي أين شاهد رأس الانسان - نسي اين شاهد رأس الكلب - نسي اين شاهد افعى فاتحة</p>	<p>9 ث / 6:03د 44- فراشة 45- رأس أنسان 46- رأس كلب راس ورقبة 47- دخان 48- فيل رأس فيل 49- ثور واقف على زوج رجلين شغل كابرا على زوج رجلين 50- جبال بيناتهم نهر 51- واحد يتسلق في جبل 52- افعى فاتحة فمها 53- شخص شغل يمشي بين زوج حيوط في بلاصة ضيقة</p>	<p>Planche VII </p>

	فمها شخص يمشي من وراه الدخان	54- شخص من وراه الضباب	
Choc au C 55- D KobE _{clob+} -Obj		59 ث / 1.13 د 55- شغل حاجة تتقطع.. قماش	Planche VIII 
56- Dd F- A 57- Dd K- H/ Scene 58-Dd F- Ad 59- Dd FC'- A		26 ث / 2:10 د 56- حوتة 57- عجوزة تجرى مورا طفل صغير 58- رأس قرد 59- وحمامة بيضا	Planche IX 
60- D FC+ Bot 61- D F- Anat 62- Dd F+- A 63- Dd K - H Choix +		15 ث / 2:02 د 60- مرجان 61- جمجمة خارج منها زوج قرونات 62- أسماك 63- شخص واقف على يديه شغل يجي	Planche X 

بروتوكول T.A.T لاياتو:

الإشكالية	السياقات الدفاعية	القصص	اللوحات
تعكس إجابة المفحوص تمثلاً واضحاً لإشكالية العجز الطفولي، المحورية في البطاقة. يظهر الطفل كموضوع لعنف عائلي، ما يدل على إحساس بالقصور والتهديد أمام سلطة أبوية قاسية، يُعيد تنشيط قلق الخشاء وفقدان الأمان. الوحدة والتأمل يعكسان حالة انكفاء على الذات، تشير إلى آليات دفاعية بدائية كالتراجع والانفصال، في ظل عجز عن التمثيل الرمزي للفقد أو مواجهة الصراع.	بعد زمن كمون طويل اولي (CI1) باشر سرده بصيغة المبني للمجهول (CI2) مستحضرا موضوع الاضطهاد (E2.2) مكتفيا بذاته (CN1) مؤكدا على الصراعات الداخلية (A2-4)	31'.....ضربوه دارهم هكذا راح قعد وحدو..قاعد يتأمل.36"	1 

<p>كما تعكس الإجابة هشاشة في البنية الأوديبية، وضعفاً في التماهيات، ما يُعيق تشكّل هوية نفسية مستقرة وقدرة على التكيف.</p>			
<p>فالحديث عن "الهروب من دارهم" يكشف عن رغبة في الانفصال عن المنظومة العائلية، وهو ما يعكس محاولة رمزية للابتعاد عن المثلث الأوديبى. لكن هذا الانفصال يتم في سياق دفاعي (الهروب)، مما يدل على أن التحرر من العلاقات الأوديبية لم يتم بشكل ناضج، بل عبر التملص والفرار. كما أن التركيز على "التعلم" و"القراءة" يشير إلى نقل الليبيدو نحو أهداف تصعيدية، ما يُمكن اعتباره محاولة بديلة لتجاوز الصراع الأوديبى. ومع ذلك، غياب أي ذكر مباشر للعلاقات أو الانجذاب أو التنافس، يعكس كبتاً للحمولة الانفعالية الجنسية والرغبات الأوديبية، ما قد يشير إلى نمط دفاعي قائم على الإنكار أو الإزاحة.</p>	<p>بعد زمن صمت (CI1) يستهل في سرد مبني للمجهول (CI2) بتمثيل لفعل غير مرتبط بحالة عاطفية (B2.3) ثم يليها تكرار (A3.1) وبعد ذلك يبدي تحفظ كلامي (A1.3) ليكرر مرة أخرى (A3.1) في بناء للمجهول (CI2)</p>	<p>15' ... هربت من دارهم باه تتعلم .. هربت شغل من المزرعة... اوو راحت تتعلم ... تقرا.</p>	<p>2</p> 
<p>تعكس إجابة المفحوص تمثلاً سطحياً وغير متماسكاً للإشكالية الكامنة في البطاقة، والتي تدور حول الوضعية الاكتئابية والقدرة على التمثل الرمزي للفقْد والحزن. يشير الاختزال في السرد إلى غياب الربط العاطفي والمعنوي مع تمثلات الفقْد، حيث يتم تفسير الوضعية الجسدية على أنها مجرد سقوط جسدي أثناء اللعب، ما يُظهر استخداماً لآلية التفكك أو التبسيط الدفاعي. هذا النمط قد يدل على صعوبة في الاعتراف بالمشاعر الاكتئابية أو الحزن المرتبط بخسارة أو فشل رمزي، ويكشف عن بنية نفسية تقاوم الدخول في وضعية الحداد، عبر الإنكار أو التقليل من المعنى العاطفي للمشهد. إذن، تعكس الإجابة عجزاً عن ربط التمثلات الجسدية بالحالة الانفعالية الكامنة، ما قد يشير إلى تراجع أو نقص في القدرة على معالجة الفقْد، أو على</p>	<p>بعد زمن كمون طويل (CI1) في سرد مبسط مبني للمجهول (CI2) يبدي المفحوص انكاراً (A2.3) في سرد غير ملائم للمحفز (E2.1) مع ميل عام للتقصير (CI1)</p>	<p>35' كان يلعب طاح. 35"</p>	<p>3BM</p> 

استثمار بدائل رمزية جديدة.			
<p>تعكس إجابة المفحوص تمثلاً واضحاً لإشكالية البطاقة، والمتمثلة في الطابع التوتري للعلاقة العاطفية القائمة على الازدواجية بين الحب والعدوان. الصراع الظاهر ("تعافرو") يظهر نشاطاً للتيارين المتضادين: العدوان/التعلق، وهو تعبير مباشر عن الطابع الثنائي الغريزي في العلاقة. فخروج الرجل يرمز إلى الانفصال أو الهجر، بما يشير إلى تنشيط قلق الفقد والتخلي، بينما تتبع المرأة له يكشف عن تمسك يائس ورفض للانفصال، ما يعكس تعلقاً غير متوازن. تظهر الاستجابة بنية نفسية حساسة تجاه الفقد والانفصال، مع صعوبة الابتعاد عن موضوع الحب، وهو ما يتماشى مع الدينامية الأوديبية غير المحلولة والتمسك بالموضوع الأصلي رغم الألم. بالتالي، تدل هذه الإجابة على أنماط تعلق قلقة وهشة، تتسم بالتذبذب بين التعلق والعدوان، وتُظهر صعوبة في ترميز مشاعر الانفصال بشكل ناضج.</p>	<p>بعد زمن صمت طويل (CI1) يذكر شخصيات مجهولة في صراع غير محدد الدوافع (CI2) يتبعه بصمت ضمن القصة (CI1) فيواصل سرده في بناء للمجهول (CI2) في تمثيل لفعل غير مرتبط بحالة عاطفية (B2.3) مع ميل عام للتقصير (CI1)</p>	<p>17 '...تعافرو وخرج من المنزل... وهي راهي تبع فيه. 27"</p>	<p>4</p> 
<p>تظهر الإجابة صورة أمومية مراقبة، ما يعكس جانباً من الوظيفة الحامية أو المتحكمة، دون التطرق إلى الأبعاد الانفعالية المعقدة كالفضول أو التطفل أو الحضور المهذّب، مما يدل على كبت أو إنكار للحمولة الانفعالية الكامنة المرتبطة بمشهد الاقتحام أو التجسس. هذا التصور يشير إلى تنظيم نفسي يتجنب الصراع الأوديبى عبر تبني صورة أمومية مثالية وحيادية، مع غياب واضح لأي إشارة إلى الذنب، الفضول، أو المشاعر المتضاربة، ما قد يكشف عن آليات دفاعية قائمة على الإنكار أو التصعيد التكيفي، أو عن بنية نفسية لم تخضع العلاقة بالأم لمساءلة أو تفكك رمزي كاف.</p>	<p>بعد زمن كمون أولي طويل (CI1) يباشر سرده مبني للمجهول (CI2) في تمثيل لفعل غير مرتبط بحالة عاطفية (B2.3) مستدخلا اشخاص غير موجودة في الصورة (B1.2) مركزا على العلاقات بينهم (B1.1) مذبذب بين تفسيرات مختلفة (A3.1) مع ميل عام للتقصير (CI1)</p>	<p>1:01 '...تشوف في وليدها.. تشوف في وليدها ولا بنتها. 1:06"</p>	<p>5</p> 

<p>تعكس تمثلاً دفاعياً ومضمرًا للعلاقة الأم/الابن في سياق يحمل طابع الانفصال العاطفي والوداع الهادئ، وهو ما يتقاطع مع الإشكالية الكامنة في البطاقة. السرد يبرز تمثيلاً للعلاقة بين الذكر والأنثى بفرق أجيال (امرأة مسنة/رجل شاب)، دون توتر ظاهري، بل بحضور شعوري مشحون بالحزن المقنع والحنان المنضبط، خاصة في مشهد "الوداع". وصف المرأة بـ"أمه" يوحي بأن المفحوص يستدعي النموذج الأمومي الواقعي أو المتخيل، ويُظهر تعلقاً عاطفياً قوياً يكافح للفصل عنه بطريقة هادئة، عبر سياق "الخدمة"، مما يشير إلى سعي ناضج لفك الارتباط دون صدام أو تمرد. لكن تجنب الإشارة إلى أي بعد محرم أو صراع داخلي، كما يتوقع في دينامية أوديبية، يعكس وجود آليات كبت أو نفي للرغبة أو الذنب المرتبط بالتمثلات اللاواعية لعلاقة الأم/الابن. هذا قد يشير إلى بنية نفسية تميل إلى التلطيف أو التصعيد الدفاعي للعلاقات البدئية.</p>	<p>بعد زمن صمت أولي (CI1) يبرز المبحوث حاجته لطرح تساؤل (CI3) بعدها يباشر سرده بشخصيات غير معرفة (CI2) مركزاً بذلك على اليومي (CF1) في سياق موضوعي غير ملائم للمحفز (E2.1) يعقبه صمت لمدة قصيرة (CI1) فيبيدي احتياط لفظي (A3.1) يؤكد فيه على العلاقة بين الأشخاص (B1.1) ليأتي بتفسير آخر (A3.1) في تمثيل لفعل مرتبط بحالة عاطفية (B2.3) ثم يليها مواظبة على الفعل (A3.1) مؤكداً فيه على الفعل اليومي (CF1)</p>	<p>18'... زوج ولا وحدة؟ عندي زوج حكايات.. الفاحص: كيما تحب. - ... لعجوز راهي تلقي في الدرس وهو راه يوجد... - وممكن اا امو .. وهو كشما راهو رايح لبلاصة.. موو جا يودع فيها رايح لبلاصة راح يخدم . الفاحص: ايهما تحسها تتطابق اكثر مع اللوحة؟ .. الثانية ممكن.. كيفكيف 1:00"</p>	<p>6BM</p> 
<p>تعكس تمثيلاً تحييدياً لعلاقة من المفترض أن تكون مشحونة انفعالياً، إذ تم إسقاط المشهد في إطار علمي محايد، مما يُظهر ميكانيزم دفاعي قائم على التصعيد المعرفي. الإجابة تغيب عنها أي إشارة إلى الصراع أو العلاقة الثنائية العاطفية بين الشخصيتين (والتي تمثل في المحتوى الكامن علاقة الأب/الابن في بعديها: التماهي أو التنافس). المفحوص يحوّل العلاقة إلى سياق "تعلم وتجربة"، مما يدل على نقل للحمولة الانفعالية نحو مساحات غير مهددة نفسياً. غياب التمثلات الشعورية من قبيل التقرب، الرغبة، التوتر، أو الانفصال يشير إلى أن العلاقة بالأب، كمفهوم رمزي أو واقعي، قد لا تكون متبلورة بوضوح، أو ربما يتم تحييدها تجنباً لمشاعر الصراع أو الضعف المرتبطة بها.</p>	<p>بعد زمن كمون أولي معتبر (CI1) يباشر في سرد مبني للمجهول (CI2) في موضوع لا يلائم المحفز (E2.1) مركزاً على اليومي (CF1) بعد يليها صمت (CI1) ليواصل سرده مبدياً احتياط لفظي (A3.1) مع وصف بتفاصيل (A1.1) ليقطع حديثه متحفظاً (A3.1) ليعود مؤكداً على الفعل اليومي (CF1) مع ميل عام للتقصير (CI1)</p>	<p>14 ' هام يتعلموا... ممكن دارو تجربة وشافو ملاحظات على يتعلمو يقرأو.. 30 "</p>	<p>7BM</p> 

<p>تمثل رفضًا صريحًا للانخراط في تأويل المشهد أو حتى استدعاء تمثلي رمزي له، وهو ما يترجم إلى دفاع نكوصي أو تفادي شديد. كما تعكس إجابة المفحوص آلية إنكار أو كبت عميق، أمام مشهد يُستدعي فيه صراع أوديبى حاد أو خيال عدواني تهديدي، مما يدل على صعوبة في التمثيل الرمزي للمحتويات الغريزية العنيفة.</p>	<p>بعد زمن كمون طويل (C11) يبدي المفحوص رفضه للبطاقة (C11) مع انتقاده لها (D3)</p>	<p>37 '..... مفكرتني في والوا...والوا</p>	 <p>8BM</p>
<p>تحويل محتوى البطاقة من علاقة زوجية أو عاطفية إلى علاقة أم/بنت يغلب عليها الطابع التربوي والرعاي. يظهر هنا التحويل كميكانيزم دفاعي قائم. كما يشير إلى صعوبة لدى المفحوص في الربط بين العاطفة والرغبة، أو التصالح مع التمثلات الحسية داخل العلاقات. كما قد يكون هناك نفي غير واع للتصورات المرتبطة بالرغبة أو القرب الجسدي، واستبدالها بصورة مثالية للعلاقة .</p>	<p>بعد وقت استجابة مطول (C11) يباشر سرده المبني للمجهول (C12) في سرد غير ملاءم الموضوع للمحفز (E2.1) مركزا على وظيفة الموضوع الإيجابية (CL3+) يليها صمت ملحوظ ضمن القصة (C11) ليستأنف سرده مؤكدا على العلاقة بين الأشخاص (B1.1) مواظبا على الفعل (A3.1)</p>	<p>1:08 '..... تمدلها في النصائح برك... بنتها راهي تمدلها في النصائح.. هي راهي تمد لبنتها في النصائح.. لمرأة " 1:25</p>	<p>10</p> 
<p>تعكس الإجابة تمثيلاً قويا ومكثفا لمشهد كارثي يجسد حالة من الاضطراب والانهيال. الصور المستخدمة (خبط نيزك، انهيار جبل) تدل على تحريك عميق لمخاوف بدائية مرتبطة بالفقدان، التدمير، وخطر التفكك النفسي. هذا المشهد يعبر عن ارتداد نفسي نحو حالات رجعية تعكس عدم استقرار داخلي وحالة توتر شديد. كما تظهر الإجابة استخدام دفاعات بدائية مثل الإسقاط والتفكيك الرمزي، حيث يتحول الواقع الداخلي إلى صورة عنف وفوضى خارجية تُجسد صراعات نفسية لم يتم استيعابها أو تنظيمها.</p>	<p>بعد وقت كمون اولي معتبر (C11) يباشر سرده بتمثيل لأفعال مرتبطة بالكارثة (B2.3) مؤكدا في دقة كمية (A1.2) على شخصين غير معرفين (C12) في تمثيل مرتبط بتصوير كارثي (B2.3)</p>	<p>11 ' ... خبط نيزك في لرض وو... حاجة هبنت مالمسا ... ووو... انهيار جبل طاح على زوج عباد كانوا يتسلفو 26 "</p>	<p>11</p> 

<p>المفحوص يصور المكان كفضاء خاص ينتمي لشخص يحب الوحدة، ما يشير إلى حاجة ملحة للعزلة كملجأ نفسي للابتعاد عن صراعات خارجية أو داخلية. هذه الوحدة الطوعية تعكس غالباً رغبة في الانسحاب من التوترات العلائقية أو الانفعالية.</p> <p>استخدام كلمة "يستأمل" يشير إلى محاولة التفكير والتأمل الذاتي كوسيلة لإعادة التنظيم النفسي، ما يعكس نزعة إلى استرجاع التوازن الداخلي بعد تجارب من القلق أو الألم العاطفي.</p> <p>غياب الشخصيات والاعتماد على منظر طبيعي ساكن يعكس حالة فراغ عاطفي، أو صعوبة في استدعاء كائنات داخلية داعمة أو أمان نفسي من الخارج، وهو ما يتماشى مع الإطار الكامن للبطاقة الذي يربط بين غياب الدعم العاطفي وارتباطه بمراحل نفسية متقدمة من فقدان الأمان.</p>	<p>بعد زمن كمون اولي (CII) يياشر سرده مبني للمجهول (CI2) مستدخلا شخصا غير موجود في الصورة (B1.2) مكتفي ذاتيا (CN1) في صيغة تحفظية (A3.1) مركزا على الصراعات الداخلية (A2.4) مع ميل عام للتقشير (CII)</p>	<p>10 ' ... بلاصة تاع واحد يحب.... يريج وحدوشغل .. ااا .. يستأمل كشغل. 23 "</p>	<p style="text-align: center;">12BG</p> 
<p>التصور المكرر لفكرة الوداع والترك يعكس إحساساً بالهجر والافتقاد العاطفي، ما يشير إلى مخاوف داخلية من الانفصال أو التخلي، وهي مخاوف مركزية في سياق البطاقة التي تطرح اختباراً للقدرة على الصمود والوحدة في ظروف هشة.</p> <p>فالتركيز على المشاهدة والوداع يوحي بأن المفحوص يعيش تجربة مراقبة أو انتظار دون مشاركة فاعلة، مما يعكس عجزاً أو استسلاماً لحالة العزلة، ويعبر عن علاقة متذبذبة مع الحضور الأسري.</p>	<p>بعد زمن كمون اولي (CII) في صياغة مبنية للمجهول (CI2) مستدخلا اشخاص غير موجودة في البطاقة (B1.2) في تمثيل لفعل مرتبط بعاطفة (B2.3) يليها توقف بسيط (CII) ليكمل سرده بتفسير مختلف (A3.1) فيضيف تفسير اخر (A3.1) مستدخلا اشخاص اخرين غير موجودين في الصورة (B1.2) ممثلة لفعل مرتبط بعاطفة (B2.3)</p>	<p>9 ' اا ممكن يتفرج في الذر يلعبو ... اووو...ممكن رايح ياا يرحلو من دارهم ... يودع .. فيها ..وممكن يشاهد.. يشوف في الطبيعة هكذا قدامو... ولا ...يودع كشما واحد من اقاربو رايحين وخالوه .. 48 "</p>	<p style="text-align: center;">13B</p> 



30' ... واحد بانى دارو ف فعزلة... وكان حوايج راي دور بيه ..على الدار تاغو..كاين كلاب ذئاب..بلاصة فيها الشياه ولكباش.. 42 "

بعد وقت استجابة مطول (C11) يياشر سرده المبني للمجهول (C12) في سياق انطباعي ذاتي (-CN) (1) مستدخلا شخصا غير موجود في الصورة (B1.2) في موضوع غير ملاءم للمحفز (E2.1) مستحضرا الشيء السيئ و مواضيع الاضطهاد (E2.2) مع وصف بتفاصيل بدون تبرير للتفسير (A1.1)

تصوير المفحوص يعكس بوضوح موضوع الحماية مقابل التهديد، والحدود بين الداخل الآمن والخارج المهدد. البيت هنا يشير إلى المكان النفسي الآمن أو الذات المحمية، بينما الكلاب والذئاب ترمز إلى مخاوف خارجية، تهديدات محيطية، وربما اضطرابات داخلية تحمل طابعا عدائيا أو مطاردا. وجود الأغنام إلى جانب الذئاب يبرز تباينا بين البراءة والضعف (الكباش) أو الخطر (الذئاب)، مما قد يعكس صراعا داخليا بين مشاعر الضعف والرغبة في الحماية، أو بين مكونات نفسية متناقضة. الوضعية التي رسمها المفحوص تعبر عن إحساس بالعزلة والاعتراب، مع مواجهة مخاطر محسوسة أو متخيلة تحيط بالمأوى النفسي، مما يعكس صراعات نفسية عميقة مرتبطة بالحدود النفسية للذات وقدرتها على التمييز بين ما هو داخلي/آمن وما هو خارجي/مهدد.

26' شغل نجيبها من راسي؟ الفاحص: نعم اا طفل صغير.. ما ..شغل.. كان يتعرض للاهانة ..من والديه وكلش..وكان يحب يقرا حاجة .. يبقى يقرا فيها حتان ينجح يولي حاجة كبيرة.. - نزيد وحدة؟ الفاحص: اذا حبيت .. نزيد وحدة هذي جديدة 1:36 "

بعد تردد طويل أولي (C11) يبرز المبحوث حاجته لطرح تساؤل (C13) يتبعه توقف (C11) لياياشر المفحوص سرده في قالب انطباعي ذاتي (CN1) مستحضرا الشيء السيئ و مواضيع الاضطهاد (E2.2) مع تفاصيل نرجسية بقيمة إيجابية ترفعا عن موضوع الاضطهاد (CN3+) مركزا على اليومي (CF1) مؤكدا على ذلك التصور النرجسي الإيجابي (CN3+)

إجابة المفحوص التي اختار فيها تصوير طفل يتعرض للاهانة من والديه ثم يسعى للنجاح والتفوق كوسيلة تعويضية تكشف عن دينامية إسقاطية تعبر عن صراع داخلي بين الجرح النرجسي والاحتياج للاعتراف والقيمة الذاتية. يظهر الطفل كصورة للذات المجروحة التي تسعى إلى إعادة ترميم كرامتها عبر الاجتهاد والإنجاز، ما يعكس ميكانيزم دفاعي بارز يتمثل في التصعيد وربما التعويض. الوالدان في المشهد يمثلان مصدر الإهانة أو الإذلال، ما قد يشير إلى نواة نفسية مؤلمة مرتبطة بتجارب مبكرة من الإحباط أو النقد أو غياب الاحتواء العاطفي. بالمقابل، يظهر الطفل كرمز للذات التي تحاول النجاة من ذلك الألم النفسي بتحويل المعاناة إلى دافع للنجاح، في إطار علاقة توترية مع الصور الأبوية الداخلية. من حيث بناء المشهد الداخلي، تظهر تنظيمات دفاعية ناضجة نسبيا (مثل الطموح والإصرار)، لكنها تستند إلى أرضية انفعالية مشحونة بمشاعر النقص

والإهانة، ما قد يدل على ثنائية "الضعف- القوة" في تمثيلات الذات، وحاجة مستمرة لإثبات القيمة من خلال الإنجاز.			
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Young Schema Questionnaire – Short Form.

1

INTRUCTIONS

Listed below are statement that a person might use to describe him or herself. Please read each statement and decide how well it describes you. When you are not sure, base your answer on what you emotionally feel, not on what you think to be true. Choose the highest rating from 1 to 6 that describes you and write the number in the space before the statement.

RATING SCALE:

- 1- Completely untrue of me
- 2- Mostly untrue of me
- 3- Slightly more true than untrue
- 4- Moderately true of me
- 5- Mostly true of me
- 6- Describes me perfectly

1. _____ Most of the time, I haven't had someone to nurture me, share him/herself with me, or care deeply about everything that happens to me.
2. _____ In general, people have not been there to give me warmth, holding and affection.
3. _____ For much of my life, I haven't felt that I am special to someone.
4. _____ For the most part, I have not had someone who really listens to me, understand me, or is tuned into my true needs and feelings.
5. _____ I have rarely had a strong person to give me sound advice or direction when I'm not sure what to do.
6. _____ I find myself clinging to people I'm close to, because I'm afraid they'll leave me.
7. _____ I need other people so much that I worry about losing them.
8. _____ I worry that people I feel close to will leave me or abandon me.

9. _____ When I feel someone I care for pulling away from me I get desperate.
10. _____ Sometimes I am so worried about people leaving me that I drive them away.
11. _____ I feel that people will take advantage of me.
12. _____ I feel that I cannot let my guard down in the presence of other people, or else they will intentionally hurt me.
13. _____ It is only a matter of time before someone betrays me.
14. _____ I am quite suspicious of other people's motives.
15. _____ I'm usually on the lookout for people's ulterior motives.
16. _____ I don't fit in.
17. _____ I'm fundamentally different from other people.
18. _____ I don't belong; I'm a loner.
19. _____ I feel alienated from other people.
20. _____ I always feel on the outside of groups.
21. _____ No man/woman I desire could love me once he/she saw my defects.
22. _____ No one I desire would want to stay close to me if he/she know the real me.
23. _____ I'm unworthy of the love, attention, and respect of others.
24. _____ I feel that I'm not loveable.
25. _____ I am too unacceptable in the very basic ways to reveal myself to other people.
26. _____ Almost nothing I do at work (or school) is as good as other people can do.
27. _____ I'm incompetent when it comes to achievement.
28. _____ Most other people are more capable than I am in areas of work and achievement.
29. _____ I'm not as talented as most people are at their work.
30. _____ I'm not as intelligent as most people when it comes to work (or school).
31. _____ I do not feel capable of getting by on my own in everyday life.

32. _____ I think of myself as a dependent person, when it comes to everyday functioning.
33. _____ I lack common sense.
34. _____ My judgement cannot be relied upon in everyday situations.
35. _____ I don't feel confident about my ability to solve everyday problems that come up.
36. _____ I can't seem to escape the feeling that something bad is about to happen.
37. _____ I feel that a disaster (natural, criminal, financial, or medical) could strike at any moment.
38. _____ I worry about being attacked.
39. _____ I worry that I'll lose all my money and become destitute.
40. _____ I worry that I'm developing a serious illness, even though, nothing serious has been diagnosed by a physician.
41. _____ I have not been able to separate myself from my parent (s) the way other people my age seem to.
42. _____ My parents and I tend to be over involved in each other's lives and problems.
43. _____ It is very difficult for my parent(s) and me to keep intimate details from each other without feeling betrayed or guilty.
44. _____ I often feel as if my parent(s) are living through me – I don't have a life of my own.
45. _____ I often feel that I do not have a separate identity from my parent(s) or partner.
46. _____ I think that if I do what I want, I'm only asking for trouble.
47. _____ I feel that I have no choice but to give in to other people's wishes, or else they will retaliate or reject me in some way.
48. _____ In relationships, I let the other person have the upper hand.
49. _____ I've always let others make choices for me, so I really don't know what I want for myself.

50. _____ I have a lot of trouble demanding that my rights be respected and that my feelings be taken into account.
51. _____ I'm the one who usually ends up taking care of the people I'm close to.
52. _____ I am a good person because I think of others more than of myself.
53. _____ I'm so busy doing for the people that I care about that I have little time for myself.
54. _____ I've always been the one who listens to everyone else's problems.
55. _____ Other people see me as doing too much for others and not enough for myself.
56. _____ I am too self-conscious to show positive feelings to others (e.g. affection, showing I care).
57. _____ I find it embarrassing to express my feelings to others.
58. _____ I find it hard to be warm and spontaneous.
59. _____ I control myself so much that people think I am unemotional.
60. _____ People see me as uptight emotionally.
61. _____ I must be the best at most of what I do; I can't accept second best.
62. _____ I try to do my best; I can't settle for "good enough".
63. _____ I must meet all my responsibilities.
64. _____ I feel there is constant pressure for me to achieve and get things done.
65. _____ I can't let myself off the hook easily or make excuses for my mistakes.
66. _____ I have a lot of trouble accepting "no" for an answer when I want something from other people.
67. _____ I'm special and shouldn't have to accept many of the restrictions placed on other people.
68. _____ I hate to be constrained or kept from doing what I want.
69. _____ I feel that I shouldn't have to follow the normal rules and conventions other people do.
70. _____ I feel that what I have to offer is of greater value than the contributions of others.

71. _____ I can't seem to discipline myself to complete routine or boring tasks.
72. _____ If I can't reach a goal, I become easily frustrated and give up.
73. _____ I have a very difficult time sacrificing immediate gratification to achieve a long-range goal.
74. _____ I can't force myself to do things I don't enjoy, even when I know it's for my own good.
75. _____ I have rarely been able to stick to my resolutions.

Eating Disorder Examination Questionnaire (EDE-Q)

Instructions: The following questions are concerned with the past four weeks (28 days) only. Please read each question carefully. Please answer all the questions. Thank you.

Questions 1 to 12: Please circle the appropriate number on the right. Remember that the questions only refer to the past four weeks (28 days) only.

Q	ON HOW MANY OF THE PAST 28 DAYS ...	NO DAYS	1-5 DAYS	6-12 DAYS	13-15 DAYS	16-22 DAYS	23-27 DAYS	EVERY DAY
1	Have you been deliberately trying to limit the amount of food you eat to influence your shape or weight (whether or not you have succeeded)?	0	1	2	3	4	5	6
2	Have you gone for long periods of time (8 waking hours or more) without eating anything at all in order to influence your shape or weight?	0	1	2	3	4	5	6
3	Have you tried to exclude from your diet any foods that you like in order to influence your shape or weight (whether or not you have succeeded)?	0	1	2	3	4	5	6
4	Have you tried to follow definite rules regarding your eating (for example, a calorie limit) in order to influence your shape or weight (whether or not you have succeeded)?	0	1	2	3	4	5	6
5	Have you had a definite desire to have an empty stomach with the aim of influencing your shape or weight?	0	1	2	3	4	5	6
6	6 Have you had a definite desire to have a totally flat stomach?	0	1	2	3	4	5	6
7	Has thinking about food, eating or calories made it very difficult to concentrate on things you are interested in (for example, working, following a conversation, or reading)?	0	1	2	3	4	5	6
8	Has thinking about shape or weight made it very difficult to concentrate on things you are interested in (for example, working, following a conversation, or reading)?	0	1	2	3	4	5	6

9	Have you had a definite fear of losing control overeating?	0	1	2	3	4	5	6
10	Have you had a definite fear that you might gain weight?	0	1	2	3	4	5	6
11	Have you felt fat?	0	1	2	3	4	5	6
12	Have you had a strong desire to lose weight?	0	1	2	3	4	5	6

Questions 13-18: Please fill in the appropriate number in the boxes on the right. Remember that the questions only refer to the past four weeks (28 days).

Over the past four weeks (28 days)....

13	Over the past 28 days, how many times have you eaten what other people would regard as an unusually large amount of food (given the circumstances)?	
14	... On how many of these times did you have a sense of having lost control over your eating (at the time you were eating)?	
15	Over the past 28 days, on how many DAYS have such episodes of overeating occurred (i.e. you have eaten an unusually large amount of food and have had a sense of loss of control at the time)?	
16	Over the past 28 days, how many times have you made yourself sick (vomit) as a means of controlling your shape or weight?	
17	Over the past 28 days, how many times have you taken laxatives as a means of controlling your shape or weight?	
18	Over the past 28 days, how many times have you exercised in a "driven" or "compulsive" way as a means of controlling your weight, shape or amount of fat, or to burn off calories?	

Questions 19 to 21: Please circle the appropriate number. Please note that for these questions the term "binge eating" means eating what others would regard as an unusually large amount of food for the circumstances, accompanied by a sense of having lost control overeating.

Q		NO DAYS	1-5 DAYS	6-12 DAYS	13-15 DAYS	16-22 DAYS	23-27 DAYS	EVERY DAY
19	Over the past 28 days, on how many days have you eaten in secret (i.e., furtively)? ... Do not count episodes of binge eating.	0	1	2	3	4	5	6
		None of the times	A few of the times	Less than half	Half of the times	More than half	Most of the time	Every time
20	On what proportion of the times that you have eaten have you felt guilty (felt that you've done wrong) because of its effect on your shape or weight?... Do not count episodes of binge eating.	0	1	2	3	4	5	6

		Not at all	Slightly	Moderately		Markedly		
21	Over the past 28 days, how concerned have you been about other people seeing you eat? ... Do not count episodes of binge eating.	0	1	2	3	4	5	6

Questions 22 to 28: Please circle the appropriate number on the right. Remember that the questions only refer to the past four weeks (28 days).

Q	ON HOW MANY OF THE PAST 28 DAYS ...	NOT AT ALL MARKEDLY		SLIGHTLY		MODERATELY		
22	Has your weight influenced how you think about (judge)? yourself as a person?	0	1	2	3	4	5	6
23	Has your shape influenced how you think about (judge)? yourself as a person?	0	1	2	3	4	5	6
24	How much would it have upset you if you had been asked to weigh yourself once a week (no more, or less, often) for the next four weeks?	0	1	2	3	4	5	6
25	How dissatisfied have you been with your weight?	0	1	2	3	4	5	6
26	How dissatisfied have you been with your shape?	0	1	2	3	4	5	6
27	How uncomfortable have you felt seeing your body (for example, seeing your shape in the mirror, in a shop window reflection, while undressing or taking a bath or shower)?	0	1	2	3	4	5	6
28	How uncomfortable have you felt about others seeing your shape or figure (for example, in communal changing rooms, when swimming, or wearing tight clothes)?	0	1	2	3	4	5	6

What is your weight at present? (Please give your best estimate) _____

What is your height? (Please give your best estimate) _____

If female, over the past three to four months have you missed any menstrual periods? (please circle) YES NO

If so, how many? _____

Have you been taking the "pill"? (please circle) YES NO

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جامعة محمد بوضياف بالمسيلة
كلية العلوم الإنسانية والاجتماعية
قسم علم النفس

تصريح شرقي
خاص بالالتزام بقواعد النزاهة العلمية لإنجاز بحث

أنا الممضي أسفله:

السيد (ة): قاسم عالم النفس، الصفقة: طالب، أستاذ، باحث طالب
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عنوانها: EARLY MALADAPTIVE COGNITIVE SCHEMAS AND THE ISSUE

OF INDIVIDUATION-AUTONOMY AMONG HIGHLY GIFTED ADOLESCENTS
SUFFERING FROM PSYCHOGENIC EATING DISORDER

أصح بشرفي أنني ألتزم بمراعاة المعايير العلمية والمنهجية ومعايير الأخلاقيات المهنية والنزاهة الأكاديمية المطلوبة

في إنجاز البحث المذكور أعلاه.

التاريخ: ٢٠٢٥/٠٦/١٠

توقيع المعني (ة)

المرجع: القرار 1082 المؤرخ في 27 ديسمبر 2020

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كلية العلوم الإنسانية والاجتماعية
قسم علم النفس

تصريح شرفي

خاص بالالتزام بقواعد النزاهة العلمية لإنجاز بحث

أنا الممضي أسفله:

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التاريخ: 2025 / 06 / 10

توقيع المعني (ة)

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