

Theoretical and empirical approaches to using films as a means to increase communication efficiency

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The theoretical framework of this analytic study is based on studies in the field of film perception. Films are considered as a communicative system that is encrypted in an ordered series of shots, and decoding proceeds during perception. The shots are the elements of a cinematic message that must be "read" by viewer. The objective of this work is to analyze the existing theoretical approaches to using films in psychotherapy and education. An original approach to film therapy that is based on teaching clients to use new communicative sets and psychotherapeutic patterns through watching films is presented. The article specifies the main emphasized points in theories of film therapy and education. It considers the specifics of film therapy in the process of increasing the effectiveness of communication. It discusses the advantages and limitations of the proposed method. The contemporary forms of film therapy and the formats of cinema clubs are criticized. The theoretical assumptions and empirical research that could be used as a basis for a method of developing effective communication by means of films are discussed. Our studies demonstrate that the usage of film therapy must include an educational stage for more effective and stable results. This means teaching viewers how to recognize certain psychotherapeutic and communicative patterns in the material of films, to practice the skill of finding as many examples as possible for each pattern and to transfer the acquired schemes of analyzing and recognizing patterns into one's own life circumstances. The four stages of the film therapeutic process as well as the effects that are achieved at each stage are described in detail. In conclusion, the conditions under which the usage of the film therapy method would be the most effective are observed. Various properties of client groups and psychotherapeutic scenarios for using the method of active film therapy are described.

Keywords: film therapy, films, psychotherapy, communication system, effective communication

Introduction

The perception of films is a process that includes a direct viewer's perception as well as the imaginative perception of its authors in its structure, and it can be said that it is a complicated informational, or, to be more exact, communicative, system. The communicative nature of films can be easily seen in the following example. When we look out of the window of a moving train, we never think of joining the views that we see into one logical chain. If we first see children playing and then cars crashing or young people having fun, we will not join the images into cause-and-effect or any other logical or artistically meaningful sets, unless we want to artificially create a text such as "This is life" based on the visual input that we have received. In the same way, looking out of the window, we will never ask ourselves: "What are these mountains for?" However, in discussing a film, such questions would be quite appropriate (Lotman, 1973).

In films, we can single out the elements and the means of the connection of images in a message that is realized in a communicative system (Voroshilova, 2007; Yanovsky, 2008). Shots are such elements of a moving picture. Looking at such images in respect of transmitting information, we can say that a moving picture is a certain sign system that is encrypted in an ordered series of shots and aimed at a decoding process of perception. The apparatus for deciphering dynamic screen images is formed quite slowly. However, as soon as this apparatus has been created in its most elementary form, it continues to develop under the influence of imaginative perception throughout a person's life (Zhinkin, 1978).

Film language

The basis of film text is not taught specially. There are no special institutes or rules for mastering this form of communication, as it is not the easiest and most evident means of satisfying human communicational requirements. The elementary forms of film expression are acquired spontaneously and intuitively, and they are rarely self-reflected. Even in specialized educational organizations, the teaching of film language does not have a systematic character: students learn the separate aspects of montage theory, film psychology and other approaches, with no conceptualization. Ultimately, students achieve a high professional level based on their own extensive experience of viewing and working with film material.

The deliberate use of films as the means of increasing communication efficiency is quite a new and scarcely studied notion (Bondarenko, 2000). In the modern world, it is done mostly in the context of film therapy, which achieves changes in a client's communication by solving personality problems and working with communicative mindsets (Korablina, 2001; Pleskachevskaya, 2001; Ulus, 2003). Film therapy requires a special understanding as a separate style of practical work, and it needs to be used competently and in a balanced way to achieve its maximal advantageous and well-controlled effects.

The first and the main film therapy restriction is connected with the psychological evolution of the subject. In case a person is not able to react analytically or verbally to the film material that is shown, the range of means that are available with which to treat him can be very narrow (Carroll, 2008). Moreover, experimental work has shown that all people do not resonate with film characters with the same ease. This creates another restriction that is based on the personality of the viewer, influenced by personal qualities such as emotional capability, empathy, or sensitivity (Kvasova, 1993).

Thus, on one hand, we have a viewer who cannot analyze a film but can "feel" it, and the developing effect in this case is minimal. On the other hand, we can have a viewer with a good understanding of the creative product that can remain absolutely indifferent to what is happening on the screen (Coplan, 2006). If we do not take special steps to increase the effect of working with such viewers, it is unlikely that we will be able to achieve positive results in psychotherapy or education through the means of films. During our investigation into this problem, we have found no special recommendations on this topic except for general advice such as "develop the lacking components of film perception."

Despite the vast range of film material that is available, very few films can boast a high developing potential (Wooder, 2008). Yet few films can fully correspond to a client's individuality or reflect a client's life situation. A psychotherapist should be aware of the films that he can target that correspond with the needs of his clients. Otherwise he will be obliged to trust a film guide (or a film collection) that was created by other specialists that most are likely based on other methodologies that lack the formal proof that a film is safe and corresponds to a specific client (Solomon, 1995). Firstly, the practice of film therapy Russian and western psychotherapy tends to use films that are consonant with the problems of persons or groups. These films are selected on the belief that the chosen films contain material that can be facilitate solving such problems. Secondly, such films are generally chosen intuitively, based on the personal and professional experience of the psychotherapist (Pleskachevskaya, 1998; Solomon, 2001; Ulus, 2003; Wooder, 2008). Such approaches in determining psychotherapist and client interactions can scarcely be considered to be well-grounded.

The unobviousness of the process of transition from film to reality is a significant restriction that is widely seen in various formats of film therapy. In other words, there are two types of extremes. In the first case, the psychotherapeutic communication is based on the film, to some extent disengaging the client from his own life and problems, making him think about the fate of distant or non-existent characters. In the second case, the film is only a pretext for discussing the client's problem, that is, the experience and philosophy of the characters and the author are almost disregarded. Thus, the client does not transcend the limits of his individual perception of the situation.

The client's dependency on the psychotherapist in psychotherapy appears to be the result of the low-grade presence of an educational component in such work. This phenomenon is characterized by the fact that the client demonstrates high or significant results within the work process, but in independent life he is not able to apply his new experience that was acquired in psychotherapy (Hill & Knox, 2009, Meltzoff & Kornreich, 2007). This leads to repeated visits to the specialist over a long period of time, sometimes with additional sessions, not to mention the difficulties that are associated with overcoming the end of the psychotherapy. We believe that these shortcomings could be avoided if we disclosed the methods that are used by the psychotherapist in his work and teach these methods to clients. In this way of the client can reproduce the psychotherapeutic effect in his everyday life.

Theoretical groundings

The Laboratory of Scientific Basis of Psychotherapy and Counselling Psychology of the Psychological Institute of the Russian Academy of Education has conducted extensive research that is devoted to the area of practical psychology that is known as film therapy. For many years, this approach has been applied in family speech and language therapy — including work with stuttering youth and adults (Karpova, Danina, Kiselnikova & Shuvikov, 2011). We tried to find the theoretical grounds for this method and to disclose the mechanisms for reaching the psychotherapeutic effect by watching films. The purpose of our previous research was to determine the factors that contribute to the healing effect of certain films when they are presented to groups of stuttering patients. For this purpose we used a pragmatic approach, considering different forms of psychotherapeutic communication as instruments to subjects to reach certain emotional, cognitive or behavioral changes. These changes are considered in terms of their *psychotherapeutic effect* in the study. Over 20 classical psychotherapeutic approaches were used in this case (APA Dictionary of Clinical Psychology, app. 2013). These approaches included gestalt therapy, logotherapy, psychodrama, cognitive therapy, IPT, and SFBT.

Traditionally the psychotherapeutic effect in psychotherapeutic communication is achieved by including special techniques that provide for the evolution of a client's communicative abilities (Brammer, Abrego & Shostrom, 1993). In spite of the existing differences between the theories and methodologies of different psychotherapeutic schools, many of the techniques that are used in practice have similar effects, identical algorithms and general meaning content. For example, the technique reframing (in family system therapy, NLP, in the work of Virginia Satir, Milton Ericson), the technique positive redefinition of symptom (in the strategic psychotherapy of G. Nardone), and the technique emphasis on humor (in provocative therapy) cause similar effects. These approaches frame scenes from another point of view so that the client feels relieved or is able to better handle a challenging situation. Thus, such techniques can be united into one group. We have named such groups of psychotherapeutic techniques that are united by these properties *psychotherapeutic patterns.* The survey results of a large number of experts have given us a closed list of such patterns that form the basis of our future work (Danina & Kiselnikova, 2012).

Our research was based on the supposition that a film message may contain psychotherapeutic patterns that were added by the authors (consciously or unconsciously). These patterns can appear in characters' speech as well as in actions (for example, they can demonstrate cognitive restructuring or positive self-talk or context reframing). The more patterns that a film contains, the higher its healing value and the greater its psychotherapeutic potential will be.

We have established the aim of identifying general universal patterns in films as a means of influencing audiences and to harness the potential of films to facilitate the desired changes of clients. To achieve this, we have used the closed list of psychotherapeutic patterns to analyze several films, marking their presence with the help of a specially designed method. As a result, we have made a so-called **psychotherapeutic profile** for each film, that is, a record of the psychotherapeutic patterns that are contained in the film material, including such aspects as their intensity and frequency of use. We assume that such a profile reflects the *psychotherapeutic potential* of the film, that is, how strong the psychotherapeutic effect of each film can be.

By incorporating the effects of psychotherapeutic patterns of classical verbal psychotherapy, we could easily create a model effect of a film on an audience. This method allows us to predict personal changes that could result from an individual who watches a certain film. In our research, these models were tested experimentally: we have proved that the predicted effect does take place, although the viewers are barely conscious of it. The tests were run in in such a way that the subjects did not know the evaluation criteria (the so-called projective methods) that served as the main indications of the changes.

Method description

We have obtained evidence of the fact that watching films can have a certain predicted influence, but we have also noted that the intensity level of such an effect differed greatly among the test subjects (Danina & Kiselnikova, 2012). In our study, we observed a significant difference in the results that were obtained using standardized questionnaires (questionnaire SAN (Doskin et al.), Test "Rigidity" (N.D. Levites)), as well as techniques that require subjective scaling (Osgood's Semantic differential, adapted to the subject of speech and speech problems; a modified self-esteem scale (T. Dembo-S.Ya. Rubinshteyn, modification M. Danina) and projective techniques - drawing tests and film reviews by our subjects. For example, a significant difference was found in the results of the diagnostics before and after watching the films, but on verbal questionnaires and output scale, it was not demonstrated. Projective drawings "Me and my speech" (for stutterers) and "I am among the people" were significantly different from the parameters: a) increasing the size of the self-figure (not less than 1.5 times — 60% of the test), b) increasing size of human figures (not less than 1.5 times – 70% of subjects), c) magnification of the self-figure (not less than 1.5 times — 100% of subjects), d) increasing the image details of people (new components, additional elements — 70% of subjects), d) an increase in the number of figures of people in the picture (more than 1 additional person -70% of subjects) e) imaging contact with the outside world (the addition of more than 1 item - 70% of subjects), g) centering patterns (a visible shift to the center of the sheet -60% of subjects). According to the parameters of the analysis of the projective tests obtained data that suggest ego strengthening, a focus on social relations and decentration, as well as the identification of the current moment.

The dynamics of positive-thinking patterns were tested by a content analysis of film reviews. The similarity of the film and the review patterns was statistically significant (Kolmogorov-Smirnov test). A week later, a complex re-test revealed no significant differences between the results before watching the film and after re-collecting the data. We could also come to the conclusion that such changes were hardly understood and lasted only for a short period of time (i.e., they soon faded).

Based on the results, we decided to develop a film therapeutic system in such a way that the effect achieved as the result of watching a film could be controlled, understood, and last as long as possible. Teaching viewers to understand the contents of the film that were the richest in the psychotherapeutic sense became the key to such results. We have adapted the names of the psychotherapeutic patterns for a non-professional audience, determining the main principles on which the education would be based and developing a special course so that the speech and language therapy group members could attend on a part-time basis.

We consider the possibility of "overriding" clients' defense mechanisms to be of the utmost importance at the beginning stages of the therapeutic process, to be the main virtue of film therapy. On the one hand, our approach emphasizes an educational target instead of a healing one. On the other hand, the group discusses the communicative problems of the film characters, and not their personal ones. This approach gives the viewer the opportunity to analyze the characters from outside, to form a critical observer's position, and to disclose his own attitude to the situation with no fear of being blamed. A gradual, smooth transfer from analyzing the film material to personal life material creates an atmosphere for the process of safe correction and rehabilitation and decreases anxiety and resistance to psychotherapeutic action.

In addition to the obvious effects that are supported by the experimental research that has already been conducted, we wish to address the additional positive changes that become possible due to the active role of the film therapeutic group members. These positive changes include the disclosure of personal creative potential, the symbolic transfer of the film script writer and director's position to the position of being the script writer and director of one's own life.

The ability to use dramatic films as well as popular, animated and feature films as well as films of different genres makes the film therapy method attractive for working with clients who are not interested in direct psychotherapeutic work.

Our method of film therapy takes participants through four main stages. The stages are conditional: you can miss some of them and pay more attention to the others. The full active film therapy cycle is mostly appropriate for working with groups of clients with similar social positions that are joined by a shared problem that requires intensive work as well as a significant amount of time and resources.

In the following section we will review the work stages more closely.

1st Stage — Introduction

This stage aims to change the usual (intellectual) experience of watching films as entertainment and to create the possibility of viewing films as a therapeutic element. This stage is introductory to the work in general. We cannot say that this aspect offers much by itself; but the main idea is to get a client interested, to increase the client's motivation to work for self-improvement and to solve the problem. Interestingly, many film clubs stop at this stage and do not move ahead towards solving the problem. However, we cannot deny the fact that the first changes in a viewer's life can occur at this stage.

First of all, the very fact that a film is seen as the film "about you" and "about your situation" may initiate the process of self-analysis and understanding. Sometimes this is enough for psychologically developed clients to start acting and changing. Secondly, if the work is done in groups, all of the classic mechanisms of group dynamics, which depend very little on the psychotherapist, are engaged, and the work content begins. Thirdly, if a psychotherapist manages to convince the client of the efficiency of the suggested method, the anticipation of positive effects from the future work increases. This provides for a serious growth of placebo effect in the general effect of group work.

This stage includes watching films that are specially chosen with free commenting through writing. The films are chosen in accordance with the group specifics: either with a focus on the stated problem or oriented to social factors. In any case, the film choosing process should be base not on intuitive mechanisms, as it stated above, but on the method of film analysis we are suggesting, which is described in detail below. The analysis can be detailed and include a psychotherapeutic prediction of the results of viewing. It can also be superficial, determining the general "applicability" of the film for working with a given problem (or topic). The group leader decides upon the extent of analysis based on many factors, from time and resources that he has at this stage of the process to the expectations that he sets in connection with achieving a certain psychotherapeutic effect.

At this stage, we can logically expect the following effects:

- 1. Emotional "contamination": Some viewers are sensitive to what they see on the screen, and they are easily "contaminated" by emotions that have been set by the authors, displayed by the actors and strengthened by the cinematography. This means that a person in a bad mood (not to be confused with clinical depression) may feel better after watching a happy and light film; a viewer with "accumulated" feelings that cannot be expressed may feel calmer after crying over a touching scene; an uncertain client may feel the desire to act, inspired by a brave and active character. The emotional contamination does not solve the problem by itself, but it has the effect of making changes easier and creates some "ground" for successful psychotherapy.
- 2. Understanding the client's problem: This is also a more preparatory effect than the psychotherapeutic one. However, if a client realizes the problem, he will be able to find the best-suiting means of solving it and achieve greater independence from the psychotherapy. This can be compared to a mechanical engineer and a broken device: unlike an ordinary user, he is able to manage and repair it as he wishes.
- 3. Understanding one's own abilities connected with the resolution of problems: Most often, the films at the first stage of film therapy contain characters' attempts to solve their problems, that is, the viewers are presented with possibilities to overcome their own difficulties. A client may not use the approach from the film in future, but widening his understanding of possible ways out of the current situation creates a supportive environment for further searching.
- 4. Creating motivation for self-improvement and trust for the suggested method: This effect is achieved mostly through the competent introduction of the method by the psychotherapist, his ability to create a trusting relationship, to explain the essence of the work that is being offered, and to formulate

the main results that can be expected. The film itself plays a supplementary role, demonstrating the ultimate aim of the psychotherapy through vivid screen images.

- 5. Self-revealing in the comments about the film: The uniqueness of film therapy is in its capacity to create a safe environment for education and free discussion about the characters and happenings in the films without focusing on the personal feelings of the viewer. However, the material that is provided by every member (through comments on the film or piece that is watched) is identified indirectly by the psychotherapist as the content of individual feelings, irrational thoughts, systems of a person's relationship with the world and himself.
- 6. Raising new common topics of discussion with the psychologist (pedagogue): As we have already indicated, the unique value of film therapy is in its ability to have an indirect psychotherapeutic impact on the viewer by bringing new topics that are connected with the client's problem but do not oblige him to open up in front of a specialist in the typical communication context of "Client" and "Psychotherapist." Therefore, a psychotherapist is able to manage a client's internal state and the psychotherapeutic process in general, speaking on a seemingly different, external level from the client reality.
- 7. Indirect communication with the film characters: Broadening the outlook, de-centration, ability to integrate various people's experience these are the undeniable results of dialogue communication. The same effects can be reached indirectly, mediated by the film. The communication of a film's characters, how they express their thoughts or behave in certain ways, can demonstrate different ways in which they may view their own situation.

2nd Stage — Education

The name of this stage speaks for itself. Its main aim is to teach clients how to recognize psychotherapeutic patterns in the material of the suggested films. What does this mean? Let us have a closer look. So, as stated above, a psychotherapeutic pattern is a group of psychotherapeutic procedures and techniques that are linked by a similar psychotherapeutic effect. This means that there is a certain universal mind procedure, which, as a result of its translation from the psychotherapist's words to the client's psychic world, brings some changes to his inner world or behavior.

This is what constitutes verbal psychotherapy, in which a new experience is born out of the communication between two people and leads to solving patients' problems. We believe that the processes at the very least automate the psychotherapeutic process and at best help the psychotherapist to effectively facilitate the resolution of a client's problems and help the client to experience a positive change are formed in during psychotherapeutic training.

Assuming that it is true that such universal mind processes are mastered directly or indirectly in the course of the professional training of a psychotherapist, perhaps we can teach clients psychotherapy with the intention of making "self-psychotherapists," that is, to provide them with a special, psychotherapeutic thinking style? To be honest, this idea is not new. Indeed, it runs through cognitive psychotherapy, is present in behavioral psychotherapy, and has found partial reflection in psychoanalysis. Our method of bringing this idea into a client's life experience is different only in the fact that we do not limit ourselves to one concept of the individual or psychological problem model. On the contrary, we have accumulated the means that are used by many different practices as part of our approach.

Thus, we have decided to teach the viewer to recognize in films the universal mind processes that are actually psychotherapeutic patterns. The idea is that, one way or another, any psychotherapy works on the idea of analogy and natural psychic processes. The difference between "life as it is" and "life under the psychotherapy gunpoint" is only in the fact that the psychotherapist consciously and deliberately models the client's mechanisms that are naturally used by the people who are faced with a certain problem. So, if psychotherapy is a model of effective, but natural human life, then psychotherapeutic methods are also natural, true-life ways of solving problems.

This means that such approaches can easily be found by film authors intuitively or based on their life experience. Of course, the antitherapeutic models that are often seen in films and created especially to increase the dramatic effect of the film, its emotionality and depth, have their own impact. However, teaching clients to recognize psychotherapeutic patterns in films minimizes the influence of such negative models and increases the safety of viewers when they watch such films.

Thus, we accept that psychotherapeutic patterns are a human reality, and consequently, this reality is reflected in films. Now we only need to teach the viewer to "see" it. This is what we do at the second, educational stage of our work. To achieve this, all of the film therapy members must go through the following stages:

- 1. Getting to know a detailed list of psychotherapeutic patterns, describing their criteria with the corresponding examples.
- 2. Practicing the skill of finding as many examples as possible for each pattern.
- 3. Watching short-length films or cartoons that contain no more than five main patterns, during which each member of the group conducts an individual analysis. The analysis is completed by the group as a whole.
- 4. Watching various film materials that contain psychotherapeutic patterns, working at home.

Effects: De-centration, mastering psychotherapeutic thinking skills, creating prerequisites for self-therapy.

3rd Stage — Summary

Aim: To transfer the acquired schemes of analysis and to recognize the psychotherapeutic patterns in one's own life circumstances.

Content: To transfer the schemes of psychotherapeutic thinking into the life of group members, which provokes several discoveries and solutions of problems through the methods that were learned at the previous stage.

Effects: To form an autotherapeutic system that can be reproduced and applied to any situation.

4th Stage — Conclusion

Aim: To make and view the group's own film that is shot on the basis of the psychotherapeutic patterns that were learned and which allows them to share the problem-solving experience with future film therapy members.

Content: To choose the psychotherapeutic patterns, contribute to the psychotherapeutic effect, choose and shoot the situations that translate the psychotherapeutic patterns, develop the plot and edit the film.

Effects: The accumulation and consolidation of the knowledge and skills that were learned by the members, the prolongation of the therapeutic effect.

Conclusion

Thus, the system of film therapy that we created based on teaching clients new communicative sets and psychotherapeutic patterns through watching films is a new and promising method of psychotherapy.

The results of our research suggest that watching films has significant therapeutic benefits for certain issues or types of clients. Thus, based on the collected data, we found that watching films as a part of therapy significantly decreases clients' defensiveness and resistance toward therapy. It gives clients' the opportunity to discuss their problems from perspective of outsiders and allows them to analyze the situations and behaviors that they experience and become less guarded in discussions. This approach seems to be especially helpful as a part of group therapy. The results of self-reports and projective tests shows a significant difference in the measures of self-esteem, attitude toward self and positive thinking patterns before and after watching films.

Traditional film therapy uses ways of bringing the emotional impact of films through the general mechanisms of contagion and empathy, but, as the experience of our studies in this field shows, the effect of films achieved solely by the impressions of viewing, is impermanent and can rarely be transmitted to the wider life context of a person (Danina, Kiselnikova, 2011, 2012). A lack of an expressive educational component can be considered to be a significant problem for using films in psychotherapy. A client's autonomy from the psychotherapeutic process, acquiring basic communication skills and an understanding of the principles of transforming one's own difficult situations, including new problems that are not singled out in the course of the therapy, will by all means be one of results of effective development. This appears to be the major challenge in classical film therapy. Moreover, very often the plot of the film is built on the non-constructive communicative behavior of characters. That is the reason for adding the educational and summarizing stages to the therapeutic process — it is supposed to prolong the effects of treatment and make them more sustainable. Additionally, it solves the problem of clients' dependence on the psychotherapy.

Based on our research and practical work experience, we recommend using the method of active film therapy in the following circumstances:

- supporting group social rehabilitation and therapy;
- clients with apparent psychological defense mechanisms;

- weakly shaped client requirements (such as general tasks of self-development, life quality improvement);
- psychological work with clients that do not have a psychotherapeutic request (for example, teenage groups and/or school classes).

Limitations

Of course, the suggested method has a number of significant restrictions. One of the most important of which is its "bulkiness": you need to spend from a month to half a year to go through the whole education cycle. Not all categories of clients have that much time to spare for psychotherapy. Moreover, there are psychotherapy and rehabilitation issues that can be resolved in a shorter period of time with other means used by different psychotherapeutic schools. Thus, the film therapy method cannot be considered to be effective for certain types of client problems from the viewpoint of economy criteria, judging by time parameters. We should also note that the complete experience of the active film therapy course by members of a film therapy group requires the participation of a specialist in the film sphere at the final stage (developing the scenario and film editing). In this context we can guarantee that the film that is created by the group members will possess high psychotherapeutic potential not only from the point of view the presence of a healing context but also as a beneficial experience for viewers. This condition also makes the film therapy method uneconomical based on the human and technical resources that are required.

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