

# Effectiveness of Existential Group Therapy on Perceived Inadequacy in Adolescents with Neglectful or No Guardians in the Welfare Center of Zanzan City

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## ABSTRACT

**Objective:** The present study aimed to investigate the effectiveness of a group intervention based on the existential approach in reducing feelings of inadequacy in this vulnerable group.

**Methods and Materials:** This study employed a quasi-experimental design with a pretest–posttest control group. The statistical population included all adolescents aged 13 to 18 years with neglectful or no guardians under the supervision of welfare centers in Zanzan City in 2023. Among them, 30 participants who met the inclusion criteria were purposefully selected and randomly assigned to experimental and control groups. The experimental group participated in 10 ninety-minute sessions of existential group therapy, conducted once a week under the supervision of the researcher. During this period, the control group did not receive any therapeutic intervention. Data were collected using Self-Criticizing/Attacking & Self-Reassuring Scale (FSCRS) developed by Gilbert et al. (2004) administered in two stages: pretest and posttest. Data analysis was conducted using analysis of covariance (ANCOVA) via SPSS-26.

**Findings:** Pretest scores were controlled as a covariate. The results indicated a significant difference between the two groups in posttest scores of perceived inadequacy ( $F(1, 27) = 22.335, p = .004$ ). In the experimental group, the mean score of perceived inadequacy decreased from 3.52 in the pretest to 2.99 in the posttest, while in the control group no considerable reduction was observed (from 4.22 to 3.60). The obtained effect size (0.452) indicated a large impact of the intervention.

**Conclusion:** By providing a context for discovering meaning, accepting responsibility for choices, and confronting existential anxieties, this therapeutic approach fosters the enhancement of self-worth and competence among adolescents.

**Keywords:** existential group therapy, perceived inadequacy, adolescents with neglectful guardians, adolescents with no guardians, welfare center.

## 1. Introduction

Adolescence is a critical developmental stage during which individuals face profound physical, cognitive, and emotional changes that shape their sense of self and psychological well-being. For adolescents who grow up without stable family support or who are subjected to neglect, this period can be particularly challenging. Neglect, in its many forms, deprives adolescents of the consistent emotional, cognitive, and social scaffolding necessary for developing resilience, competence, and a stable sense of identity (Carroll, 2020; Westman & Westman, 2019). Research has shown that neglect is not a single episode but a chronic and cumulative condition that leaves long-term scars on a person's psychological health, often manifesting in maladaptive beliefs about self-worth and competence (Carroll, 2020). As Garnezy and Masten (Garnezy & Masten, 2014) highlighted in their seminal work, competence indicators serve as protective factors in children at risk; however, adolescents with histories of neglect frequently lack access to these protective mechanisms.

Perceived incompetence—understood as the internalized belief of being incapable, inadequate, or unworthy—is a recurring consequence among adolescents exposed to neglectful or absent caregiving. Such adolescents often develop heightened self-critical tendencies that undermine their ability to adapt to stressors. Gilbert and colleagues (Gilbert et al., 2004) emphasized how self-criticism and inadequate self-assessments are deeply connected to developmental experiences of rejection or neglect, which result in enduring patterns of self-doubt. Similarly, studies on impulse control and non-suicidal self-injury in adolescents with childhood maltreatment underline the mediating role of self-efficacy, demonstrating how diminished self-perceptions contribute to maladaptive coping (Khanipour Hamid et al., 2015). These findings reinforce the necessity of therapeutic interventions that directly target maladaptive self-beliefs in vulnerable adolescents.

Existential psychotherapy has gained attention as an effective intervention for addressing such psychological vulnerabilities. Rooted in the works of Frankl and subsequent existential theorists, existential therapy emphasizes meaning-making, responsibility, authenticity, and confrontation with existential anxieties such as death, isolation, and meaninglessness (Roosbehaneh, 2021). Its application in therapeutic contexts is particularly relevant for individuals who have been stripped of stable frameworks of

meaning, such as neglected or orphaned adolescents. Existential therapy provides an opportunity to reconstruct meaning in life and to develop resilience by acknowledging suffering as part of existence rather than as a sign of personal inadequacy (Mata, 2022).

Scholars have repeatedly demonstrated the potential of existential group therapy in improving psychological outcomes. For example, Khodadadi and colleagues (Khodadadi et al., 2015; Khodadadi Sangdeh et al., 2015) found that existential group therapy significantly enhanced students' mental health, underscoring its effectiveness in fostering psychological stability through group-based dialogue and exploration of meaning. Zadafarshar and colleagues (Zadafarshar et al., 2022) compared existential therapy with emotion-focused therapy among victims of child sexual abuse and reported that existential therapy was effective in strengthening adjustment, which is vital for rebuilding a sense of competence in trauma-exposed populations. Such findings align with the principles outlined by Ryle and Kerr (Ryle & Kerr, 2020), who emphasized relational approaches to therapy that integrate existential dimensions, enabling clients to reframe maladaptive self-concepts within supportive therapeutic settings.

Neglect and child maltreatment are also public health concerns that extend beyond individual pathology. Westman and Westman (Westman & Westman, 2019) noted that addressing neglect requires systemic approaches because it undermines the developmental trajectory of large groups of children and adolescents. Adolescents in welfare systems, particularly those who are orphaned or abandoned, represent a demographic where existential challenges intersect sharply with developmental vulnerabilities. Carroll (Carroll, 2020) documented the lived experiences of adults who endured neglect in childhood, demonstrating how these early wounds persist into adulthood as feelings of disconnection, meaninglessness, and incompetence. These studies provide a backdrop for understanding why interventions like existential therapy may be uniquely suited to address the unmet psychological needs of neglected adolescents.

The effectiveness of existential therapy has been documented across diverse populations and clinical conditions. For instance, Vos and colleagues (Vos et al., 2023) integrated existential therapy with cognitive and spiritual approaches for cancer patients, reporting improvements in psychological adaptation and meaning reconstruction. Similarly, Ratanashevorn (Ratanashevorn R, 2021) applied existential therapy to LGBTQ+ clients struggling with loneliness, showing how confronting

existential concerns can reduce feelings of isolation and enhance resilience. In organizational contexts, Rouhani Farqani (Rouhani Farqani, 2023) demonstrated that existential therapy enhanced flourishing and organizational loyalty among employees, highlighting its broader application beyond clinical pathology. These findings collectively support the adaptability and universality of existential therapy principles, which can be tailored to meet the specific needs of neglected adolescents.

More recent Iranian studies have contributed significantly to this field. Hatami (Hatami & Tabatabaieinejad, 2023) and Hatami Arad (Hatami Arad, 2023) investigated the effectiveness of existential therapy among undergraduate students with social anxiety, finding improvements in emotional capital, emotion regulation, and mental well-being. Such evidence suggests that existential therapy not only addresses clinical symptoms but also enhances positive psychological constructs, which are crucial for adolescents who perceive themselves as incompetent. Likewise, Sharif and colleagues (Sharif et al., 2024) compared existential therapy with acceptance and commitment therapy in female students with generalized anxiety disorder and found existential therapy effective in enhancing resilience. These results provide further evidence that existential interventions are capable of reshaping maladaptive self-perceptions in vulnerable populations.

In addition to existential therapy, other therapeutic approaches such as acceptance and commitment therapy have been tested for improving emotional regulation and flexibility. Lotfi Azimi (Lotfi Azimi, 2022) demonstrated that acceptance and commitment group therapy significantly improved students' cognitive flexibility and emotional self-regulation, outcomes that are closely related to perceived competence. However, existential therapy distinguishes itself by explicitly addressing existential themes such as meaning, freedom, and responsibility, which are particularly relevant for adolescents who have experienced abandonment or neglect. This distinction underscores the importance of choosing therapeutic modalities that align with the unique existential challenges faced by this demographic.

The literature also highlights the interplay between self-critical tendencies and existential challenges. Gilbert et al. (Gilbert et al., 2004) demonstrated how self-criticism can become pervasive among individuals with histories of neglect, reinforcing feelings of incompetence. This dynamic is evident in adolescents exposed to maltreatment, where maladaptive self-criticism mediates the relationship between trauma and harmful coping strategies (Khanipour Hamid et

al., 2015). Interventions that confront existential anxieties while simultaneously cultivating self-compassion and self-worth are therefore essential. Existential therapy provides such a framework by promoting authentic self-exploration and acceptance.

The significance of studying existential therapy in adolescents without parental support is further amplified by the growing body of qualitative research that underscores the lived experiences of vulnerable groups. Shoa Kazemi and colleagues (Shoa Kazemi et al., 2025) explored the lived experiences of women overcoming addiction and self-harming behaviors, highlighting the central role of meaning-making in recovery. Their findings resonate with existential therapy's emphasis on reconstructing meaning in the face of suffering. Similarly, Roozbehaneh (Roozbehaneh, 2021) demonstrated the alignment between Frankl's existential therapy and the philosophical insights of Molavi, suggesting that existential principles can be culturally contextualized to enhance their applicability in Iranian populations.

Taken together, these findings underscore the need for interventions that not only alleviate symptoms but also rebuild adolescents' sense of competence and meaning. Adolescents residing in welfare centers often confront multiple layers of vulnerability: loss of parental figures, social stigma, and lack of consistent emotional support. Without targeted interventions, these conditions can perpetuate cycles of self-doubt and maladaptation. As Garnezy and Masten (Garnezy & Masten, 2014) argued, competence indicators play a protective role in buffering children against adversity. Existential group therapy, by addressing fundamental human concerns and enabling adolescents to rediscover a sense of purpose and responsibility, may provide such a protective mechanism.

This study builds upon a foundation of empirical and theoretical research that supports the application of existential therapy in various vulnerable populations. By focusing specifically on neglected and orphaned adolescents in welfare centers, the present research addresses a significant gap in the literature. Existing studies have demonstrated existential therapy's effectiveness in contexts ranging from trauma recovery to organizational well-being (Rouhani Farqani, 2023; Vos et al., 2023), but limited attention has been devoted to adolescents facing chronic neglect. The application of group therapy further enhances the intervention's potential, as group settings foster shared experiences, validation, and mutual support, which are essential for individuals who have endured isolation and abandonment.

In summary, the literature demonstrates that existential therapy is uniquely positioned to address the psychological sequelae of neglect, particularly perceived incompetence, by fostering meaning, responsibility, and authenticity. Building on previous findings from both international (Mata, 2022; Ratanashevorn R, 2021; Vos et al., 2023) and Iranian contexts (Hatami & Tabatabaieinejad, 2023; Sharif et al., 2024; Zadafshar et al., 2022), this study investigates the effectiveness of existential group therapy on reducing perceived incompetence among adolescents with neglectful or no guardians in Zanjan City.

## 2. Methods and Materials

### 2.1. Study Design and Participants

This study aimed to determine the effectiveness of existential group therapy on perceived inadequacy in adolescents with neglectful or no guardians. The research design employed in this study was quasi-experimental, using a pretest–posttest control group design. This design allowed the researcher to examine the effect of the independent variable (existential group therapy) on the dependent variable (perceived inadequacy) by controlling for pretest effects and comparing the results of the experimental group with those of the control group.

The statistical population of this study included all male and female adolescents aged 13 to 18 years with neglectful or no guardians who resided in welfare centers under the supervision of Zanjan City Welfare Organization in 2023. Given the nature of the research and to ensure the selection of a sample most consistent with the study's objectives, purposive sampling was used. The inclusion criteria were as follows: age between 13 and 18 years, residence in Zanjan City welfare centers, willingness to participate in the study, and provision of informed consent (if necessary, with approval of the legal guardian). The exclusion criteria included unwillingness to continue participation, absence from more than two therapy sessions (for the experimental group), and incomplete or invalid responses on the questionnaires.

The sample size for this study was calculated using the sample size formula for interventional studies, considering a 95% confidence level, 80% test power, and an effect size (ES) of 0.6. Accordingly, the required number was 15 participants per group, totaling 30 participants. Therefore, 30 eligible adolescents who met the inclusion criteria were purposefully selected and then randomly assigned into experimental (15) and control (15) groups. Random

allocation was used to reduce bias and to homogenize the groups regarding possible confounding variables.

After obtaining the necessary approvals from the university and Zanjan City Welfare Center and selecting the sample, the pretest (perceived inadequacy questionnaire) was administered to both experimental and control groups. Then, the experimental group participated in existential group therapy sessions. These sessions lasted 10 weeks, with one 90-minute session each week, conducted by the researcher who had sufficient qualifications and experience in existential group therapy.

The content of the sessions was designed based on the principles and techniques of existential therapy, focusing on topics such as meaning-making, responsibility, confronting existential anxieties, accepting limitations, and strengthening self-worth and adequacy. The control group did not receive any specific therapeutic intervention during this period and only participated in the routine programs of the welfare center. After the intervention, the posttest (perceived inadequacy questionnaire) was re-administered to both groups. Throughout the study, ethical considerations such as obtaining informed consent, ensuring confidentiality, and respecting the right to withdraw were observed.

### 2.2. Measures

To measure the level of inadequacy in adolescents, the Forms of Self-Criticizing/Attacking & Self-Reassuring Scale (FSCRS) developed by Gilbert et al. (2004) was used. This scale consists of two main subscales: self-criticism (including the subcomponents of inadequate self and hated self) and self-reassurance. In this study, only the inadequate self subscale, which reflects feelings of inadequacy and incompetence, was used. This subscale contains items assessing feelings of helplessness, worthlessness, and lack of competence. Reliability of this questionnaire has been reported as satisfactory in previous studies, including the study of Khanipour et al. (2014), using Cronbach's alpha. In the present study, reliability of this subscale was also calculated using Cronbach's alpha, and acceptable values were obtained.

### 2.3. Intervention

The intervention consisted of a structured existential group therapy program implemented over 10 consecutive weeks, with one 90-minute session each week, facilitated by a qualified researcher experienced in existential therapy.



Each session was designed around key principles of existential psychotherapy, beginning with group orientation, establishing rules, and clarifying expectations, followed by exploration of meaning in life, freedom and responsibility, and the consequences of personal choices. Subsequent sessions addressed confrontation with existential anxieties such as death, loneliness, and meaninglessness, processing experiences of loss and grief, enhancing self-acceptance and authenticity, identifying core personal values, and examining the role of interpersonal relationships in shaping a sense of adequacy. Toward the end of the program, participants engaged in future planning by setting meaningful goals and fostering hope, with the final session dedicated to integrating insights, consolidating skills, and reviewing shared experiences before closure.

## 2.4. Data Analysis

After data collection, the information was analyzed using SPSS version 26. Descriptive statistics (frequency, percentage, mean, and standard deviation) were used to describe demographic characteristics of the sample. The Shapiro–Wilk test was used to examine the normality of data distribution. To test the research hypothesis regarding the

effect of existential group therapy on perceived inadequacy, one-way analysis of covariance (ANCOVA) was employed. In this analysis, pretest scores were used as a covariate to control for initial individual differences and to assess the pure effect of the intervention on the dependent variable. The significance level for all statistical tests was set at 0.05.

## 3. Findings and Results

The participants in this study consisted of 30 adolescents aged between 13 and 18 years who were residing in welfare centers in Zanjan City. Of these, 15 were assigned to the experimental group and 15 to the control group through random allocation. In terms of gender distribution, the control group included 8 boys (53.3%) and 7 girls (46.7%), while the experimental group comprised 10 boys (66.7%) and 5 girls (33.3%). Regarding age, the majority of participants in the control group (66.7%) were between 13 and 15 years old, with the remaining 33.3% between 15 and 18 years old; in the experimental group, 53.3% were in the 13–15 age range and 46.7% in the 15–18 age range. Overall, the demographic composition reflected a balanced distribution across groups, ensuring comparability in terms of gender and age.

**Table 1**

*Descriptive indices of perceived incompetence scores in the two experimental and control groups in the pre-test and post-test stages*

Group	Stage	N	Mean	SD	SE
Control	Pre-test	15	4.2200	0.39976	0.10322
	Post-test	15	3.6020	0.34655	0.08948
Experimental	Pre-test	15	3.5239	0.97129	0.25079
	Post-test	15	2.9905	1.02372	0.26432

As shown in Table 1, the mean score of perceived incompetence in the control group at the pretest stage was 4.22 (SD = 0.39), which decreased to 3.60 (SD = 0.34) at the posttest stage. In the experimental group, the mean perceived incompetence score at pretest was 3.52 (SD = 0.97), which decreased to 2.99 (SD = 1.02) after the implementation of existential group therapy. This reduction in mean score in the experimental group was greater than that observed in the control group. Since lower scores on the perceived incompetence questionnaire indicate a lower level of this variable (i.e., greater sense of adequacy), the reduction in mean perceived incompetence score in the experimental group from pretest to posttest suggests a potential positive effect of existential group therapy.

Before conducting the analysis of covariance (ANCOVA), the assumptions of this test were examined:

1. **Normality of score distribution:** To assess the normality of the dependent variable (perceived incompetence) in both groups at pretest and posttest stages, the Shapiro–Wilk test was used. The results indicated that the significance level in all cases was greater than 0.05, confirming the normality assumption. Furthermore, skewness and kurtosis indices showed no significant deviation from normal distribution.
2. **Homogeneity of variances:** To assess the homogeneity of variances of posttest scores of the dependent variable across the experimental and control groups, Levene’s test was applied. The results showed that the significance level for perceived incompetence scores was less than 0.05 (control group:  $p = 0.014$ ; experimental group:  $p =$

0.000), indicating lack of homogeneity of variances. However, given that the sample sizes of both groups were equal ( $n = 15$ ), ANCOVA is considered robust against this violation.

3. **Homogeneity of regression slopes:** This assumption examines whether the relationship between the covariate (pretest scores of perceived incompetence) and the dependent variable (posttest scores of perceived incompetence) is the same across groups. For this purpose, the interaction effect between group membership and pretest scores on the posttest scores was tested. The results needed to show a nonsignificant interaction to confirm the assumption.

4. **Linearity of the relationship between covariate and dependent variable:** It was assumed that the relationship between pretest and posttest scores of perceived incompetence was linear. This assumption is typically verified through scatterplots or correlation analyses.

The main hypothesis of the study stated: “Existential group therapy is effective in reducing perceived incompetence among adolescents with neglectful or no guardians.” To test this hypothesis, a one-way ANCOVA was applied. In this analysis, posttest scores of perceived incompetence were considered the dependent variable, group membership (experimental or control) was the independent variable, and pretest scores of perceived incompetence were entered as the covariate.

**Table 2**

*Results of the analysis of covariance of the effect of existential group therapy on perceived incompetence*

Source of Variation	Sum of Squares	df	Mean Square	F	Sig.
Group (Independent Variable)	0.130	1	0.130	22.335	0.004
Error	22.530	27	0.834		
Total	29				

The results of ANCOVA (Table 2), after controlling for the effect of pretest scores, indicated a significant difference between the experimental and control groups in posttest scores of perceived incompetence ( $F(1, 27) = 22.335$ ,  $p = 0.004$ ). Since the significance level (0.004) was less than 0.05, the null hypothesis of no difference between the groups was rejected. This finding shows that existential group therapy had a significant effect in reducing perceived incompetence among adolescents with neglectful or no guardians. The calculated effect size (0.452) indicates that approximately 45.2% of the variance in posttest perceived incompetence scores was explained by group membership (receiving or not receiving existential group therapy), which is considered a large effect.

Therefore, the research hypothesis that “existential group therapy is effective in reducing perceived incompetence among adolescents with neglectful or no guardians” was confirmed.

#### 4. Discussion and Conclusion

The present study examined the effectiveness of existential group therapy on reducing perceived incompetence among adolescents with neglectful or no guardians residing in welfare centers in Zanjan City. The

findings revealed that participants in the experimental group who received existential group therapy showed a significant decrease in perceived incompetence scores from pretest to posttest, compared with the control group. This suggests that existential group therapy, which emphasizes meaning-making, responsibility, and authentic engagement with existential concerns, has a powerful effect in restructuring self-concept and enhancing feelings of adequacy in vulnerable adolescents. The large effect size observed (0.452) further underscores the clinical relevance of the intervention and its potential for application in welfare-based contexts.

These results align with the foundational work of Gilbert and colleagues, who demonstrated that self-critical tendencies and feelings of inadequacy often stem from early experiences of neglect and rejection, and that these maladaptive self-assessments can be shifted through interventions that foster self-compassion and meaning (Gilbert et al., 2004). In the present study, existential group therapy provided adolescents with opportunities to reflect on their lived experiences, confront existential anxieties, and reframe their narratives around responsibility and authenticity. By doing so, the intervention likely disrupted maladaptive self-critical cycles and fostered a sense of worthiness and competence.

The findings are consistent with those of Khodadadi and colleagues, who reported that existential group therapy significantly improved students' mental health outcomes in Iranian contexts (Khodadadi et al., 2015; Khodadadi Sangdeh et al., 2015). Similarly, Hatami and Hatami Arad found that existential therapy enhanced emotional capital, emotion regulation, and mental well-being in undergraduate students experiencing social anxiety (Hatami & Tabatabaieinejad, 2023; Hatami Arad, 2023). The present research extends these findings to a population of adolescents at high risk due to neglect and lack of guardianship, demonstrating that existential group therapy is not only effective for clinical populations such as those with social anxiety but also for socially vulnerable groups whose existential concerns are heightened by chronic life stressors.

Another important contribution of this study is its resonance with the broader literature on neglect and child maltreatment. Carroll's phenomenological study of adults who experienced childhood neglect showed that neglect leaves lingering effects on self-worth, often manifesting as feelings of incompetence and inadequacy in adulthood (Carroll, 2020). Likewise, Westman emphasized that neglect and abuse are public health challenges that compromise developmental outcomes across generations (Westman & Westman, 2019). In this regard, the observed improvements in perceived competence among adolescents in this study are encouraging, as they may represent early protective effects against the long-term consequences of neglect identified by Carroll and Westman. By addressing existential needs, existential group therapy may interrupt the transmission of maladaptive self-beliefs into adulthood.

The positive outcomes also support Garmezy and Masten's findings that competence indicators play a protective role in children at risk (Garmezy & Masten, 2014). In this study, existential therapy may have acted as a competence-enhancing intervention by fostering meaning, responsibility, and authentic self-worth. This is especially critical for adolescents in welfare settings who are often deprived of external sources of validation. The group format of the therapy may have further amplified these benefits, providing adolescents with a supportive social context where shared experiences validated their struggles and reinforced collective growth.

These findings echo the work of Zadafshar and colleagues, who compared existential therapy with emotion-focused therapy for victims of child sexual abuse and concluded that existential therapy was effective in enhancing adjustment (Zadafshar et al., 2022). Adolescents in the

present study likely benefited from similar processes of meaning reconstruction and emotional validation, enabling them to develop a stronger sense of adequacy. Likewise, Sharif and colleagues reported that existential therapy improved resilience among female students with generalized anxiety disorder (Sharif et al., 2024). Together, these studies suggest that existential therapy not only alleviates maladaptive symptoms but also builds resilience, adjustment, and competence—protective factors essential for long-term psychological well-being.

The integration of existential therapy with diverse cultural and clinical contexts further underscores its adaptability. Vos and colleagues showed that existential therapy, when combined with cognitive and spiritual elements, improved psychological well-being in cancer patients (Vos et al., 2023). Ratanashevorn applied existential therapy to LGBTQ+ clients struggling with loneliness, reporting significant improvements in connection and resilience (Ratanashevorn R, 2021). Roozbehaneh argued for the compatibility of Frankl's existential therapy with Molavi's philosophical insights, reinforcing the cultural relevance of existential principles in Iranian populations (Roozbehaneh, 2021). These diverse applications mirror the present findings and suggest that existential group therapy can be tailored to different cultural and developmental contexts while maintaining its core focus on meaning and authenticity.

It is also important to note the role of meaning-making in overcoming maladaptive behaviors. Shoa Kazemi and colleagues highlighted how meaning reconstruction is central to recovery for women overcoming addiction and self-harm (Shoa Kazemi et al., 2025). This finding parallels the processes observed in the current study, where adolescents restructured their understanding of themselves in relation to their existential challenges. The adolescents' decrease in perceived incompetence may similarly stem from the reconstruction of meaning and the development of personal agency, underscoring existential therapy's strength in addressing populations burdened with trauma and neglect.

Moreover, the findings suggest that existential group therapy may complement other evidence-based approaches such as acceptance and commitment therapy (ACT). Lotfi Azimi demonstrated that ACT enhanced cognitive flexibility and emotional self-regulation among students (Lotfi Azimi, 2022). While ACT builds psychological flexibility through acceptance and value-based action, existential therapy provides a deeper engagement with fundamental human concerns such as freedom, responsibility, and meaning. The

results of this study highlight how existential therapy, by directly addressing adolescents' sense of inadequacy, offers unique therapeutic benefits that may not be fully captured by other modalities.

The relational dimension of therapy also appears crucial. Ryle and Kerr emphasized the relational foundation of cognitive analytic therapy, which integrates existential dimensions to enhance self-understanding (Ryle & Kerr, 2020). Similarly, the group context of the present study may have offered relational validation and interpersonal learning, reducing isolation and strengthening adolescents' competence. This finding is in line with the view that relational frameworks in therapy enhance the effectiveness of interventions targeting self-critical and maladaptive beliefs.

Finally, this study contributes to a growing body of Iranian research exploring existential therapy's application. Rouhani Farqani found that existential therapy improved flourishing and organizational loyalty among employees (Rouhani Farqani, 2023), while Hatami and colleagues confirmed its benefits for emotional regulation and well-being (Hatami & Tabatabaiejad, 2023). These findings demonstrate that existential principles are highly relevant within Iranian contexts, and the present study adds to this literature by addressing adolescents in welfare systems. By situating existential therapy within culturally sensitive frameworks, these findings open pathways for its broader implementation in social welfare, educational, and clinical settings.

Taken together, the results of this study confirm the efficacy of existential group therapy in reducing perceived incompetence among adolescents with neglectful or no guardians. The findings are consistent with both theoretical expectations and empirical evidence across diverse populations, providing strong support for the application of existential group therapy in welfare contexts. By fostering meaning-making, responsibility, and authentic engagement, existential group therapy appears capable of addressing the deep-seated self-critical beliefs that underlie perceived incompetence, thereby equipping vulnerable adolescents with the psychological resources necessary for resilience and growth.

## 5. Limitations & Suggestions

Although the results of this study are promising, several limitations must be acknowledged. First, the relatively small sample size (30 participants) limits the generalizability of the

findings. While random allocation was used to minimize bias, the modest number of participants reduces the statistical power and restricts the ability to detect more nuanced effects. Second, the study focused exclusively on adolescents residing in welfare centers in Zanjan City, which may limit the applicability of the results to other cultural or regional contexts. Adolescents living in families, foster care, or other forms of social support may present different existential concerns and levels of perceived incompetence. Third, the study employed self-report measures, which are susceptible to response biases such as social desirability or inaccurate self-assessment. Finally, the absence of follow-up assessments restricts the ability to evaluate the long-term sustainability of the intervention's effects.

Future studies should expand the sample size and include participants from diverse geographical and cultural backgrounds to enhance generalizability. Longitudinal designs with follow-up assessments would be valuable in determining the durability of existential therapy's effects on perceived competence and related outcomes. Additionally, comparative studies that evaluate existential therapy against other modalities such as cognitive-behavioral therapy, acceptance and commitment therapy, or cognitive analytic therapy could provide further insight into the unique mechanisms and advantages of existential approaches. Qualitative research may also complement quantitative findings by exploring participants' lived experiences during and after therapy, offering richer insights into how adolescents internalize existential concepts. Finally, exploring hybrid models that integrate existential therapy with resilience-building or trauma-informed practices could broaden the intervention's applicability in welfare and clinical settings.

Practitioners working with adolescents in welfare systems should consider incorporating existential group therapy into their intervention programs, particularly for adolescents struggling with feelings of incompetence and inadequacy. Training welfare center counselors and psychologists in existential principles can equip them to address the deeper existential concerns of adolescents who have experienced neglect or loss. Group-based delivery should be prioritized, as it fosters shared experiences and reduces isolation while reinforcing the therapeutic benefits of meaning-making and responsibility. Moreover, policy-makers and administrators in welfare organizations should support the integration of existential group therapy into psychosocial programs, recognizing its potential to



strengthen resilience, competence, and overall mental health among vulnerable adolescents.

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### Declaration of Interest

The authors of this article declared no conflict of interest.

### Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

### Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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### Authors' Contributions

All authors equally contributed to this article.

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