### Urszula Dębska<sup>1</sup> Anna Szemplińska

Department of Psychology, University of Wrocław

# Alone or together? Positive aspects of mentally disabled persons residing in L'Arche communities

#### **Abstract**

In this article we present positive aspects of personal and social relations of intellectually disabled persons. Narration examinations were carried out among the residents of L'Arche communities. We show the invaluable impact on intellectually disabled persons who stay in a community and community life on individual development and how these individuals function and find satisfaction in life. Theoretical basis for our considerations constitutes positive psychology, narration psychology and philosophical anthropology.

**Keywords:** Mental disability, L'Arche communities, social relations, positive aspects

#### Introduction

The weakest light is bright

If its background is black (Lec, 2009)

Mentally disabled persons are most often perceived through their misfortunes, burdens, deficiencies, difficulties, dysfunctions, inadaptability and so on, and as a rule research is carried out in these contexts. In our study, we would like to take another path which is aimed at arriving at positive aspects of their lives. Mentally disabled persons who live in the houses of L'Arche communities shall be

<sup>&</sup>lt;sup>1</sup> Urszula Dębska Department of Psycholoogy, Faculty of Pedagogical and Historical Sciences,, Uniwersity of Wrocław, Dawida 1, 50–527 Wrocław, Poland; u.debska@psychologia.uni.wroc.pl.

participants and co-authors of our research, which is of a narrative nature. Intellectual disability co-exists with other significant limitations in the process of social adaptation. Development and life of mentally disabled persons depends to a large extent on the support which they receive from their surroundings. In our present research, we intend to focus on positive qualities that mentally disabled persons derive from living among persons who are close and kind to them, but who are not necessarily their biological family. Human development at its best requires numerous bonds and close interpersonal relations, acceptance, feeling of belonging and support from close persons. These conditions refer to all people, and also to mentally disabled persons – although in their case the level of intellectual development is particularly hindered and lowered. Here, we notice that there is a greater demand for help and support from their surroundings (Czapiga, 2010) as they are not able to satisfy their needs on their own.

The title of the article 'Together or Separately' refers to a hard situation confronting intellectually disabled persons. Many times in their social experience, they are not able to 'free themselves' from influences or control from other persons. Or it is the other way round – they remain in the background, with no support, help, love or even right to live, which is denied them by their closest persons. Intellectually disabled people are characterized by lowered and limited cognitive and social possibilities as well as skills of individual action and behaviour. For the purpose of their best development and life, they need to live among the people who are kind to them and enter with into numerous interpersonal bonds. Thanks to such positive social relations, they are able to break from the isolation which makes it impossible for them to develop. Such assumptions are part of the L'Arche communities pedagogy. In our research, we draw on the anthropology of Jean Vanier, the founder of International Foundation L'Arche. He emphasizes that intellectually disabled persons have their personal Self and that they are worthy of respect and deserve appropriate treatment. The L'Arche pedagogy assumes the charge to help disabled persons to experience their human dignity in many aspects of existence as well as in acquiring faith in themselves (Dębska, Szemplińska, 2008; Szemplińska, Śmigiel, 2009; Śmigiel, Szemplińska, Andrzejczak, 2010; Dębska, Szemplińska, in printing).

Each human being – also the one who is mentally disabled – has their needs; some of them are basic and universal, such as a need for security, belonging, respect and love (Maslow, 1970), a need to strengthen oneself and make self-assessments, and a need to make sense (Frankl, 1976; Solomon, Greenberg, Pszczyński, 1991). When these needs are not satisfied, human development is hindered or even made impossible and there are problems with social functioning. Knowledge of the L'Arche communities functioning principles of helps us find out how to support personal and social development of mentally disabled persons.

It is interesting to attempt to conduct narration-type examinations among mentally disabled persons. These examinations are aimed at reaching positive sides of these persons' statements as to their life in L'Arche, which they themselves mention. Our research comprises mentally disabled persons as a separate group. Our goal is to show more than just their deficiency, which is what researchers usually concentrate upon. While listening attentively to the narrations of the examined persons, we learn about their personal understanding of various aspects of reality, of themselves and of their surroundings. We wish to emphasize the possibility of sharing this experience with others. This may become a step towards presenting an intellectually disabled person as someone who is not hermetically closed in a cognitive scheme of 'beyond the intellectual norm'. Through broader understanding of cognition, taking into account other components which constitute strictly human learning, we are able to look at a human being with more sensitivity, including one who is intellectually disabled. The mind does not act in isolation, however; on the contrary, it combines feelings, actions and mutual personal impingements within an environment.

#### Theoretical basis

It is necessary to approach the whole issue from a multi-planar and multi-contextual perspective. We concentrate on positive aspects of intellectually disabled persons in light of salutogenesis (the term used in health psychology): we do not focus on disease or deficiency, but rather on health, on positive sides, and on the things which serve the purpose of full development. It is true that we cannot change what happens to us due to our fate; however, we can change our attitude to these occurrences. We cannot get rid of intellectual disability. What we can do is look at persons with lowered intellectual levels as we do at people who have their needs, possibilities, and joys and not at individuals with deficiencies or limitations, not at those 'of lower category' because they are below the so-called norm. Positive psychology, which emphasizes 'bright' aspects of life, is a good field of reference here (Czapiński, 2004). When examining the persons who live in L'Arche communities, we look at them from the viewpoint of those things which give them joy, happiness, a better frame of mind and consequently result in their better functioning in society. If these persons are to exercise their right to develop, some conditions of socialization, normalization and personalization need to be observed (Gunzburg, 1977). Mentally disabled people, similar to other people, also have their dreams, experiences and hopes. In order to make them come true, it is crucial that they have a sense of being a person. This is achieved through experiences coming from the following spheres: biological, social and

subjective (Straś-Romanowska, 1992). According to the assumptions of philosophical anthropology and existentialism, the present and future life of a person depends to a large extent on this person's attitude toward, and involvement in, self-formation and the shaping of one's own fortune. Therefore, persons who suffer from a disability also have their fortune in their own hands to some degree. The subject who feels that 'he can do something himself' and acts accordingly, sets himself new goals and achieves them, shapes or changes himself, and influences his development and his contacts with other people (Śleszyński, 1996; Neckar, 2005). Taking advantage of his subjectivity and the fact that he can feel it, in an autonomous way he realizes the sense of life of which he is in control to some degree (Obuchowski, 2000). Intellectually disabled persons' problems with abstract thinking are significant constraints, however, such constraints do not need todeprive them of individuality or independence. Mental disability of a genetic, metabolic, organic or social and cultural nature can be modified by support from the immediate surroundings and numerous therapeutic actions introduced early on (Czapiga, 2010). Intellectually disabled persons can experience the feeling of creating oneself when they are allowed to make decisions, take into consideration their most important aspects of life in this way satisfy their personal needs. There is also a place for responsibility here. It will differ according to the particular personal dysfunction. It is conditioned by physical, mental and intellectual possibilities as well as by a widely understood context in which an especially important role is played by the immediate surroundings. Certainly, the issues of responsibility and its levels are to be perceived differently with persons of various levels of intellectual disability. Their level of awareness is different, though less developed; however, it can grow along with development, and becoming mature these persons may undergo new experiences and be faced with more roles in life (Bandura, 1986; Baumeister, 1994; Neckar, 2005; Kościelska, 1995; Northway, 2001).

Taking into account the impact of social relations and bonds on the functioning of individuals, we can consider the positive aspects of living in L'Arche. This environment allows for the basic experiences of an individual who is intellectually disabled; it can stimulate their development, social relations and can also have an enriching and supporting function. The individual's social environment, feedback and its experiences constitute the basis for shaping and modifying one's own image and self-assessment. These experiences, in turn, impinge the process of adjusting to the surroundings and to their proper functions. We must admit that cognitive limitations of intellectually disabled persons may hinder the process of forming the one's self-image and self-assessment; however, their level depends on the quality and quantity of social contacts and experiences. When these persons are rejected and left for themselves without any required

and necessary stimulation, their entire development is additionally blocked up. Along with the possibility to be in a community of well-wishing people, where the quality and quantity of social contacts compensates to a large extent for acquired deficiencies, there appears a chance for better development and for forming a rich self-image and self-assessment and greater power to regulate these contacts. Research confirms that persons who participate in occupational tTherapy workshops and attend pecial schools or other institutions of this type experience a higher quality of life than those whose contacts and social relations are limited (Smoleń, Sękowski, 2008).

In our research we employ *narration psychology*. One of its basic assumptions is the ability to create narrations as a universal human feature. Narration understood as *story telling* '...belongs to the most natural means of communication and the ways of contacts between people. (...) It serves the purpose of ordering and understanding events, it helps us distance ourselves from them as well as look for their cohesive and sensible interpretation, thus making the world understandable (Oleś, 2003 p. 333). It unites the rich experiences of an individual, it supports developmental processes, self-improvement and personal changes. It engages cognitive and emotional processes, fulfils sense-creative and motivational functions, directs behavior and introduces mechanisms of self-control (Bluck, Habermans, 2000; Trzebiński, 2002; quoted from: Oleś, 2003, p. 335). It constitutes an important element of forming identity even when such identity is revealed in small fragments and not necessarily as a whole life story. Narrative thinking is directly connected with the experienced needs, desires and set goals of the subject constructing the narration (Oleś, 2003).

Narration emphasises first of all the language and its transmission of numerous cognitive processes, emotions, motivation and intentions – the basis of effective language usage. This complex context must be taken into account, especially in relation to narrations of persons with lowered intellect. Linguistic activity of mentally disabled children is conditioned by the society (Kościelska,1995; Rakowska, 2003) – depending on the environment in which an intellectually disabled child is brought up, his/her language develops and functions differently. The existence of a close connection of a child's speech with his/her thinking has been studied for a long time; however, the dispute over priority of development has still not been settled (Kościelska, 1995). However, we do know that the formation of higher forms of thinking is possible thanks to speech (Spionek, 1975, p.173). Disorders in general mental development are most often accompanied by difficulties in linguistic functioning (Rakowska, 2003). Persons who have intellectual disabilities can be supported narrators, thanks to which it is possible to understand their stories, feelings and experiences (Dębska, Szemplińska, in printing).

#### Mentally disabled persons in their personal and social context

Mental disability comprises all persons whose intellectual possibilities are lowered, independently of their reasons and adaptation possibilities. This is a condition that is reached as a result of an abnormal developmental process. It takes place as a consequence of co-impingement of biological, environmental and individual factors. It is accompanied by disorders and impediments to maturity, learning and to social adjustment (American Association of Mental Deficiency, Kostrzewski, Wald, 1981; Czapiga, 2010). This process includes formation of personality, first of all, structure and function of Self; its special feature is blockage of cognitive activity (Kościelska, 1995, p. 8). Development of mentally disabled children requires intensive support from the surroundings, which provides chances for better results (Czapiga, 2010). Kościelska (1995) perceives and defines disability not as an organic disorder but a psychological one; this is a condition reached as a result of an abnormal developmental process as well as environmental impingements. Particular emphasis is placed on the environment where different levels of intellectual disability, determined by environmental impingements, are shown (Kościelska, 1995; Majewski, 1999; Otrębski, 2007). Social surroundings of a mentally disabled person may significantly influence the way an individual behaves and progresses and may influence whether these persons are able to satisfy their needs and come to feel that they have an impact on their decisions (Debska, Szemplińska, 2008; in printing).

Persons mentally disabled – like all others – create bonds: They create emotional relations with people from their nearest surroundings. These bonds constitute the basis and conditions for their proper development (Sadowska, Skórczyńska, Gruna-Ożarowska, 2007) – inasmuch as it is possible – and the basis for their human existence. A bond satisfies the need to experience closeness and security (Niewiarowska, Regner, 2007). The everyday life of disabled persons and their families depends upon the type, quantity, quality, depth and accuracy of these bonds. We can achieve certain positive developmental results with mentally disabled children as long as we accept them, give them love and create possibilities to stimulateg development. However, the effort of loving, accepting and supporting a disabled child is often unacceptable for many parents. The fate of such children is then twice as bad – they experience great loneliness.

Philosophical anthropology allows us to look at human individuals in light of their human dignity. In order to function properly, it is crucial that individuals feel their own dignity – one of the basic types of developmental dynamism. Its basis is formed by respect for oneself combined with a recognised system of values, trust, self-acceptance and accepting one's strong and weak sides (Płużek, 1989; Steuden,

2006). A sense of one's own dignity is formed in interpersonal relations when there is the possibility to do good things to other people. It becomes lower when people are not respected by others, are humiliated, ignored, or treated indifferently. Its particular growth is observed when an individual is able to deal with interesting matters, passions and plans. Self-assessment, shaped in the course of social experiences, mediates in experiencing one's own dignity – it allows experiencing the value of oneself and constructing a positive image of oneself, and motivates behavior in a morally valuable way according to a recognised system of values. Perceiving oneself as a valuable person makes it easier to cope with difficult situations and accept life's adversities (Steuden, 2006; Dębska, Szemplińska, 2008).

Mental disability does not deprive a disabled person of either dignity or other potentials which constitute the person's status. Mentally disabled persons may or may not feel that their personal dignity is respected. Having this ambivalent feeling, they suffer when their dignity is violated. In this way, the area of their disability increases. Kościelska (1995) indicates that a disability which results from an abnormal developmental process becomes more intense through inappropriate attitudes, behaviour, errors and lack of personal respect.

The greatest devastation in the psyche of a disabled child is caused by making the child more handicapped than it is through inappropriate social impingements such as lack of bonds or their deformations (Kościelska, 1995; Debska, 2007), relations not conducive to development or no relations at all, incorrect and negative attitudes, requirements, and expectations. On the other hand, if we treat them as people who contribute a unique value to the society in which they live, who give something of themselves and co-create a community, then we can achieve a state in which the level of their disability is minimized, while their humanity is maximized. The Houses of L'Arche are a good example of a place where stereotypes of thinking about intellectually disabled persons are broken and where these persons are given an opportunity to discover their human face (Debska, Szemplińska, 2008, p. 162; Szemplińska, Śmigiel, 2009; Śmigiel, Szemplińska, Andrzejczak, 2010). L'Arche provides its residents with values connected with the notion of a home; however, in a special way it attempts to secure bonds which are a source of growth and development of the communities' members (Szemplińska, 2011). The attitudes of the closest persons are significantly reflected in the child's own sense of self-respect and feelings. Many parents and carers, whether consciously or not, violate the dignity of their children when they do not know how to deal with them or when they adopt negative attitudes from their environment (Kościelska, 1995).

Mentally disabled persons are able to acquire the skill of so-called cognitive decentering. This means that in their thinking they consider many aspects of a problem situation and its mutual relations and at the same time accept an extra-personal perspective. It is a function of intelligence development (Kościelska, 1995). With appropriately worded instructions for a task and research material, it is possible to achieve an effect of imagination "de-centering" with intellectually disabled children. This means that their potential is greater than one revealed in normal conditions – we only need to discover how to release it. In order to stimulate developmental processes of people with lowered intellect, it is particularly important to maintain a high level of self-dependency in the hierarchy of educational goals, and not to lower the level of expectations connected with independent activity. Instead, we need to set requirements which slightly raise the current level of the child's abilities, to control the child's activeness in a moderate way, and provide the child with appropriate models of activity along with creating situations which inspire the child's own activity and allow the child to satisfy his/her natural needs (Rakowska, 2003, p. 126). Minczakiewicz (2010) also emphasizes various possibilities for persons with Down syndromec their feelings of social identity.

## Houses L'Arche as a wayof changing the fortunes and developmental possibilities of mentally disabled persons

L'Arche was established in the 1960s by its creator Jean Vanier (1991). The goal was to create jobs and places of residence for intellectually disabled persons. In the houses of L'Arche usually five to eight intellectually disabled persons live permanently along with assistants who are designated for a certain time. For the intellectually disabled living there, communities are a home in which they feel important, needed, loved and surrounded by close friends. The family type houses provide their residents with necessary support 24 hours a day. The simple style of life in L'Arche is based on mutual interpersonal relations. As Vanier puts it: 'They wanted to live with a friend' (Vanier, 2008, p. 59-60). The first L'Arche community was established in Trosly-Breuil near Paris. Several years later, L'Arche opened up to other cultures, languages and social and economical conditions. At the moment, there are 137 communities in 35 countries, with 17 languages being used. The L'Arche Federation has circa 5,000 members, including 2,278 persons with an intellectual disability who live in the houses run by the federation. Additionally, there are 1,316 other persons with disabilities who take part in workshop activities. In total, the Federation supports 3,594 persons with disabilities (data from 2009, http://www.larche.org.pl). There are also some houses of this type<sup>2</sup> in Poland, where intellectually disabled persons have a chance to experi-

<sup>&</sup>lt;sup>2</sup> Currently, Polish communities comprise one region which is part of the Northern Europe Zone. The Polish Region assumed legal status of 'Fundacja L'Arche' with its seat in Śledziejowice

ence respect for their own dignity, develop it and at the same time feel that their lives make sense. L'Arche was created in the Catholic tradition; however, it soon became an ecumenical community also open to non-Christian religions. Faith and spirituality havegreat significance in L'Arche communities. These communities proclaim a simple evangelic message: that the poor can teach us many things as long as we let them speak. In L'Arche houses all persons, regardless of their disability – and to the best of their ability – take responsibility for the community. Thanks to this principle, we often observe transformations of disabled persons as well as persons without disabilities. Introverted persons in the course of months and years spent in L'Arche somehow 'flourish' and become more and more capable of giving support to others. Attitudes of fear, depression, instability and insecurity as well as loneliness gradually disappear. A sense of belonging, which is discovered in mutual relations, becomes a source of involvement. According to the experiences of L'Arche communities, treating intellectually disabled adults as partners constitutes a necessary condition for the relation of reciprocity. For persons who normally use their intellect and a language code based on intellect, it is not an easy task. However, mutual relations are thus deprived of any hierarchy that places some people higher than others. Over time this partnership becomes an element which guarantees reciprocity – understood as the exchange of gifts and also mutual support in the face of revealed weaknesses and traumas. In L'Arche it is important to listen attentively to verbal and non-verbal messages that are communicated by its residents (Śmigiel, Szemplińska, Andrzejczak, 2010).

#### The authors' own research

Narration examinations which we conducted comprised nine adults with various levels of mental disability. Selection was random so as to comply with the principles of methodological correctness. We were aware that persons with deeper disabilities might not be able to meet the examination requirements. Taking into account the broad range of our collected material, we did not include the entire content, but only some fragments representing particular aspects of the narrations. For ethical reasons, privacy concerning actual personal data was maintained.

because it was here that the first Polish community was established in 1981. The Polish Foundation includes three branches in Krakow (in Wieliczka and Śledziejowice), in Poznań and in Wrocław; additionally, there is one more project in Warsaw. The Foundation now has five houses and two occupational therapy workshops, it is a non-government organization serving social purposes and as such it has the status of a public benefit organization. The legal aspect of L'Arche results in its responsibility to local government or state institutions for the quality of care over the disabled persons in its custody. At the local government level it is called City Social Help Centre (MOPS), at the state level Disabled Persons Rehabilitation State Fund (PFRON) (Szemplińska, Śmigiel, 2009).

One cognitive aim of our research was to examine narration possibilities of these persons. We wanted to concentrate on positive aspects of the statements. Research questions were as follows:

- Are mentally disabled persons able to meet the requirements of narration? Do they construct autobiographical narrations or other kinds?
- Do the narrations of mentally disabled persons contain information about positive aspects of their living in L'Arche? What do they particularly focus their attention on?

Originally, the instruction was: 'Tell me your story'. However, as it was too difficult for some persons to understand, it was verbalized as 'tell me something about yourself'. The examiner asked the participants the same auxiliary questions in order to maintain the direction of the story or dialogue, or to understand further a particular aspect such as the awareness of having Down syndrome or being a L'Arche resident. Some of the participants attempted to break away from this course of examination and directed conversation to other subjects beyond the scope of the research, but at least they chose these subjects themselves.

It was difficult to carry out the research for such reasons as frequent speech defects of the examined persons, employed brachylogy, perseverations and changes of word meanings which had to be clarified. In the course of the examination, it was notably visible that the participants needed to feel a bond with the examiners, which was manifested through shown trust or its lack. Obviously it was important to spend a long time with the participants if we wanted to conduct thorough research.

#### Reflections in the context of the conducted research

#### 1. Research methods

The research can be seen only as dialogues supported by the interlocutor rather than by free narrations or stories. As can be imagined, we could only talk about co-creating narration with an intellectually disabled person. We needed to use so-called 'drivers' – navigating questions or ones that kept the the conversation going (Dębska, Szemplińska, in printing). The participants' memories constituted certain smaller stories. Some had difficulty starting, others became stuck on one sound: *aaa*, *yyyy*, and there were many hesitations: 'I wonder how to say it', 'I'll start again', 'for me, it's difficult to tell about this'. During the examination, there were numerous perseverations of words, phrases and longer fragments.

However, the persons constructed their statements on the model of a narration, their thinking being narrative. They registered many events from their lives and built a certain chronological entirety, which was revealed in their stories. They had order. Sometimes the participants tried to analyze – starting from their birth,

through childhood, young age, home, school, and up to their adult relations and interpersonal bonds.

When analyzing the collected research material, we noticed several leading areas/ subjects which were similar with all the examined persons, like references to child-hood, their family home, L'Arche as their current place of residence, attitudes to their disability, numerous social relations, religious motifs, dreams and desires, holidays and travels – being on the road, moving somewhere, 'being some time here, some time there' (especially with persons whose disabilities were deeper). There were also more personal stories, containing individual depictions of experiences.

#### 2. Positive personal and social aspects of staying in L'Arche

The participants came from various backgrounds. They also had varied, hard or even painful experiences and memories prior to their living in L'Arche. Even the fact that they noticed more aspects of their lives and other people's lives and they tried to reflect on certain issues and analyse them, proves that their stay in the community has been stimulating, enriching and has enabled them to develop. Concentrating on positive matters, we noticed that they referred to various aspects. Some were directly connected to personal experience and growth, while others referred to social relations.

#### A) Personality and personal aspects:

- They express a sense of distinction and identity of the examined: 'that's the way I am', 'I am just original', 'that's the way I was born', 'I want it this way'.
- They observe their attitude to themselves, observe changes, possibilities and desires:
  - 'As to children, honestly, not a good idea, maybe adopt some but not having my own ones, it would be too hard for me. I am a person with a disability, with my eyes and such feelings, so my child would me like me; I could adopt another one from an orphanage.' The participant Justyna notices some positive features of her personality, her skills and behaviours: 'I would be a good nanny because everybody trusts me. I have a good character for children. Well, that's the way I am, I take after my sister and mother.' Konrad looks at himself when he was young with criticism, he notices changes when he says: 'I was such a different man then, not like in my present life, everything has changed, it all comes with age, it just changes, as if I was in a totally different life, no?'
- Some also refer to their disability; most frequently, having been so directed by the examiner. However, in the end the participants are able to express

themselves using their own words. They tell a story of themselves, about their diseases, changes in their thinking about themselves, they look with criticism at what their environment did not show them, tell or teach them:

'I was such a tiny baby like all other children then, no, of course I was actually born with such a strange syndrome, as you said, with Down syndrome of course. You know how it came to be known, this Down syndrome? A man discovered this strange disease, didn't he? I don't know what it is, this Down syndrome, but I was born with a defect, or rather an inborn heart disease. /.../ but I would not think about it in this way, it was Down syndrome at all, but after some time I learnt that something like this exists. /.../ I do not know whether it made my life difficult then, I was not aware that something like this can exist at all, very strange, isn't it? I imagined it as something totally different, some disease or not a disease, like Down syndrome, nobody knew what it was like.

• some are able to refer personally to their disease:

I am different', 'This is what I am like', 'I was born like this';

they see its disadvantages and express their desire to change this condition:

'I don't want it like this', 'I would have to change it'.

• The participants talk about their future plans and dreams. Their desires are similar to those of adults without disabilities – they want to be independent, to set up a family and have friends. Some are aware of their deficiencies and difficulties they would have if they were to start a family. Justyna knows how her carers perceive her: 'They might be afraid of a gas explosion, or no payment for the water/.../or if I know how to cook, wash, switch off everything/.../'. On her own, she tries to assess her possibilities: 'I can do it myself because I can do everything but I'm afraid of occupational safety and health – that I can't cope with safe life (energy, gas, etc.)'. The participants are sometimes critical towards their behaviour, they do not accept existing requirements, but they also notice their faults, i.e. their anger, belligerency – They do want to change, correct themselves – 'sometimes I quarrel when I don't like something, when I want it my way'. They are able to refer to behaviours of others, close persons, in a critical way. Justyna says:

'our Mum had four of us. She did not want to tell us about it, she hid it. She left us already at hospital. My sister took me and looked after me. /.../ Mum was just very poor and this is her life. She was taken ill and that's it — she had to submit papers to an orphanage.'

#### B) Social references:

As the most important aspect in all of the narrative accounts, we note the following: relations with other persons, including memories of mother, father, grandmother, aunt, sister, brother, assistants of L'Arche as well as the other residents. With great care interviewees try to express *who was, who is* – it is a noticeable tendency not to omit anyone and but to show the significance of other persons. The narrations are full of people who are significant to the participants. Konrad tells about his mother and grandmother:

Sometimes my mother came here to visit me, to ask me how I felt, /.../Grandma was. And more than my mother or father, she was just better. She was different than the rest of the family. /Grandma brought me up/more in the Christian tradition and now I thank her so much for this (very moved), she was the mother of my father. /.../ Eee, at first Mum thought that I was very clumsy in every work and when she saw me here I somehow became more skilful. What do you think? /.../ My mother did not have a good opinion of me.'

The examined persons in their stories partly refer to other residents. They emphasise mutual bonds, friendships, personal experiences of positive interpersonal contacts, acceptance, support and reciprocity. Moreover, they talk about the possibility to do useful things and find interesting emotional outlets. Karina is happy in L'Arche: 'I love people I live with, I appreciate the community and doing things for others./.../ Each of the residents of this house is important for me'. In the community they find opportunities to express themselves, they learn many things, they feel needed: Karina – I love painting, making Christmas cards'. Konrad: 'Only in L'Arche have I found a real life, it is true until now, I am happier than ever before'.

We must admit that in order to reach the hidden resources of the examined persons, it is necessary to employ more efficient and more flexible research tools. Undoubtedly, our research depends on following intellectually disabled persons patiently and creating an atmosphere of trust and acceptance. We often deal with the stereotype of an intellectually disabled person as an individual who is limited in many spheres – the main limitation being their lowered level of intellectual development. We do not usually notice their potentials: sensitivity, empathy and differentiating between good and evil. Sometimes, these persons are referred to as having 'smaller minds but big hearts' (Śmigiel, Szemplińska, Andrzejczak, 2010; Dębska, Szemplińska, in printing).

#### **Conclusions**

The conducted research has proven that intellectually disabled persons think in narratively; they can create narrations but in order to release them they need a trusted and patient co-narrator. However, it is difficult for them to express their narrations spontaneously. In order to facilitate their expression, we had to 'change our research approach'. They need somebody they can trust to release their narrations; they need somebody who supports them in ways similarto other domains of life. Therefore, in our examinations we employed the dialogue method.

An atmosphere of trust, safety and support so necessary for personal development is found at L'Arche. Here the participants acquire new experiences and skills, make new friends and learn co-responsibility for themselves. They talk about many things, including their diseases or deficiencies.

According to our research results, intellectually disabled persons have a sense of their distinction and difference, an awareness of themselves, a sense of SELF, sense of identity, feel changes, and have their own world of personal meanings. They discover their own personalities: they learn about their distinction, about which other people do not want to talk with them. They discover their hidden possibilities – their talents and skills. The atmosphere of the community helps them cope with their weaknesses and gives them an opportunity to develop. By establishing interpersonal relations they notice their merits and perceive themselves as persons who can give something to others and be helpful. They no longer perceive themselves as individuals who constantly take from others and remain on the margin or are excluded. They also assume responsibility, according to their possibilities, for the community and have are confident that they will complete the tasks entrusted to them.

Due to the principle of mutual co-responsibility, we can observe transformation processes of the examined persons. At first distrustful, frightened and introverted persons, during their stay in L'Arche they become more confident, courageous, and want to be with others and for others; they become involved in various activities and give others their support. They change in their everyday attitudes and behaviour. Their ways of looking at themselves and thinking about themselves and others undergo changes, thanks to which it is possible to establish numerous new interpersonal relations, close bonds and friendships. Thanks to these changes, their memories of past hard experiences and traumas fade while their personal development is thus enhanced.

Therefore, we can say that living in a L'Arche community means that its residents have an opportunity to boost their personal and social development.

#### References

Bandura, A. (1986). *Social foundation of thought and action*, Englewood Cliffs, NJ, Prentice-Hall.

- Baumeister, R.F. (1994). *The crystallization of discontent in the process of major life chang*. In: Heatherton T.F., Weinberger J.L. (ed.). *Can personality change?* (pp. 281–297). Washington D.C.: American Psychological Association.
- Czapiga, A. (2010). Intellectual Development Disorders In Childhood: Theoretical Aspects. *Polish Journal of Applied Psychology*, vol. 8(1), 83–90.
- Czapiński, J. (ed.)(2004). *Psychologia pozytywna. Nauka o szczęściu, zdrowiu, sile i cnotach człowieka.* Warszawa: Wydawnictwo PWN.
- Dębska, U. (2007). *Trud współbycia więź jako istotny czynnik rehabilitacji i rozwoju*. In: J. Patkiewicz (red.). Rola więzi w rozwoju dzieci i młodzieży niepełnosprawnej (pp. 135–146). Wrocław: Typoscript & TWK in Wrocław.
- Dębska, U., Szemplińska, A. (2008). *O godności osób z zespołem Downa i ich rodzin*. In: J. Patkiewicz (ed.). Zespół Downa postępy w leczeniu, rehabilitacji i edukacji (pp. 159–168). Wrocław: Typoscript & TWK in Wrocław.
- Dębska, U., Szemplińska, A. (in printing). *Narracje w kontekście niepełnosprawności. Badania osób niepełnosprawnych intelektualnie*. In: A. Cierpka, E. Dryll (eds.). Psychologia narracyjna: tożsamość, dialogowość, pogranicze. Warszawa: Eneteia.

http://www.larche.org.pl.

Frankl, V.E. (1976). Homo patiens. Warszawa: I.W. PAX.

Gunzburg, H.C. (1977). PAC Manual. Vol. 1. Straffrod upon Avon.

Kielin, J. (2002). Jak pracować z rodzicami dziecka upośledzonego. Gdańsk: GWP.

Kostrzewski, J., Wald, I. (1981). *Podstawowe wiadomości o upośledzeniu umysłowym*. In: K. Kirejczyk (ed.). Upośledzenie umysłowe – pedagogika (pp. 52–65). Warszawa: PWN.

Kościelska, M. (1995). Oblicza upośledzenia. Warszawa: PWN.

Lec, S.J. (2009). *O względności*. In: B. Dymara (ed.) Jeszcze nadzieja (p. 32). Kraków: Impuls.

Majewski, T. (1999). *Biopsychiczna koncepcja niepełnosprawności*. In: R. Ossowski (ed.), Kształcenie specjalne i integracyjne (pp. 79–83). Warszawa: MEN.

Maslow, A. (1970). Motivation and Personality. New York: Harper and Row.

Minczakiewicz, E.M. (2010). *Poczucie tożsamości społecznej a perspektywy i plany życiowe dorosłych osób z zespołem Downa*. In: B.B. Karczmarek (ed.). Trudna dorosłość osób z zespołem Downa (pp. 99–120). Kraków: Impuls.

Neckar, J. (2005). Stałość i zmiana osobowości w wieku dorosłym – perspektywa genetyki zachowania. In: A. Niedźwieńska (ed.). Zmiana osobowości. Wybrane zagadnienia (pp. 13–23). Kraków: UJ.

Niewiarowska, M., Regner, A. (2007). *Diagnoza zaburzeń rozwoju więzi*. In: J. Patkiewicz (ed.). Rola więzi w rozwoju dzieci i młodzieży niepełnosprawnej (pp. 19–30). Wrocław: Typoscript i TWK we Wrocławiu.

- Northway, R. (2001). Changing the balance od power? People with intellectual disabilities and participatory research. In: P. Francuz, P. Oleś, W. Otrębski (eds.). Studia z psychologii w KUL. T. 10 (pp. 13–27). Lublin: Wydawnicwto KUL.
- Obuchowski, K. (2000). *Galaktyka potrzeb. Psychologia dążeń ludzkich*, Warszawa: Zysk i S-ka.
- Oleś, P.(2003). Wprowadzenie do psychologii osobowości. Warszawa: Scholar.
- Płużek, Z. (1989). *Refleksje nad godnością człowieka*. In: K. Janicki (ed.). Słuchaj, módl się, pracuj (pp. 296–307). Poznań: Księgarnia św. Wojciecha.
- Rakowska, A. (2003). *Język, komunikacja, niepełnosprawność. Wybrane zagadnienia*. Kraków: Wydawnictwo Naukowe Akademii Pedagogicznej.
- Sadowska, L., Skórczyńska, M., Gruna-Ożarowska, A. (2007). *Trudności w kształtowaniu się więzi między matką i niepełnosprawnym dzieckiem*. In: J. Patkiewicz (ed.). Rola więzi w rozwoju dzieci i młodzieży niepełnosprawnej (pp. 59–74). Wrocław: Typoscript & TWK in Wrocław.
- Smoleń, R., Sękowski, A. (2008). *Ocena poczucia jakości życia u osób z upośledzeniem umysłowym w kontekście zmiennych psychospołecznych*. In: P. Francuz, W. Otrębski (eds.). Studia z psychologii w KUL. T. 15 (pp. 157–184). Lublin: Wydawnictwo KUL.
- Solomon, S., Greenberg, J., & Pyszczynski, T. (1991). A terror management theory of social behavior: The psychological functions of. In: M.P. Zanna (Ed.). Advances in experimental social psychology. 24. Academic Press. pp. 93–159.
- Spionek, H.(1975). Zaburzenia rozwoju uczniów a niepowodzenia szkolne. Warszawa: PWN.
- Steuden, S. (2006). *Rozważania o godności z perspektywy człowieka w okresie starzenia się*. In: S. Steuden, M. Marczuk (eds.). *Starzenie się a satysfakcja z życia* (pp.17–28). Lublin: Wydawnictwo KUL.
- Straś-Romanowska, M. (1992). Los człowieka jako problem psychologiczny. Podstawy teoretyczne. Wrocław: Wydawnictwo Uniwersytetu Wrocławskiego.
- Szemplińska, A., Śmigiel, R. (2009). *Godność osoby niepełnosprawnej intelektu- alnie we wspólnotach zamieszkania L'Arche*. In: A. Twardowski (ed.). Wspomaganie rozwoju dzieci z rzadkimi zespołami genetycznymi (pp. 227–234). Poznań: Stowarzyszenie "GEN".
- Szemplińska, A. (2011). *Anioły wcielone życie mężczyzn i kobiet upośledzonych intelektualnie w domach wspólnot Fundacji L'Arche*. W: B.Bartosz (ed.) Wymiary kobiecości i męskości (pp. 365–376). Warszawa: Eneteia.
- Śleszyński, D. (1996). *Uaktywnienie i poznanie siebie*. In: A. Grochowska, A. Jakubik, I.M. Marcysiak, S. Siek, A. Strzałecki, J. Terelak (eds.). *Studia z psychologii*. Tom VII (pp. 317–331). Warszawa: ATK.

- Śmigiel, R., Szemplińska, A., Andrzejczak, J. (2010). *Wspólnota zamieszkania Arka (L'Arche) miejscem doświadczenia dorosłości osób z zespołem Downa*. In: B.B. Karczmarek (ed.). Trudna dorosłość osób z zespołem Downa (pp. 365–378). Karków: Impuls.
- Vanier, J. (1991). *Wspólnota miejscem radości i przebaczenia*. (M. Żurowska, przeł.). Warszawa: Editions Spotkania.
- Vanier, J. (2008). W słabości moja siła. Życie duchowe, nr 55, 56-61.