

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

Dr. Eswari Vadlamudi^{1*}, Ms. Krishnaveti Harshitha²

ABSTRACT

There is ample evidence that institutionalization posits several challenges pertaining to the physical, social, emotional and cognitive development of children living in institutions. In spite of being acted on, many institutions continue to function ineffectively augmenting the devastating impact on children. The institutionalized children differ from the non-institutionalized children in that they claim to be less attentive to their own emotions as well as those of others; they do not consider it feasible to actually change an emotion; and they consider the effect of emotions to be more detrimental (Terwogt, Schene & Koops, 1990). Art based learning experiences have the potential to promote young people's development of social-emotional competencies. A 5 hour programme (covered in two days) with four art activities was conducted in a registered Child Care Institute, Hyderabad on 20 girls who were between the age group of 8 to 12 years. The objective of the art based activities was to foster social-emotional literacy through reflection and discussion. The four activities that were conducted include drawing with two hands, guided visual imagery, peer drawing and change that have been adopted from the book titled as 'art therapy techniques and applications' (Buchalter, 2009). Thematic data analysis (deductive approach) was used to analyze the drawings and the feedback received from the participants. Some of the themes that emerged from the drawings created by the girls are openness to learning, taking healthy risks, empathic bonding, stress reduction, mindfulness, emotional awareness, cognitive reappraisal, and acceptance.

Keywords: *Social-Emotional Literacy, Institutionalized Girls, Art Learning*

The word institution is generally used for different kinds of residential facilities where many boys and girls spend a significant period of their lives. These facilities may be children's homes, care homes, juvenile detention facilities, prisons, orphanages, reform schools, institutes for the physically and mentally disabled, etc. While there is no universally accepted definition of a children's care institution, most have the following features in common: round the-clock care of children who live apart from their families and supervision by remunerated staff. Some institutions are directly managed by the Government, some by Non-Governmental Organisations (NGOs) or private companies, and

¹Co-founder – Manomantra – Psychological & training services, Asst. Professor Social Work

²Asst. Professor Psychology, St.Francis College for Women, Hyderabad, India

*Corresponding Author

Received: July 08, 2021; Revision Received: September 07, 2021; Accepted: September 22, 2021

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

others are faith based residential facilities. All these institutions can be closed, where children are locked in, or open to the public in different ways.

Institutionalisation process has been adopted in many countries worldwide for many years. Therefore, despite several researches being conducted on institutionalization, there is a dire need and a vast scope to enhance this process to benefit children and other stakeholders involved in this set up. Large body of evidence exists in support of various perils and challenges regarding institutionalization that requires utmost gravity.

Institutionalized children experience diverse setbacks in their development in comparison to the non-institutionalized children. Bowlby (1951) was highly suspicious that a residential rearing environment could approximate a normal home life for a child, yet institutions continue to exist throughout the world more than a half-century after strong concerns were expressed (e.g., Bowlby, Spitz, and others) regarding the devastating effects of institution life upon children. Institutional care settings typically do not meet the conditions of the average expectable environment, a prerequisite for children's normal development, encompassing protective, stable caregiving and open opportunities for exploration and mastery of the world (Bowlby, 1980/1998; Cicchetti & Valentino, 2006; Hartmann, 1958). A considerable number of studies have shown that children growing up in orphanages are at risk in various domains of functioning, including their physical, socio-emotional, and cognitive development (Chapter 1; see also St. Petersburg–USA Orphanage Research Team, 2005, 2008) Minimal communication, attention, and physical contact from caregivers, along with the strictly regimented life in an institution, mean that children in institutions experience little responsiveness to their individual needs (reviewed in Maclean, 2003; Gunnar, 2001). Overall, the neglect experienced by institutionalized children is associated with a host of physical, neurobiological, cognitive, behavioral, and socioemotional deficits (Beckett et al., 2006; Carlson & Earls, 1997; Chisholm, 1998; Chugani et al., 2001; Eluvathingal et al., 2006; Fisher, Ames, Chisholm, & Savoie, 1997; Johnson, 2000; O'Connor & Rutter, 2000; O'Connor, Rutter, Beckett, Keaveney, & Kreppner, 2000; Rutter et al., 1999; Rutter et al., 2007).

There is ample evidence which suggests that institutionalized children are consistently more vulnerable to develop behavior problems (Ajduković M, Franz BS, 2005) psychopathological symptoms, and a low self-esteem (Zeanah CH, Egger HL, Smyke AT, Nelson CA, Fox NA, Marshall PJ, et al., 2009). Parental and subsequent social deprivation associated with institutionalization and the necessity to redefine themselves and to adapt their identity make many institutionalized children and adolescents feel insecure, lonely, and worthless, which in turn impairs their self-acceptance, self-confidence, and self-esteem (Youngleson ML, 1973; Worden JW, Silverman PR, 1996; heung C, Goodman D, Leckie G, Jenkins JM, 2011; Elebiary H, Behilak SG, Kabbash I, 2010). In an institutional environment, children have difficulties in developing psychological and social skills that allow them to adequately regulate their emotions and behaviors, which in turn increases the risk to develop externalizing behavior problems (Rus AV, Stativa E, Pennings JS, Cross DR, Ekas N, Purvis KB, et al, 2013). Hence, it becomes imperative to teach children various ways to enhance their social and emotional competencies to parallel the problems they encounter in institutionalized homes.

Social and emotional learning (SEL) involves the processes through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

others, establish and maintain positive relationships, and make responsible decisions. (Bridgeland 2013).

The use of art-based methods for socio emotional learning appeared as the most useful way because of the general inability of the children to express their thoughts and feelings in words because of the fear of being laughed at and misunderstood. It is evident through empirical research that children who learned art based socio emotional learning were more confident in expressing their identity, more content with the class climate and they thought of their class as more safe, intimate, and cooperative environment.

Arts provide a wide range of opportunities for social-emotional experiences as well as developing social-emotional competencies. Results from several studies show that art techniques can improve academic performance (Pleasant-Metcalf & Rosal, 1997), attitudes towards school and self (Rosal, McCulloch-Visliser, & Neese, 1997), emotional understanding and anger management (Bush, 1997), or self-growth (Stepney, 2001). The use of art-based techniques and art therapy in classroom setting is beneficial for shaping intellectual and emotional development and for evoking emotional responses in children who are unable to evoke them in a normal educational setting (Eisner, 2002; Greene, 2001). Art techniques engage competencies, which might affect children’s relationships with their peers, teachers, or family (Horowitz & Webb-Dempsey, 2002). Well-developed social and emotional abilities and skills learned as children affect how individuals functional later in life in the workplace and personal situations (Brenner, Chen, and Mindness, 2008). Amarasinghe GS (2018) has implemented a novel art based life skills teaching method that takes into account the vulnerabilities of and opportunities available for individual participants for health promotion of adolescents in a resource poor setting. Several researches that focus on synthesizing creativity and psychological education are indispensable to be conducted on children to battle the drawbacks of institutionalization.

METHODOLOGY

Broad Objective

The broad objective of the art based activities was to foster social-emotional literacy of the adolescent institutionalized girls through reflection and discussion.

Table 1.0 showing the activities and objectives of each activity along with the procedure

Activity	Materials	Procedure (Description)	Objective of the activity	Role of facilitator
Drawing with two hands	Drawing paper, color pencils, writing pad	Children were asked to pick up a color pencil in each hand and draw anything that occurs to them at the moment. Instructed to use both the hands simultaneously	To encourage children to try new experiences (openness to learning) Mental stretching	Share examples of what they can draw like flowers, animals, face etc. Observing and supporting when required
Guided Visual Imagery	Drawing paper, color pencils, sketches, writing pad	Asked the children to close their eyes and relax and guided them to the beach and forest. A Speaker was used	Helps children to visualize and expand their horizon of imagination The importance of	Facilitator ensured that children were comfortable and relaxed and minimized the distractions around.

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

		<p>to play the sounds of water fall, birds chirping. The children were asked to focus on what they see, hear, feel, smell in the imagery place</p> <p>They were asked to draw what they experienced using colors, shapes, objects and figures to represent their thoughts and feelings</p>	<p>taking time to stop and smell roses, not dwelling on the past or worrying about the future is explored</p> <p>Let go and relax</p>	
Peer Drawing (Empathy Building)	Drawing paper, color, pencils, sketches, writing pad	<p>Children were asked to team up into pairs, listen attentively to their partner speak about himself/herself.</p> <p>Suggested to focus on their partner's eyes, expressions, voice, tone, sighs, gasps, yawn, body language etc.</p> <p>Now the clients draw each other's "core" using color line, design and shape.</p>	<p>To develop empathy in relationships.</p> <p>Goals include socialization and intra-personal & inter-personal awareness.</p>	Facilitator ensured the children were following the instructions
Change	Drawing paper, color, pencils, sketches, writing pad	<p>The children were asked to fold the paper in half. Instructed to draw things that they can't change (age, physical disability) on one side of the paper and things they can change (attitude, mood) on the other side.</p>	<p>To gain awareness on what is in their control and what is not in their control</p>	Facilitator gave examples to identify appropriately.

Research questions

- How to connect creativity (art) to inner emotional experiences of the child?
- How to help children acquire positive thinking?
- How to increase empathy among children?
- How to help the children be more self-aware?

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

Sample

The sample population includes adolescent girls. A 5 hour programme (covered in two days) with four art activities was conducted in a registered Child Care Institute, under the umbrella of Rainbow Homes, Hyderabad, Telangana on 20 girls who were between the age group of 8 to 12 years.

Data Analysis and Coding

Thematic analysis method is used to analyze the qualitative data. It was applied to the voluntary anonymous information gathered by the researcher from the sample population, both verbally and in written. The researcher closely examined the data and identified common themes – topics, ideas and patterns of meaning that come up repeatedly expressed through art.

Table 2.0 showing coding of gathered data

Activity extract	Codes	Research question
Activity 1: drawing with two hands		
Away from normal	New experience	3,4
Difficult	Discomfort	
Fun	Initial difficulty in activity leading to excitement later	
Confusing		
New experience		
Excited trying new		
Discomfort		
Activity 2: Guided visual imagery		
Walk alone	Stress relief	1, 2
Peaceful	Felt lighter and relieved	
Relaxed	Could experience/feel all the guided imagery	
Mindful		
Dancing		
Enjoying		
Happy		
Lockdown- suffocating		
Activity 3: Peer Drawing		
Voice modulation	Reflect what is being said	1,3, 4
Hand movements	Identified basic emotions	
Eye movements	Self-awareness	
Body gestures		
Anger		
Happy		
Sad		
Get connected to their pain		
Appreciate		
Inexpressible pain		
Separation from parents		
Family conflicts		
Activity 4: Change		1,2,4

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

Mood	Able to Identify emotions
Laziness	Focus on thoughts and behaviors
Anger	Awareness on challenges
Thoughts	
Friends	
Fear	
Attitude	
Language	
Parents	
Family	
Age	
Personality	
Food habits	
Body	
Going back in Time	

Table 3.0 showing the converted codes into themes

Codes (Activity 1)	Theme
New experience	Openness to learning
Discomfort	Taking healthy risks
Initial difficulty in activity leading to excitement later	
Codes (Activity 2)	Theme
Could experience/feel all the guided imagery	Mindfulness
Felt lighter and relieved	Stress reduction and relaxation
Stress relief	
Codes (Activity 3)	Theme
Reflect what is being said	Mindful listening
Identified basic emotions	Empathic Bonding
Self-awareness	Socialization and self-awareness
Codes (Activity 4)	Theme
Able to Identify emotions	Emotional Awareness
Focus on thoughts and behaviors	Cognitive reappraisal
Awareness on challenges and understanding what to accept and what to challenge in life	Acceptance

RESULTS AND DISCUSSION

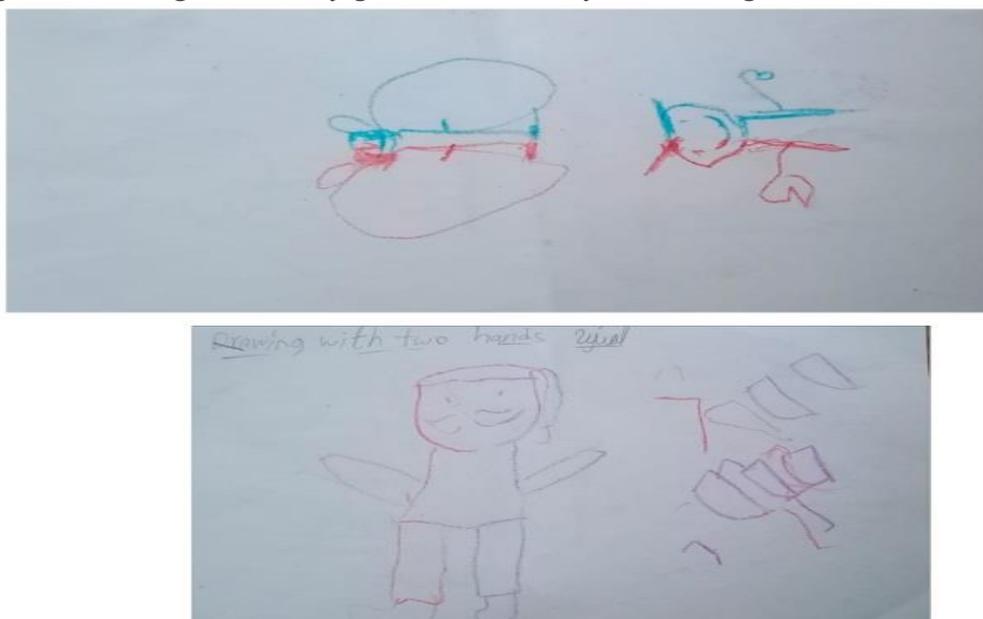
A total of 20 adolescent girls aging 8 to 12 years participated in the art based sessions in the two day program.

Observations

Activity 1- Drawing with two hands

It was essential to start the session with a mental stretching and creative activity which provides the children sufficient space to enjoy and have fun. The first activity energized the girls to socialize with the facilitator, to settle down and also to get clarity on the purpose of these art sessions.

Fig. 1.0 Drawings created by girls in the activity 1- Drawing with two hands



The activity mainly allows the children to draw using both the hands which was an unusual experience. This led to a discussion about how they felt drawing in an atypical manner. Majority of the children expressed that it was initially difficult to produce the drawing but after few attempts, they stated enjoying it and were able to get comfortable. When the facilitator guided the discussion and asked them to apply in to their life situations, half of the children felt that it was fun and gave example situations to support this experience which is explained in Table 4.0.

Table 4.0 showing the responses of girls and the interpretations of activity 1- drawing with two hands

Verbatim (most repeated)	Interpretation
<p>“ it was fun ”</p> <p>“When I first time wore a jeans I felt the same”.....</p> <p>“I did not feel like coming and staying in this institute. Initially I used to feel difficult. Later I made friends. Now I enjoy being here. It’s a good place”....</p> <p>“I thought it’s difficult to draw with two hands. It was tough. But slowly I felt ok and I enjoyed the shapes I made”</p>	<p>They felt it was fun and enjoyed the activity.</p> <p>They had very similar feelings when they were experiencing something new in their life (they were able to connect it to their initial days in institutional set up)</p>
<p>“Many times I have feared to start or learn new things. When mam was telling the purpose of the activity, I felt next time I should try”.....</p>	<p>Encouraging children to try new experiences which inculcated openness to learning</p>

Activity 2- Guided visual imagery

The central focus of Child Care Institutes is to provide food, clothing and a safe shelter. But Covid-19 generated uncertain situations, making their work more difficult. Procurement of essential commodities, menstrual hygiene products, medicines and teaching materials became difficult as supply logistics were affected. Social distancing and lock downs restricted the outsiders not only in voluntary welfare activities but also to visit and communicate with children, leaving an impact on their emotional health. The whole situation led to development of fear and anxiety among children living in Child Care

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

Institutes. Residential caregivers at CCIs had to undertake additional workload of keeping the children engaged through art and craft, reading and games, tutoring and counseling (Sudeshna Roy, 2020).

Guided visual imagery is one such activity which helps their mind to be in a happy and safe place. This activity helps the children to visualize themselves in the pleasant and positive environment which help them to reduce the feeling of suffocation due to lockdown, made them feel relaxed, calming, soothing and also to distress. When one visualizes oneself achieving goals, one's brain may eventually believe one has already achieved those things. This image can help one's brain start associating optimism and other positive feelings with the thought of a promotion, instead of feeling insecure about the chances of moving up.

Fig 2.0 Drawings created by children in activity 2- guided visual imagery



With the help of facilitator, the children practiced guided imagery and got into a deeply relaxed state. Majority of the children were able to imagine themselves relaxing in beach, dancing in rain, used their senses to hear, see, smell and feel the trees, flowers, and water in the imaginary place. Some children projected these visuals using bright colors where as some chose to express it only by doing a pencil sketch.

The facilitator, then, guided the discussion towards sharing experiences of guided visual imagery. Majority of children expressed that they felt like they were sleeping, relaxed and very nice which is depicted in table 6.0.

Table 6.0 showing the responses of girls and interpretations of Activity 2 – guided visual imagery

Verbatim (Most repeated)	Interpretation
<i>"I felt as if I went to beach or forest. It was so nice".....</i>	Felt happy, relaxed and calm
<i>"When I was doing I felt like I am sleeping and I really thought I am standing beside a bird"</i>	Felt realistic (was able to sense water, breeze etc)
<i>"I feel relax"</i>	Body was feeling light (comparing pre and post activity)
<i>" I imagined myself playing in the rain and dancing".....</i>	They were mindful and stretched imagination
<i>"I cried in the morning. After doing this activity I am feeling happy. I forgot why I cried in the morning".....</i>	
<i>"Mam can we do again? its very nice."...</i>	

Activity 3- Peer Drawing

Incidences of situational peer violence; bullying, abuse and physical harm; aggressive behaviour and attention deficit hyperactivity disorder (ADHD) (El Koumi et al., 2012), are expected to flare up amidst lack of group interactions and recreational sessions, following a regimented routine ((Sudeshna Roy, 2020). This is the state of affairs due to the pandemic in several institutionalized homes. Thus, the need was felt to work on building empathy and peer relationships among the children.

The facilitator divided the girls into pairs and asked to draw the person sitting next to them which was preceded by an interactive session. They were encouraged to involve in active listening and carefully observe the verbal and nonverbal cues used while interacting. It was exciting to see how beautifully they have projected the other person in this activity which also reflects their involvement in the activities.

Discussion focused on ‘One’s attitude towards other’ and how they felt while interacting (happy and sad moments in their lives). Then facilitator asked them to share their earnings with the group and the facilitator as depicted in table 7.0.

Table 7.0 showing the responses of girls and interpretations of activity 3 – peer drawing

Verbatim (Most repeated)	Interpretation
<i>"When my partner was crying, I also felt like crying"</i>	Child could feel pain in partner’s eyes while discussing sad moments.
<i>"I saw my partner smiling so much talking about funny incident happened last night and when she was talking about her father I observed water in her eyes".....</i>	Could observe nonverbal cues like eye movements, hand gestures, body postures etc.
<i>"When she was talking about her family problems, I remembered mine. I felt like crying".....</i>	Was able to connect to the emotion of the partner with their own.
<i>"when she was talking about sad incident hands were closed while sharing happy things her mouth was wide open"</i>	Felt how wrong they were about attitude of partner , prior to the session
	Flashes of their own experiences in mind

Fig. 3.0 Drawings created by girls in activity 3- peer drawing



Activity 4: Change

Children living in institutional set up have lot of limitations. There are lots of factors (social, emotional, financial) in which they don't have control causing them to feel helpless and also sometimes angry. Change activity helped them to cope with these kinds of negative feelings. Facilitator made the children draw things that they can and can't change. It was happy to see that most of the children had clarity about what is not 'changeable' and that which had to be accepted. Large number of girls shared about their thoughts, behaviours, mood, bad language and attitude as few things that are changeable and house, hair, skin color, blood color, job (household chores in institution) are few things that can't be changed as depicted in table 7.0.

Facilitator helped them to understand what to accept and what to challenge in this scenario, within their limitations. The girls were able to evaluate the importance and need of accepting the things that are in their control and not in their control.

Table 7.0 showing the responses of girls and interpretations of activity 4- change

Verbatim (Most repeated)	Interpretation
<i>I can change my language, bad behaviour, my thoughts and my mood and I cannot change skin colour, eye colour, blood colour, hair and height</i>	Girls were aware of the possibility of changing their attitudes and the limitations with respect to biological aspects of one's personality.
<i>I can change my thoughts, sadness, lifestyle, to my beautiful face and I cannot change job, age, skin colour, friend and hair.</i>	Girls also expressed an inability to change others for eg. Friends, job (external factors not in their control) leading to acceptance
<i>I can change my thoughts, lifestyle, anger, attitude, actions, my friends, my mood, my food habits and my hair and I cannot change age, hands, gender, legs, parents, skin colour, house, nose and happiness.</i>	Girls expressed optimism in changing various aspects of one's lives.

Fig 4.0 Drawings created by girls in activity 4- change



Limitations

One of the challenges experienced by the facilitators was holding the attention of girls till the end of the sessions on both the days as there were many distractions during the sessions. Another limitation was lack of adequate art materials for all of them to express their creativity. Moreover, the research was conducted on 20 adolescent girls for only two days, restricted to limited sample, gender specific and limited time frame. Another major limitation of the study was that it was conducted on girls in one institute only.

Recommendations

An in-depth study may be conducted to identify social-emotional issues of the children in institutionalized homes and specific art based techniques can be applied as interventions and the progress can be gauged respectively. A Comparative study can be conducted between children studying in institutionalized and non-institutionalized homes. Moreover, an in-depth long term intervention can be done to see the long term impact among the children.

REFERENCES

Amarasinghe, G. (2018, December 27). *Teaching life skills through arts; an option for adolescent health promotion in resource poor settings*. Anuradhapura Medical Journal. <https://amj.sljol.info/articles/abstract/10.4038/amj.v12i1.7647/>.

Bakermans-Kranenburg, M. J., Steele, H., Zeanah, C. H., Muhamedrahimov, R. J., Vorria, P., Dobrova-Krol, N. A., Steele, M., IJzendoorn, M. H. van, Juffer, F., & Gunnar, M. R. (2011, December 21). *III. Attachment and Emotional Development In Institutional Care: Characteristics And Catch Up*. Society for Research in Child Development. <https://srcd.onlinelibrary.wiley.com/doi/abs/10.1111/j.1540-5834.2011.00628.x>.

Centrone, M. R. (2014). *Institutionalised Children: A Seminar on Standards of Care and Mental Health*. <https://udayancare.org/>. https://udayancare.org/sites/default/files/Institutionalised%20_Children_Revised.pdf.

EL Koumi, M. A., Ali, Y. F., El Banna, E. A., Youssef, U. M., Raya, Y. M., & Ismail, A. A. (2012, December 9). *Psychiatric Morbidity among a Sample of Orphanage Children in Cairo*. International Journal of Pediatrics. <https://dx.doi.org/10.1155/2012/141854>.

Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls

- Erol, N., Simsek, Z., & Münir, K. (2010, February). *Mental health of adolescents reared in institutional care in Turkey: challenges and hope in the twenty-first century*. European child & adolescent psychiatry. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3124379/>.
- M, S. C., & C, U. R. (2016, December). *Emotional and Behavioural Problems in Institutionalized Adolescent Girls*. <https://www.worldwidejournals.com/>.
- Maclean, K. (2003). *The impact of institutionalization on child development*. Development and Psychopathology. <https://pubmed.ncbi.nlm.nih.gov/14984130/>.
- McEntire, S. (2010). *Social Emotional learning through Art Education*. <http://www.artsuz.com/>.
http://www.artsuz.com/uploads/4/1/0/8/41081813/sel_actionplan_smcentire.pdf.
- Moulson, M. C., Shutts, K., Fox, N. A., Zeanah, C. H., Spelke, E. S., & Nelson, C. A. (2015, March). *Effects of early institutionalization on the development of emotion processing: a case for relative sparing?* Developmental science. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4297604/>.
- Mynaříková, L. (2012). *Art-Based Program for Social and Emotional Development of Children*. Eric. <https://files.eric.ed.gov/fulltext/ED536463.pdf>.
- Nsabimana, E., Rutembesa, E., Wilhelm, P., & Martin-Soelch, C. (2019, June 4). *Effects of Institutionalization and Parental Living Status on Children's Self-Esteem, and Externalizing and Internalizing Problems in Rwanda*. Frontiers. <https://www.frontiersin.org/articles/10.3389/fpsy.2019.00442/full>.
- Raypole, C. (2020, May 28). *Visualization Meditation: 5 Exercises to Try*. Healthline. <https://www.healthline.com/health/visualization-meditation#compassion-meditation>.
- Roy, S. (n.d.). *Restructuring Institutional Care: Challenges and Coping Measures for Children and Caregivers in Post-COVID-19 Era - Sudeshna Roy, 2021*. SAGE Journals. <https://journals.sagepub.com/doi/full/10.1177/2349300320973825>.

Acknowledgement

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Vadlamudi E. & Harshitha K. (2021). Fostering Social-Emotional Literacy through Art for the Institutionalized Adolescent Girls. *International Journal of Indian Psychology*, 9(3), 1606-1617. DIP:18.01.148.20210903, DOI:10.25215/0903.148