

When Chaos Met Catharsis

Yuti Doshi^{1*}

ABSTRACT

This paper describes the impact of Arts Based Therapeutic interventions with children at risk aged 12 – 14 years. Action research was conducted using arts- based therapy sessions at the Community Development Centre, Mumbai, Pune from 23rd September, 2021 to 4th March, 2022. The most pre dominant behavioural concerns of the participants included aggression, distrust, withdrawal from academic engagement, low attention span, disrupted peer interaction. The arts-based therapy intervention was aimed at improving assertiveness and emotional expression through speech and creative writing. The data collection was done with the help of session record sheets. The data analysis was based on behavioural observations, behavioural rating scales, ABT assessment tools and standardized test. The findings suggested enhanced emotional expression, with specific increase in Structuring, Expression and Meaningfulness parameters. Findings also indicate an increase in assertive behaviour. The qualitative observations contribute to the detailed changes along the process. Apart from the targeted domains, participants also displayed regulation of their actions, emotions along with empathy, thus indicating an improvement in Mindfulness domain as a result of arts-based interventions. This study points in the direction of using ABT with children at risk.

Keywords: Behavioural, ABT

The Larger Problem

Children at risk present a complex environment of causes and conditions that influence their state of being. The causes could range from poverty, being abandoned by family, domestic violence, unaffordable housing, conflicts with law, physical and sexual abuse, exposure to alcoholism and drug abuse, broken homes, etc. Many children opt to live on the streets because they feel it is safer than their homes. Many also land up in institutions where some become resigned to staying and some try to run away. Institutions have also played a major role in supporting and taking care of these children by providing the basics – food, clothing, shelter and education. But, socio-emotional development has a larger impact on what determines their adaptation, adjustment, values and success. Institutions offer a multitude of services to the child. The street child makes his decision not to enter an institution when he is afraid that his ‘needs of instant desire’ (addressed arbitrarily and without apparent rationality) will not be met, when there is fear generated over what others have said about their stay in institutions or when there is fear of losing ‘freedom’. On the other hand, he would want to join an institution for short- or long- term

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benefits (D'Souza 2008). Understanding the reality of children at risk is difficult and complex. It seems chaotic to constantly live in a dichotomy of love-hate, rich- poor, good-bad, success-failure. But at the same time, they live with a different kind of order and develop coping strategies accordingly, be it in on the street or in an institution.

Children at risk is a population that are at a risk of health, education, nutrition, basic necessities, committing undesirable actions, child labour and even their life. This happens due to poverty, being abandoned by family, domestic violence, unaffordable housing, conflicts with law, physical and sexual abuse, exposure to alcoholism and drug abuse, broken homes, etc. Many children opt to live on the streets and many land up in institutions. At Community Development Centre, Malad the children face issues like abandonment by family, absence of one or both parents, parent is a sex worker, extreme poverty, domestic violence

LITERATURE REVIEW

Research conducted in the year 2019 by Vaidehi Chilwarkar aimed at enhancing group cohesion and improving interpersonal interaction in children at risk using Arts Based Therapy interventions.

The most predominant behavioural and emotional concerns of the participants included bullying behaviour, verbal and physical aggression, withdrawal from academic engagement, disturbances in peer interaction and low attention span. Towards the end of 35 hours of group work majority participants showed improvements in group cohesion and interpersonal interaction, sharing resources, helping each other in creative ideas and working in pairs, offering food and being concerned for friends. A few participants exhibited enhanced verbalization and self- expression and the individual therapy session proved beneficial to address the issue of loneliness of one participant.

Another research was conducted by Deborah Daniel, Zubin Balsara, Asha Pillai Balsara, Aanand Chabukswar, Dr. Suneeta Kulkarni, Purvi Gohil (WCCL foundation 2013) named as Best Practices in ABT to study what would be the best intervention design that has an impact on children at risk and which assessment tools would be most suitable for this population? There were 30 children in the age group of 9 to14 years and were randomly selected. Data was collected through Direct observations through SRS and Observer's notes, Behavioural rating scales, Pre and Post-tests i.e. simulated tasks, Video recordings, and Focused group discussions. These tools were reviewed and revised after each intervention cycle. Every child showed progress on the domain of expression according to the practitioner and every child made a noticeable progress in the ratings from pre to mid to post.

A research conducted by Farhina Pinto, a student of the WCCL Foundation (2008) to study the impact of Arts Based Therapy intervention on marginalized children. The population of children at risk consisted a sample size of six children from the community where their fathers were alcoholics and mother worked as domestic help in Mumbai. The main aim of this research was to study the impact of ABT on trust and confidence levels in these children.

Various milestones were achieved as a result of ABT intervention like – vocalization and expression of ideas, group bonding and self-confidence increased. The ABT intervention brought changes in the group and also the facilitator. The group had bonded well. The

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parents shared that, children who had lived in fear were seen to be happy in a different world. They had become more organized in their work. They had also become more creative and caring towards each other. ABT helped these children in the community to channelize their energy positively.

Hypothesis

ABT will improve the emotional expression (speech and creative writing) and group dynamics in children at risk.

METHODS

Eligibility Criteria

Demographics of the group: It is a total of 9 participants and the group is selected by the organisation head on the basis of behavioural issues like being notorious and fighting with others.

Table 1: Eligibility Criteria of Clients

AGE	12 to 14 years
GENDER	Adolescent males
BACKGROUND	The client are at risk of hygiene, education and other basic necessities at their homes. Some of them are orphans, while some of their parents are extremely toxic, incapable to take care of them. These children are admitted to the organisation with the goal of getting basic food, clothing and shelter and also education. They have siblings admitted in other institutions.
OTHER RELEVANT INFO	They go to the same local government school. Their parents visit them or call them at regular intervals.

Logistics

The Action Research was conducted at Community Development Center, Marve Road, Malad West, Mumbai 400064. These sessions were conducted twice a week for 1.5 hours each mostly during afternoons. The sessions were conducted indoors in dormitory area with ample space and light along with safety precautions. The intervention started on 23rd September, 2021 and ended on 04th March, 2022

Data sources and data collection protocols:

- Evaluation Tools Used for the Intervention-

Table 2: Evaluation Tools

Sr. No	Source Name	Administered By	Source Type	Reference
1	Behaviour Observation Checklist	Neutral Observer	Rating Scales	Appendix A
2	Rathus Assertiveness Scale	Clinical Psychologist	Standardized test	Appendix B
3	Narrative Development Capability	ABT Student Facilitator	ABT tool-Simulated Task	Appendix C

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4	Round Robin Round	ABT Student Facilitator	ABT tool	
5	Session Record Sheet	ABT Student Facilitator	Reporting Format	Appendix D

Video Recording Format

- Purpose- To document the sessions.
- Camera used- Mobile Camera (OnePlus 9R – Sony IMX586 48megapixels) Original tapes/ Digital format- Digital format
- Recording duration/ frequency-
- Recording focus- Group participants’ creation Friend / Professional- Friend
- Capturing sound- OFF
- Editing- Final cut pro video editing software

Methods used

The method used for Arts Based Therapy intervention was an Action Research method, wherein Arts Based Therapy sessions were conducted for 36 hours with Children at Risk. To understand the impact of ABT, various evaluation tools were used before and after the intervention (Pre and Post).

To measure Emotional Expression through speech and creative writing (Communication domain), the ABT tool of Narrative Capability Development (Appendix C) was used with a simulated task. In this task, image cards were spread and clients had to choose any three cards that attracted them. From these three cards, they had to come up with three different words (one for each card) and write a story involving these three words. Once they wrote their story, they had to narrate it individually. The assessment was done Pre and Post ABT intervention.

To measure Group Dynamics- ability to be assertive with others (Group Interaction domain), the ABT tool of Round-Robin-Round was used. In this task clients sat in a circle formation and were given sheets of paper (one each). They wrote their names behind the paper. They had to start colouring/ scribbling on their paper as soon as there was a sound (of clap or a bell) and stop it when there was a sound again. Once they stopped, they had to immediately pass their paper to the person on their right, and again start colouring/ scribbling as they heard a sound. This went on for ten rounds until they received their paper back.

Rathus Assertiveness Schedule was used as a standardized test to measure assertiveness. This test was administered by translating the meaning of the items on the test before and after the intervention.

Behaviour Observation Checklist was administered by a neutral observer at the centre. She rated the frequency of listed behaviours on a Likert scale from 1-5 (1- Never; 2-Rarely; 3-Sometimes; 4-Frequently; 5-Always) before and after the intervention.

Session Record Sheets were used to plan the session as well as record every detail after each session. These sheets were filled with session flow and each child’s observation in detail to describe how the session progressed and get insights for the next sessions. A summary of each session can be viewed in Appendix E

RESULTS

Assessment Tools

I. Round-Robin-Round



Figure 1: Round-Robin-Round Pre-Test (Navin, Nithish, Tushar, Shankar, Shrishanth)



Figure 2: Round-Robin-Round Pre-Test (Shiva, Prajwal, Shashank, Agnal, Anjee)



Figure 3: Round-Robin-Round Post Test (Navin, Nithish, Tushar, Shankar, Shrishanth)



Figure 4: Round-Robin-Round Post-Test (Shiva, Prajwal, Shashank, Agnal, Anjee)

Figures 1 and 3 show the pre-test results and figures 2 and 4 show the post-test results of Round Robin Round Assessment tool. This tool was administered to study the domain of Group Interaction, with specific focus on the ability to be assertive with others. As it can be clearly seen in the pictures above, there was a remarkable difference from pre to post-test throughout the group. The main difference observed was that the group's understanding of personal space had increased in post-test as compared to pre-test, which is visible in their doodles where they have not covered other's scribbles with their own in the post test (Figures 2 and 4). They gave space to express for others. The content they drew was also different from pre to post test. In pre-test they had only scribbled randomly and aggressively, whereas in the post-test their drawing had some structure. There was also a difference in the colours they chose from pre to post test. The way they passed their paper during post-test was surprising i.e., without snatching or throwing. They maintained a good sitting posture during post-test.

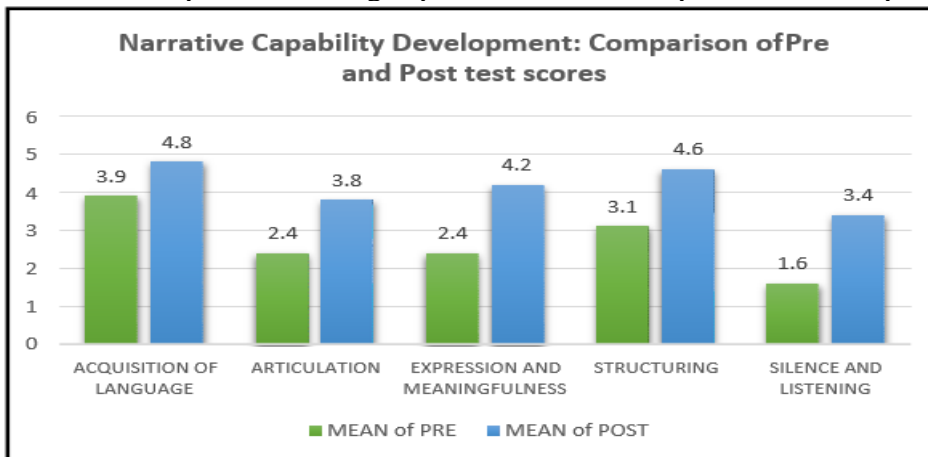
This assessment shows an improvement not only in the domain of Group Interaction, but also in other domains like Mindfulness, Expression and Body.

II. Narrative Capability Development

The above graph shows mean scores of client group on the Narrative Capability Development tool which was used to assess the domain of Communication with specific

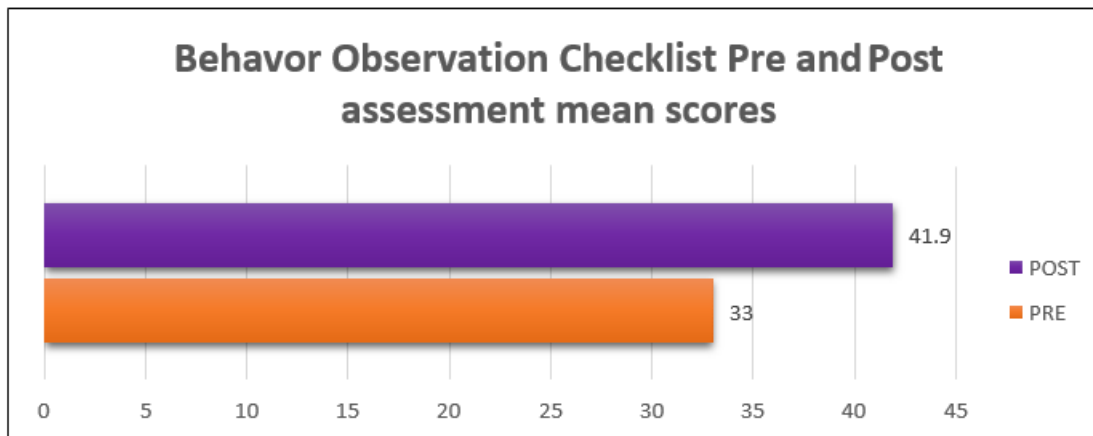
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focus on emotional expression through speech and text. The parameter of Expression and



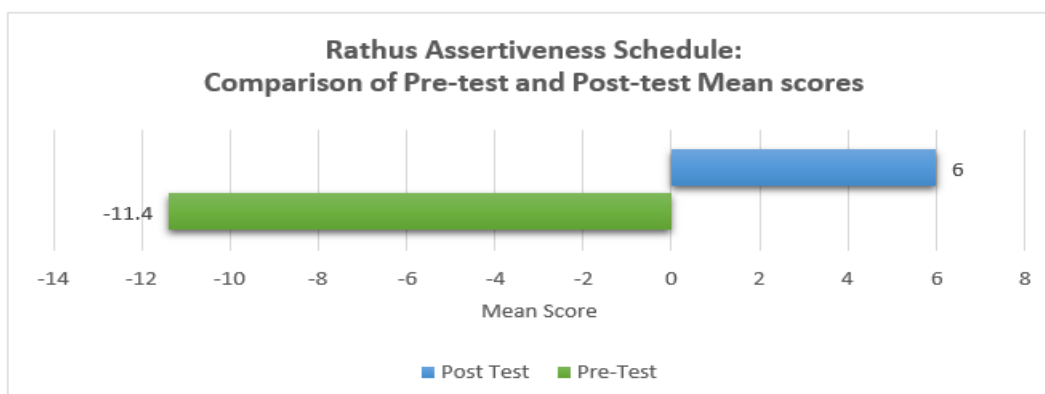
Meaningfulness shows a remarkable increase from pre-test (2.4) to post-test (4.2), thus supporting the hypothesis. Another dimension that has shown remarkable increase from pre-test (3.1) to post-test (4.6) was Structuring. Other three dimensions, namely, Acquisition of Language, Articulation and Silence and Listening have also shown a significant increase in mean scores from pre-test to post-test.

III. Behavior Observation Checklist



The above graph shows mean scores obtained on the Behaviour Observation Checklist before and after the intervention. The scores indicate an upward trend in behaviours, i.e., an increase in positive behaviours being attentive, co-operative, independent, participating, etc and decrease in negative behaviours like being disruptive, inappropriate, uninvolved, etc.

IV. Rathus Assertiveness Scale



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The above graph shows the pre and post mean scores obtained on the Rathus Assertiveness Schedule. This test was administered to assess the domain of Group Interaction with specific focus on the ability to be assertive with others. Before the ABT intervention, the mean score obtained was -11.4, whereas after the intervention the mean score increased to 6, which indicates a positive impact of Arts Based Therapy intervention. These results thus, support the hypothesis.

Results in detail

Client 1: Anjee

A. Background and Creation

Family Anjee is 12 years old. He has lost both his parents some years back to an accident. Since then, his relatives have been their guardians. Anjee lives at the Community Development Centre, whereas his sister lives in another shelter for girls in Andheri. The child likes to assume responsibility for his sister, and very often misses her.

Background Anjee is 12 years old. He has lost both his parents some years back to an accident. Since then, his relatives have been their guardians. Anjee lives at the Community Development Centre, whereas his sister lives in another shelter for girls in Andheri. The child likes to assume responsibility for his sister, and very often misses her.

Creation Anjee likes to study. His favourite subject is Mathematics. He loves playing football and always strives towards maintaining discipline. Anji's main area of need is working in a team and improve creative expression through artistic skills

B. Inferences



Image 1 Anjee: Round Robin Round outcomes

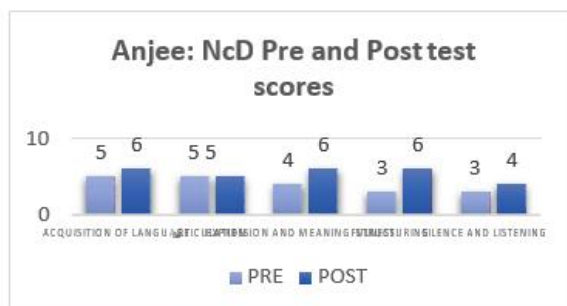


Figure 1.1 Anjee: NcD graph

In the beginning of intervention, Anjee was interested in the sessions but expressed only if probed. He only talked with specific children in the group. According to observations, Anjee has shown improvement in his communication skills. Earlier he was mostly silent and interacted with only selected children, now he talks to almost everyone around him. His voice projection has also changed over the course of time and the client seems confident than before.

The client has shown a change in group interaction as seen in Round Robin Round Pre-test and Post-test (Image 1) above. In the post test, he expressed how he felt when others drew on top of his drawings, unlike pre-test when he did not express anything. He also left space for others to draw. In post-test, he also expressed that he was missing his sister by drawing her on the paper.

As seen in figure 1.1, Anjee has shown a remarkable improvement from pre to post test in Narrative capability, especially the expression and meaningfulness parameter. His score on Structuring domain has also shown improvement.

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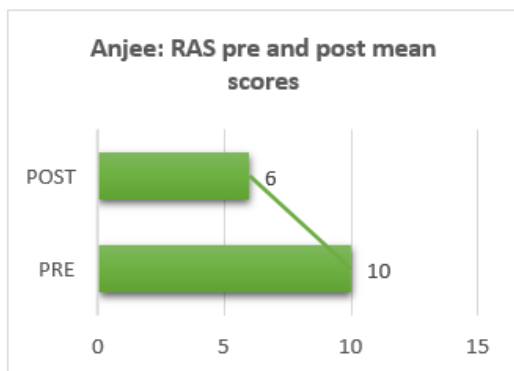


Figure 1.2 Anjee: Rathus Assertiveness Schedule graph

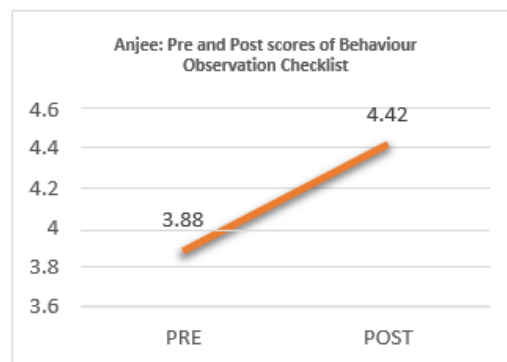


Figure 1.3 Anjee: Behaviour Observation Checklist graph

The scores on the checklist (figure 1.3) indicate increase in positive behaviours from mean score of 3.9(pre) to 4.5(post). His scores on Rathus assertiveness schedule, however, do not show a positive impact from pre to post. Overall trends show an improvement in the Communication and Group interaction domain in the client as a result of Arts Based Therapeutic intervention.

Client 2: Agnal

A. Background and Creation

Family Background Agnal is 12 years old. The client's mother has passed away when he was one year old. Father was an alcoholic and used to hit Agnal too due to which he was admitted to this institution. The client clearly expresses dislike towards his father. He is taken care by his uncle at times.

Creation Agnal is a happy child most of the times. He however gets upset very soon and that mood lasts for a very long time. He enjoys colouring, and like to have company. He is always eager to learn and help others.

B. Inferences

In the beginning of action research project, the client threw frequent tantrums during the session. He ended up quarrelling with at least one other child during the session. It was difficult for him to understand complex instructions. Along the course of action, he has shown a reduction in temper tantrums with a simultaneous development in verbal communication. He also mingles with the entire group eventually.

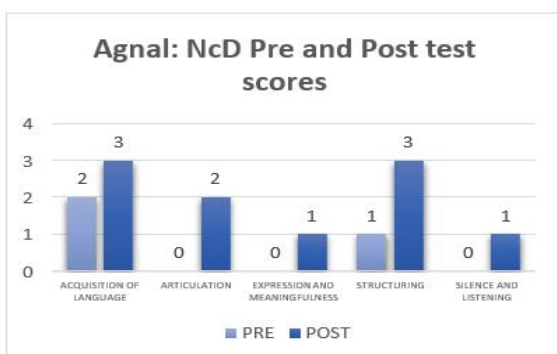


Figure 2.1 Agnal: NcD graph



Image 2 Agnal: Round Robin Round Outcomes

As it can be seen in figure 2.1, Agnal has shown improvement in all the parameters of narrative capability, with the highest change in Structuring parameter. Earlier his sentences

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would be confusing and disorganised, he has now learned how to frame simple sentences while having a conversation. He has also started listening patiently when others are speaking. Agnal now uses his verbal abilities to say how he is feeling instead of directly crying. There were times when he held his crying and put efforts in verbalising it and then expressed how he felt. These kind of minute changes have been visible at different times along the course of intervention. During the Round Robin Round post-test, it was observed that though Agnal felt impatient, he resisted it, waited for his turn and followed the instructions as well (Image 2).

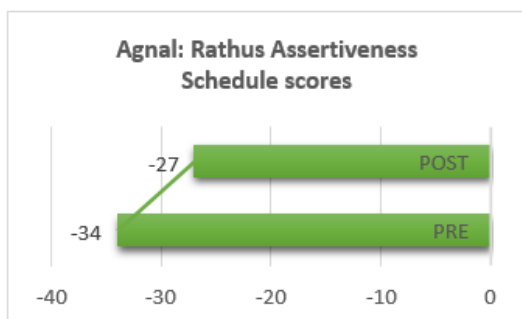


Figure 2.2 Agnal: Rathus Assertiveness Schedule graph

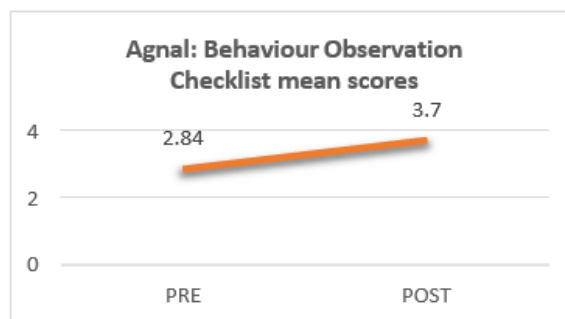


Figure 2.3 Agnal: Behaviour Observation Checklist graph

Agnal's score on assertiveness was -34 (figure 2.2) before the intervention and has now increased to -27 which shows reduction in certain non-assertive behaviours like keeping his anger to himself and crying alone. Agnal finds it difficult to hold up a conversation like other children in the group, however, he attempts to communicate with everyone. His friends understand him as well. In the beginning, no child would want to pair up with him, but eventually he was able to make connections with at least few of them who would not mind sitting with him. His mood swings have reduced since he started being patient and verbally expressing what he wanted. He is not misunderstood now by his peers. The client has shown improvement in the domain of Communication and some improvement in Group Interaction as a result of arts-based therapy intervention.

Client 3: Tushar

A. Background and Creation

Family Background Tushar's father is an addict and works as a tiling labourer due to which he is often bullied by his peers as 'bevda' (drunkard). He often shows aggression through anger outbursts and possesses fast and unclear speech. His mother used to work at this same institution as a domestic help, now she works somewhere else. He has three other siblings, one of whom lives with him and two other sisters live in another institution.

Creation Tushar loves craft and DIY projects. He is always found helping with cleaning and gardening at the centre. He has difficulties in speaking appropriately in the group and is usually distracted. He has a very high volume of speech too. The main focus is to work on his ability to be assertive in the group and to improve communication skills.

B. Inferences

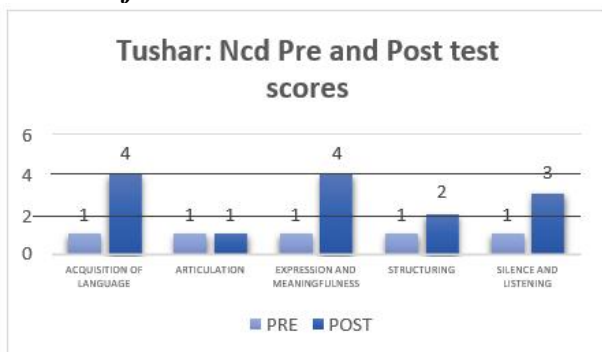


Figure 3.1 Tushar: Ncd graph

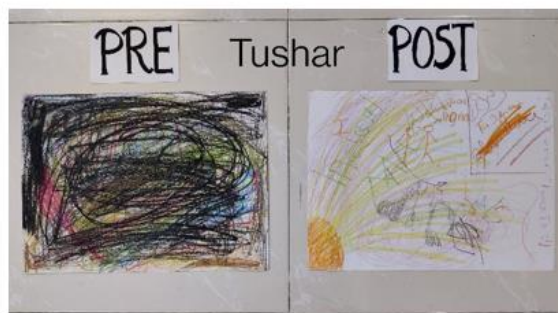


Image 3 Tushar:Round Robin Round outcomes

In the beginning of the intervention Tushar was uncooperative and argumentative. He found it difficult to trust his peers. Along the way, he has shown improvement in regulating his anger and remains calm instead of immediately fighting. Earlier he would disrupt the entire session if he was upset, or go and hide somewhere. But now, he attempts to share how he feels when he is angry or if someone has hurt him. Another visible change was in his voice and speech. His speech is comparatively comprehensible now as he regulates his pitch and speed while talking. During the Round Robin Round pre-test assessment, Tushar did not pay attention at all and also attempted to distract everyone else. However, during the post-test he expressed his annoyance and said, “Aisa sab nahi karna didi jisme apna bigaad dete hai” (I do not want to do such things where others will spoil what I do). However, in spite of the dislike he remained seated calmly and did not disturb anyone else. This implies that the child has developed some amount of tolerance.

As it can be seen in the above graph (figure 3.1), the client has shown remarkable improvement in narrative capabilities. He has shown highest improvement on two parameters, namely, Acquisition of language and Expression and Meaningfulness. He uses actions and expressions while having conversations and also keeps learning new words. This result can be directly compared with his assertiveness score as well (figure 3.2). This aligns with his ratings on the behaviour observation checklist (figure 3.3) as well which shows and improvement in positive behaviours decrease in behaviours like being loud, uncooperative, throwing tantrums, speaking inappropriately. He has also developed patience. For example, initially when he would not be interested in the session, he would run away and not come back, but now he lies down or sits in the session listening to whatever is happening. Tushar has shown improvement not only in the domains of Communication and Group Interaction, but also Mindfulness. He has learnt to regulate his speech and mood, and not react immediately.

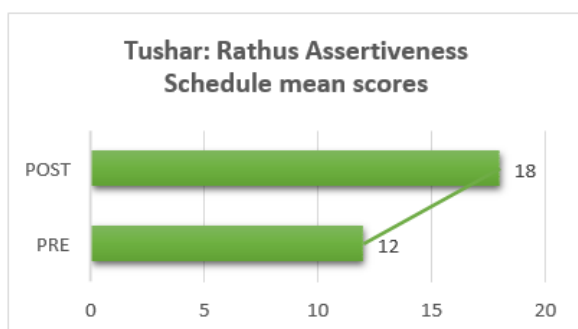


Figure 3.2 Tushar: Rathus Assertiveness Schedule graph

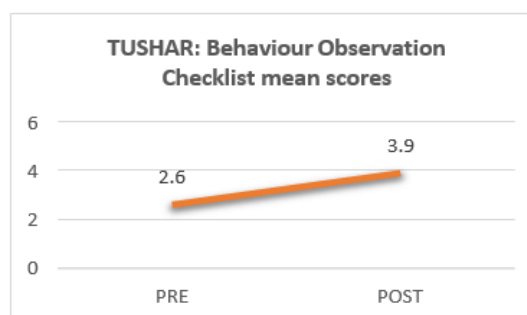


Figure 3.3 Tushar: Behaviour Observation Checklist graph

Client 4: Prajwal

A. Background and Creation

Family Background Prajwal’s mother is a vegetable vendor and prior coming to the institute he used to help his mother in selling vegetables. He was sent to this organization after his father passed away due to excessive drinking one and a half years back. The child has two elder siblings, one of them works with mother and the other one works somewhere else, they have discontinued studies.

Creation Prajwal is a very shy boy, has low confidence level. He usually enjoys being by himself. He is interested in games and play mostly. His goal is to be financially independent soon so that he can go back home and take care of his mother. The areas to be worked on are assertiveness and confidence level.

B. Inferences

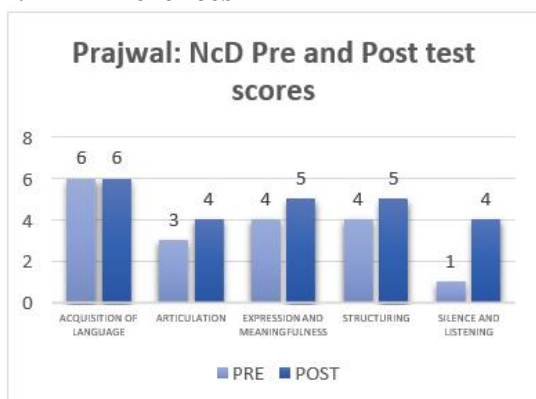


Figure 4.1 Prajwal: NcD graph

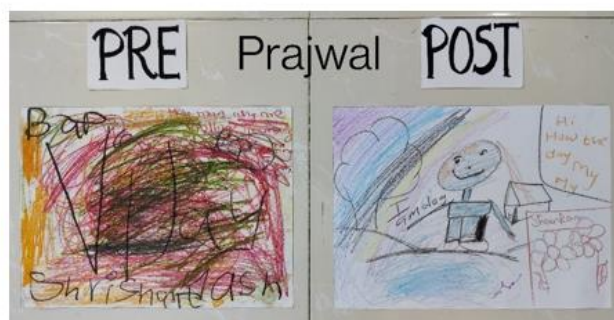


Image 4 Prajwal: Round Robin Round outcomes

Prajwal was a shy person in the beginning. Sometimes he would attempt to hide amongst his friends too. He would want to participate but would be reluctant to come ahead and express or play. He was very suggestible and did not seem to have his own point of view. However, towards the end of action research project, a change was visible in this area. He has a husky voice, and initially he would not bother about speaking clearly or see whether the other person has really understood what he said. Eventually, there has been a change in the way he speaks and is also mindful about the clarity and volume of his speech. Prajwal would not participate in any kind of argument especially if there was someone with better communication skills on the other side, but now he at attempts to narrate his thoughts / stories without any hesitation. Along the way he has become more assertive and shows the same by taking charge frequently.

Prajwal’s narrative capability scores (figure 4.1) show development, especially in the parameter of Silence and Listening. He not only pays attention to others but also speaks without reluctance when required. He has mingled well with his friends.

There is a remarkable improvement in his assertiveness scores (figure 4.2) which was -7 before the intervention, and has increased up to 3 which indicates a decrease in his shyness and increase in assertive behaviours like speaking up if he is uncomfortable or if he wanted something. These scores are also aligned with his Behaviour Observation scores which show clear increase in positive behaviours (figure 4.3).

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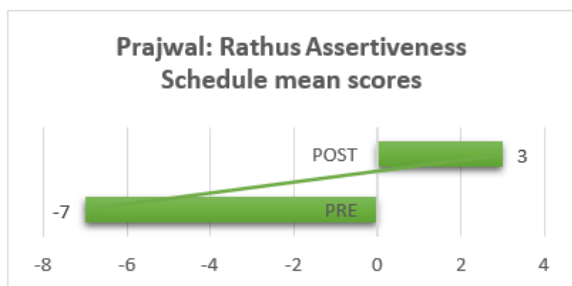


Figure 4.2 Prajwal: Rathus Assertiveness Schedule graph

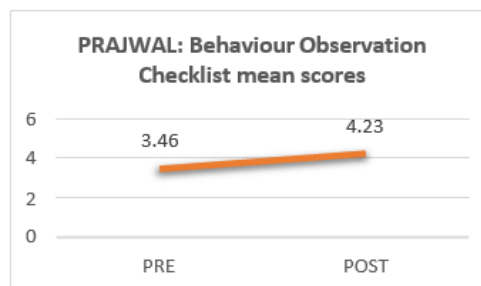


Figure 4.3 Prajwal: Behaviour Observation Checklist graph

Client 5: Navin

A. Background and Creation

Family Background Navin is 14 years old. mother had abandoned him and has been taken care by a lady in their vicinity through whom he has been admitted to this centre. He is the only child.

Creation Navin likes all kinds of sports, especially football. He aspires to be an athlete or a sports teacher in future. He faces difficulty with learning at school frequently. He seems to be sad or foggy sometimes. His main area of need is assertiveness and communication skills along with academic skills.

B. Inferences

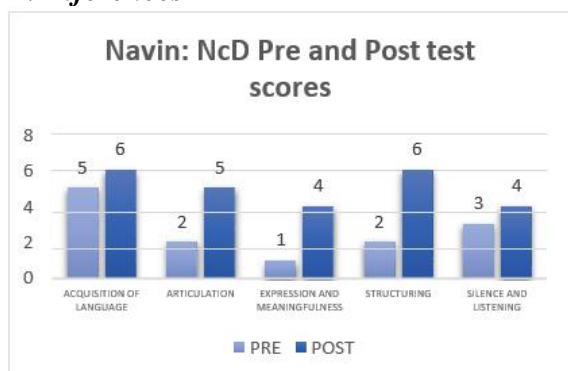


Figure 5.1 Navin: NcD graph



Image 5 Navin: Round Robin Round outcomes

Initially, Navin was very agreeable and would not be able to speak up even if he knew he was right. He often felt disappointed and frustrated because of this inability to express without being angry. Over the course of intervention, he has shown improvement in his expressive abilities and towards the end of the intervention he was able to speak up and express his emotions freely, as it can be seen in figure 5.1. He has shown remarkable improvement in the Structuring parameter of narrative capability followed by Expression and Meaningfulness and Articulation. His volume would be too low to be heard in the beginning, which has now improved and is at an audible level. With regards to assertiveness, Navin has shown some improvement, however this observation is not supported by his mean scores (figure 5.2). He would allow anyone, even children who were younger than him to tease or make fun of him earlier, but now he expresses the dislike through words effectively. He also shares about his experiences more often than before and also approaches the facilitator for support.

In the pre-test of Round Robin Round, Navin said, “Mujhe bohot gussa aa raha hai. Mai sabke paper mein acha kar raha tha lekin mera sabne bigaad diya” (I made such good

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drawings on other's papers but they all spoilt mine so I'm angry). This response changed during the post-test. He was little annoyed that again his paper was spoilt, but not really angry.

Navin has also shown development in self-awareness which reflects in his day-to-day routine. His behaviour has also changed over time with a positive influence of arts-based therapy sessions. He has become more helpful, has become friendlier than before. He participates with enthusiasm and energy. Earlier, there was a negative attitude towards life, with complaints and external locus of control, which is now moving towards a positive direction. He is found to be happy more often now.

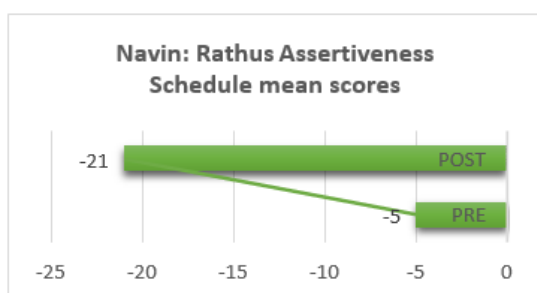


Figure 5.2 Navin: Rathus Assertiveness Schedule graph



Figure 5.3 Navin: Behaviour Observation Checklist graph

Client 6: Nitish

A. Background and Creation

Family Background: Nitish was admitted to this institution because his father passed away 2 years back due to cancer as a result of excessive smoking and drinking, and mother currently works as a delivery person. His sister is in another hostel in Tamil Nadu.

Creation: Nitish is well-behaved and usually follows what elders tell him. He loves to interact with people. Nitish's main area of focus is to be assertive in the group and increase the sense of belongingness with the group.

B. Inferences

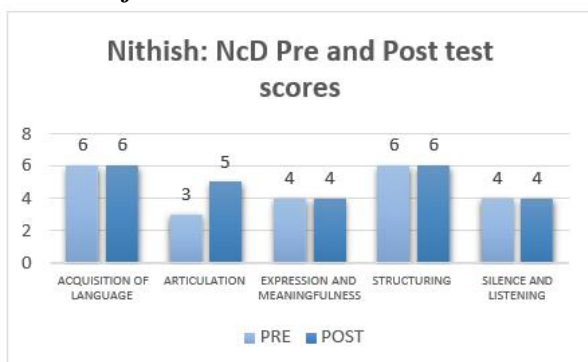


Figure 6.1 Nithish: NcD graph



Image 6 Nithish: Round Robin Round outcomes

As it can be seen in figure 6.1, Nithish has maintained his narrative skills. He loves story telling with expressions, but when it comes to personal feelings or experiences, he is reluctant. There is an improvement in the Articulation parameter of Narrative Capability

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Development. He is usually the leader of the entire group, but sometimes he is not able to speak.

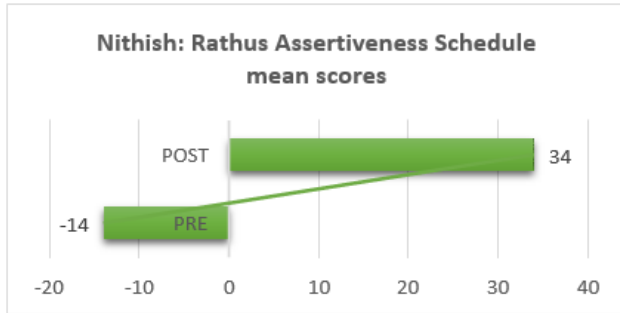


Figure 6.2 Nithish: Rathus Assertiveness Schedule graph

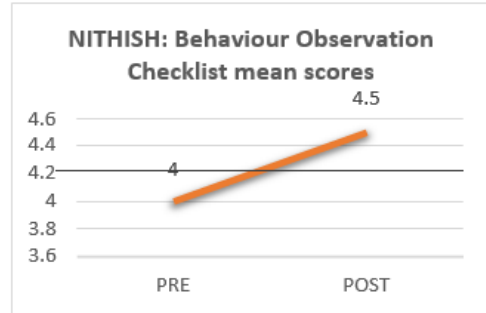


Figure 6.3 Nithish: Behaviour Observation Checklist graph

With the arts-based therapy intervention his assertiveness has increased over time as seen in figure 6.2, from -14 to 34. He is now able to set boundaries and deny if he cannot help someone. Due to this, he has also been able to focus on his upcoming Board exam. Earlier, he would end up doing a lot of work and assume unnecessary responsibility. He now has formed good friendships and communicates about distributing work amongst friends. Nithish has shown improvement in the domains of Group Interaction and Self Expression, followed by Mindfulness too.

Client 7: Shashank

A. Background and Creation

Family	Shashank is 13 years old. His mother had passed away some years back,
Background	and father works as a deliverer. He was admitted to the institution for the purpose of education.
Creation	Shashank is a shy boy. He usually sits passively throughout the session. He does not share about his experiences or emotions even of probed. The main area of need is developing emotional expression and assertiveness.

B. Inferences

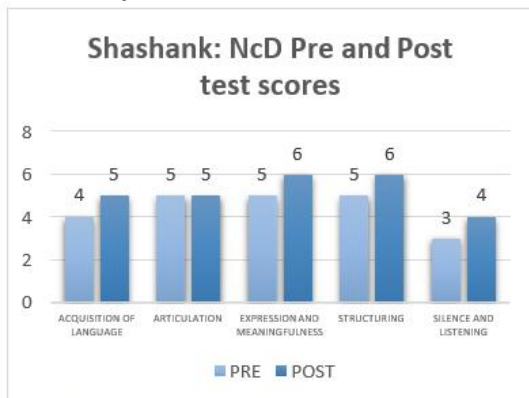


Figure 7.1 Shashank: NcD graph

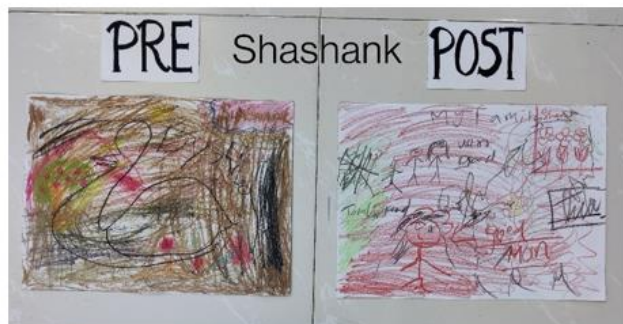


Image 7 Shashank: Round Robin Round outcomes

Initially Shashank was very shy and would not say much. He would not pay attention during sessions as well. Eventually, through games and other artistic skills he started being involved and interacting with everyone during sessions. He has shown remarkable improvement in the body domain with regards to correct posture and lethargy. Earlier he

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would never participate in movement related activities, but eventually he started participating without feeling shy. In the pre-test of Round Robin Round assessment (Image 7), he was distracted and would not pay attention in his colouring. He also hesitated from sharing how he felt. This changed drastically during post-test where he sincerely focused on his colouring. He also expressed that he felt some kind of discomfort which he could not describe.

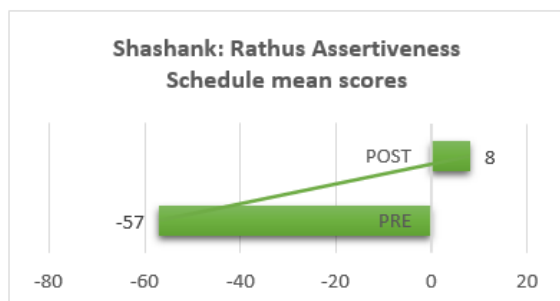


Figure 7.3 Shashank: Rathus Assertiveness Schedule graph

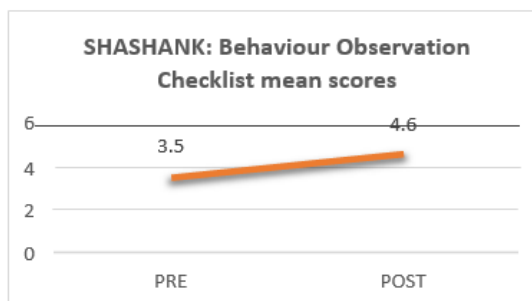


Figure 7.4 Shashank: Behaviour Observation Checklist graph

He would speak well, but now he also shares about his emotions verbally. He has shown empathy and care towards his group members. As it can be seen in figure 7.2, an upward trend can be seen in mean score from -57 to 8 which indicates a positive impact of Arts Based Therapy intervention on Assertiveness. The child has started having interactions with everyone in the group and does not get into arguments. He takes time to be completely open up between his friends, however, he does share about his emotions in person. He had been selected as class leader in his school too. He is well mannered and does not discriminate with anyone. Earlier if he got angry, he would sit alone and over think for a long time, but now he attempts to regulate his emotions and tries to talk about the same.

Client 8: Shrishanth

A. Background and Creation

Family Background	Shrishanth has been sent to the institution because he used to bunk school and keep running away. His father as abandoned them. Mother is a sex worker but the child isn't aware about it. The child misses his mother a lot, and has eloped from the institution several times. He has been exposed to sexual content early and used to talk about the same with other kids, which has stopped now. He still continues to make plans of running away, but has stopped the attempts. The child shows verbal and physical aggression.
Creation	Shrishanth is rebellious, uses abusive language, throws tantrum and has attention seeking behaviour. The likes to be in the spotlight and aspires to become an actor. The areas that need intervention are to be assertive with everyone in the group and also improve communication skills.

B. Inferences

Before the action research started, Shrishanth used to be short tempered, loud and also disruptive. He has a stuttering issue, but that has never been a problem in self-expression. Initially there were times when he would hide under the bed or just leave the session at random if something upset him. His stubbornness reduced to a great extent towards the end of the intervention.

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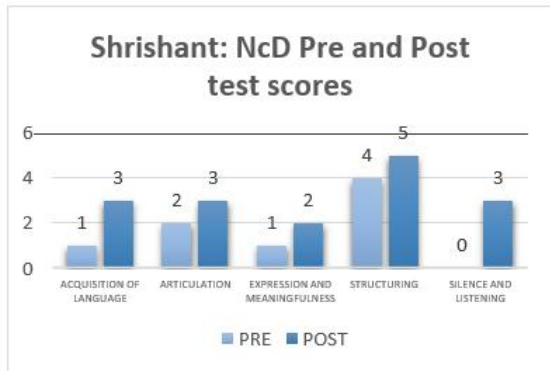


Figure 8.1 Shrishanth: NcD graph

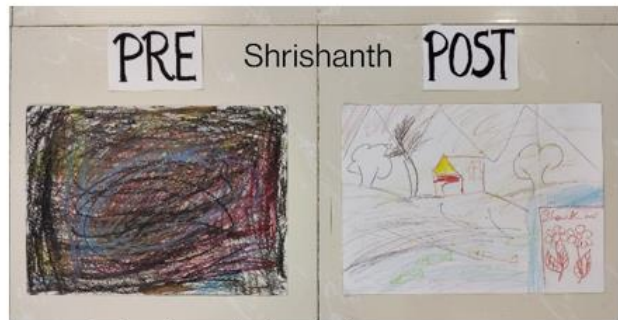


Image 8 Shrishanth: Round Robin Round outcomes

Shrishanth had run away from the institution twice as he had been missing his mother a lot. He also helped another child to do the same. After one-to-one counselling sessions and ABT sessions simultaneously, his need to run away subsidized and eventually realised how safe it was at the centre. After this event there was a transformation in the child. His negative behaviours with regards to communication reduced a lot and now he would wait for his turn to speak, be mindful of others and was more kind towards his friends. The image above (Image 8) shows a drastic change in Shrishanth's pre and post drawings of Round Robin Round assessment. During the pre-test he expressed anger verbally and he did not like his drawing at all. However, during the post-test, he was a little disappointed initially as he was expecting his paper to be spoilt, but to everyone's surprise he became very happy instead seeing everyone's drawings on it.

His aggressive behaviour also changed as he started communicating assertively with his peers. Now, he refrains from hitting or saying bad words to his peers as much as possible. His attention seeking behaviour has also reduced. As we can see it in figure 8.1, his narrative capability has developed, with highest impact on Silence and listening parameter followed by Acquisition of language and Expression and meaningfulness.

These findings align with the observed behaviour (figure 8.3) where he has shown increased positive behaviours like being helpful (he has started helping with cleaning), appropriate language, co-operating with friends and elders, waiting for his turn to speak, etc. Negative behaviours have reduced.

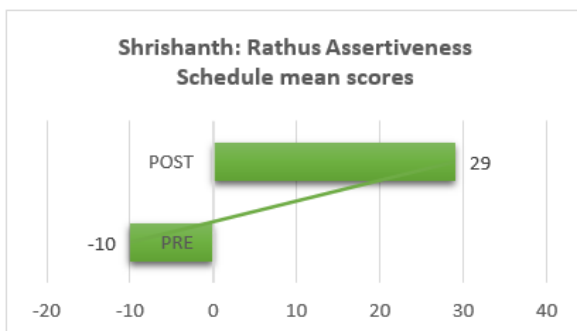


Figure 8.2 Shrishanth: Rathus Assertiveness Schedule graph

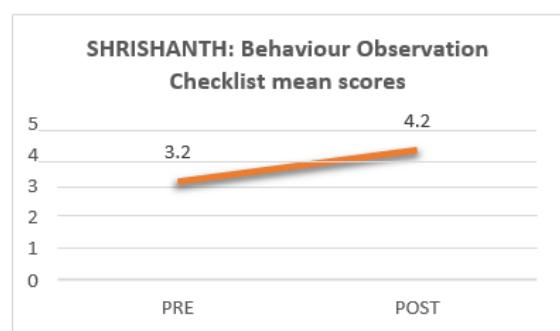


Figure 8.3 Shrishanth: Behaviour Observation Checklist graph

Shrishanth has not only shown tremendous improvement in the Group Interaction and Communication domain, but also in other domains like Mindfulness and Self-expression.

Client 9: Shiva

A. Background and Creation

Family Background Shiva was sent to the institution after his mother abandoned the family and ran away. Father lives alone at home and his two other siblings are admitted to other institutes.

Creation Shiva talks softly, looks under-nourished and is found to be distracted a lot of times. He has a naughty personality and is also short tempered. Shiva loves playing football and aspires to be a football player in future. He enjoys playful activities and is driven by external stimulation sometimes. Shiva’s main area of focus emotional expression through speech.

B. Inferences

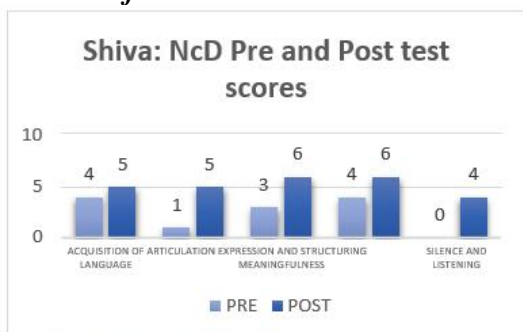


Figure 9.1 Shiva: NcD graph



Image 9 Shiva: Round Robin Round outcomes

The above graph (figure 9.1) portrays Shiva’s development of narrative capability. He has shown progress in the parameter of Expression and Meaningfulness. Followed by Structuring. Earlier, Shiva would speak very softly with negligible volume. His speech was also unclear and very fast. He would mumble internally with whoever sat next to him, but hesitated to talk in front of everyone. He would always go last during turn taking games or activities which involved talking. With time, positive changes were observed in this behaviour, and towards the end of action research he would often speak very confidently in front of the group. With regards to expressing emotions, he has shown development over time. He now puts efforts in having a conversation if there a misunderstanding with friends. He also expresses verbally, “Didi mujhe aap pe bohot gussa aa raha hai” (Didi, I’m mad at you) if he gets angry or irritated and still chooses to stay throughout the session.

Shiva used to be very aggressive earlier, and there were frequent complains of him getting into a fight or an argument. He finds it difficult to trust anyone easily. During the pre-test assessment of Round Robin Round, he shared that he was annoyed because everyone spoils his beautiful drawings. However, during post-test he said that he was able to regulate his anger and was fine with the paper that he got back.

Along the journey, a very important change that was observed was that he mingled with each member of the group. Earlier he would straight away deny to pair-up with certain children he did not like, now that behaviour has reduced to a considerable amount. Figure 9.2 displays the progress in his assertiveness which implies that now he is able to regulate his emotions and also assert his feelings better than before.

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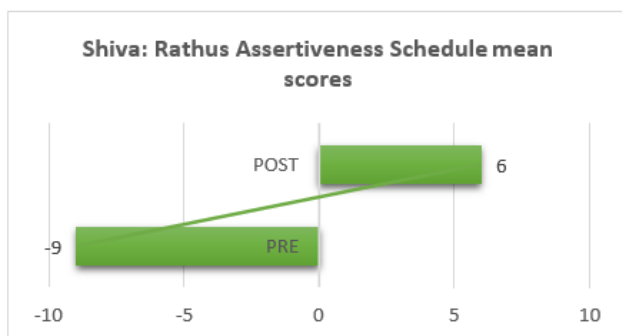


Figure 9.2 Shiva: Rathus Assertiveness Schedule graph

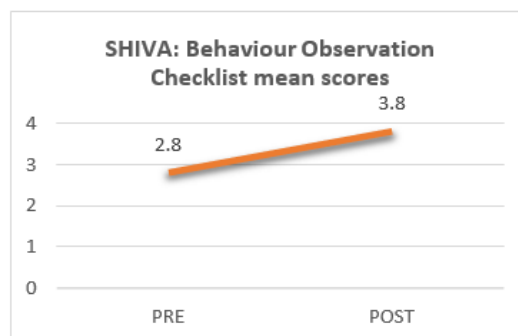


Figure 9.3 Shiva: Behaviour Observation Checklist graph

Shiva has definitely shown overall transformation in his behaviour (figure 9.3), with an increase in positive behaviours and reduction in negative ones. The impact of Arts Based Therapy intervention can be seen across various domains like Mindfulness, Self-Expression, Body along with Emotional Expression and Group Interaction.

Client 10: Shankar

A. Background and Creation

Family Background	Shankar's father does not earn and mother is a flower vendor in Dadar market. The family lives in Kurla and his sisters help their mother with the flower sale. He was sent to the institution due to his behavioural issues.
Creation	Shankar is fun loving and kind. He loves to cook and is very hospitable. He also likes to dress up sometimes. His main area of need is improved quality of focused attention and ability to be assertive with others.

B. Inferences

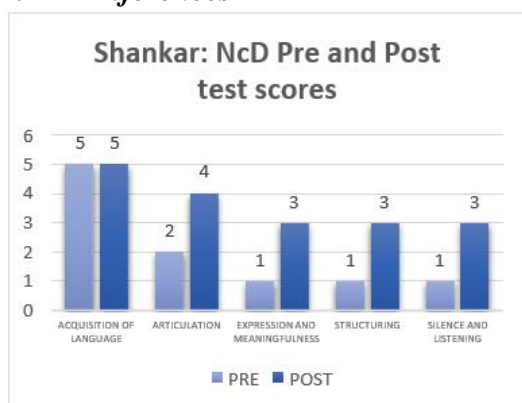


Figure 10.1 Shankar: NcD graph

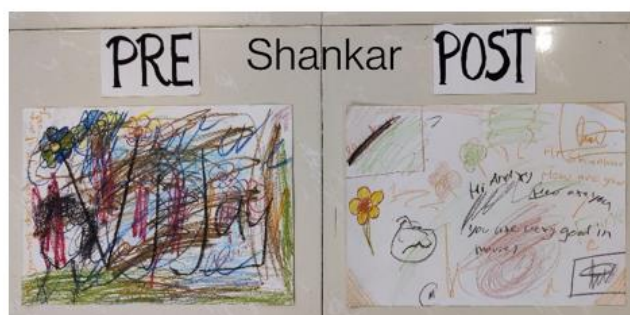


Image 10 Shankar: Round Robin Round outcomes

During initial days of intervention, Shankar was very mischievous, inattentive and talkative. He would disturb everyone, not only during ABT sessions, but also during study time. Along the way, Shankar has become more observant and expressive. He does share how he feels sometimes. During the post test of Round Robin Round (image 10), he expressed how he felt saying, "I feel uncomfortable", whereas in the pre-test he had not expressed his discomfort. He also made a boundary around his drawings in the post-test. Shankar has shown a marked improvement in assertiveness from 0 to 4 (figure 10.2)

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He has stopped yelling and arguing back with authorities as well. He used to immediately lie down during sessions and had physicals excuses like body pain but now he tries to remain seated as much as possible and does not complain much. His scores on narrative capability (figure 10.1) show a change in his communication style with his friends. He is more verbally expressive now and aggression has also reduced to a certain extent.

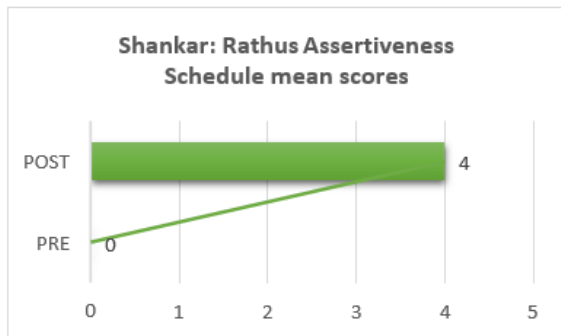


Figure 10.2 Shankar: Rathus Assertiveness Schedule graph

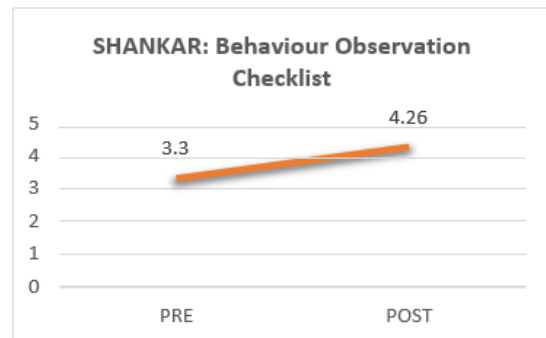


Figure 10.4 Shankar: Behaviour Observation Checklist graph

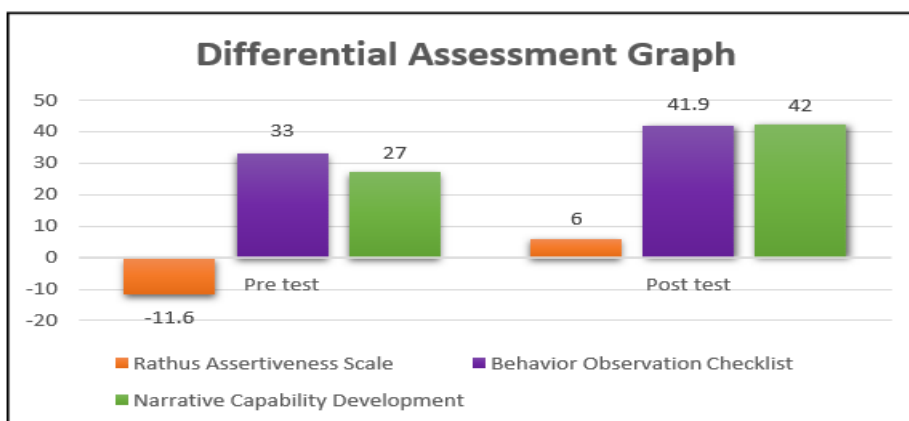
As the child started verbalising or sharing his experiences and feelings, his assertiveness also increased parallelly. In addition to that, his overall positive behaviour has also increased and he has become more friendly with his group. Shankar started paying attention throughout the session and also encouraged others to do so. He does take charge of the group very often.

Comparison of Domains and Differential Assessment

Table 3: Differential Assessment

Differential Assessment		
	Pre test	Post test
Rathus Assertiveness Schedule	-11.6	6
Behaviour Observation Checklist	33	41.9
Narrative Capability Development	27	42

The above table displays mean scores of the evaluation tools used before and after the ABT intervention. The scores indicate a positive impact of the intervention from pre-test to post-test with all evaluation tools. The highest change was seen in their narrative capability, followed by changes in positive behaviour and assertiveness.



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The domains of Communication and Group Interaction have had an interdependent impact on each other. As the Communication improved over time, they have also been able to be assertive with their peers.

Apart from these two domains, the group has shown improvement in being Mindful (regulating their speech, action and attention) along with the Body domain (balance in physical alertness and regulating their posture)

These results also align with the outcomes of Round Robin Robin assessment tool, which was qualitative in nature. The group has shown a change in group dynamics in various ways. Their post-test drawings depict an understanding of personal space, self-expression, positive attitude towards each other and feeling of friendship.

DISCUSSION

Limitation

- **Covid-19** is one of the main reasons for a delay in commencing the sessions. Also, during the intermittent lockdown, maintaining the decided schedule seemed tough.
- **Irregular intervals.** Due to COVID-19, vacations, sick days, the duration in between two sessions has not been very consistent throughout.
- **Setting:** Since it was a shelter for around 25 children and the sessions were conducted in a space where they had their lockers and beds, there was frequent interruption by other kids during sessions. Sometimes, when participants had other classes or any sudden event occurred, the facilitator had to wait or postpone the session.

Personal limitations:

One of the challenges I faced initially was remaining patient during the session. I had my reservations about the outcomes towards the end of a session. Another limitation was expecting a particular behaviour from participants, and would feel anxious if that did not happen. However, that changed through daily meditation practice and being more mindful of the little things around me. As pointed out by guide as well, I would sometimes end up being loud when I was unable to control the group.

Learnings

“Only when I unlearned, was I able to learn”

ABT has been my biggest teacher in the past three years involving a lot of learning, unlearning and relearning. My learning started with the book “What Makes You Not A Buddhist” where I learnt the basic principles of Buddhism that helped me throughout my journey.

Keeping calm in every situation. Life is riddled with challenges and tumultuous paths. But it is during those times that it becomes important to stay calm and maintain your inner peace. It seemed an unachievable task until I started ABT. It has helped me get more in tune with myself.

Having a blueprint in mind so that we are always ready to improvise without compromising the goal of the session. ABT has also helped me streamline my daily activities better. It was helpful to chalk out a rough sketch of my action plan before actually beginning it. For each

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session, I would prepare two plans. The second plan came to the rescue if the first one didn't work. This helped prevent any obstacles to the flow of the session.

Ask for help and lend help if required. One of my biggest takeaways from ABT has been that it takes a village to undertake anything: be it a project, a course, an event, or anything else. Likewise, completing this project wouldn't have been possible if it wasn't for all the people who put in the effort to make it a success. It has also enabled me to find the strength to give abundantly. This helped bring the principle of interdependence to life.

It's not about you; you need to forget yourself during the session. Through ABT, I have learned that it's less about you as an individual or practitioner, and more about your intention and the participants. Not focusing on the self also helps connect with the clients without any judgement. When I applied the principle of FUNN (Functional Understanding Not Necessary) I was actually able to be in present and observe with clarity.

Taking the required action instead of procrastinating or overthinking. This course has been a major eye-opener for me in the sense that it has empowered me to push beyond my fears and weaknesses. It has helped me become more prompt in my actions, and feel proactive enough to work towards my goal relentlessly.

Self-discipline and self-compassion: they are both sides of the same coin. Another major lesson I have learnt from ABT is knowing when to be gentle on myself and when to push myself to do more and be more. It is something I will carry into all spheres of my life, moving forward.

The results of this study have supported the hypothesis that arts-based therapy will improve the emotional expression (speech and creative writing) and group dynamics in children at risk. These findings are in line with previous researches done by Vaidehi Chilwarkar which focused on enhancing group cohesion and improving interpersonal interaction in children at risk using Arts Based Therapy interventions.

Future

For children at this organisation, Arts Based Therapy has been a safe place where they could feel their own emotions without being judged. Children are great visual learners. For instance, ask a child about their family and they would feel threatened but ask them to draw their family and they would do it without any hesitation. With the obtained results, it is clear that arts-based therapy has a remarkable impact on children at risk.

However, there is scope for further research with ABT to study different domains and understand the best practices and skills for different populations. ABT can be made more applicable with more and more practice and awareness. Every school could use ABT as a tool to educate the young heroes without putting them into certain categories. Even parents could use arts-based techniques to nurture, teach and educate their children at home. If a child learns in a world without judgement, where he or she is free to imagine and create, there would be less suffering and more peace.

Also, regular upgradation and meets of ABT practitioners could be great reminders to keep honing our skills and hold on to our life purposes.

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Conflict of Interest

The author(s) declared no conflict of interest.

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