

Art Therapy to Deal with Anxiety, Depression, Stress and Psychological Wellbeing Among School Children

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ABSTRACT

The study conducted by Ms. Anita Khosla and Pooja Sharma at G.D. Goenka Public School Dwarka explores the effectiveness of art-based therapy in addressing anxiety, depression, stress, and psychological well-being among school children aged 8 to 18 years. It highlights the growing concern of mental health issues among children globally and suggests that traditional verbal therapies may not always be effective for younger populations. Instead, art therapy, which enables creative expression and non-verbal communication of emotions, is identified as a valuable intervention. In the study, 50 students participated in a pre- and post-intervention research design, utilizing the Anxiety, Depression, and Stress Scale (ADSS) and the Ryff Scale of Psychological Well-Being to measure outcomes. The intervention consisted of four sessions that focused on emotional awareness, managing negative emotions, and relaxation techniques, such as mandala art. Findings indicated that art therapy significantly reduced levels of anxiety, depression, and stress among participants, while improving their psychological well-being. The study concluded that art therapy is an effective method for enhancing mental health among school children.

Keywords: *Anxiety, depression, stress, psychological wellbeing, Art therapy*

Mental health issues in children have become a growing concern worldwide, with a rising number of children diagnosed with conditions such as anxiety, depression, and post-traumatic stress disorder (PTSD). Traditional therapeutic methods often rely heavily on verbal communication, which can be challenging for children who may not yet possess the cognitive or verbal skills necessary to fully express their feelings and experiences. In this context, art therapy has emerged as an invaluable tool, offering children a creative and expressive outlet to process and communicate their emotions in a way that is easier to understand and express.

Art therapy, defined as the use of creative artistic methods to treat psychological disorders and promote mental health, encompasses activities such as drawing, painting, sculpting, and other forms of artistic expression within a therapeutic setting. The main principle behind art therapy is that the act of creating art can contribute to emotional healing and overall mental well-being. It provides children with a non-verbal method to explore their feelings, gain self-

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awareness, manage their behavior, and improve their social skills in a supportive and creative environment.

Children and adolescents face significant issues with anxiety, stress, and depression, with estimates showing that 10% to 20% are affected worldwide (Kieling et al., 2011; World Health Organization, 2018). These mental health problems can severely affect their psychological well-being, impacting daily functioning, and can also contribute to poor academic performance (Veldman et al., 2015). The term "psychosocial problems" is used to highlight the close relationship between the psychological and social aspects of human experience, encompassing emotional, behavioral, and social challenges (Soliman et al., 2020). Emotional problems, such as anxiety, depression, withdrawal, and psychosomatic complaints, are often classified as internalizing problems. On the other hand, behavioral problems, including hyperactivity, aggression, and conduct issues, are considered externalizing problems. Social problems refer to difficulties in forming and maintaining positive social relationships with others. Often, these issues occur together, creating a complex and interconnected set of challenges for children (Vogels, 2008; Jaspers et al., 2012; Ogundele, 2018).

Psychosocial issues have various causes and can differ depending on the individual and their specific circumstances. Numerous theories attempt to explain the onset of psychosocial problems. The biopsychosocial model is one widely accepted theory, suggesting that a combination of genetic predisposition and environmental stressors plays a role in the development of these problems (Lehman et al., 2017). Attachment theory also provides valuable insights, focusing on the early caregiver-child relationship and its impact on emotional regulation and social competence (Duschinsky et al., 2015; Veríssimo et al., 2014). Research has identified biological, psychological, and environmental factors as key contributors to the development of these problems (Boursnell, 2011; Sellers et al., 2013; Wright and Simms, 2015; Patrick et al., 2019).

The prevalence of psychosocial issues among children and adolescents is significant, with approximately 10% to 20% of the global youth population affected (Kieling et al., 2011; World Health Organization, 2018). These problems not only hinder day-to-day functioning but can also result in poor academic performance and contribute to long-term mental health challenges (Bhosale et al., 2015; Veldman et al., 2015). Addressing these issues through effective interventions can prevent long-term impairment and reduce the mental health burden on individuals, families, and society (Cho and Shin, 2013).

Traditional approaches for managing psychosocial problems often involve cognitive-behavioral therapy (CBT) and social communication techniques, but these may not always be suitable for all children, particularly those who struggle to express their feelings verbally (Scheeringa et al., 2007). In such cases, alternative therapies, such as art therapy (AT), offer an effective solution. Art therapy is a non-verbal, experiential form of treatment that allows children to express their feelings through creative means. It is especially beneficial because it helps children access emotions that may be difficult to verbalize. Art therapy is widely used to improve self-esteem, emotional resilience, and social skills, while also reducing distress (American Art Therapy Association, 2017). It is also increasingly recognized for its role in emotion regulation and fostering self-esteem (Gratz et al., 2012; Baumeister et al., 2003).

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Art therapists use a variety of therapeutic approaches, including psychodynamic, humanistic, cognitive-behavioral, and family-based approaches, depending on the needs of the child (Van Lith, 2016). In art therapy, the therapist creates a safe and supportive environment where the child can engage with both the therapist and art materials. The therapeutic process allows children to express feelings that are otherwise difficult to articulate, promoting self-discovery and emotional regulation (Waller, 2006).

While research on the specific mechanisms of change in art therapy is still developing, studies have shown that it can lead to positive outcomes for children and adolescents, particularly those experiencing trauma, medical conditions, or special needs (Cohen-Yatziv and Regev, 2019). The effectiveness of art therapy in addressing psychosocial issues has been increasingly recognized, although further research is needed to understand which specific elements of art therapy interventions contribute to these positive outcomes. By identifying these elements, clinical practices can be enhanced, leading to more targeted and effective interventions for children facing mental health challenges.

Mechanism of art therapy

Historically, people have used the arts for self-expression, communication, and healing for thousands of years. However, art therapy did not emerge as a formal discipline until the 1940s. During this time, doctors noticed that individuals with mental health issues often expressed themselves through drawings and other artistic forms. This observation encouraged many professionals to explore art as a therapeutic method, a development that was met with enthusiasm by both therapists and patients alike.

Examples of art therapy in the context of mental health treatment include activities designed to foster skill development and mastery, studio-based artmaking, individual art projects, structured and supervised art therapy groups, art psychotherapy, and personal art with therapeutic and healing goals. In particular, community-based artmaking has been shown to significantly enhance mental well-being by allowing individuals to express themselves visually and symbolically. This process can lead to improvements in self-esteem and self-worth. Moreover, it helps facilitate social interactions, creating opportunities for individuals with mental health conditions to expand their social networks and build relationships.

Art therapists design therapeutic sessions to align with specific goals by selecting appropriate materials and interventions that suit each client's needs. Through the creative processes, art therapists assist their clients in achieving personal growth, gaining greater self-awareness, reducing stress, healing from trauma, enhancing cognitive, memory, and sensory functions, improving interpersonal relationships, and attaining a sense of fulfillment and self-realization.

The effect of mindfulness-based therapy on anxiety and depression:

A study conducted by Hofman et al. (2010) examined the impact of mindfulness-based therapy on anxiety and depression. The findings suggest that mindfulness-based therapy may be an effective approach for addressing anxiety and mood disorders in clinical populations. The researchers used the Beck Depression Inventory and Beck Anxiety Inventory to gather data, which was collected through pre- and post-intervention self-reported assessments of anxiety and depression. Additionally, post-intervention group interviews were held. A multivariate analysis of variance showed that participants in both intervention groups reported lower levels of anxiety and depression, with no significant

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difference between the two groups. Qualitative analysis revealed that both group interventions were beneficial to participants, though the experience of group participation differed between the two programs. For instance, participants in the arts-based group emphasized mutual support and enjoyment, while those in the other group focused on individual learning. The arts-based intervention seems promising for adults dealing with anxiety and depression, suggesting the need for further exploration.

Art Therapy: A Complementary Treatment for Mental Disorders

Art therapy, a non-pharmacological complementary and alternative medical approach, has shown positive clinical effects in treating mental disorders. However, a detailed systematic review of its clinical applications is still lacking. To explore its theoretical foundation, clinical uses, and future directions, we conducted a search on PubMed for art therapy studies, focusing specifically on painting and drawing as primary therapeutic media. Our search identified 413 relevant studies, and after reviewing the full texts, we found that art therapy has been increasingly utilized for patients with mental disorders, yielding positive outcomes. These include alleviating symptoms of depression, anxiety, cognitive impairment, Alzheimer's disease, schizophrenia, and autism. The findings suggest that art therapy not only helps patients express their feelings, thoughts, and experiences but also serves as an adjunct diagnostic tool, providing medical professionals with complementary information beyond traditional tests. Art therapy holds significant potential for future clinical applications in treating mental disorders.

One study focused on the use of art therapy to address post-traumatic stress, depression, and anxiety among Syrian refugee children (N = 64). The research first measured the prevalence of psychological symptoms in these children using the Stressful Life Events (SLE) Questionnaire. The main outcome measures were the UCLA Post-Traumatic Stress Disorder Parent version, Child Depression Inventory, and State-Trait Anxiety Scale. Following the baseline assessment, a five-day art therapy intervention based on the Skills for Psychological Recovery model was conducted. The results indicated that 60.3% of the children were at high risk for post-traumatic stress disorder (PTSD), with 23.4% displaying PTSD symptoms, 17.6% showing severe depression, and 14.4% exhibiting high levels of state anxiety. By the end of the intervention, trauma, depression, and trait anxiety symptoms were significantly reduced, although state anxiety symptoms did not show significant improvement. This suggests that art therapy could be an effective intervention for reducing PTSD, depression, and trait anxiety in refugee children.

Another study investigated the impact of group art therapy, combined with breath meditation, on the subjective well-being of depressed and anxious adolescents. The study involved 24 first-year high school students from Daegu, South Korea, who participated in 13 80-minute art therapy sessions over several months. The subjective well-being scale developed by Han (1997), based on Campbell, Converse, and Rodgers' (1976) scale, was used to measure outcomes. Statistical analysis revealed that both experimental groups—those who received art therapy with breath meditation and those who received only art therapy—showed significantly higher subjective well-being scores compared to the control group. The group that received the combined art therapy and meditation intervention showed even greater improvements. These effects were sustained in follow-up assessments, indicating the lasting benefits of the intervention.

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There was no specific research papers found related to the questions. It is best to consult specific academic sources or databases for detailed studies and findings related to the variables of anxiety, stress, and depression among adolescents.

Art therapy in mental health:

Between 1994 and 2014, research was conducted to explore the art therapy approaches used with individuals experiencing mental health issues and how these approaches were integrated into the clinical mental health system. A total of thirty articles were reviewed, each demonstrating the application of art therapy for specific mental health conditions. The articles were categorized into four diagnostic categories: depression, borderline personality disorder, schizophrenia, and post-traumatic stress disorder. The synthesis of these studies highlighted areas that require further exploration. Future research could benefit from including more detailed descriptions of the art therapy methods used, which would enhance the applicability of these practices. Additionally, incorporating feedback from art therapists on the approaches used from their practical perspective would support the development of evidence-based practices that are both effective and feasible. Lastly, future studies should include the perspectives of clients to better understand the relationship between client expectations and the perceived effectiveness of art therapy.

Rationale of the Study

The rationale for conducting this study is rooted in the recognition of the pressing mental health issues faced by school students during a crucial life stage. The transition from childhood to adolescence brings about numerous challenges and stressors, which, when combined with the pressure of doing good in academics and societal expectations, can result in depression, anxiety, and stress. It is imperative to address these issues to safeguard the psychological well-being of adolescents and equip them with the resilience needed to thrive in their academic and personal lives. Given the historical effectiveness of Art Therapy in addressing psychological challenges, it is essential to investigate its potential as an intervention to mitigate the mental health issues faced by school students.

Significance of the Study

This study holds substantial significance due to its potential to contribute to the well-being of school students, a demographic vulnerable to mental health issues during a pivotal life transition. Understanding the effectiveness of Art Therapy as an intervention for alleviating depression, anxiety, and stress, while improving psychological wellbeing, has practical implications for both mental health practitioners and educators. It offers a promising approach to support students in managing their emotional and psychological challenges effectively, ultimately leading to improved academic performance and a higher quality of life. Furthermore, the study aligns with broader societal goals of addressing mental health concerns, reducing the societal cost of mental health disorders, and fostering a more mentally resilient young population.

Sample

The study employs convenience sampling, a type of non-purposive sampling. The sample size consists of 50 adolescents aged 11 to 18 yrs who are currently enrolled in school. The research span over a duration of three months, with participants undergoing intervention in the form Art Therapy through two sessions per week during this three-month period. This approach allows for a comprehensive examination of the impact of Art Therapy on the

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mental well-being of school students within this specific age range, providing valuable insights into the potential benefits of this intervention for this demographic.

Operational Definition

- **Depression:** In this study, depression is operationally defined as the extent of emotional and psychological distress experienced by participants, measured using the Depression subscale of the DASS-21 (Depression, Anxiety, and Stress Scale). Higher scores on this scale indicate a higher level of depressive symptoms, reflecting feelings of sadness, hopelessness, low energy, and diminished interest or pleasure in activities.
- **Anxiety:** Anxiety is operationally defined as the degree of nervousness and unease experienced by participants, assessed through the Anxiety subscale of the DASS-21 (Depression, Anxiety, and Stress Scale). Higher scores on this scale indicate a greater level of anxious symptoms, reflecting symptoms such as restlessness, excessive worry, and a heightened state of arousal.
- **Stress:** Stress is operationally defined as the level of psychological and emotional tension experienced by participants, evaluated using the Stress subscale of the DASS-21 (Depression, Anxiety, and Stress Scale). Higher scores on this scale signify a higher degree of stress, indicating responses to various stressors, including tension, irritability, and difficulty in relaxing.
- **Psychological wellbeing:** Psychological well-being refers to the subjective feeling of contentment, happiness, and satisfaction with life's experiences, including one's role in work, sense of achievement, usefulness, belonging, and the absence of distress, dissatisfaction, or worry. These elements are hard to measure objectively, which is why the term 'subjective' is emphasized in the definition of psychological well-being. It can persist even in difficult situations, and conversely, it can be lost even when conditions seem favorable. While it is related to physical and psychological conditions, it is not entirely dependent on them.

Research Design

The research design for this study is a quasi-experimental design. Quasi-experimental designs are characterized by the manipulation of an independent variable (Art Therapy intervention) and the measurement of its impact on dependent variables (depression, anxiety, stress, and psychological wellbeing) while lacking the random assignment typically seen in true experimental designs. In this study, the intervention is applied to a group of school students within a specific age range, and changes in the dependent variables are measured before and after the intervention.

Variables

Independent Variable:

1. **Art Therapy Intervention:** This is the variable that is manipulated in the study. It involves the provision of Art Therapy to the participants, and the impact of this intervention is assessed on the dependent variables.

Dependent Variables:

1. **Depression:** The extent of emotional and psychological distress experienced by the participants is measured using the Depression subscale of the DASS-21. Higher scores on this scale indicate a higher level of depressive symptoms.

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2. **Anxiety:** The degree of nervousness and unease experienced by participants is assessed through the Anxiety subscale of the DASS-21. Higher scores on this scale indicate a greater level of anxious symptoms.
3. **Stress:** The level of psychological and emotional tension experienced by participants is evaluated using the Stress subscale of the DASS-21. Higher scores on this scale signify a higher degree of stress.
4. **4. Psychological wellbeing:** Carol Ryff created the six-factor model of psychological well-being, a hypothesis that identifies six elements that influence a person's psychological health, happiness, and contentment. Self-acceptance, healthy interpersonal connections, independence, environmental mastery, a sense of direction and meaning in life, and personal development are all components of psychological well-being. Higher psychological wellness is indicated by a higher Ryff psychological wellbeing measure.

Problem Statement:

- What is the Impact of Art Based Therapy on Depression and Anxiety on the Psychological Wellbeing of School children?
- Descriptive method was used in this study in “data is collected to test the hypothesis or to answer questions concerning the current status of the study”.

Objectives:

- To determine the levels of anxiety, stress, and depression in school children.
- To assess the psychological well-being of school children.
- To evaluate the effectiveness of Art-Based Therapy in two distinct age groups of students.
- To compare the conditions of school children before and after undergoing therapy.

Hypotheses:

- Art-based therapy will not impact depression, anxiety, and stress levels among school children.
- Art-based therapy will not influence the psychological well-being of school children.
- There will be a significant variation in the effectiveness of art-based therapy across different age groups.

Tools:

Below mentioned tools/questionnaires were used to collect the data for this research study,

DASS-21- The DASS-21 is the short form of the DASS-42, a self-report scale designed to measure the negative emotional states of depression, anxiety, and stress. This scale is suitable for clinical settings to assist in diagnosis and outcome monitoring, as well as non-clinical settings as a mental health screener. The DASS is based on a dimensional rather than a categorical conception of psychological disorders, and scores emphasize the degree to which someone is experiencing symptoms rather than having diagnostic cut-off points. The DASS-21 was initially developed using a sample of responses from 504 students, taken from a larger sample of 950 first year university students. The items were subsequently checked for validity against outpatient groups including patients suffering from anxiety, depression, and other mental disorders. The DASS-21 has been extensively normed, with data used for interpretive purposes based on a sample of 1794 non-clinical adults (Henrey & Crawford,

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2005). Consistent with the DASS42, the DASS-21 has internal consistency and concurrent validity in acceptable to excellent ranges (Antony et al., 1998).

Scoring and Interpretation Scores are presented as a total score and a score for the three subscales. For each of the three subscales percentiles are computed based on a community sample (Henry & Crawford, 2005). In addition, scores for each subscale are categorized into five severity ranges: normal, mild, moderate, severe, and extremely severe. The severity labels are used to describe the full 9 range of scores in the population, so 'mild' for example means that the person is above the population mean but probably still below the typical severity of someone seeking help (i.e., it does not mean a mild level of disorder).

Each of the three DASS-21 scales contains 7 items.

- Depression: (Items 3, 5, 10, 13, 16, 17, 21)
- Anxiety: (Items 2, 4, 7, 9, 15, 19, 20)
- Stress: (Items 1, 6, 8, 11, 12, 14, 18).

The Ryff Scales of Psychological Well-Being

There are either 54 (medium form) or 84 (long form) questions on the Ryff inventory. Respondents score statements on a scale of 1 to 6, where 1 denotes significant disagreement and 6 denotes strong agreement, in the Ryff Scale of Measurement, a psychometric inventory that comes in two formats (either 54 or 84 questions). The six pillars of the Ryff Scale are self-acceptance, positive interpersonal relationships, environmental mastery, personal growth, and autonomy. Higher psychological well-being is indicated by higher overall scores.

1. **Autonomy:** High scores suggest that the responder is self-sufficient and controls their behavior without regard to social constraints.
2. **Environmental Mastery:** High scores show that the responder manages environmental factors and activities with a sense of mastery and takes advantage of opportunities.
3. **Personal Growth:** High scores show that the respondent is open to new experiences, keeps growing as a person, and acknowledges how their behavior and identity have improved over time.
4. **Positive Relationships with Others:** High scores indicate that the responder has meaningful relationships with others, which include affection, intimacy, and reciprocal empathy.
5. **Life Purpose:** High scores demonstrate the respondent's strong goal orientation and belief in the purpose of life.
6. **Self-Acceptance:** High scores indicate that the respondent feels good about himself, or he tasks revolved around mindfulness

Answer Format: 1 = strongly agree; 2 = somewhat agree; 3 = a little agree; 4 = neither agree or disagree; 5 = a little disagree; 6 = somewhat disagree; 7 = strongly disagree.

Scoring and Interpretation:

- The Autonomy subscale items are Q15, Q17, Q18.
- The Environmental Mastery subscale items are Q4, Q8, Q9.
- The Personal Growth subscale items are Q11, Q12, Q14.
- The Positive Relations with Others subscale items are Q6, Q13, Q16.
- The Purpose in Life subscale items are Q3, Q7, Q10.

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- The Self-Acceptance subscale items are Q1, Q2, and Q5.
- Q1, Q2, Q3, Q8, Q9, Q11, Q12, Q13, Q17, and Q18 should be reverse scored.
- Reverse-scored items are worded in the opposite direction of what the scale is measuring.

The formula for reverse-scoring an item is:

$((\text{Number of scale points}) + 1) - (\text{Respondent's answer})$

For example, Q1 is a 7-point scale. If a respondent answered 3 on Q1, you would re-code their answer as: $(7 + 1) - 3 = 5$.

In other words, you would enter a 5 for this respondents' answer to Q1.

To calculate subscale scores for each participant, sum respondents' answers to each subscale's items. Higher scores mean higher levels of psychological well-being.

Procedure

The intervention was scheduled for 4 sessions, one session per week. The participants were divided into 5 batches and online groups were formed for sharing the information. The questionnaires were filled in by the participants before the intervention. The material required was pre-informed. In the first session, the activities revolved around emotional awareness. The participants were asked to pick an emotion and use colours that were relatable and draw the things coming into their minds. During the second and the third session the theme revolved around bringing up negative emotions. The fourth and fifth sessions focused on relaxation, home tasks were given, and feedback was taken after every session. Once the intervention was finished, a qualitative interview was taken, and the questionnaires were again provided to the participants.

Session	Theme	Tasks
1	Emotional awareness	Emotion checklist Here are four emotions mentioned below. Pick one emotion at a time and use the colors you relate with that particular emotion and draw whatever comes to your mind You can write your thoughts and insights (Example Jealousy-purple, brown) The 4 emotions are • HAPPINESS, SADNESS, • FEAR • SURPRISE
2	Bringing up Negative Emotions	Creative writing We will write our good and bad memories on a piece of paper cardboard. We will pin good memories so that we can look at them and feel good. We will cover negative memories with thread/wool in order to let go or bury them.
3	Relaxation	MANDALA – Derived from Sanskrit meaning circles. It is a therapeutic that helps in sustained attention and relaxation. MIGHTY CREATURE - Making a creature from your name, it's a fun activity which will make people explore their creative side.
4	Relaxation	THE DATE How do you treat yourselves? Explore which individuals will engage in luxuries such as buying flowers for oneself for no reason, finding time in the day for a bubble bath reading a good book and/or cooking oneself a healthy and delicious meal

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RESULTS

Demographic Details

Research was carried out by obtaining data collection from the target sample which included school children who are suffering from mental health issues. The following analysis is offered as per the data collected.

Table no.1: Shows the age distribution of the sample

AGE	Below 12 yrs	12-18 yrs	Total
Frequency	31	19	50

Table No.2: Shows the mean scores, SD and t value obtained by participants on the ADSS scale

Subscales		Mean	SD	T value
Anxiety	Pre Art-Therapy	14.8	4.3	3.77**
	Post Art Therapy	11.6	3.9	
Depression	Pre Art-Therapy	11.8	3.1	4.66**
	Post Art Therapy	9.6	2.6	
Stress	Pre Art-Therapy	9.7	2.6	1.98
	Post Art Therapy	8.3	2.02	

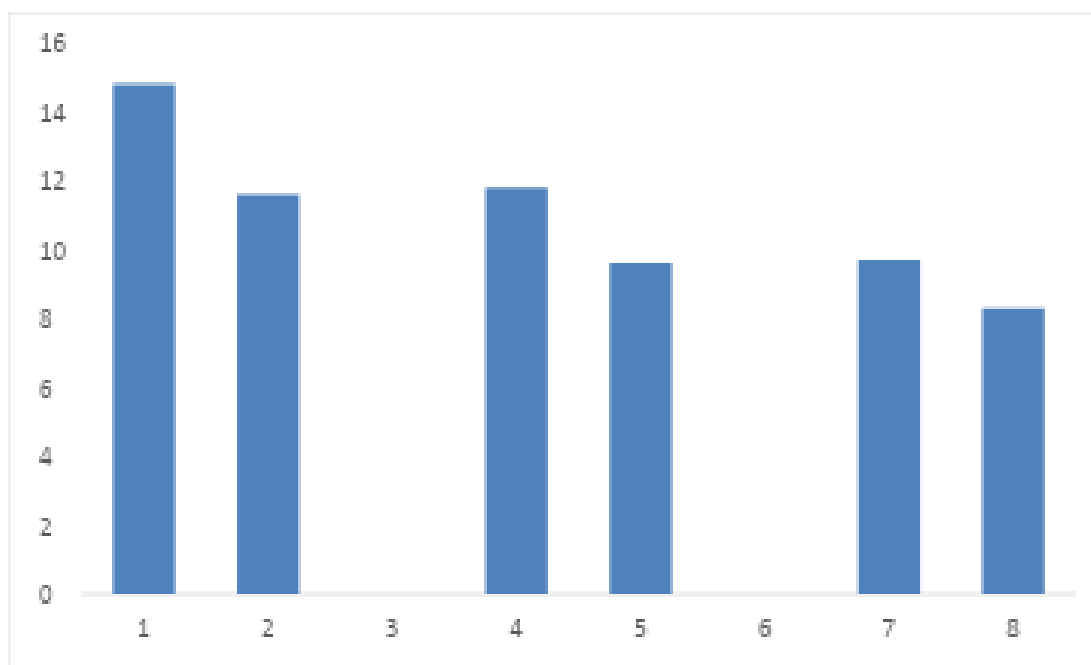


Figure No.1: Shows the mean scores obtained by participants on the DASS scale

Table No. 3 Shows the mean scores obtained by participants on the Carroll ryff scale of psychological well being

	Mean	SD	T value
Pre Art-Therapy	24.5	8.66	3.98**
Post Art Therapy	28.6	9.22	

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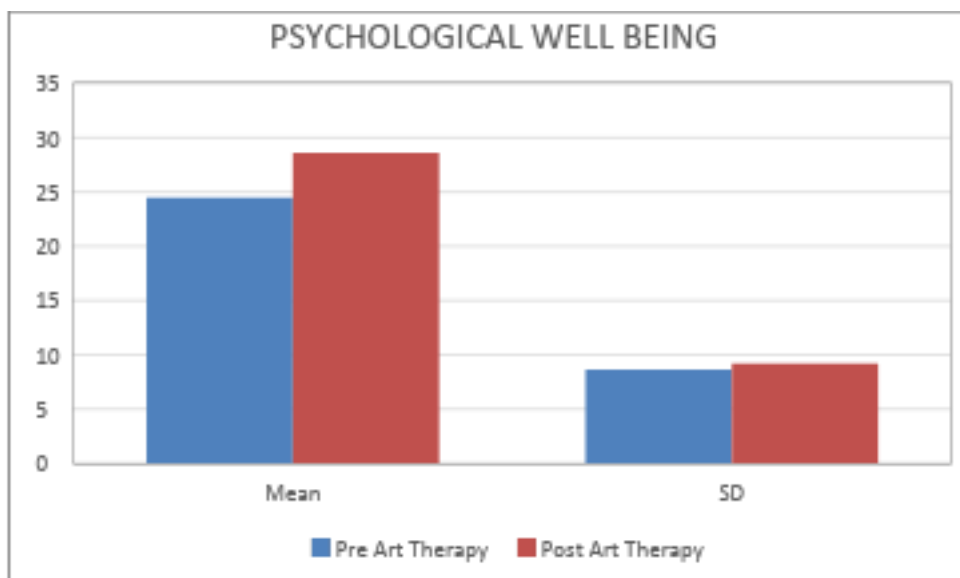


Figure No.2 Shows the mean scores obtained by participants on the Carol Ryff scale of Psychological Wellbeing

In the first session, one of the tasks was an emotional checklist where the participants were given 4 emotions, and they were asked to pick the colours and draw whatever they can relate with those emotions. The emotions were happiness, sadness, fear, and surprise.

The second session focused on bringing out negative emotions and managing them. The tasks made them recall the incidents which made them once feel lost, crumpled, or disappointed. Later in the session, they were made to recall the good and the bad memories. "I feel nostalgic, reminiscing some of my good and bad memories." "I wasn't feeling good today, this helped a bit.

Session 3 focused on relaxation. One of the activities done was mandala which is therapeutic and helps in sustained attention and flow. "Honestly, this one was the most therapeutic session. Mandala has always brought content in my chaotic and dark life.", "Both the activities were very interesting. I particularly found the mandala very relaxing. Mandala art one is my favorite session", "The activities I found the best were in sessions 1 & 4. Both left a very happy and positive impact on my mind. These sessions make me feel very calm and peaceful."

Overall, "Life is a mixture and series of types of colours on blank sheets of paper, each signifying a different story. The sessions were smooth and calming. After each session. I realized there is more to me than I know. It also brought out my hidden artist and how much I loved drawing and painting. It made me realize it is necessary to feel every emotion. Thank you for these sessions. loved the way these sessions brought out my creativity and fuelled my emotions. These sessions made me focus on my emotions, understand them, and make peace with them. A great way to deal with feelings, "For the first time, I realized how much healing power colors have. I took these sessions thinking it would be a formality but as participated...I realized that the connection we have with colors and the pain...is universal...and there are many in this suffering and as they cope up so do we. Thank you for letting me participate

CONCLUSION

The purpose of the study was to see the impact of group art therapy on anxiety, depression, stress and psychological wellbeing of School children. The sample size of 50 people of age range 8-18 years belonging to urban areas was taken. A 4-week intervention program was designed. The questionnaires were administered pre- and post-intervention. The significance of the mean was calculated and the result showed that the anxiety, depression and stress of the participants decreased, the psychological wellbeing of the participants increased, and the negative affect of the participants decreased post-intervention.

Limitations

- The qualitative analysis could not be done
- The sample size was small.
- Controlling extraneous variables like peaceful environment, proper spacing, and privacy, etc. was difficult.

Future Suggestions

- This intervention could be taken on larger sample size.
- The art therapy techniques used to be intertwined with other techniques like DBT, yoga, dance therapy, etc.
- The art therapy techniques could be used on other age groups as well.

Implications

- This study shows how art therapy techniques are useful in reducing anxiety and the negative affect of the people and increasing the positive affect.
- The data shows that the techniques are very helpful in helping people recognize and work on their emotions in times of distress.
- Interventions like these could be used more frequently on School children as it will help them target their negative emotions in a very easy and interesting way.

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Conflict of Interest

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