

# **MORE THAN WORDS**

**Vani Joshi -18**

# MORE THAN WORDS

Role of Arts Based Therapy in enhancing Self-Image, Confidence, and Social Adjustment in adults with disabilities by empowering their Self-Expression

*Vani Joshi*

*(Study conducted at Snehadhara Foundation, J.P.Nagar)*



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## 1 ABSTRACT

The research studied the role of Arts Based Therapy (ABT) in expanding the range of self-expression of clients and its effect on their self-image, confidence and social-emotional adjustment. The study was conducted on a group of 6 adults (5 females, 1 male) with developmental delays between the age of 20 and 37 years. The data for the study was collected using ABT Tools, Observation formats (Rating Scales – filled by other observers) and Video Recording of sessions. The results show a significant improvement in the assessed domains with an average growth of 15.6% for the group. There have been obvious shifts in the clients' abilities to express themselves (verbally or non-verbally). The method of the arts has helped the clients share personal stories and find integration and experience a sense of belongingness with the group.

From the results it can be inferred that Arts Based Therapy can be used as an effective intervention strategy to help adults with developmental delays gain confidence and have an enhanced self-image, resulting in better social-emotional adjustment with their environment. It has also opened up interesting possibilities of non-verbal art forms (mime, visual arts, dance) providing an impetus to narrative capabilities.



## 2 INTRODUCTION

### 2.1 THE LARGER PROBLEM

In India, persons with disabilities constitute 2.13% of the total population (Census 2001). This figure, according to the National Sample Survey Organization (NSSO) is estimated at 1.8% of the population. This included persons with visual, hearing, speech, locomotor, and mental disabilities. However, experts working in the field believe that the prevalence of mental disability is much higher than documented. (Ganesh KS, 2008); (Chavan, 2014). The provision of education and employment for persons with mental retardation as a right, has been recognised only recently after the enactment of the Persons with Disabilities Act (PWD), 1995.

Down syndrome (DS) or Trisomy-21 is one of the most common genetic birth disorders. It is associated with mild to moderate learning disabilities and co-morbidities like heart defects, leukaemia, Alzheimer's disease, gastro-intestinal problems. Life expectancy for individuals with Down syndrome has dramatically increased over the past few decades as medical care and social inclusion have improved. (Down syndrome Federation of India)

Systematic research into prevalence and determinants of disability has been scanty from India although it is an important public health problem. Mild or moderate forms of disability often go unrecognised by the surveyors (Kumar SG, 2009). With the improvement in healthcare facilities and increase in overall life expectancy, the problem assumes a greater dimension in terms of education, employment opportunities, rehabilitation, and geriatric care for persons with disabilities.

The population type selected for the ABT Action Research is a group of adults (20-37 years). It is a diverse group with respect to abilities and challenges. It includes four adults with developmental delay/Mental Retardation; and two adults with Downs Syndrome with impacted learning, communication, and social skills. The participants are able to express their needs, understand verbal instructions and can do small tasks assigned to them. There is fair degree of independence in activities of daily living. The group has issues with Self-awareness and mindfulness, which affects their ability to have meaningful and lasting relationships.

All of them have attended school during early learning years but discontinued for various reasons. Their caregivers are aging and, in some cases, infirm. Thus, there is a greater need to build functional life skills to help them survive in a rehabilitation set-up. By building on existing skills, the group can be encouraged to assume greater roles and responsibilities which could well be extended into their personal lives.

## 2.2 LITERATURE REVIEW OF CREATIVE ARTS THERAPIES

Arts Based Therapies involve the use of multiple art forms to accomplish individualised therapeutic goals. (Zubin Balsara, 2017) The art forms vary from music and visual arts to movement, games and drama; providing an experiential paradigm for learning. It is a form of **expressive therapy**. The expressive therapies are defined in this context as the use of art, music, dance/movement, drama, poetry/creative writing, play, and sand-tray within the context of psychotherapy, counselling, rehabilitation, or health care (Malchiodi, 2005). Enabling a deep engagement with self and the environment, Expressive Art Therapies help bring about internal “shift” within the clients, helping them progress towards the desired therapeutic outcomes. While the Therapeutic Goals (TG) guides the practitioners in formulating the objectives, the focus is equally on the “process” or “flow” which helps bring about the healing. While expressive therapies can be considered a unique domain of psychotherapy and counselling, within this domain exists a set of individual approaches namely Music, Creative Dance and Movement, Drama, Visual Arts (or Art Therapy), Poetry or Creative Writing.

“Music is the language of the spirit. It opens the secret of life bringing peace, abolishing strife” – Khalil Gibran. “It is in the womb that the baby will have the first contact with the elements of the music. The heartbeats, first information confirming the existence of life on the tiny being that was generated, find its analogy in the pulse and rhythm of music. The heartbeats also inform the continuity of life during the lifetime” (Vargas, 2015). **Music Therapy (Rhythm and Melody)** as an element of Expressive Therapy, helps improve the clients’ well-being in various domains like cognitive functioning, motor skills, emotional development, social skills, mindfulness, and quality of life. Musical experiences (active or receptive) such as singing, playing instruments/drumming, song writing, movement to music, listening, meditating and creating encourage expression and help clients gain meaning and clarity. Music in therapy draws a lot from improvisations – “spontaneous, social, creative nonverbal process unfolding in real time” (MacDonald RA, 2012) which have specific benefits for particular populations including the amelioration of neurological damage, improvements in mental health conditions, reductions in stress and anxiety, and improved communication and joint attention behaviours in children with ASD (Wilson, 2014). Music Therapy, thus, offers possibilities for clients to communicate and be heard, and empowering them to feel an existence beyond their challenges.

**Dance and Movement Therapy (DMT)** involves the therapeutic use of *movement* and dance to support intellectual, emotional, and motor functions of the body (Ekman SL, 1998). It is a form of expressive therapy that simultaneously works on mind and body (cognition, motor coordination, emotion, mindfulness, body and self-awareness, physical exercise/workout). DMT aims to engage the patients in physical and verbal exploration of their experiences generated in movement based interaction. Whether carried out individually, or in groups, DMT can be applied to various populations ranging from children to the elderly, and from people with severe psychiatric problems to high-functioning people, who may be interested in strengthening their resources and self-development. By becoming concretely involved with movement in the

here and now, it enables the clients to develop body awareness and mindfulness, and encourage verbal reflection of the movement experiences to connect with the emotional core of their existence (Pylvänäinen Päivi, 2015).

Also in conjunction with movement, there is increasing use of drama as a therapeutic intervention. “**Drama Therapy** is involvement in Drama with a healing intention” by using “the potential of drama to reflect and transform life experiences to enable clients to experience and work through problems they are encountering or to maintain a client’s well-being and health” (Jones, 1996). It uses elements of story-telling, narrative play, puppetry, games, and role-playing – the components of dramatic play, which, according to Eriksson is “auto-therapeutic” in nature (Emunah, 1994). It can help the participants observe positive changes in their behaviour, mental states, self-awareness and interpersonal relationships.

The use of **Visual Arts** provides an outlet for non-verbal expression through the creative process of making art. Art therapy utilises drawing, painting, sculpture, photography and other forms of visual art expression (Malchiodi, 2005). The creative process involved in expressing one’s self artistically can help people to resolve issues as well as develop and manage their behaviours and feelings, reduce stress, and improve self-esteem and awareness. It can be very useful for people who find it difficult to verbalise their feelings or may be non-verbal. Being practical and using physical objects, such as paintbrushes and paper, it often helps people to feel more connected to the world around them. Through direct engagement and active experience of art-making, different goals can be addressed like “more emotional awareness; constructive emotion regulation; a more stable self-image; contact with the self and others; psychological overview and a feeling of control; integration of emotions/feelings; and possible insight (into self and others) and comprehension” (Suzanne Haeyen, 2015)

There is a growing body of research about the benefits of using multiple art forms and their role in fostering overall development of persons with special needs. Participating in creative activities has affected increased self-esteem, sense of achievement, empowerment, social skills and social engagement (Leyre Zarobe, 2017). Therefore, for the identified client group (Adults with Special Needs), the arts based interventions can open up a world of possibilities for creative ways of healing and learning.

## 2.3 HYPOTHESIS

ABT can provide a holistic approach to empower the clients by enhancing their Narrative Capabilities and, thereby build positive Self-Image (confidence, self-esteem), and promote emotional adjustment and well-being.



### 3 METHODS

This section details the “process” of the ABT Project (from the Pilot-study till the completion of Action Research). The Selection Criteria for the client group, Logistics, Data Sources and data-collection protocols, and the Methods used (session plans, interventions, data analysis methods) have been explained.

#### 3.1 ELIGIBILITY CRITERIA FOR CLIENT GROUP

All the selected participants are from the adults group (Group 1) at Snehadharara Foundation. They have all gone to school during early learning years but have discontinued for various reasons. They are attending the full day program at the centre. They have been selected on the basis of their independence in activities of daily living and their ability to take up small roles and tasks independently. Also, the selected participants are verbal and have varying levels of expressive language.

Demographics of the group:

AGE	Adults (20-37 years)
GENDER	F(5), M(1)
BACKGROUND	All are from middle class homes

#### 3.2 LOGISTICS

SETTING	Group of Adults with various challenges, of which, the client group is a sub-set
LOCATION	Snehadhara Foundation (Direct Care Centre), J.P.Nagar, Bangalore
START DATE	11 <sup>th</sup> September, 2017
END DATE	15 <sup>th</sup> January, 2018
SCHEDULE FOR ABT SESSIONS	1 hour session (11.15am -12.15pm) Monday, Wednesday, Friday

### 3.3 DATA SOURCES AND DATA COLLECTION PROTOCOLS

Data collection protocols of Observation Formats along with Parent Questionnaires and ABT tools were used. Inputs from the facilitator and parents were analysed at different points in the action research time-line (pre- and post-tests), along with pictures and videos taken at specific intervals during the Action Research Project.

#### Observation Formats

These are rating scales developed for specific Therapeutic Domains and Goals of the clients. These will be administered twice during the action research as pre and post-tests. These would be filled in by the ABT facilitator, another teacher working with the client group or a neutral observer, and mean values will be considered for collating and interpreting results. Parent/Caregiver Questionnaires will be administered twice during the period and studied as pre and post-test comparisons.

Name of the test	Filled by	Frequency	Administration schedule
Language and Communication Skills	Facilitator, Other teacher	Twice	First week of October and Mid-December
Social-Emotional Skills	Facilitator, Other teacher	Twice	First week of October and Mid-December
Personal Development Inventory	Facilitator, Parent/Caregiver	Twice	Mid-October and Mid-January
Parent/Caregiver Questionnaire	Parent/Caregiver	Twice	Mid-October and Mid-January

#### Appendix A

A1: Language and communication skills

A2: Social-Emotional skills

A3: Personal Development inventory

A4: Parent Questionnaire

#### ABT Assessment tools (to be filled by the facilitator)

Name of the Test	Frequency	Administration schedule
Narrative Capability Development	Thrice	First week of October, Mid November, First week of January.
E-P-R Based	Thrice	First week of October, Mid November, First week of January.
Observations during Drumming	Thrice	First week of October, Mid November, First week of December.
Comparison of Drawings and Paintings	Thrice	First week of October, Mid November, First week of January.

#### Appendix B

B1: Narrative Capability Development Scale

B2: Embodiment-Projection-Role

B3: Drumming observations

#### Video Recording Plan

**PURPOSE:** To capture the journey of the ABT Action Research through various artistic skills. It is also for self-evaluation and assessment of the facilitator. The video recordings will be an important Observation Tool to capture the client group's movement along the Therapeutic Domains.

**CAMERA USED:** iPad camera (will also capture sound) – mounted on a stand

**RECORDING DURATION:** 1 hour (record entire session)

**FREQUENCY:** Every 7<sup>th</sup> session (maximum of five sessions)

**RECORDING FOCUS:** Group sessions focusing on different artistic skills

**EDITING SOFTWARE:** iMovie for iOS, Windows Movie-Maker (Will take professional help/services for video editing the session recordings into a single movie)

### 3.4 METHODS USED

Over the course of the last 7 months (the pilot-project and the action research phase), the focus of the study has been on using the various art forms to enable the client group to push their boundaries and build confidence as they move towards achieving their individual therapeutic goals within a group setting. The role of the arts as a therapeutic intervention strategy becomes more pronounced as it is a non-threatening means (compared to conventional methods of pedagogy) to achieve milestones hitherto unreachable.

A Pilot-Project of 15 sessions was conducted during July-August 2017. During this phase, the participants were marked on the Rating Scale for special populations (Children with special needs and Adults in De-Addiction centres) designed by WCCL. The scores on the various domains were analysed to arrive at individual and group goals for therapeutic intervention. For the group in study, the main areas that emerged were – Mindfulness, Self-Awareness, Group Interaction, and Communication (Expressive and Narrative Capabilities).

The Session Record Sheet (SRS) format was followed to document each session. This served to document the progress of each session and also to serve as a feedback tool (for facilitator) to modify subsequent session plans. (*Refer Appendix C – SRS Summary*)

The client group chosen for the study was exposed to various art forms (visual arts, body and movement, rhythm, voice, theatre, games and exercises – and various combinations thereof). The group responded well to these sessions which were used to assess their progress in areas of Narrative and Expressive Capability, Group Interaction, Self-Image, Understanding Emotions, and Working Memory.

**Visual Arts:** A variety of media were used namely, paints, crayons, sketch pens, coloured tissue papers, clay. These were presented to the client group at different intervals during the study period. The group showed a fair amount of interest in almost all visual art sessions. While the dominant styles were lines and blocks in wet medium, the medium of crayons and clay brought about more shapes and forms (with better narrative expression about their creations).

**Body and Movement:** The group participated in movement sessions but often needed to be nudged to get up and move. For some of the members with chronic aches and pains initiation was a challenge. Once in the session, they seemed to enjoy it. The movements were stiff except for two of the participants who were always ready to explore and stretch the capabilities of their bodies. These sessions consisted of dance, embodiment, mirroring (in pairs), and movement to music. The movement sessions did add a lot of fun to the group with participants encouraging each other.

**Rhythm:** The sessions on rhythm consisted of drumming, body percussion, embodiment of pulse being played, and clapping the meter of a song/rhyme. The drumming sessions also served as a platform to explore it as a means of non-verbal expression (e.g. drumming an emotion). While rhythm is innate to most participants, its expression on djembes, frame drums, through body

tapping brought interesting observations regarding every individual client. While some were able to successfully drum and sustain the pulse, others were more comfortable embodying it through body movements and/or voice.

Voice: This was by far the most enjoyable art form. Music, especially melody, was most significant in every session whether it was vocal warm ups during communion or a game (like Antakshari) or a chant or song during closure. Voice sessions typically consisted of breath work, vocal warm ups, singing, chanting. There was also creation of songs in gibberish, simple lyrics, expressing oneself through a song, singing with different emotional undertones (which assumed a very theatrical character) and was much enjoyed by the group.

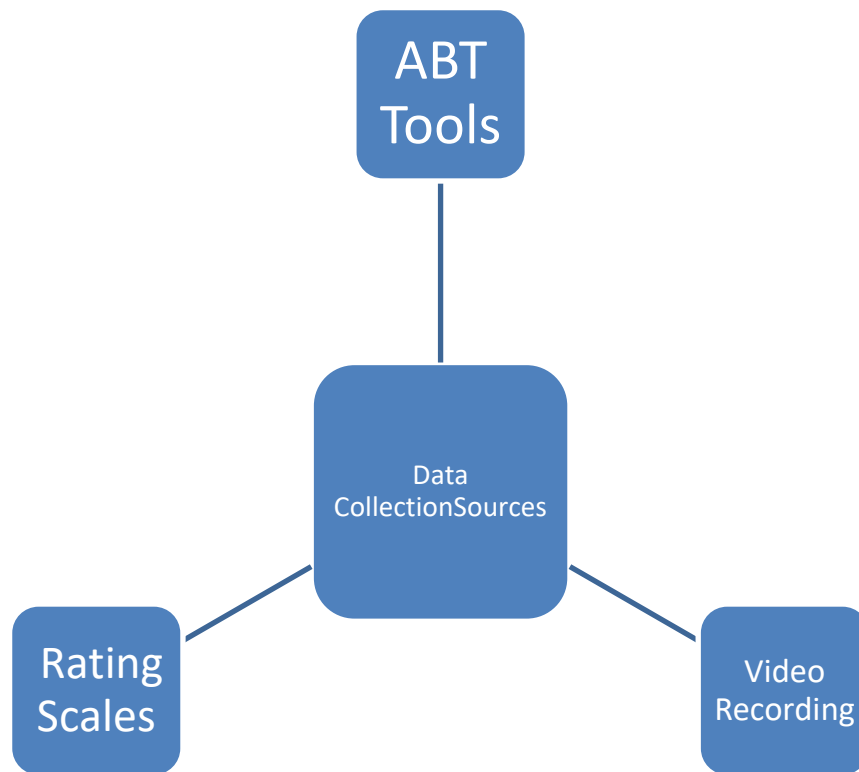
Theatre: Sessions on theatre consisted of dressing up (using mirror and props), role plays, creating simple stories and enactment by the group. It also helped to push the participants into trying to express verbally. They enjoyed exploring the variety of props presented. It proved a safe way to work on self-awareness and narrative capability.

Games and Exercises: These sessions consisted of group games (using ball, ropes, passing the parcel, bowling etc.) which helped engage the participants as a group. The exercise sessions were made interactive and collaborative where each participant would suggest a movement which would be noted down to create an exercise drill for the session. In addition, this was combined with a song being played to make it into dance aerobics. Games like Limbo Dance and going under a tunnel helped improve agility while adding a lot of fun to the activity. Team games like bowling and dumb-charades helped bring out the sense of team spirit with participants cheering for each other.

Data Analysis Methods: The therapeutic goals for the group were worked upon using various artistic skills and scored on the ABT tools (Narrative Capability Development Scale, Drumming Observation Format, E-P-R based rating scale) created specifically for the action research and filled by the ABT facilitator.

- Additionally, rating scales for “Language and Communication Skills” and “Social-Emotional Skills” were developed and filled by the ABT facilitator, as well as another teacher working with the group and average values considered.
- There were Observation Formats (Rating Scales) filled by the parents/caregivers of the individual clients covering areas of language and communication, social-emotional development, activities of daily living and self-awareness.
- Video recordings of the sessions were taken periodically.

- This formed the triangulation of data collection/feedback for the Action-Research phase.





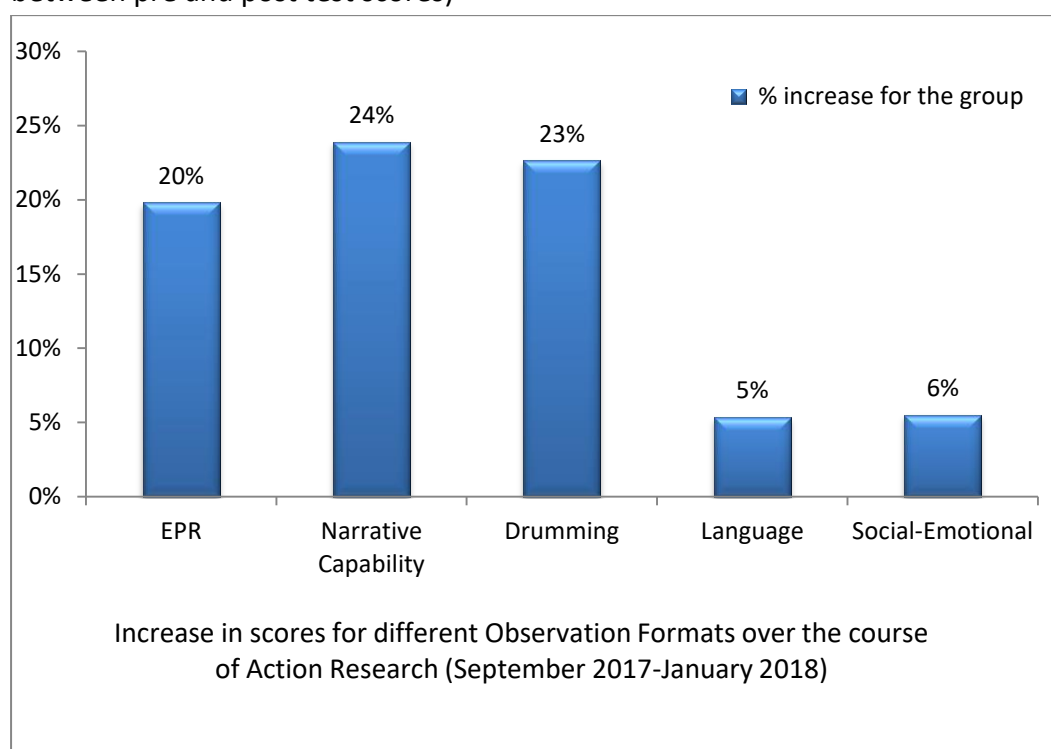
## 4 RESULTS

### 4.1 RESULTS SUMMARY

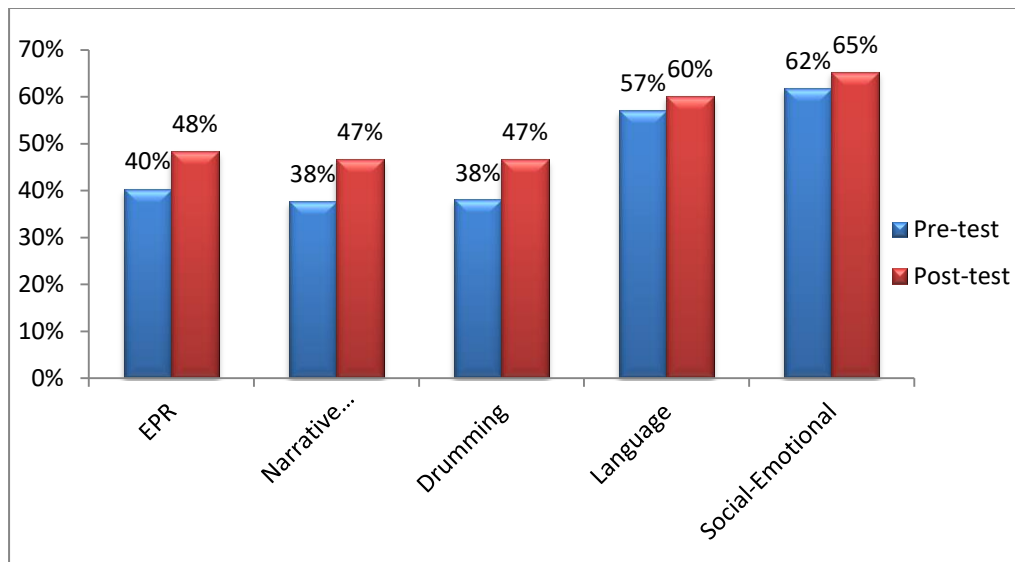
Arts Based intervention for the client group over the course of the project and analysis of the data collected has shown the following results:

- There has been an overall upward trend in the scores indicating a positive shift in the various capabilities and therapeutic domains.
- The average increase in scores across different observation tools and rating scales was 15.6% with maximum increase seen in scores on the Narrative Capability Development scale (24%). The increase in scores on the ABT tools has also corresponded with gains in Language and communication as well as social-emotional skills.

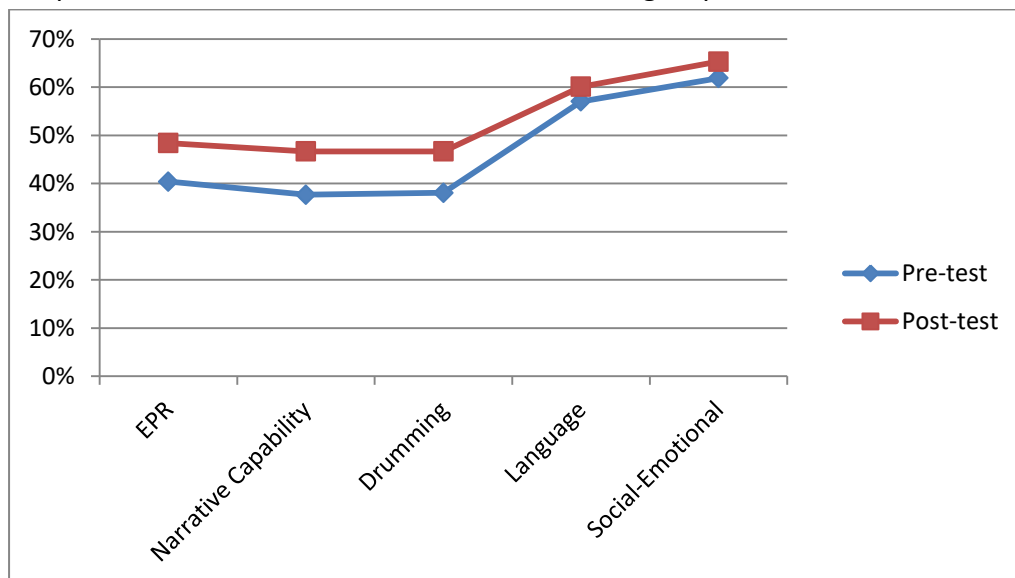
Graph -1 Increase in average group scores for different observation formats (difference between pre and post test scores)



- The following data represents the mean score for the group for a particular observation format/ABT tool. It is taken as a percentage of the maximum score. (The pre and post-test values thus obtained are shown as clustered bars in Graph-2 and as a line graph to show the shift in scores for the group, Graph-3.)
- Graph-2: Comparison of Pre and Post-test scores on observation formats created for action research

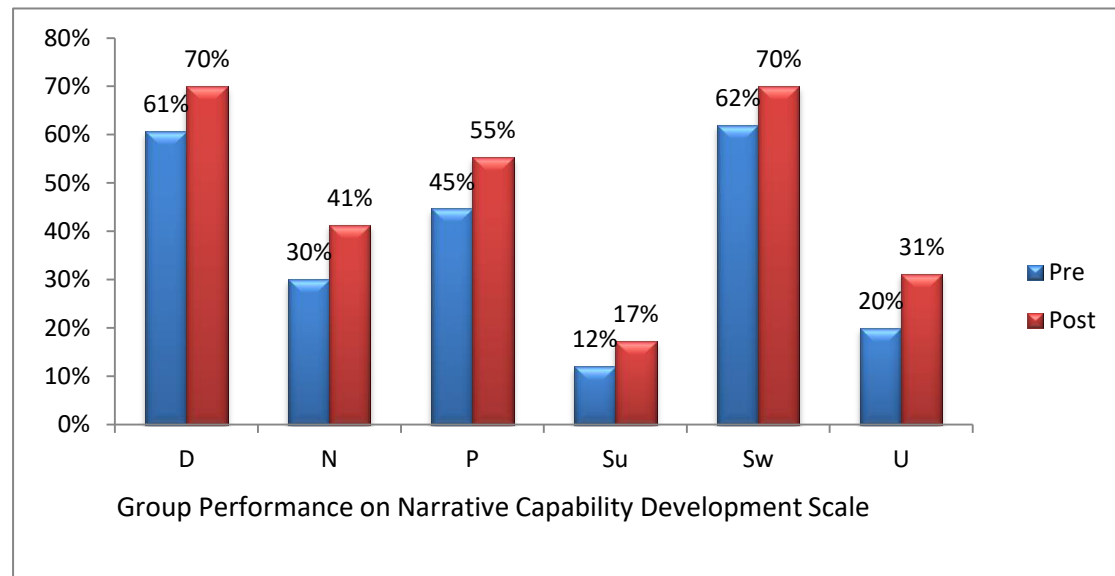


- Graph-3: Shift in Pre and Post test scores for the group as a whole

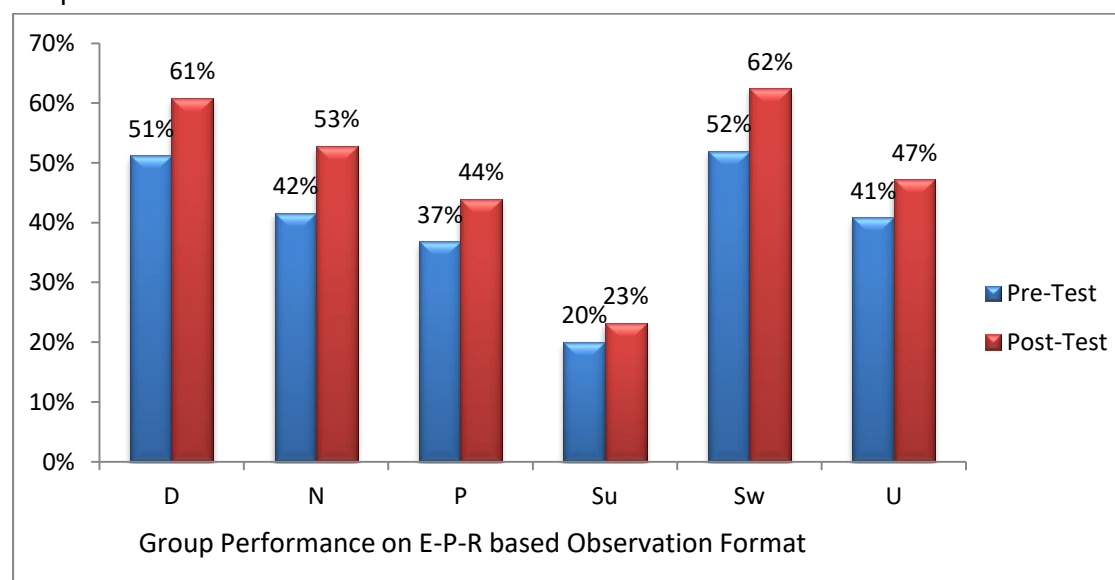


- The group graphs for ABT tools have shown a significant upward shift which is attributable to spontaneity of participation and familiarity with the artistic skills. However, these are also important markers for internal shifts in terms of confidence, openness to learn, group dynamics, and self-expression.

Graph-4

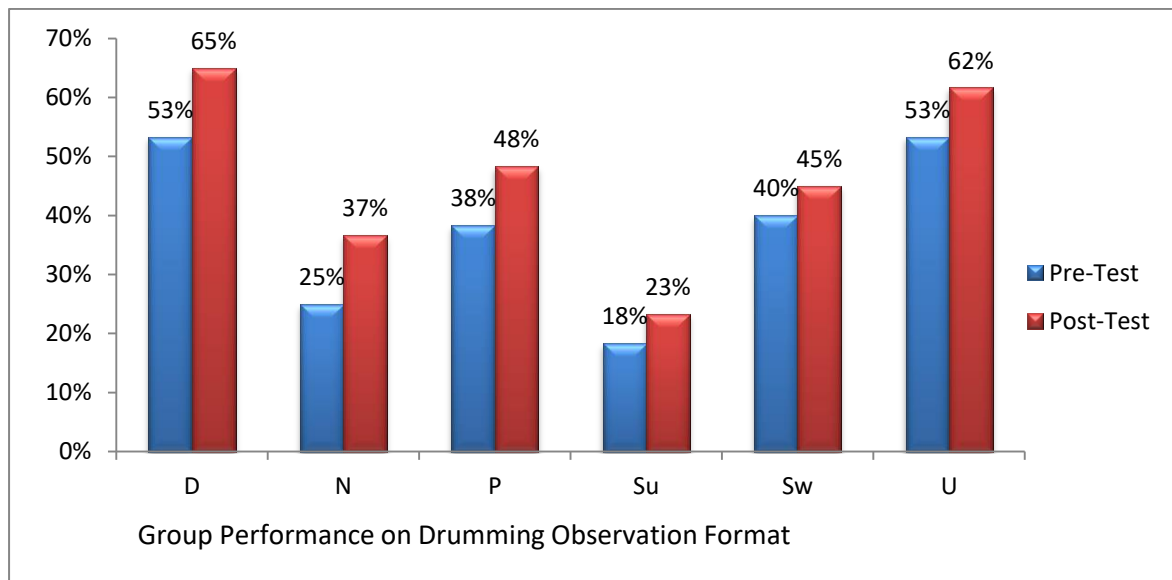


- Performance of the client group on the Narrative Capability based ABT tool has pointed towards improvements in expression, self-awareness, group interactions, and mindfulness.
- Graph-5



- The group as a whole has shown a significant shift in terms of expression using various art forms (Visual, movement and performance based) as seen in the E-P-R based ABT tool.

- Graph-6



- Drumming has enabled the group to make progress in areas of mindfulness, group interaction, and non-verbal expression. The positive change in test scores is indicative of this shift.

## 4.2 RESULTS DETAILED

### CLIENT 1: D

#### Family Background:

D (F, 23) is an adult with Down's syndrome. She lives with her family that includes her father, mother, brother, and sister in law. She has been coming to Snehadhara Foundation since 2016 and attends the full day programme at the centre.

#### Academic and rehab teacher's input:

D can read and write and has cleared the 10<sup>th</sup> standard NIOS exam for Home science, English, and Computers. She enjoys music and dancing and can express herself through visual arts. She likes music and dancing. Her strengths are swimming, cooking, taking initiative and leadership. There is, however, a great need to have spotlight on oneself which shows in her narrative. She has difficulty in sustaining attention during language intensive activities and is unable to retain "relevant" information. She also has issues with binge eating which result in upset digestion and also impacts her self-esteem.

#### Medical background:

In addition to being diagnosed with Down's syndrome, D has hypothyroidism and is on medication for the same.

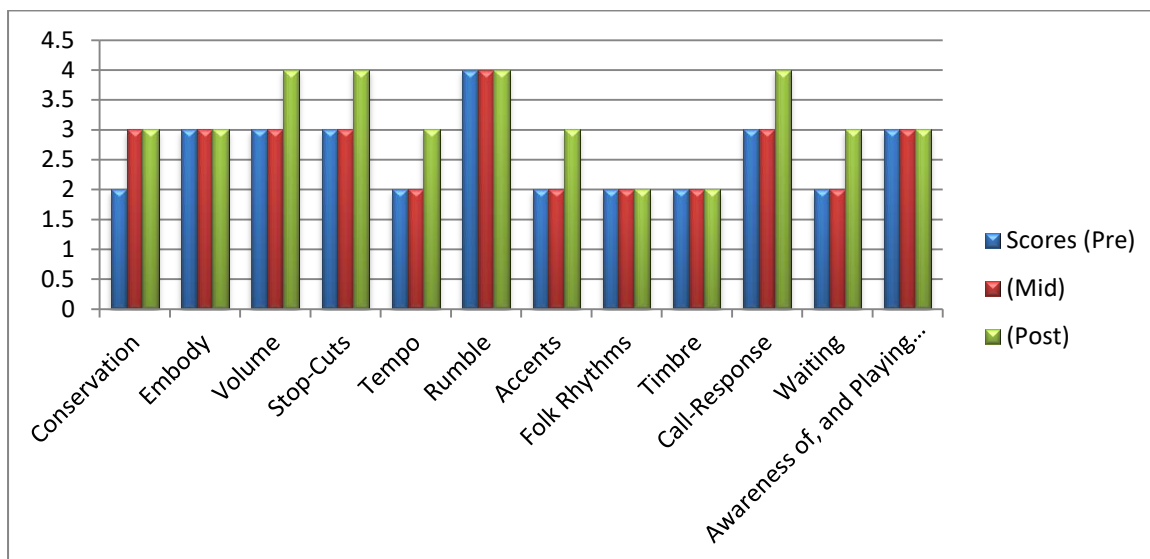
#### Creation:

D's main area of work would be in the Self-Awareness and Mindfulness domains. In Self-Awareness, the focus would be to bring about a change from her attention seeking narratives to having a stronger self-image – **develop self-confidence and esteem, and understanding (and coping with) destructive emotions**. Having the cognition and motor abilities, she could take the role of a buddy-mentor for another child or adult with challenges (provided she can acknowledge and put their needs before her own). In the Mindfulness domain, working towards **impulse control and enhancing working memory** would be important areas of intervention.

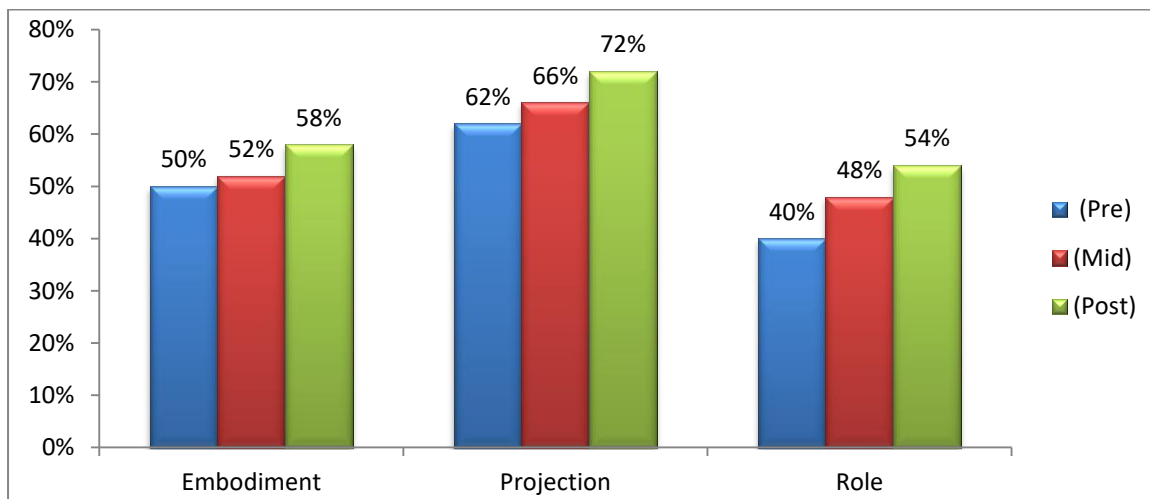
## Results:

D responded well to almost all art based interventions. She showed a positive upward shift in the scores on all observation formats. These shifts corresponded with other ratings in the triangulation (filled by parents, ABT facilitator, and rating by other teacher).

Graph-7: Comparison of scores for Drumming Observation Format (Taken as mean score on a maximum score of 5)

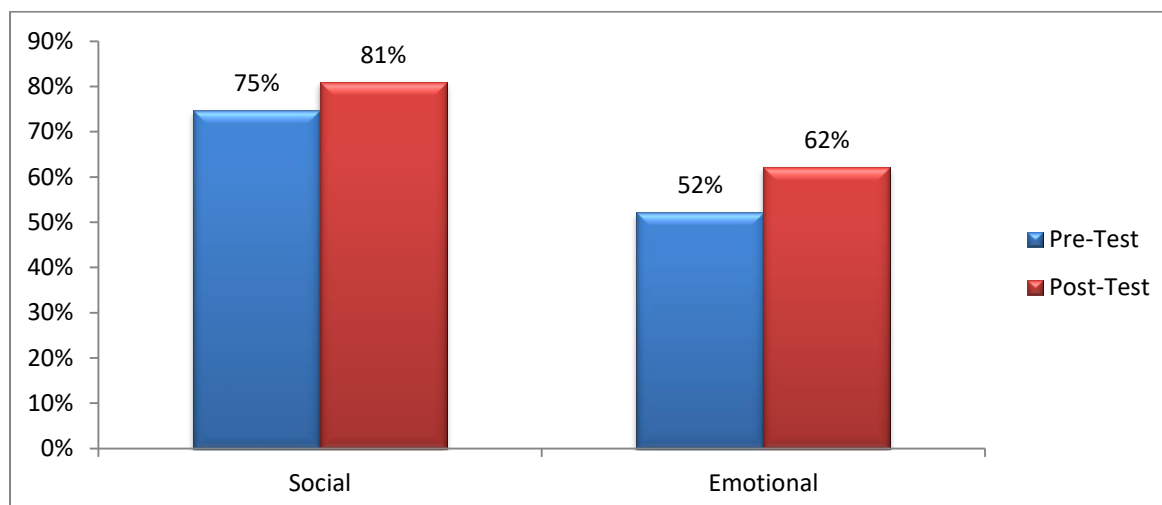


Graph-8: Comparison of scores of E-P-R Observation Format (actual scores as percentage of maximum score)

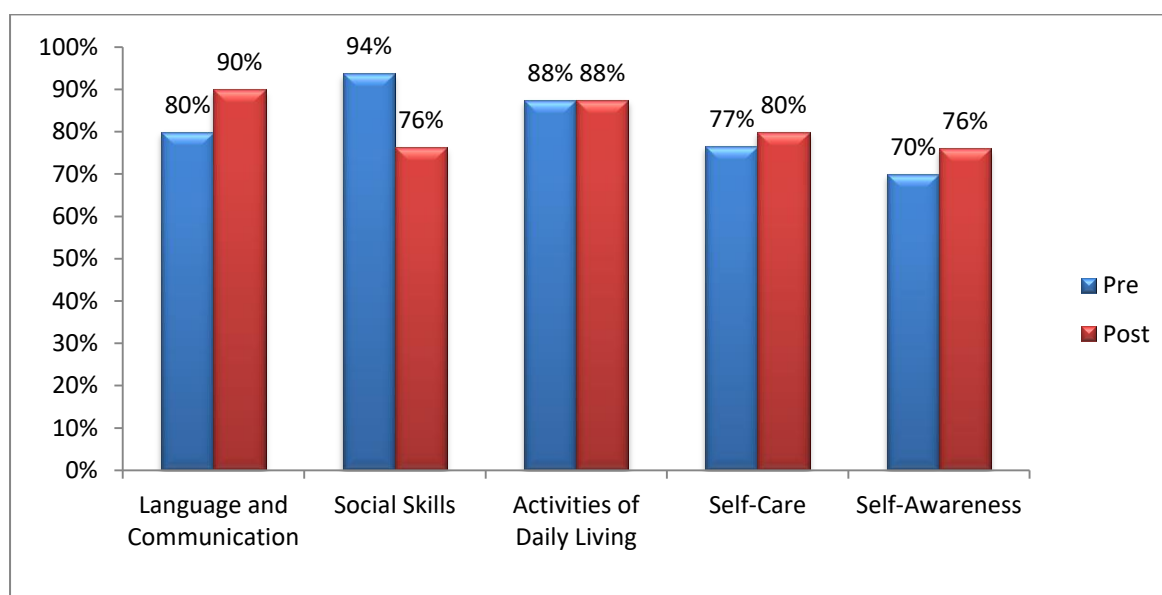




Graph-9: Pre and Post test scores for Social-Emotional skills (actual scores as percentage of maximum score)



Graph-10: Pre and Post test scores for Parent questionnaires (actual scores as percentage of maximum score)



## Interpretation

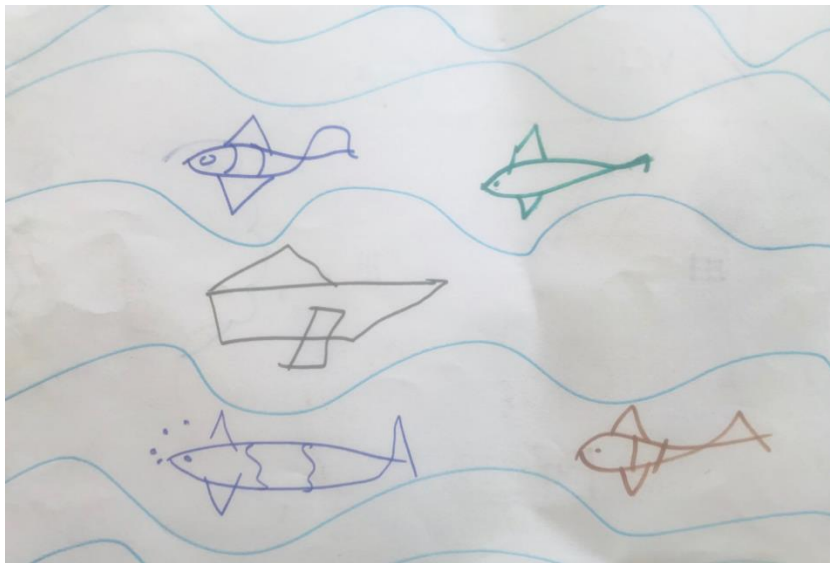
- The changes in drumming observations correlate with group interactions and social-emotional shifts. These are not just indicative of familiarity and experience with the artistic skill but also the therapeutic needs being addressed through the medium of the arts (mindfulness, impulse control, self-awareness, building empathy).
- The client, through the medium of movement, dance, visual arts and theatre, was able to achieve progress in areas of self-esteem, confidence, and emotions. (E-P-R scores)
- The client has shown improvement in in the social and emotional domains. The scores include ratings by both – the facilitator and another observer (teacher working with the same client group). This has correlated with the increase in scores on ABT tools.

- The results for parent questionnaires also show positive shifts in areas of self-development. As per the parent ratings, there has been a decline in the social skills which is a point of difference from the observed classroom performance and could have a contextual basis (space, peer-group, defined/perceived roles etc.)
- She has shown observable qualitative changes in her personal narratives and ability to empathise, taking turns, and improved working memory.

### **Comparisons of Artworks**

D has a vivid imagination and fine motor dexterity which helps her work easily with a variety of visual art media. Her comfort with language helps her express personal narratives depicted in her art. In the first image she has created a clay sculpture with many details (Goddess Durga, girl, burger, laddoos, fighting). In the second Image she has created a “safe space” where she would like to rest and relax. The third image is a continuation of the second. She described it as “going on a boat ride watching the fishes swim beside her”.





## CLIENT 2: N

N attends the full day program at Snehadhara Foundation. She joined as an employee (support staff) but is also receiving intervention as part of the adult group (GROUP-1).

### Family background:

N is married and lives with her family. She has two sons.

### Academic and rehab inputs:

N attended school till 4th grade. She cannot read or write. She is able to retrieve and recall information during a session but tends to forget once the session is over. She is independent with activities of daily living and also helps around in the school.

N expresses herself spontaneously through visual art and shows very high level of engagement with the media presented to her. It makes her calm and focused. She tends to tune out during "language heavy" sessions. She is verbal and speaks in Kannada (short sentences or phrases) but can follow instructions in English as well.

### Medical background:

N has episodes of seizures for which she is on medication. There is no available diagnosis or medical record for N. She has social-emotional and cognitive challenges. There are issues with verbal communication (sequencing of events). She is often lethargic and has mood swings.

### Creation:

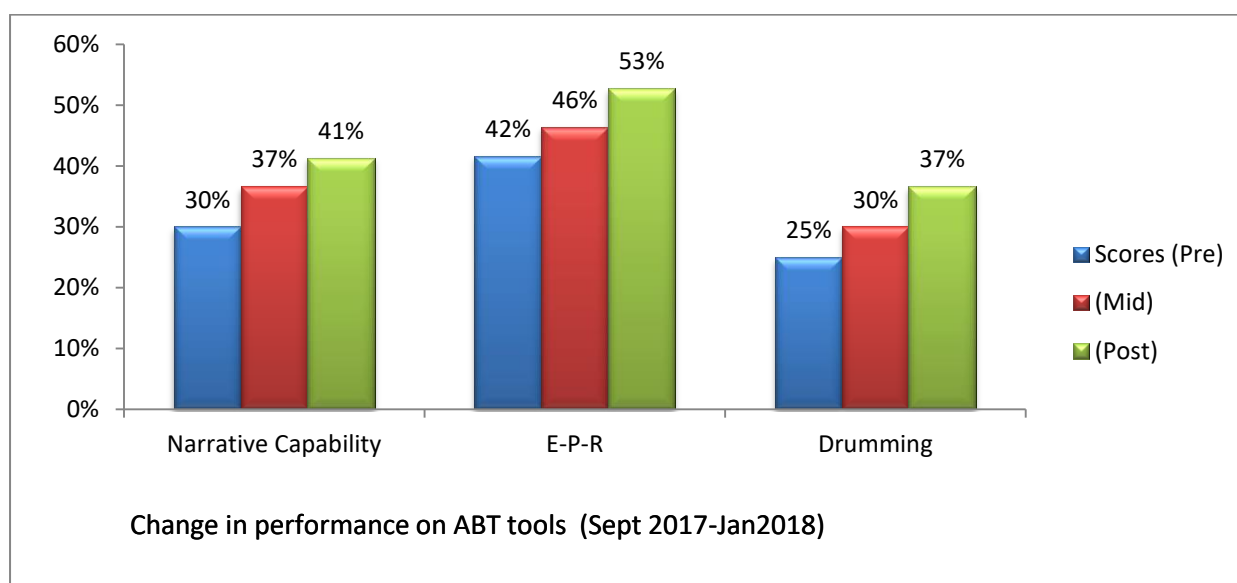
The main focus for N is **social skills/group interaction** - holding back gratification until later, speaking appropriately, and connecting with her group and her buddy. **Self-Awareness (understanding destructive emotions)** is another area where interventions might help. This could be facilitated by **improving self-expression (narrative capability and by non-verbal means – movement, theatre, visual arts)**.

She enjoys games and exercises and her mode of learning is by doing; hence, providing opportunities for movement and hands-on work would be important intervention strategies.

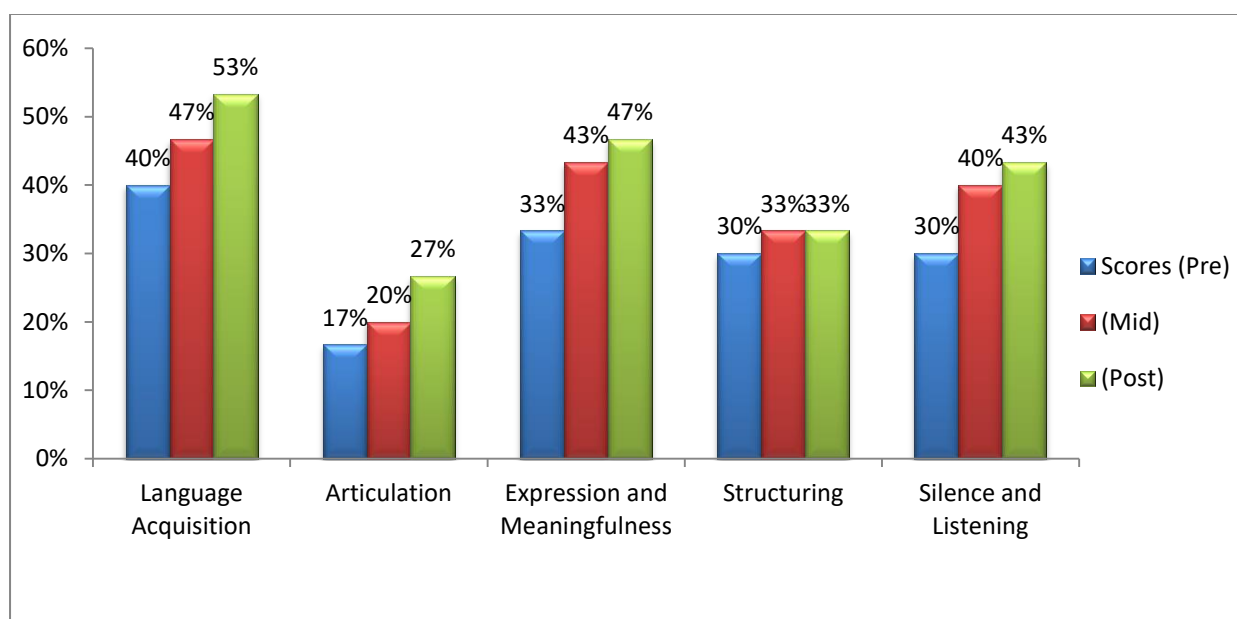
## Results:

N has taken well to ABT interventions and has shown considerable effort in trying to express herself verbally (in English). Her most significant shift has been in self-expression through arts especially Visual Arts, Movement and Theatre. She has experienced inclusion in the arts which has resulted in better group interaction and empathy.

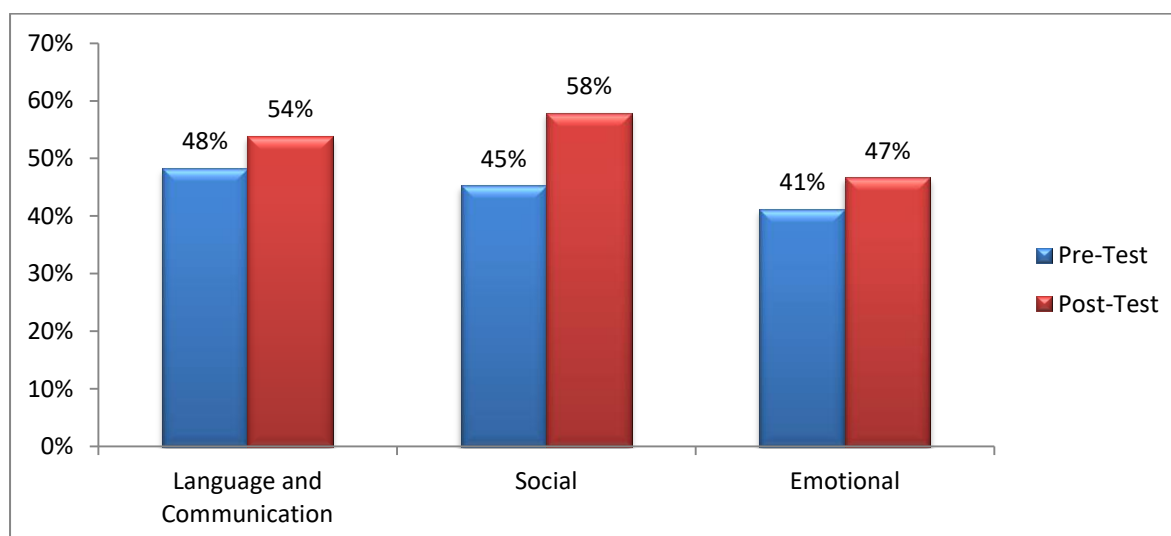
Graph-11 Comparison of scores on ABT tools (Narrative Capability, E-P-R, and Drumming Observation Format) over the course of action research – Actual scores on the tool as a percentage of maximum score)



Graph-12 Changes in Narrative Capability (detailed) over the course of the project.



Graph-13 Pre and post test scores for Language and communication, Social and Emotional skills  
(Actual scores as percentage of maximum score)



The parent observation questionnaires were not received from her family. However, with the help of a colleague, the responses on the parent questionnaire were obtained over a telephonic conversation. Her mother reported a fair degree of independence in self-care and activities of daily living but dependence on prompts.

#### Interpretation:

- The client “N” has shown positive shift in all therapeutic domains. She has responded well to artistic interventions. This is evident in the graphs for the various observation formats.
- There has been a steady rise in her ratings on the ABT tools which correspond with progress on the individual as well as group goals.
- Narrative Capability was an important area of intervention and the client has shown progress in its various aspects especially in articulation where greater use of new words, descriptive language, and even attempts at making jokes and doing quirks in speech were observed.
- Expressive Capability has also emerged through games, dances, theatre.
- Drumming was useful in facilitating group interaction and was useful in improving skills like waiting, impulse control, understanding emotions.
- The scores on the ABT tools have corresponded with similar gains in other rating scales measuring Language and communication, social and emotional skills implying that the gains in the ABT sessions have been observable outside the ABT set up.

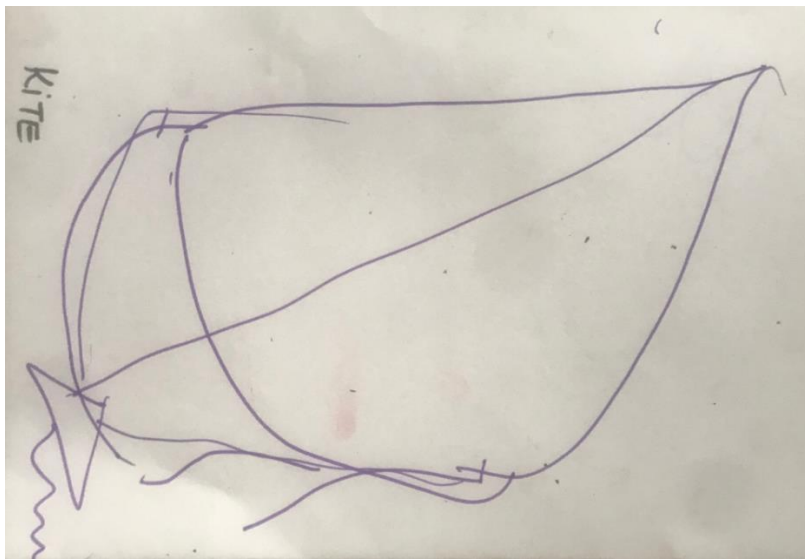
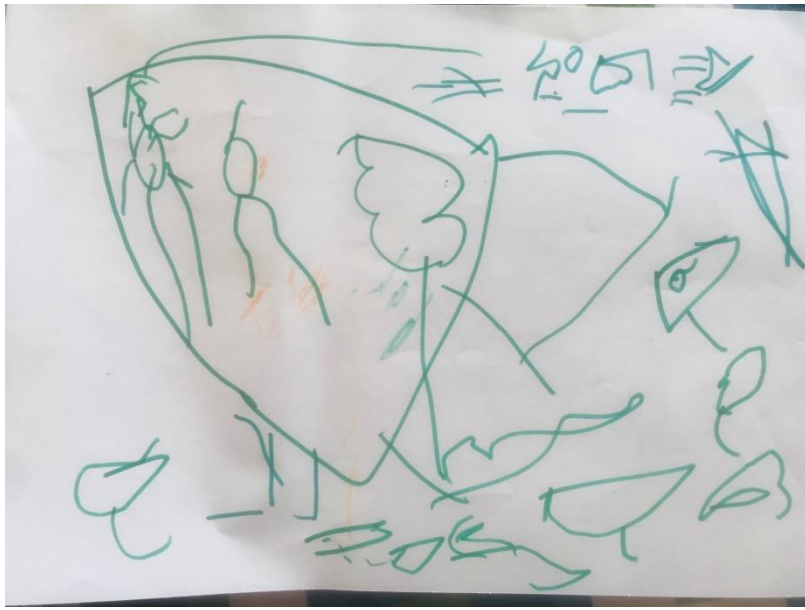


## Comparisons of Artworks

N enjoys visual art sessions. In the first image she has used paints and paintbrush and created a splash of colours on the paper, she used red and pink to cover the entire sheet and then used a scrunched paper dipped in contrasting blue colour to create a sort of block printing effect. This was an undirected artwork. In the second image she has created a mountain “betta” with stacked up balls of clay. The third image is two boys (her sons) playing near a tree outside her house and the fourth image is a kite which the boys like to fly.

The artworks bring out a lot of personal stories and she is able to use language more freely when talking about her artistic creations. Therefore, in her case, the expressive capability is shown to provide an impetus to Narrative Capability.





### CLIENT 3: P

#### Family Background:

P (M, 35) attends the full day program at Snehadhara Foundation. He lives in Bangalore with his brother and sister in law. His parents live in Noida. He is very sociable and loves making conversations.

#### Academic and rehab teacher's input:

P attended school in Noida from 1999-2013 which was like a day care unit. He learnt reading and writing alphabets and numbers 1-20. For the last three years, before joining Snehadhara Foundation, he had not been going to any school. He can manage himself in school, and is able to ask for help when required.

P has good communication skills but is unable to converse in English but wants to learn. He translates the Hindi words into English (whichever he knows) and also tries to ask "what is \_\_\_?" questions. The speech however, is slurred and sometimes there is a stammer. He is unable to retain and analyse information and usually talks from his own context or memory. He tends to talk about topics irrelevant to the ongoing session and frequently complains of physical discomfort. He has difficulty with motor planning. He loves visual arts, especially painting but shows repetitive skill (lines and colour blocks). He also enjoys voice and movement based activities.

#### Medical background:

Born pre-term (as a forceps delivery) P has delayed development, weak constitution, repeated bronchial attacks. He had his first episode of seizures in December 1989. He was diagnosed with tuberculosis in April 2012 and was undergoing treatment which lasted over a year. He is presently on medication for seizures.

#### Creation:

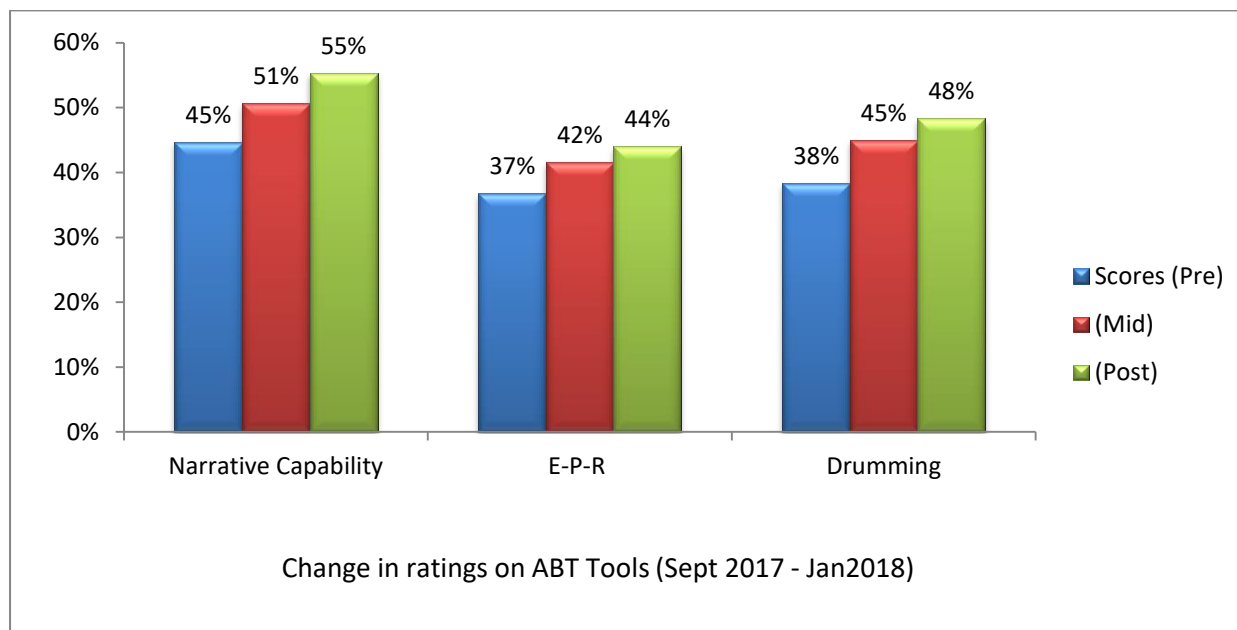
The creation for P would be mainly in areas of **Mindfulness (working memory), and Self-Awareness (emotions, self-esteem, motivation)**. He tends to engage in narratives which may be irrelevant or in-appropriate; hence opportunities for **improving narrative capability** would be an important intervention. P is very fond of visual arts, particularly painting, which could be used to foster focus and attention and encourage non-verbal expression.

## Results:

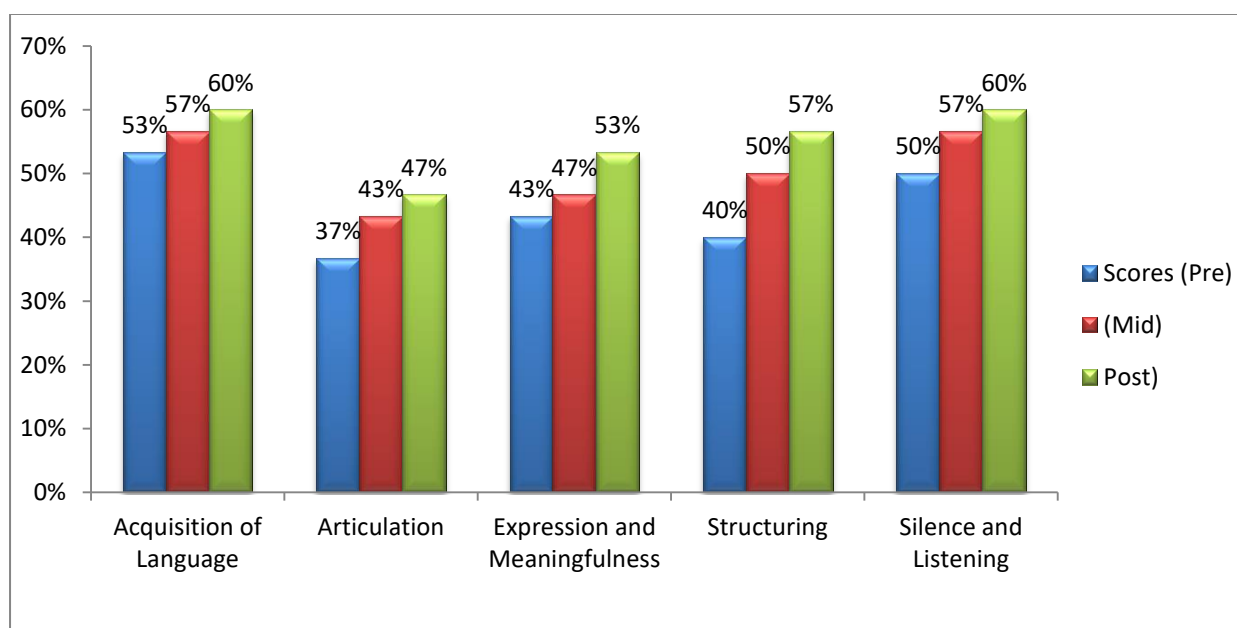
P likes being a part of this group and engages actively in various activities. He particularly likes visual arts where spontaneity of expression comes through.

Over the course of the action research, P has shown improvement in working memory, mindfulness and narrative and expressive capabilities.

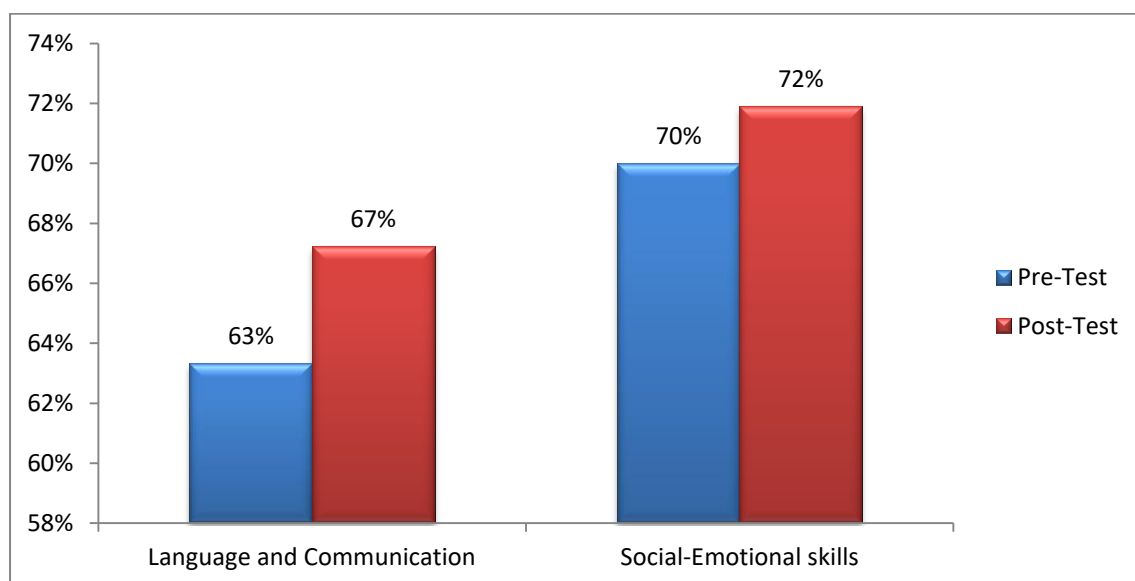
Graph-14 Comparison of scores on ABT Tools over the period of Action Research



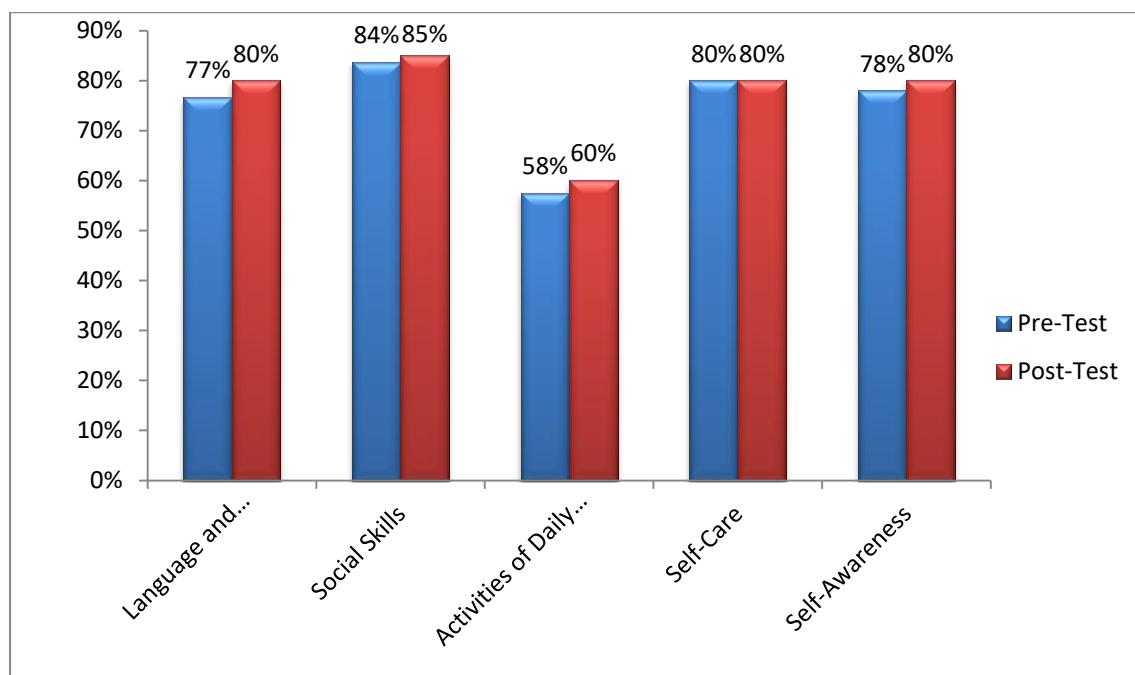
Graph-15 Performance on Narrative Capability (detailed) over the course of Action Research



Graph-16 Changes in Language, Social and Emotional skills (Pre and Post-Test)



Graph-17 Pre and Post test scores for Parent questionnaires (actual scores as percentage of maximum score)



## **Interpretation:**

- There is a clear upward shift in ratings on the ABT Tools. These have corresponded well with gains along therapeutic goals set for the client. There have been observed positive changes in expressive capabilities, self-awareness and mindfulness.
- The Narrative Capability Development scale has also shown an upward shift with maximum gain in “expression and meaningfulness” which was also observed during the sessions (Facilitator’s session notes). The client has made progress in terms of moving from narratives which were irrelevant to the sessions, to contributing meaningfully with spoken language (being in context and meaningful to others).
- There have been qualitative gains in understanding of emotions, confidence and asserting himself in the group situation. There is greater body and spatial awareness and spontaneity of expression using clay and working with props. The scores on the E-P-R scale are indicative of this shift.
- Over the course of the project, the client has shown improvement in overall Language and Communication, and Social-Emotional skills, observable even outside the ABT sessions (as shown in the pre and post-test scores on the respective rating scales).
- The Parent observation questionnaires have pointed to a slight positive shift in Language, Social skills, Activities of daily living and Self-awareness. This correlates favourably with the observations in the classroom setting.

## **Comparisons of Artworks**

P likes visual art sessions and particularly enjoys working with paints and clay. He also enjoys colouring within shapes and figures. He is very pro-active in asking for help in drawing and clearly states what he would like the facilitator to draw which he then colours.

While his visual art skill is limited to lines and colour blocks, he is able to create some forms with clay and other manipulatives. P is able to talk about what he has created and it has provided impetus to his Narrative Capability as well.

The first image is paint on paper, independent work. The theme here was to create a splash of colours. The second image is a drawing of Coorg (a hill station where the client had been on a vacation). The facilitator was asked to draw mountains and river. The colouring is done by the client. The third image is an artwork made using clay and toothpick. The client flattened the clay into a tablet and made lines using a toothpick. The fourth image is a representation of a “gate” of a colony in Ghaziabad where the client’s aunt stays.







#### CLIENT 4: Su

##### **Family background:**

Sujatha (F, 37 years) attends the full day program at Snehadhara Foundation. She is diagnosed with Down's syndrome. She lives in Bangalore with her parents and has a younger brother who is married and presently working in Noida.

##### **Academic and rehab teacher's input:**

Sujatha has studied up to 9th standard (in regular school) and subsequently attended the special school in Spastic Society (Bandra). She is able to read and write in English and Hindi. She likes dancing and enjoys soothing music and calm atmosphere. She can understand verbal instructions (mostly Tamil) and can imitate well. She speaks very softly, often in monosyllables.

She is generally slow and has tactile sensitivity - resists using props and materials during sessions. However, given sufficient time and verbal support, she is able to work with the medium presented to her. She takes time to process verbal information and her responses are often delayed. She is sensitive to loud sounds but enjoys drumming. She enjoys visual arts, rhythm and movement sessions and her responses are quite spontaneous during those times.

Her father has reported that her cognitive skills have declined over the years due to lack of stimulation and practice.

##### **Medical background:**

Sujatha is mostly on homeopathic medicines. She also has hyper-thyroidism for which she takes medication once a week.

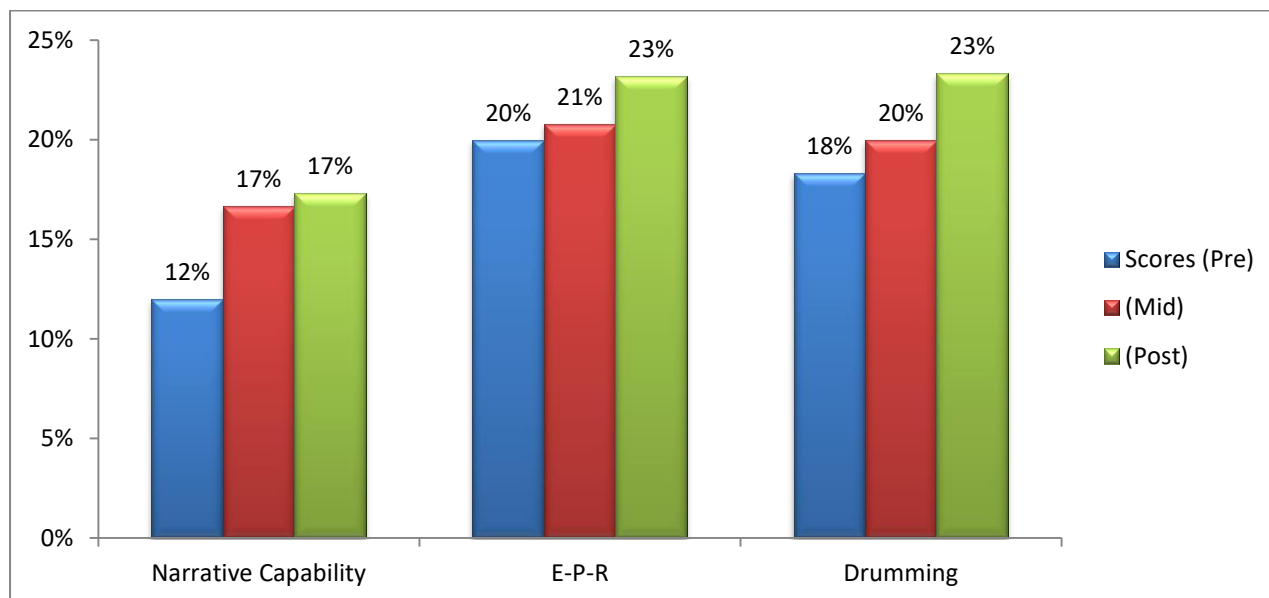
##### **Creation:**

For Sujatha, the focus will be **Group Interaction and Communication (both Narrative Capability and non-verbal expression)**. Another area of creation would be in the **Body Domain** – agility, quick response time, speech (using voice work – if possible, with a microphone, rhythm, games and exercises). This would also help her engage more actively with the group since she is rather reserved and doesn't participate much unless prompted repeatedly.

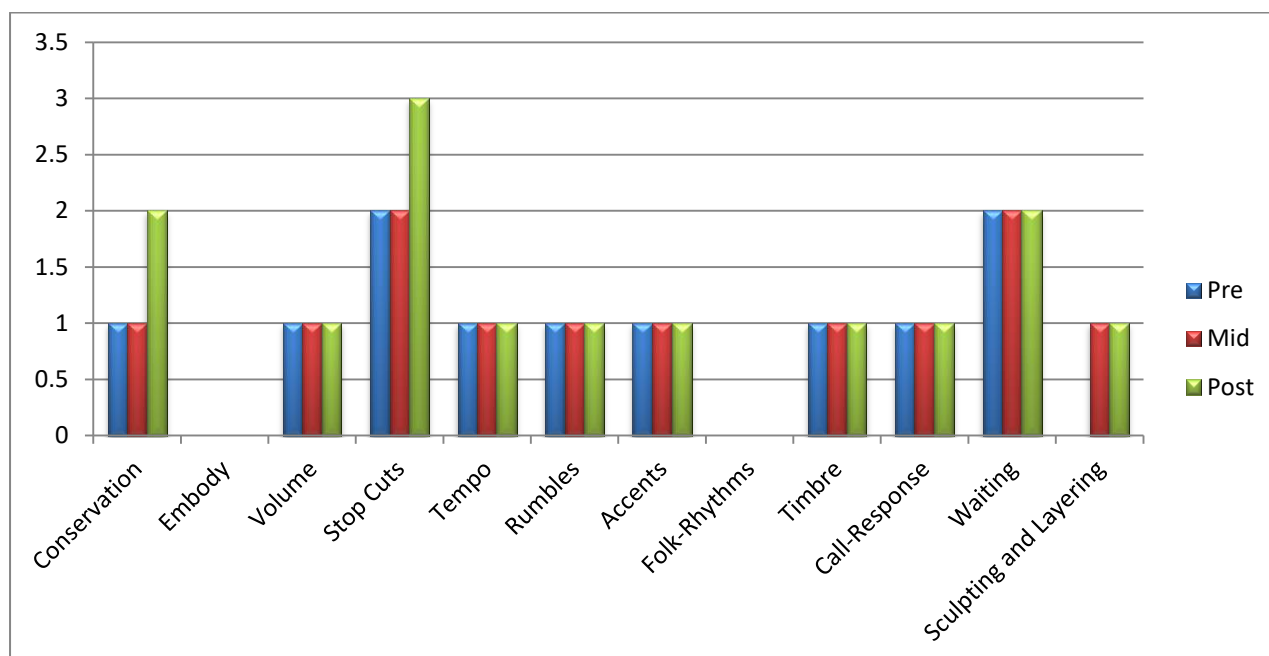
## Results:

Su has been part of the ABT sessions though her participation has been limited. The following graphs show her journey through ABT action research phase.

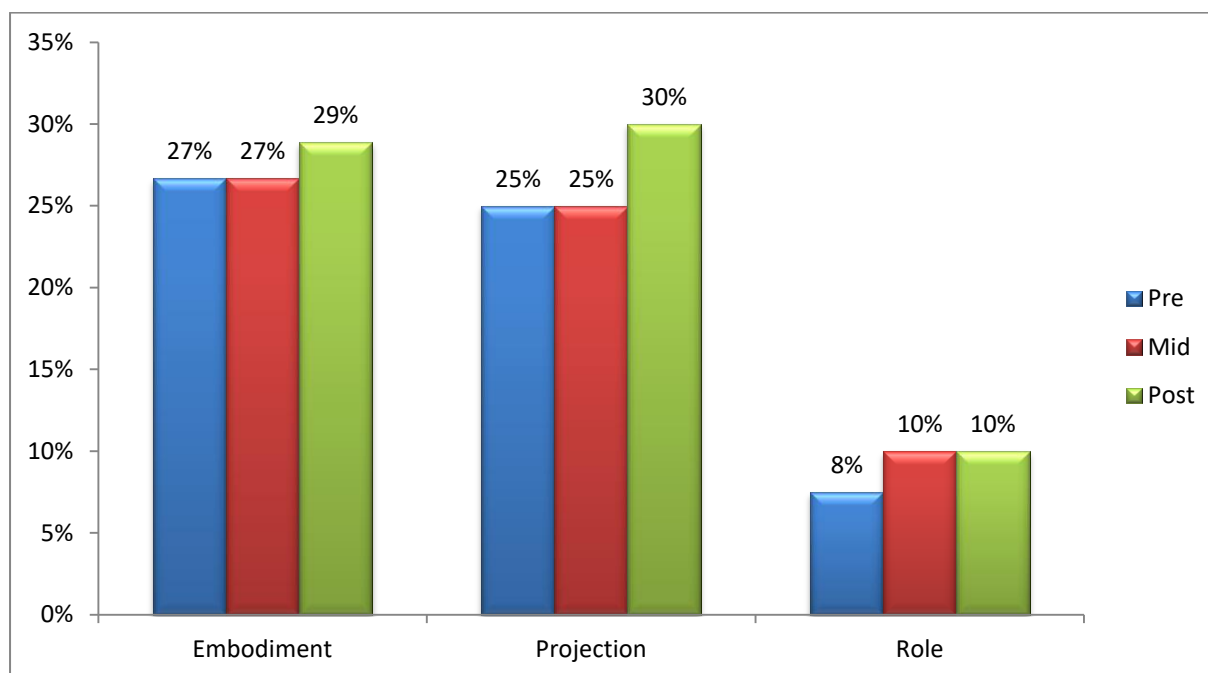
Graph-18 Comparison of scores on ABT tools over the course of action research (actual scores as percentage of maximum score)



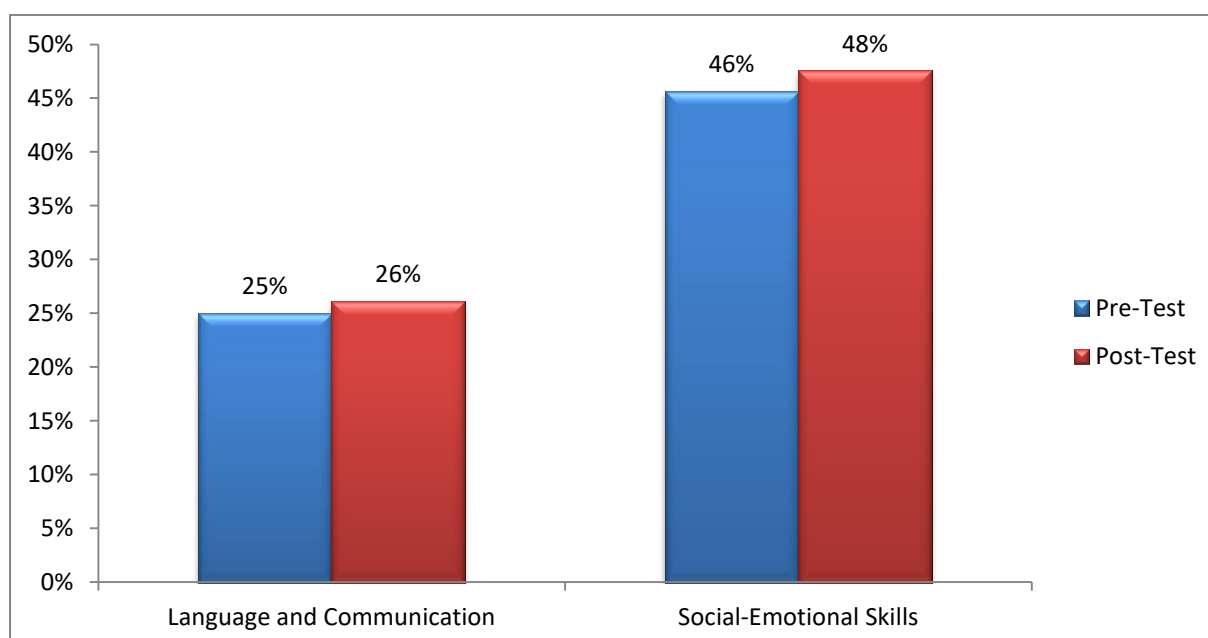
Graph-19 Comparison of scores on the Drumming Observation Tool (actual scores on a scale of 0-5)



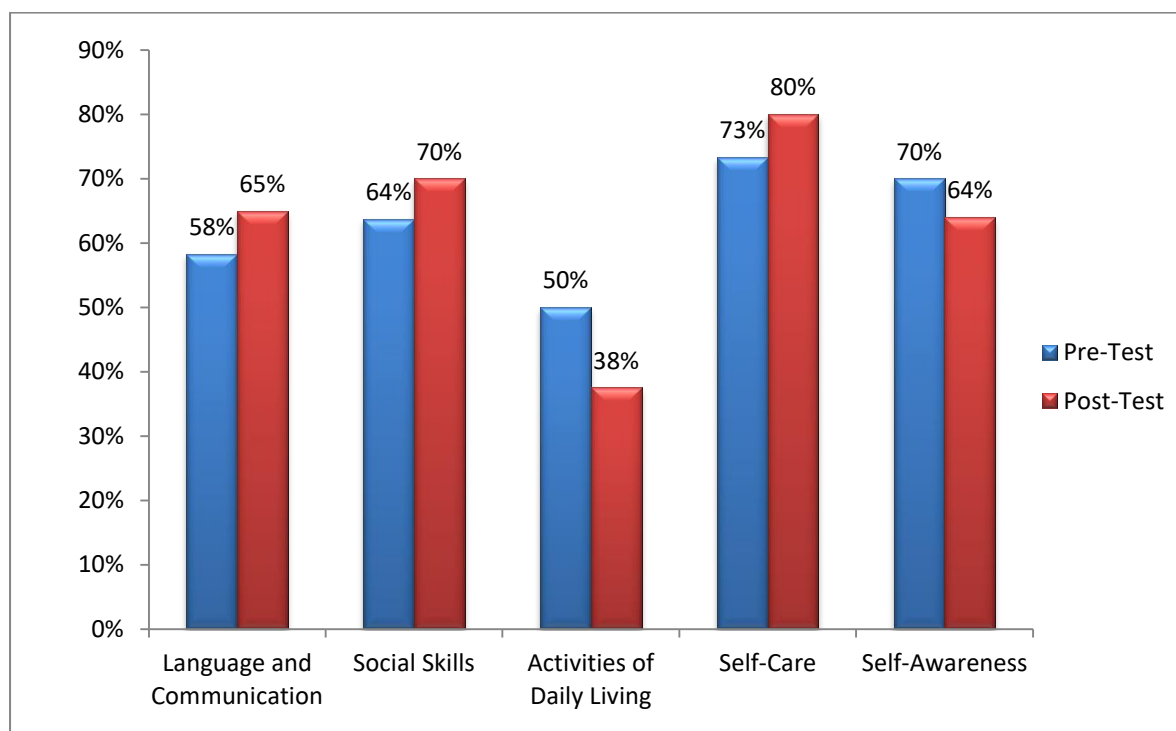
Graph-20 Comparison of scores on E-P-R based observation tool during action research phase (actual scores as percentage of maximum score)



Graph-21 Pre and Post-Test scores for Language and Communication and Social-Emotional rating scale (actual scores as percentage of maximum score)



Graph-22 Comparison of scores on parent questionnaires (actual scores as percentage of maximum score)



#### Interpretation:

- The client's scores on the ABT tools show an upward trend. She has taken well to arts based interventions (as observed in the participation in sessions as well). It is noticeable that the shift in Drumming and E-P-R based tools is higher compared to Narrative Capability, implying greater comfort with non-verbal expression compared to verbal.
- Drumming has been effective in initiating her to participate in the group without the use of spoken language. The client has shown improvements in some of the areas – namely conservation, stop cuts, layering and sculpting which essentially involve joint attention in a group setting. She is gradually making inroads to becoming a contributing member of the group.
- Su has shown a slight shift in non-verbal means of expression. She is allowing the facilitator to guide her into participation. Her agility and movement has improved slightly. In addition, she has tried to explore different art materials and props during visual arts and theatre based sessions. This is also seen in her gradual shift in E-P-R scores.
- In the rating scales on Language and Communication, and Social-Emotional Skills, there is a slight increase. She has been able to have a stronger association with her peer group and the facilitator. The use of written prompts has helped elicit verbal responses from her. This has also given her an opportunity to read aloud (which many of the peers were unaware of) and thereby feel confident.

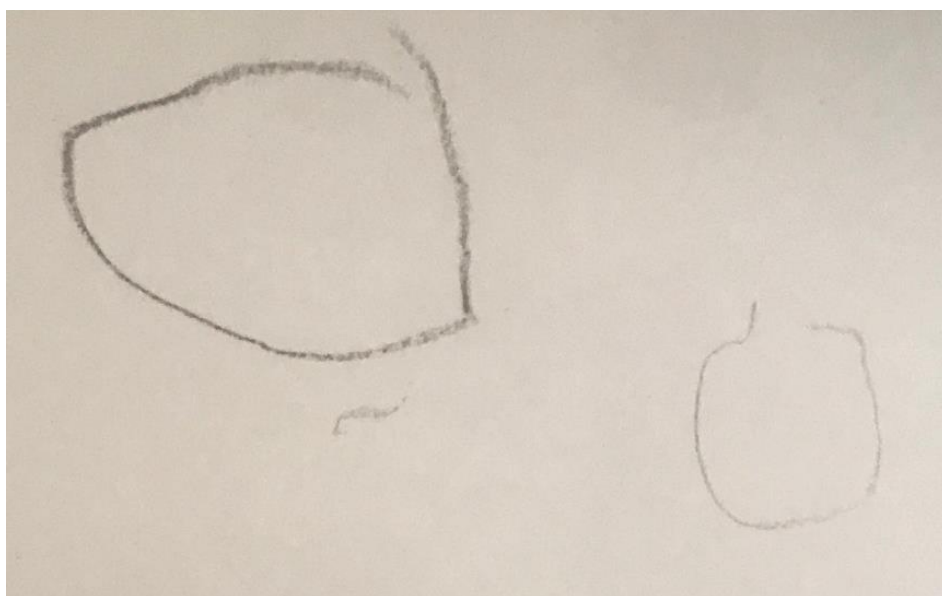
- The scores on parent questionnaires have shown positive shifts in Language, social-emotional domains. There is however, a decline in scores on activities of daily living and self-awareness. (It could be due to frequent changes in the routine of the client over the period of study and needs to be explored further in order to arrive at any conclusions)

### **Comparisons of Artworks**

Su likes exploring art materials. She usually picks up and looks at the materials offered. Her use of materials is usually limited by her tactile sensitivities.

In crayons, she usually creates colour blocks with either vertical or horizontal strokes. Using paint, the brush strokes are more fluid. She enjoys painting more than other visual art media. She has worked with clay and tried to work it into small balls.

In the first image, she has spontaneously picked up a crayon and coloured on the paper plate. (The activity was to draw a face). The second image is the first time she has created a shape using crayon on paper. The third image is a painting made by dipping a thread in paint and putting it inside a folded sheet of paper to create a symmetrical abstract painting. The client could follow the steps of the activity quite easily and made the painting independently. The fourth image is the client working with a piece of clay, working it into a ball.







## CLIENT 5: Sw

### Family background:

Sw (F, 34) attends the full day program at Snehadhara Foundation. She lives with her parents; both now retired from service. She has two brothers; one of them is abroad.

### Academic and rehab teacher's input:

Sw attended the special education unit of Bharathiya Vidya Bhavan in Delhi and has cleared the class 10th exam from NIOS. She is conversant in English, Hindi and Tamil and can read and write fluently. She has learnt Carnatic music. She used to go to a nearby school to teach nursery students (mentioned in her admission form). Sw is good in singing and enjoys voice sessions. She likes visual arts and is able to create images. She tries to improvise with the materials (especially clay).

Sw is able to take on responsibilities in the group and in the day to day activities of the school as well. She is buddy to Deepu, a young girl with locomotor and cognitive disability and takes very good care of her. However, Sw appears quite diffident and fearful by nature. She seems to be in awe of what the teachers may say if she makes any mistakes. She often assumes the role of class monitor and keeps telling other participants in the group what to do/not do, or starts speaking for them. Because of this, she tends to get distracted and is unable to retain relevant information. There is a strong need to “do the right thing” or “not make a mistake”.

### Medical background:

Sw had seizures up to the age of 7 1/2 years and is on medication. She has difficulty in concentrating for a long time. Parents also reported lack of personal hygiene as an issue of concern.

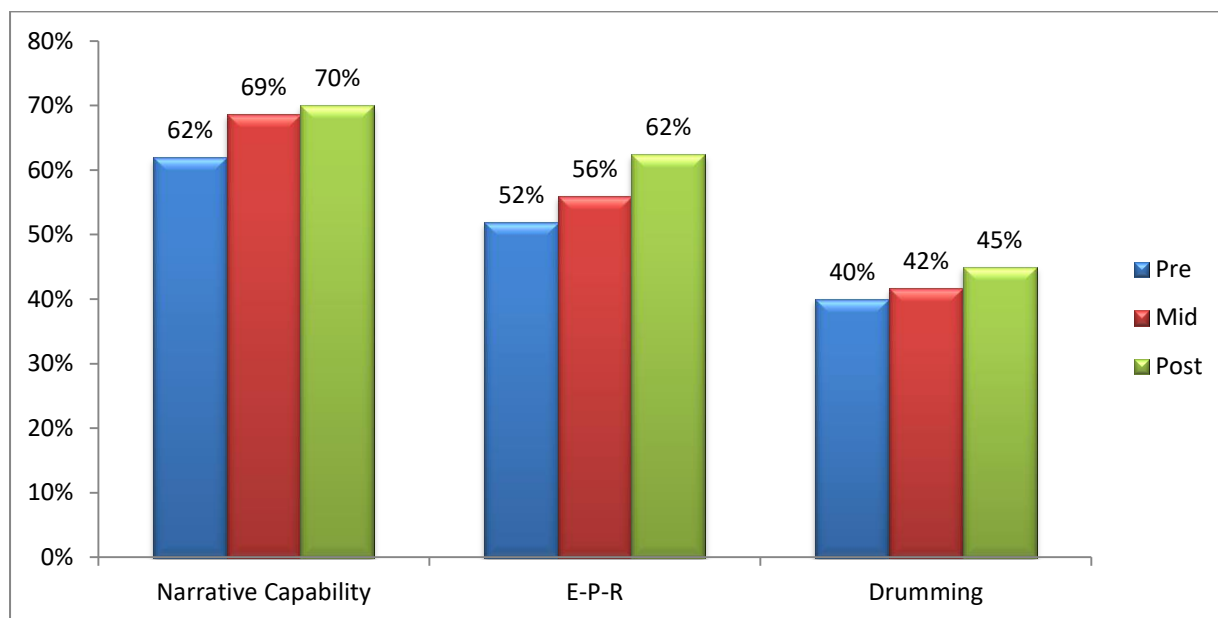
### Creation:

Creation for Sw would be in the areas of **Body (agility, coordination, hygiene), Self -awareness (self-worth, confidence, emotional expression), and mindfulness (sustaining attention, retention of information, reasoning)**. Also, since she has issues with confidence, these goals need to be approached **in a non-threatening way** (e.g. messy play or art to encourage washing hands, or using drumming – tempo or dance movements for agility and coordination etc.).

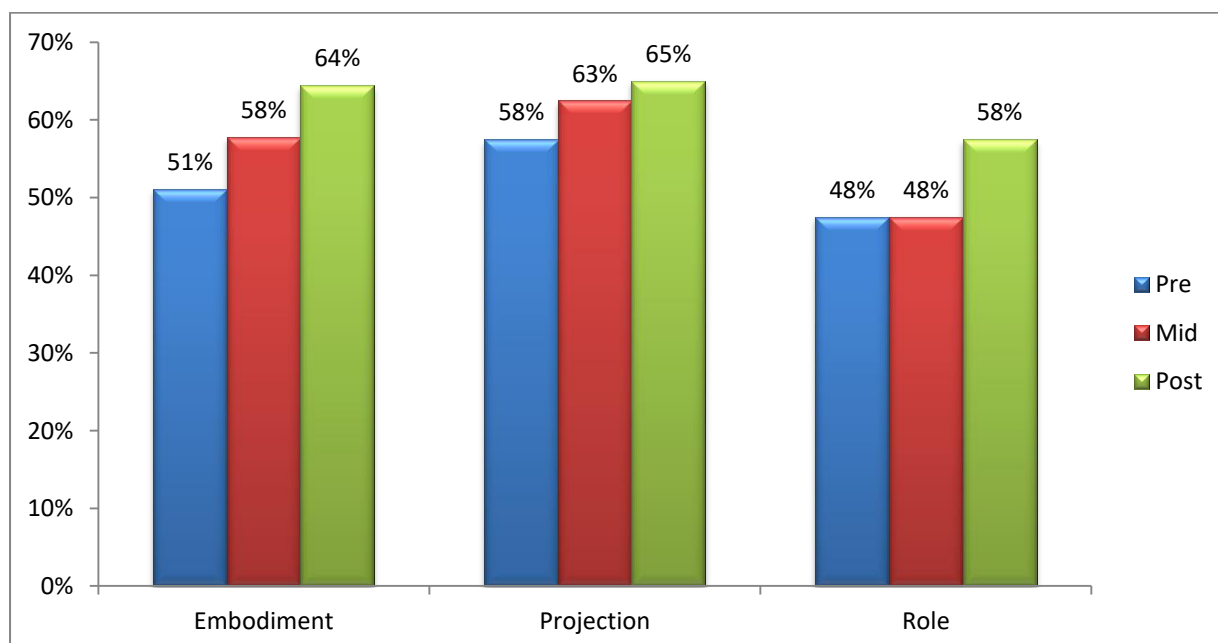
## Results:

Sw has responded well to the ABT sessions and her biggest shifts have been in her ability to participate freely. The following graphs capture her progress during the action research phase.

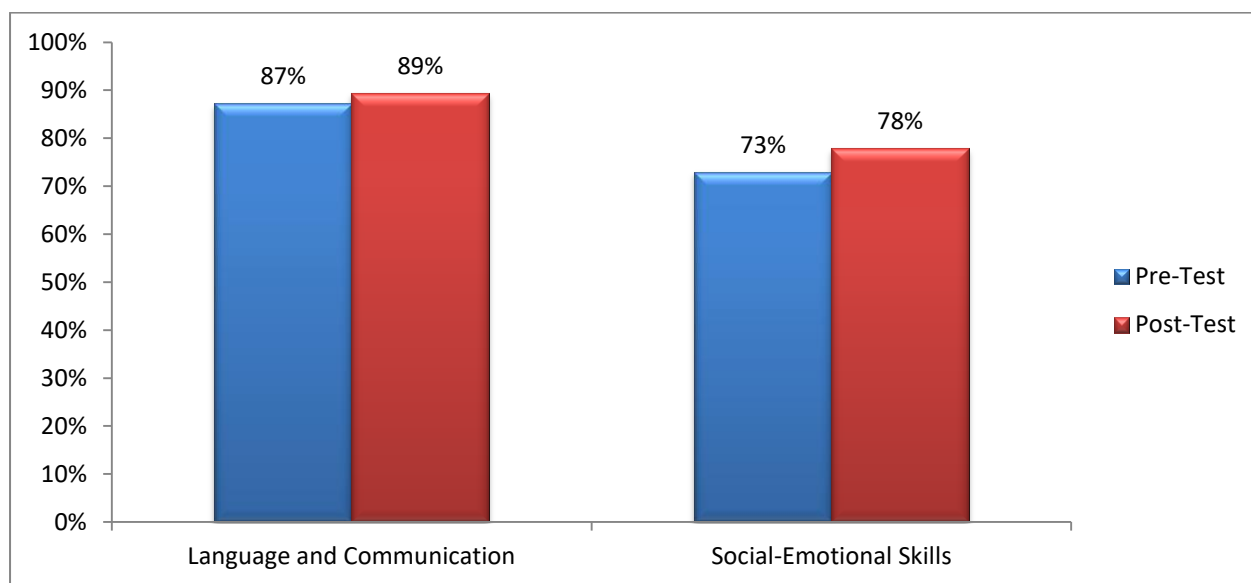
Graph-23 Comparison of scores on ABT tools (Sept 2017- Jan 2018)



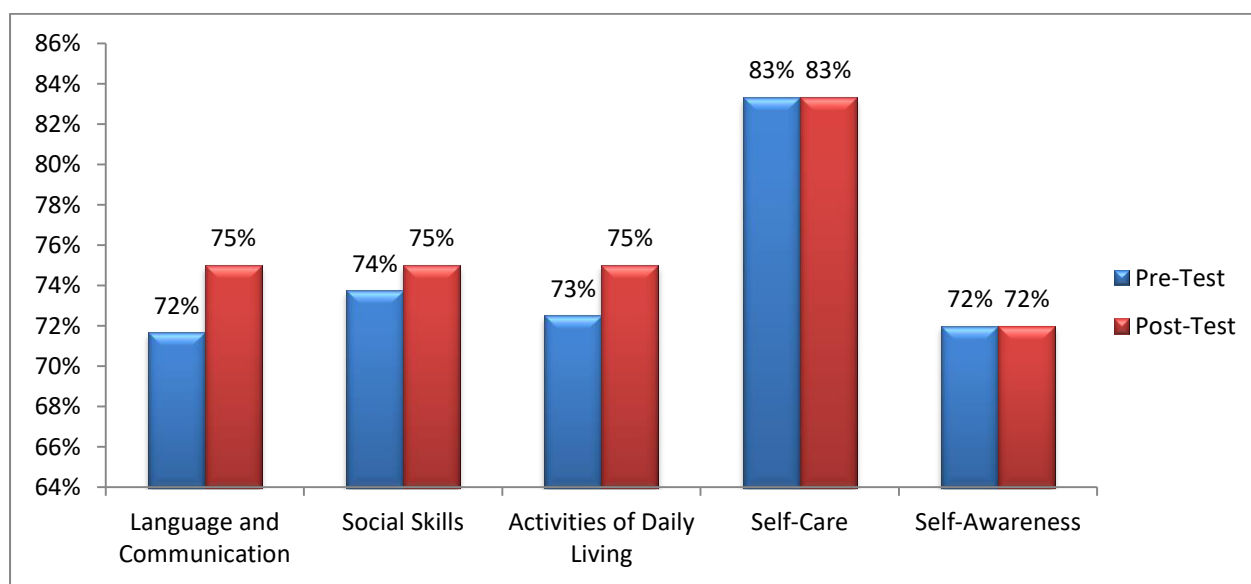
Graph-24 Comparison of scores on E-P-R based ABT tool (actual scores as percentage of maximum score)



Graph-25 Pre and Post test scores on rating scales on Language and Communication and Social-Emotional Skills (actual scores as percentage of maximum score)



Graph-26 Comparison of scores on Parent Questionnaires (actual scores as percentage of maximum score)



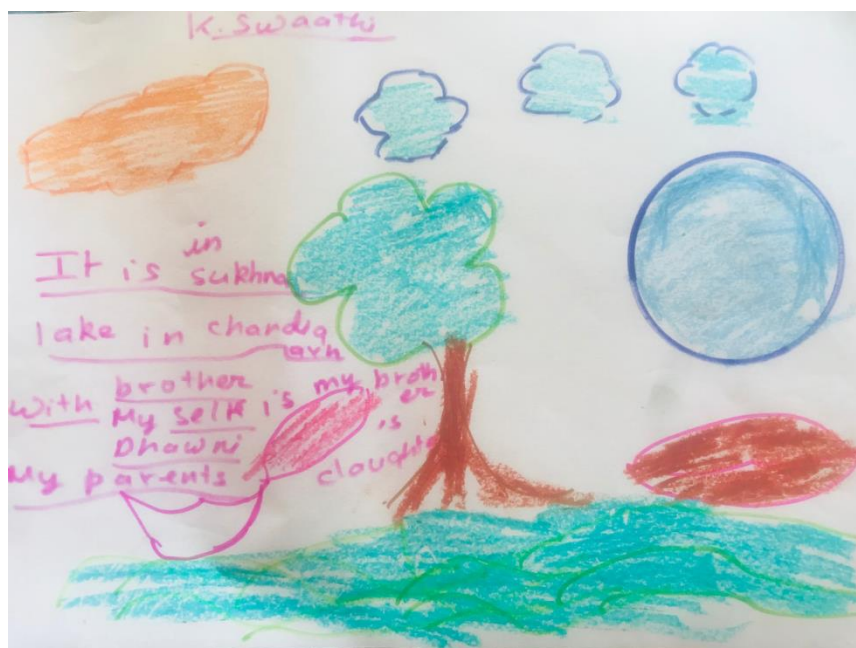
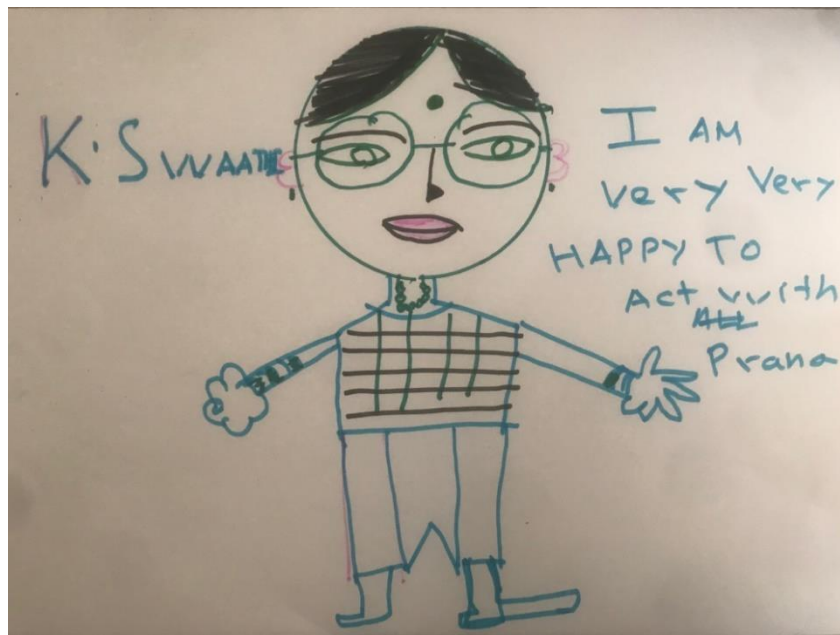
## **Interpretation:**

- The client's scores on ABT tools have shown a positive shift. This is an important indicator of an internal shift towards participant and engagement in expressive arts.
- It is noticeable that the increase in scores on E-P-R and Drumming formats are higher compared to Narrative Capability Development. This is in line with her individual therapeutic goals (creations) namely Body, Movement, Mindfulness, and Expressive capability.
- Drumming has been a powerful tool in working with the client on sustaining attention, coordination, confidence, emotional expression. There is a 12.5% increase in scores on drumming which are indicative of these internal shifts.
- Analysis of the scores on E-P-R scale reveals an upward movement in all three stages. There was a lot of work done to improve Body awareness, agility, non-verbal communication and role-plays (theatre). This reflects positively in the scores on the observation tool as well.
- The scores on Language and Social-Emotional rating scales have shown a slight upward shift. It cannot be stated conclusively if these are a direct result of arts based interventions, but the trends are aligned.
- Comparison of scores on parent observation formats show a positive shifts in Language and Communication, Social skills and activities of daily living. This is a positive indicator for transference of learnings from the school to home setting. It also points to greater independence and social adjustment which are important goals for the client.

## **Comparisons of Artworks**

Sw enjoys visual art sessions and they often bring out a lot of personal narratives. These have helped in emotional expression, self-confidence, sharing. Sw likes to talk about what she has created, thus building narrative skills as well.

The first image is a self-portrait (drawn with sketch pens on paper). She has mentioned she feels happy doing acting with Prerna. The second image is a drawing of a place where the client would like to rest and relax. It depicts a lake where her brother lives with his family. The third image is a sculpture made with clay, beads and ice-cream stick. It depicts the Thirupathi temple the client had been to. In the fourth image, the client is displaying her artwork after a round-robin painting session.







## CLIENT 6: U

### Family Background:

Umaima Sadaf (F, 20) attends the full day program at Snehadhara Foundation. This is her third year in the school. She avails the school van facility.

Umaima is the only daughter of her parents. She lives in Bangalore with her mother.

### Academic and Rehab Teacher's Input:

Umaima has global developmental delay. She attended special schools – Sankalp and Mythree before joining Snehadhara Foundation.

Umaima is a cheerful and amicable person. She greets everyone with a smile. She has cognitive delays and barely functional speech (very limited vocabulary and articulation is not clear). She is unable to retain information and tends to tune out during language intensive activities. She is good with hands-on work and likes repetitive activities. She is unable to read or write. She likes visual art though her skill is limited to drawing lines.

Umaima's strengths are her excellent sense of rhythm (embodiment, conservation of pulse, start-stop) and music. She enjoys singing, dancing and drumming the most. She is active and enjoys games and exercises.

### Medical Background:

Umaima was born in Chennai. It was a normal delivery but the birth cry was absent. She had focal convulsions continuously for two days and was in the hospital for a week. She was on medication for convulsions. Now the focal fits are under control, and the doctors have stopped medication; but she needs follow up consultation every six months.

### Creation:

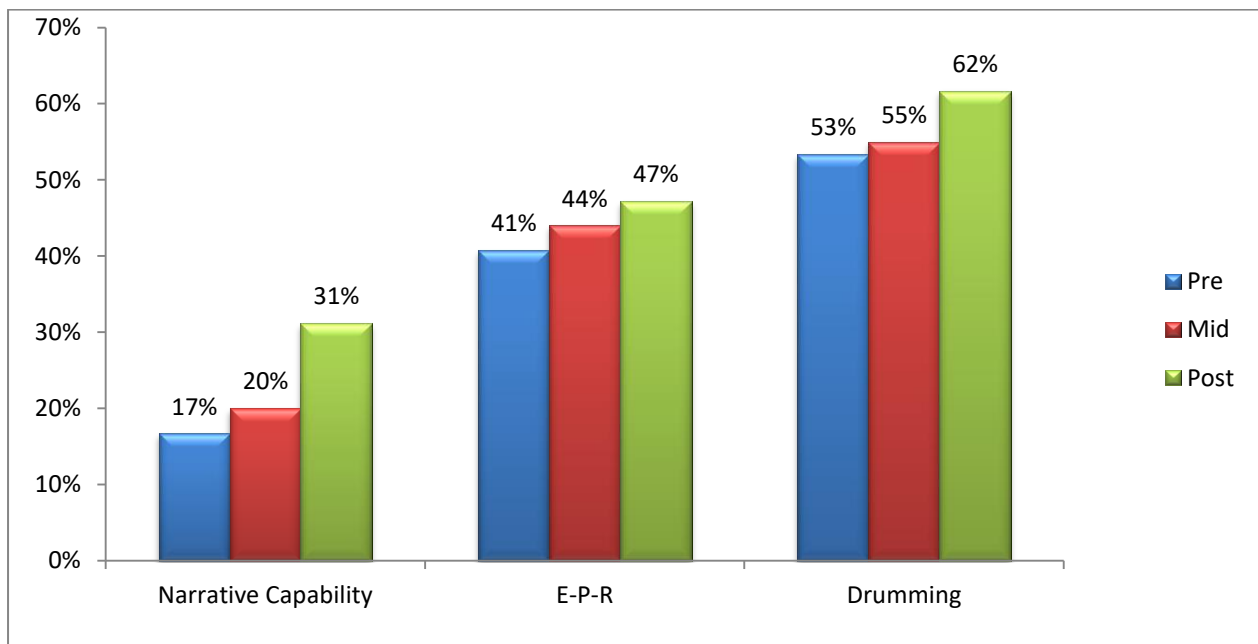
Umaima's primary area of focus would be **Mindfulness (information processing, working memory)**. She would also require intervention for **Communication** – both verbal and non-verbal (**developing Narrative Capability, expression using various art forms**). Yet another therapeutic domain would be **Self-Awareness** - understanding of emotions and developing confidence and self-esteem.



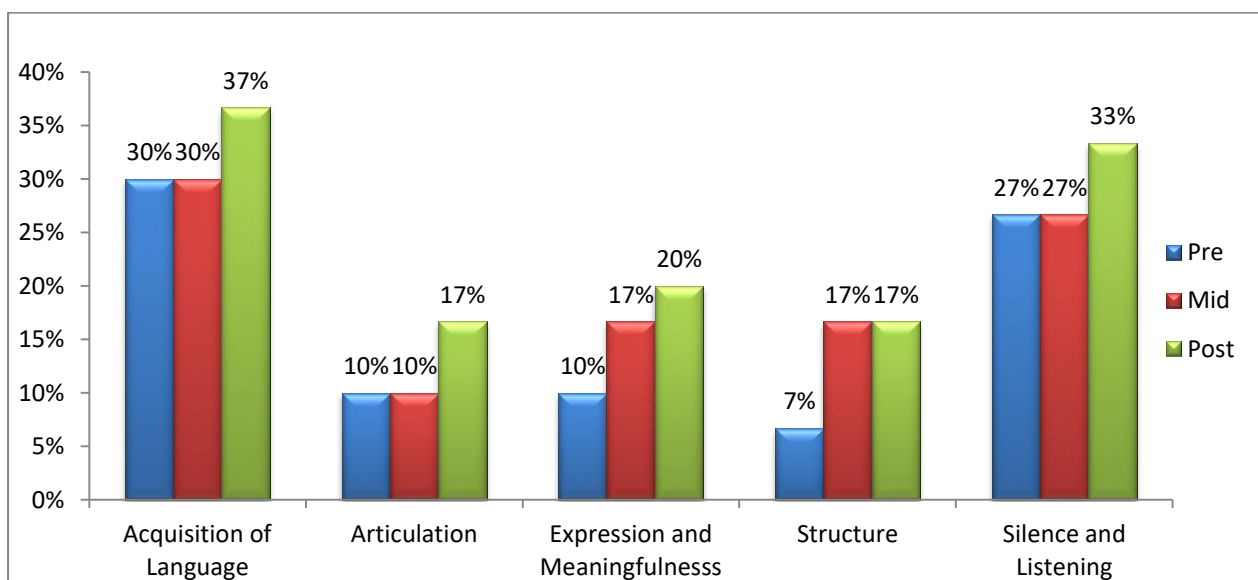
## Results:

The client finds joy and inclusion in arts based sessions which has led to progress on her individual therapeutic goals within the group setting. The following graphs provide a representation of her movement over the course of ABT action research.

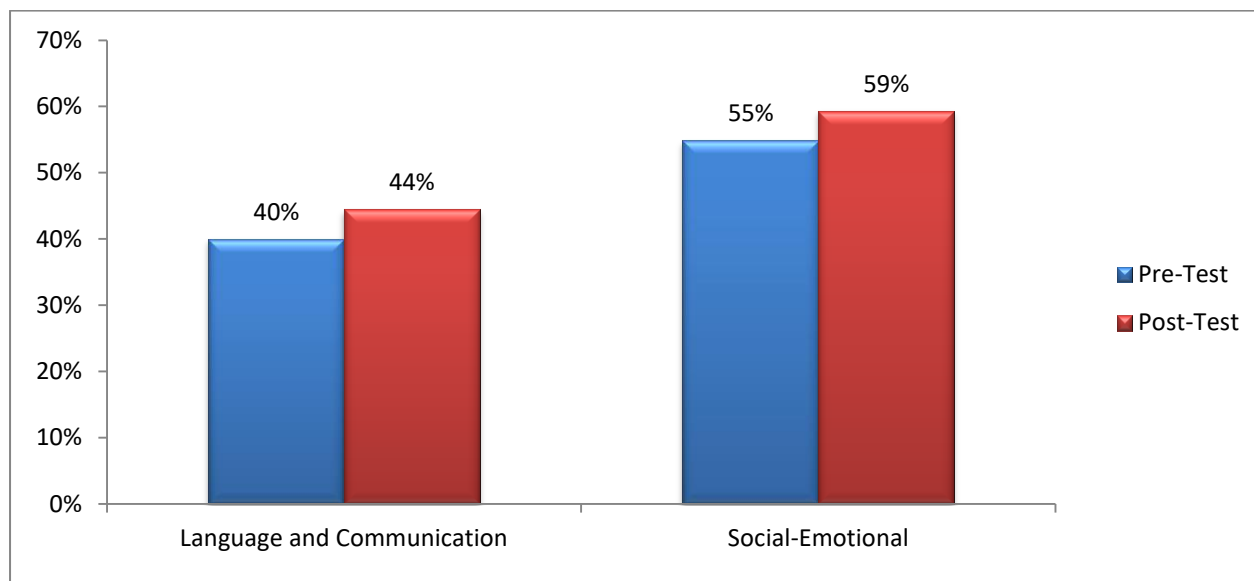
Graph-27: Comparison of scores on ABT Tools (Sept 2017 – Jan 2018) –actual scores as percentage of total score



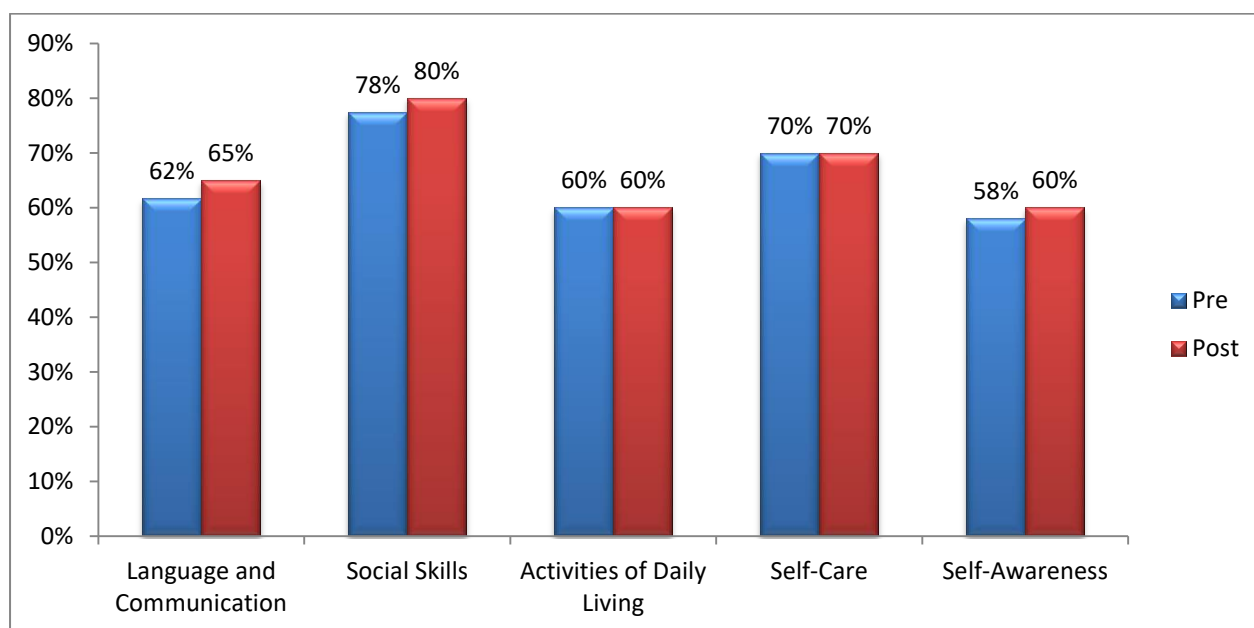
Graph-28: Comparison of scores on Narrative Capability (detailed by sub-categories)



Graph-29 Pre and Post-Test scores in rating scales on Language and Communication and Social-Emotional Skills (actual scores as percentage of maximum score)



Graph-30 Comparison of Pre and Post-Test scores on Parent Questionnaires (actual scores as percentage of maximum score)



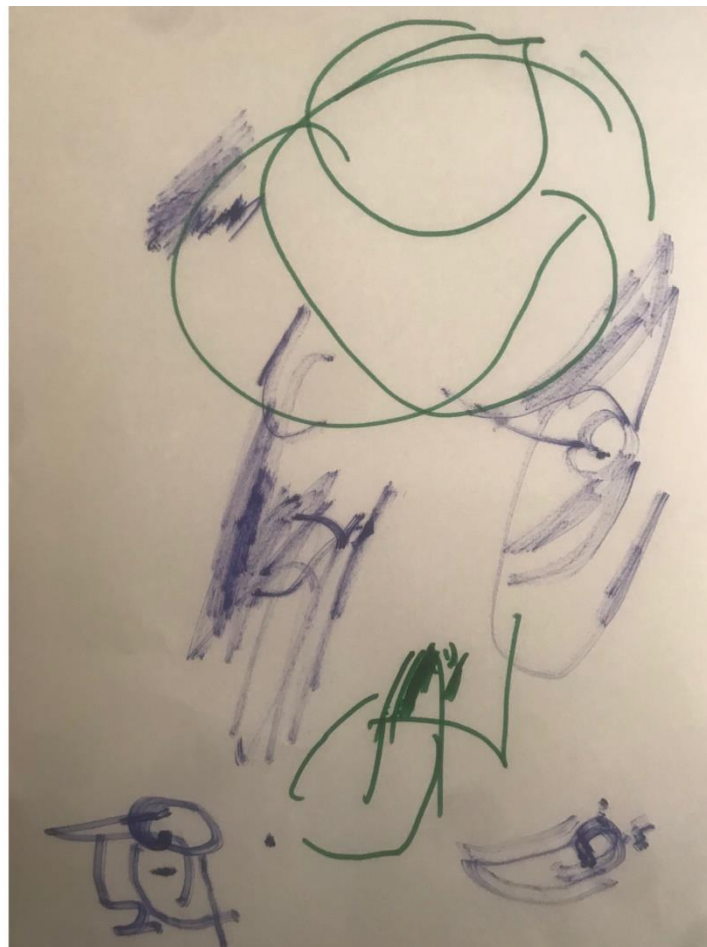
## **Interpretation:**

- The client has shown more qualitative gains which have been picked up during the sessions. Some of these have reflected in positive shift in the graphs for various observation formats.
- There has been an upward trend in all ABT based observation tools particularly in Narrative Capability and Drumming which are in line with her individual therapeutic goals. There is greater meaningfulness and context based speech.
- Drumming was an important tool to work on mindfulness, group interaction, self-expression and the client has made advances in these areas (also corroborated by drumming scores and increase in scores in social-emotional scale – Graph-29)
- In Narrative Capability, there has been a positive shift in all categories, especially in “Expression and Meaningfulness” which has recorded a 100% jump (from 10%-20% from pre to post test values)
- The performance on ABT tools has also reflected on gains in Language and Communication and Social-Emotional skills rating scales, implying that the gains are not just part of the ABT sessions but observable by other teachers working with the client.
- Parent questionnaire scores are also higher in areas of language, social skills and self-awareness, indicating that the client has carried forward the learning to home environment, making the progress more sustainable.

## **Comparisons of Artworks**

The client has a vivid imagination but her skill in visual arts is limited to lines and scribbles. She does attempt to make shapes and simple forms in her artworks using various media (Crayons/Paint/Clay).

In the first image the client is seen making balls of clay which she has lined up. The second image is a drawing of a person using sketch pens on paper. The third image is a drawing of a sea beach (place of rest and relaxation). The fourth image is Paint work on paper. She enjoys painting a lot and chooses a bright palette of colours for her paintings. She is able to ask for additional material if needed.





### 4.3 INFERENCE

Based on the group and individual client data, the following inferences can be drawn

- Arts Based interventions have led to a significant improvement in clients' performance w.r.t. therapeutic (individual as well as group) goals.
- The scores on the different observation formats (filled by different observers) have shown similar trends implying not just improved participation but gain in skills which are enduring and observable in different settings.
- The improvement in expressive and narrative capabilities has translated into increased self-confidence.
- ABT has proved to be an effective intervention strategy for the group and has potential for application as a sustained, long term medium of instruction for skill building.

## 5 DISCUSSION

### 5.1 LIMITATIONS

The Action Research Project has been a deeply moving and enriching experience. However, there are certain limitations of the study.

The constitution of the client group was quite dynamic over the course of the project. There were as many as four different participants who were part of the group and the ABT sessions intermittently (from Pilot project to the end of Action Research). Each of these new members had their impact on the inter-personal dynamics within the client group.

One of the members of the group, who was part of the pilot phase, left the school and had to be dropped from the Action Research project. This was quite disheartening.

The heterogeneous nature of the group in terms of abilities and challenges, made it difficult to design sessions equally relevant to all participants. Also, working with participants outside the study group was difficult as their needs also have to be kept in mind to make the sessions inclusive.

The irregular attendance of the clients impacted the general energies of the group as well as their individual results.

An important limitation of the study is individual perception. The ABT tools are by nature, quite subjective and the ratings of the facilitator and/or the observers are based on their perceptions. This impacts the objectivity of the results.

Another limitation was the inability to capture some of the best moments and qualitative shifts observed during the sessions in video documentation.

Last, but not the least, the time assigned for the Action Research is very limited. The number of sessions is inadequate to do justice to all art forms. While the clients have shown a positive shift in most of their therapeutic goals, the project would seem more effective as a longitudinal study, where there will be greater scope for improvisations based on multiple art forms. Also, the long term effects of arts based interventions can be studied in greater detail.

## 5.2 LEARNINGS

The ABT Action Research Project has been a great learning experience. It is incredible to learn how the arts become therapeutic and permeate every facet of our being. The Subtle Energy Guide (SEG) which forms the bedrock of ABT helps integrate body, mind and spirit and opens a world of possibilities for both the practitioner as well as the client.

The findings of the project have been in line with the literature review of expressive art therapies. Using the different art forms, the client group has been able to experience learning as an immersive process. There have been observable and measurable changes in their respective therapeutic domains. In addition, the (qualitative) internal shifts the clients have made, have been very encouraging for the facilitator to witness over the course of the study.

The Visual and Performing Arts (Dance, Theatre) helped foster the group's expressive and narrative capabilities. Their individual artistic abilities notwithstanding, what mattered most was the joy of creation and being one with the process. The artworks brought out a lot of personal narratives, and in the process, strengthened the group spirit. Talking about what they have created, gave the participants a creative release, acceptance and closure.

Music (Voice and Rhythm) was the soul of the ABT journey. Almost every session had an element of music. It served to tie the group together. While the Voice/Melody sessions brought in a lot of spontaneity and self-expression, the sessions on Rhythm helped achieve Mindfulness and Group Interaction goals.

Games and Exercises brought in a lot of fun and energy into the group sessions and helped build a sense of camaraderie as the clients cheered and encouraged each other. Though not purely artistic in nature, when combined with melody or rhythm, they helped bring the group together. A lot of suggestions and free flow of ideas and improvisations were witnessed during these sessions.

The results have supported the Hypotheses that the arts can help improve the clients' Narrative Capabilities and thereby, achieve a sense of greater self-awareness and social adjustment. The findings have shown a positive shift, though the degree of correlation could be established if the project were continued as a long term study.

The greatest takeaway has been the sense of joy and satisfaction of having enrolled for this kind of project. There is so much to learn from the clients one has worked with. They have accepted and trusted me and taught me to rise to every challenge and never ever give up. They are not afraid to push their limits and step into the infinite.



### 5.3 FUTURE

This project has been an enriching experience and I have enjoyed every moment of working with my client group. It has been a great opportunity to learn about different art forms and experience them first hand. It has sparked my interest in arts as a vehicle for teaching and learning beyond the artistic skill itself.

The small successes I have experienced with the group have served to spur me on in my quest to explore how we could take these gains further. I would like to continue my association with this group and, through ABT, be a part of their journey towards greater independence.

I would also like to work with the families of these clients help understand their concerns for their wards which could become relevant goals for the client group itself. Thus, taking the families into the foray, we could look at a more “well-rounded” approach to development through ABT.

The Action Research Project could be a good starting point for longitudinal studies wherein the goals for the client group could be revisited after a fixed period and understand the difference created by ABT over a long term association.

I would also like to work with different populations and age ranges to develop my skills as an ABT practitioner. I would like to learn more about the field of expressive arts therapies, especially theatre and its role in teaching educational concepts, thus making education fun and more inclusive.

In the long run, I also envision working in the field of training and capacity building and increasing the reach of ABT, so that more diverse populations can come under its ambit and benefit from it. To work and be of service to every sentient being – that would be the ultimate goal.

The meaning of life is to find your gift.

The purpose of life is to give it away.

-Pablo Picasso

## 6 APPENDIX

### Appendix A

A1: Language and communication skills

A2: Social-Emotional skills

A3: Personal Development inventory

A4: Parent Questionnaire

### Appendix B

B1: Narrative Capability Development Scale

B2: Embodiment-Projection-Role

B3: Drumming observations

### Appendix C

SRS Summary

## 6.1 APPENDIX A: Observation Formats

### A1: Language and communication skills

Name of the Client:

Assessment Date:

S.No.	Parameters	5	4	3	2	1
1.	Vocalises (sounds) with intonation					
2.	Has basic vocabulary					
3.	Uses 2-3 word phrases to talk about/ask for things					
4.	Speech is intelligible (understood by family/friends/teachers)					
5.	Can ask for objects by clearly naming them					
6.	Can express needs					
7.	Can understand and answer who/what/when/where questions					
8.	Uses simple sentences (4 or more words)					
9.	Can narrate activities/events at home or school					
10.	Pays attention to short stories or narratives and answers simple questions about them					
11.	Can use sentences which provide many details (Descriptive speech)					
12.	Can tell stories/maintain sequence in spoken sentences					
13.	Is able to stay on topic/maintain context while speaking					
14.	Speaks meaningfully (reflective/logical)					
15.	Appropriate use of pronouns, prepositions, verbs					
16.	Uses appropriate grammar					

17.	Personally meaningful speech – expresses thoughts, feelings, wishes, aspirations					
18.	Can express fears or negative feelings/sensations by talking about them					

Key

5: Always

4: Frequently

3: Sometimes

2: Rarely

1: Never

## A2: Social-Emotional Skills Checklist

Name of the Client:

Assessment Date:

<u>Social Skills</u>	5	4	3	2	1
Makes eye contact					
Has social smile					
Likes engaging with other people (is sociable)					
Takes turns, can wait for his/her turn					
Responds to peers (verbally or non-verbally)					
Shares ideas/resources during an activity					
Returns greetings					
Initiates greetings					
Can ask for materials or assistance					
Can offer help to others in need					
Pays attention to someone who is talking					
Can imitate modelled behaviour					
Can approach people independently and introduce self, initiate conversation					
Can give a compliment					
Can disagree amicably (without being rude or feeling hurt)					
Caring towards their buddies					
Can negotiate or make suggestions					
Can sit through an activity till its completion					
Helps with clearing away materials and simple chores					

<b><u>Emotional skills</u></b>					
Can express likes and dislikes					
Can identify emotions in self					
Can identify emotions in others					
Demonstrates affection towards preferred person or pet					
Is able to empathise with others and respect their feelings					
Shows curiosity and interest in new ideas, materials, activities, persons					
Refrains from showing aggression towards self/others					
Allows others to comfort him/her when upset					
Can use coping skills when experiencing difficult emotions					
Can accept losing or failing without getting upset (frustration tolerance)					
Can take "no" for an answer/can handle rejection					
Is able to say "I don't know"					
Can accept making mistakes without getting angry or upset					
Can realise his/her mistake and apologise					
Can delay gratification					
Can accept/adapt to unexpected changes					
Can take responsibility for his/her actions					
Is able to accept criticism or corrective feedback without getting hurt					

Key

5: Always

4: Frequently

3: Sometimes

2: Rarely

1: Never

### **A3: Personal Development Inventory**

Name of the Client:

Assessment Date:

<b>Self-Care</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
Eats a healthy diet					
Maintains personal hygiene					
Exercises regularly					
Takes adequate rest/sleep					
Takes interest in how he/she looks, grooming					
Can manage medications					
<b>Self-Awareness</b>					
Is aware of his/her likes and dislikes					
Is aware of his/her emotions					
Expresses emotions appropriately					
Can cope with challenging emotions					
Is forgiving of self and others					
Aware of his/her strengths and talents					
Proud of his/her accomplishments					
Can accept compliments gracefully					
Does not try to please others					
Is not afraid to say NO					

Key

5: Always

4: Frequently

3: Sometimes

2: Rarely

1: Never

## **A4: Parent/Caregiver Questionnaire**

Name:

Assessment Date:

Please check the most appropriate response on a scale of 5

Key:

5: Always

4: Frequently

3: Sometimes

2: Rarely

1: Never

<b><u>Language and Communication</u></b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
Communicates by vocalisation (sounds/words/sentences)					
Uses gestures to communicate effectively					
Has basic vocabulary					
Speech is intelligible (understood by family/friends)					
Can express needs or ask for things by naming them					
Can express fears or negative feelings/sensations by talking about them					
Can narrate events from school or other spaces visited by him/her					
Descriptive Speech – express thoughts and feelings in ordered and meaningful sequence of words					
Listens actively					
Can understand and answer simple questions					
Can tell stories/maintain sequence in spoken sentences					
Is able to stay on topic/maintain context while speaking					
<b><u>Social-Emotional Skills</u></b>					
Maintains eye contact when spoken to					
Likes to meet and engage with family members/visitors					
Responds to family members/acquaintances (verbally or non-verbally)					
Shows care and concern towards family members					



Gives compliments, acknowledges others					
Has friends or companions outside family					
Initiates and returns greetings					
Initiates a conversation, shares feelings/experiences					
Can express his/her emotions					
Is able to cope with challenging emotions (anger, frustration, grief, disappointment)					
Refrains from showing aggression (in words or actions) towards self/family members					
Can realise if he/she made a mistake and apologise					
Can understand others' emotions by reading their body language and empathise with them					
Expresses love or affection towards family members/friends					
Can take "no" for an answer, handle rejection					
Feels motivated when appreciated					
<b><u>Activities of Daily Living and Life Skills</u></b>					
Manages personal routine independently (toileting, bathing, dressing up)					
Manages meal times (self-serving, feeding and clearing up)					
Can use phone in times of emergency					
Helps with simple household chores (laying the table/laundry/making bed)					
Can manage his/her medications					
Enjoys solitude to pursue a hobby/leisure activity					
Can do some outdoor activities independently (going for a walk, buying groceries)					
Can handle money (petty cash)					

## 6.2 APPENDIX B: ABT Tools

### **B1: Narrative Capability Development**

Name of Client: \_\_\_\_\_

Session Date: \_\_\_\_\_

<u>Capability</u>	<u>Parameters</u>	5	4	3	2	1	0
<b>I) Acquisition of Language</b>							
Vocalisation (Sounds) with intonation							
Basic Vocabulary							
Simple sentences understood							
Understanding of simple questions							
Sound reasoning (interrelated sentences)							
Fluent speech							
<b>II) Articulation</b>							
Grammatical lapses							
Spontaneous use of new words							
Appropriate use of pronouns, prepositions, verbs							
Descriptive use of speech							
Loud reading with considerable ease							
Understands/does quirks and fun in speech							
<b>III) Expression and Meaningfulness</b>							
In context							
Personally meaningful							
Meaningful to others							
Spontaneous but expressive							
Thoughtful but expressive							

Consciously symbolic						
<b>IV) Structuring</b>						
Vaguely structured						
Structured with beginning and end						
Structured with beginning – middle – and end						
Awareness of story structure						
A proper story constructed						
Story, and deeply meaningful						
<b>V) Silence and Listening</b>						
Silent when talked to (no response)						
Listens and understands, but no appropriate response						
Appropriate silence						
Reflectively silent						
Deep listening						
Meaningful listening and relevant responses						

Key

5: Excellent    4: Good    3: Average    2: Fair    1: Poor

0: Not observed or could not do

## **B2: Embodiment-Projection-Role**

Name of the Client \_\_\_\_\_ Session Date \_\_\_\_\_

<b><u>Embodiment</u></b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>
Touch, Eye Contact						
Spatial Awareness						
Working With/Against						
Whole Body						
Body Parts						
Body/Self Image						
Mimicry/Innovation						
Other (e.g. Movement and Stillness)						
<b><u>Projection</u></b>						
Sand/Sand and Water						
Clay/Plasticine						
Pencil/Crayons						
Paint (Finger/Brush)						
Single Image/Whole Picture						
Single/Large Toys						
Environmental						
Other (e.g. working with Props)						
<b><u>Role</u></b>						
Body Movement/Gesture						
Sound/Speech						
Mimicry/Innovation						
Brief/Sustained						
Relationship with Another Role						
Role Development						
Scene/Situation Development						
Other						

**Key**    5: Excellent    4: Good    3: Average    2: Fair    1: Poor

0: Not Observed or Client could not do

### **B3: Observation Format for Drumming (RHYTHM)**

Name of the Client: \_\_\_\_\_

Session Date: \_\_\_\_\_

<b><u>PARAMETERS</u></b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>
<b>PULSE</b>						
Conservation						
Embody						
<b>DYNAMICS</b>						
Volume						
Stop Cuts						
Tempo						
Rumbles						
Accents						
<b>PATTERNS</b>						
Folk Rhythms						
Timbre						
Call response						
Waiting						
Awareness of and playing on one's turn (Sculpting and Layering)						

Key

5: Excellent  
could not do

4: Good

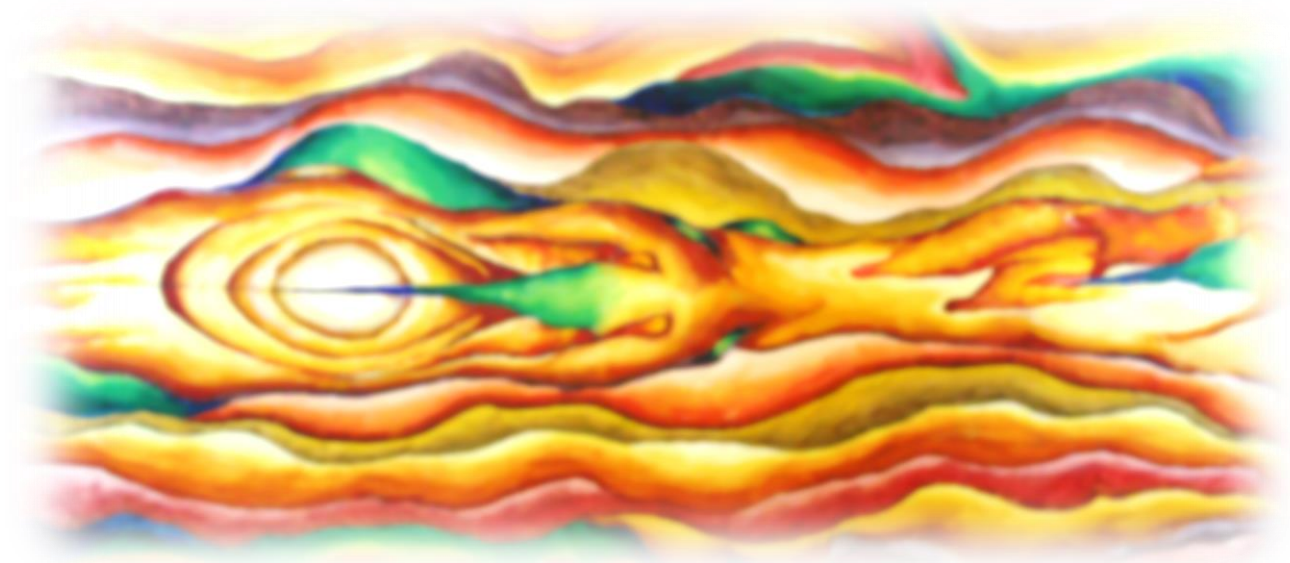
3: Average

2: Fair

1: Poor

0: Not observed or client

### 6.3 APPENDIX C: SRS Summary



<u>Session No.</u>	<u>Date and Time</u>	<u>Therapeutic Domain</u>	<u>Metaphor</u>	<u>Communion</u>	<u>Creation</u>	<u>Closure</u>
1	11th September, 11.15am - 12.15pm (Same time slot for every session)	Narrative Capability	Sharing	Greeting each other and sharing the experiences of the last week.	Present the bag of props, the participants pick something from the blind bag and talk about it. Relate it to their personal experience.	Return the objects to the bag. Recalling the different objects picked. Close with deep breathing and "Om chanting".
2	13th September	Body Awareness	Focus	Greeting the group. We began with naming body parts. Body parts song and actions. We discussed what do we observe/see when we meet someone.	Two co-facilitators became models and participants observed and shared one observation about each of them. Then we did body tracing. The participants lay down on rolls of paper and the facilitator traced their outline. The ask was to be aware of the body periphery as it is being traced.	The body tracings were put away to be worked upon in next session. We sat quietly for a minute becoming aware of our breath. We closed with bye-bye song.

3	15th September	Body and Self	Looking within, Self-Awareness	Greeting, hello song. Ask the group what are we going to do today (ref. Wednesday session). we take one tracing for reference and label the body parts in it.	we hand over the body trace-outs to the participants and give them crayons to work on their respective papers. the activity is open ended and the participants can create body maps as they wish to. they can be gently guided about specific colours indicating feelings or sensations. the time is indicated so that the participants could wind up their work accordingly. (in case we need to work further, we could take it again on Monday so that the continuity is maintained).	session recap. close with "every little cell in my body" song. thank you.
4	18th September	Self-Awareness, Expressive capability	Inside-out	We begin with the Greeting song. We will do simple warm up exercises. Using a frame drum, I will play a beat and the group will repeat it by stomping their feet. Each participant gets to play a beat which the group taps out with their feet. Once everyone gets their turn, we sit down and focus on our breath (with the instruction to become aware of the feelings and sensations in the body).	Body Maps to be continued. We will work with crayons, crepe paper, and glue and encourage the participants to express themselves through their artwork by connecting with their physical body as well as their thoughts.	Lying down and breathing with sounds (slow meditative and guided breathing exercise)



5	20th September	Emotions, Narrative Capability	Expressions	Greeting. Breathing Exercises. Verbal Narratives about self - "I am __ and I like __" - and other similar questions which will enable the group to give improvised responses about themselves w.r.t. the question being asked.	Drumming our emotions- The group is given djembes. we practice the basic pulse, and dynamics (start-stop cuts, rumbles). We will roll a dice and depending on the number, we will express that particular emotion through a beat. The group will listen and imitate as each participant gets their turn. Once every participant gets their turn, we play in unison for some time and then stop. We put away the instruments.	Putting away the drums, exercising hands. Quiet meditation.
6	4th October	Self-Awareness, Narrative Capability	Demons and Warriors	Greeting. Talking about Dussehra festival, the story behind it, its significance. Introducing the concept of good vs evil and Demons and Warriors.	Participants talked about something in their life that they don't like, they are afraid of; and also their strengths and passions which helps them overcome their fears (or demons). The participants also did an individual sculpt of both these aspects.	De-rolling by shaking hands and feet to release the pent up feelings. Recap of the session, sitting quietly to shift focus to within oneself. Close with three rounds of Bhramari Pranayama.

7	6th October	Expressive and Narrative Capability	Different Facets of Self, strengths and weaknesses	Greeting the participants. Talking about Strengths and Weaknesses, each participant shared their strengths and weaknesses by talking about them. Some help was provided by asking further questions based on their responses.	The participants were given two paper plates on which they were asked to create two different masks depicting different sides/facets of them. One depicting their fears/weaknesses/demons and the other their strengths. Once done the participants shared their artwork and talked about what they have created.	The participants were asked to tell a song which they related to as a message pertinent to their life. Ended the session with singing "Humko Man ki Shakti Dena..".
8	9th October	Narrative Capability - Descriptive Speech	Stories we tell	We began with greeting. Voice work - breathing with Vowel sounds; Voice techniques (calling out one's name with different vocal effects – whisper, echo, projection; and expressions); Speech and text (each participant to give a noun and adjective which was noted down)	Using the words written on the board, the participants made sentences, each building on the previous one to form a story (Narrative). Each participant selected a character from the story and embodied it. The participants together formed a group sculpt. (Body – Embodiment)	Talk about story being a sequence of events which is narrated. Link it to the daily events in one's life – each day a new story unfolds. We ended the session with Om chanting.
9	11th October	Expressive Capability	Bringing the story to life	Greeting the group by waving at them. Interacting with the group through actions and mime (like dumb-charades), observing their responses and building upon them (improvisation)	We re-read the story created on Monday and acted it out line by line, thereby creating a drama version of the story. The participants tried to add sounds, songs, dialogues to the basic story.(Voice: sounds, speech and text; Body: movement)	Applauding ourselves and each other for the performance. We talked about becoming mindful and aware of details in the world around us, how it add richness to simple experiences. Ended the session with quiet meditation.

10	13th October	Creativity, Descriptive speech	Abstract to Concrete to Abstract (thought- creation- narration)	Greeting the group. We worked on simple body movements and exercises with contributions from each member. (Movement) Each participant suggested an exercise (simple gross or fine motor movements) which we repeated for a count of 16.	Working with materials (clay, beads, ice-cream sticks) to create structures. The materials were distributed and the clients were free to create whatever they wished with them. Each participant talked about their created artwork (narratives).	We returned the materials to their containers, cleared the working space. We de-rolled by dusting off our hands. We talked about the ability of clay to take up any form as we mould it. What does it mean? Ended with three rounds of Om chanting.
11	23rd October	Waiting (Self-Control), Group Interaction	Pass it on	Good morning song. Talking about the diwali break, how each one celebrated the festival. What is your favourite thing about Diwali. Playing a game of "passing in the circle" (it could be a pretend ball, clap, action, words or sounds)	Drum circle - each of the participants to pass beats which will travel the circle and return to the sender. The participants were required to wait for their turn and stop once they have played the pattern. once everyone gets their turn, the group was taught the park rhythm and we played as a group. the participants were encouraged to sing along songs which would align with the beat.	Putting away the instruments, massaging hands, recap of the session, closing eyes and doing quiet meditation with deep breathing.

12	25th October			Greeting, Good morning song. The communion involved movement and exercises - Limbo Dance and warm-up exercises in pairs.	Participants listened to the sounds being played. Once done, they recalled what all sounds they heard and it was noted down. Each participant chose one sound and imitated that sound and its action and together we created a sound machine. (Dynamic Sculpture with movement and sound)	Participants shared their experiences of the activity, recap of the session followed by quiet meditation.
13	27th October	Group Interaction, Mindfulness	Collaboration	Greeting, Playing circle games - Zip-Zap-Zoom, No.7 sneeze to build and reinforce connections between group members.	Round-Robin painting. The participants painted on their art paper for a given period of time after which they had to pass on the sheet to their right and paint on the new sheet that they receive. This was continued till everyone got their paper back and painted on it one last time.	We ended the session by clearing away the workspace. All participants mopped the floor and returned to the circle. We shared our artworks and experiences and thanked each other for their contribution to our individual artworks.
14	30th October	Narrative Capability, Self-Awareness	Understanding my thoughts	Greeting, Voice work (breathing with and without sounds, volume, pitch, chanting)	Talking through your hat! "The magic headgear" - when I wear this, I start telling the truth - I say whatever comes to my mind when I wear this. Headgear goes around in circle and we listen to everyone's stories.	Shaking head to release the characters and stories from one's mind. Experiences of the activity/process. Three rounds of Bhramari pranayama. Thanking the group for sharing their stories.

15	3rd November	Expressive and Narrative Capability	...and so the story goes	Greeting, Making an improv speech. Every participant says one word to continue the sentence (could even be non-sensical). The focus is on continuing the flow of words. After going around the circle a few times. We read the sentences created.	I will tell a story and trail it off at the ending. The participants tell how they feel the story should end. They could narrate or sing or act out their version of the ending. Participants are given art paper and colour pens to draw or write to express themselves if they wish. It will be open ended w.r.t the art-form the participants wish to use to continue the story.	Telling our story to the group. Reflect on the possible endings. Quiet contemplation. Thank you.
16	6th November	Narrative Capability	Magic	Voice work (Deep Breathing, vowel sounds), talk about magic (words/sounds related to magic). I asked the group what do they understand by magic (ask what it is called in their respective languages).	A bag full of props is circulated and the participants take out one item from the bag and describe it, and any personal experience related to it. The items selected are noted down on the white board, we create a narrative based on the props listed. A story magically evolves.	Sending the props back to the bag. Recap of the session, thank you.

17	8th November	Simple exercises, Group Interaction, Body awareness	Our body, our home	Greeting, good morning song. We began with simple exercises to a count of sixteen. Also did brain gym exercises. Next I played a beat pattern on frame drum and the group had to clap it back.	We settled down in the circle and did deep breathing. As we sat, we listened to ambient sounds for 2 mins. Each participant took turn to act out what they heard and the others had to guess.	We had a closing discussion about how does the body feel today, what all do you think it is capable of? (discussion to covered topics like - Our earth vehicle - thanking our body. Taking care of it, positive body affirmations within energy circle). Closed by thanking the group.
18	10th November	Group Interaction	Creating together	Greeting, hello song. Creating a medley of sounds - starting with the first participant the others add to the existing sound and repeat the whole sequence/pattern. Once everybody gets their turn, all of us together say it in chorus.	Pass this sharing to the artwork we create. Every participant is given a chart paper and paints. The instruction is to work on your sheet of paper and pass it on once the signal to change is given. Once you get the original artwork back, paint on it one final time. the activity will now end. (Round-robin painting)	Clearing the space by putting away the art materials. Sharing of artworks and experiences. Thanking everyone for their contribution to our artwork. We closed with the Thank you song.
19	13th November	Focus, Group Interaction	"that reminds me.."	Greeting, body parts song. The participants took turns passing an imaginary object in the circle by miming it. The group had to guess what is being passed. Quiz for the participants to recall who passed what (working memory).	Word associations/chains - we say a word and the next participant says the word based on the previous one. We continued this for a few rounds in the circle.	We closed with a recap of the session. Om Chanting.

20	15th November	Narrative Capability, Self-Awareness	"I notice everything!"	Greeting, hello song, vocal warm ups. I asked the group some riddles about people in the school - guess the person (structured as a passing the parcel game)	Observe your friend - each participant becomes a model and the rest of the group describe his/her appearance (descriptive speech). The activity got over once every participant got their turn to be the model.	The participants talked about their experience of standing before the group and being observed. How did it make them feel?
21	17th November	Expressive and Narrative Capability	Nature	Greeting, good morning song. We talked about nature and different landscapes, images that come to mind when we talk about different landscapes. Participants shared the different places they have visited and had to embody what they have seen (any landscape or what they did there)	Using clay, ice cream sticks, strings, beads, participants were asked to create something related to nature.	Clearing the workspace, sharing the art works and talking about what everyone created. We closed by meditating to nature sounds.
22	20th November	Self-Awareness (projection), Narrative Capability, positive Self-Image	Reaching within	Greeting. Vocal exercises. Group members described how they were feeling with a song. Once they sang it, they had to name the emotion in that song.	Working with a mirror. The participants sat before a mirror and used the props provided in any way they like. The other members of the group had to describe the change in appearance of the person and the individual talked about the look they have created.	We cleared the space, put the mirror and props away. Guiding attention inwards the group members gave themselves a compliment. We ended with Om chanting.

23	22nd November	Non-Verbal Expression, Group Interaction	Emotions	Greeting, Weather song, creating sounds with breath and voice to depict different types of weather.	Drumming an emotion. Enlist some of the common emotions experienced by the group members. They play/drum their interpretation of the emotion. The group will follow the lead in an effort to understand how the person chooses to express it (building empathy, mindfulness). we end the creation by playing together to a constant pulse.	putting away the drums, exercising hands. Quiet meditation.
24	24th November	Expressive and Narrative Capability	Projection	Greeting, hello song, movement with music, exercises in pairs, return to the circle, deep breathing with focus on how one is feeling inside.	Draw a person activity. Using crayons and sketch pens, the participants made a drawing of a person - depicting what he/she looks like and what he/she is feeling. The participants were given pointers but they drew from their own imagination.	The participants were asked to "look at the picture you have created and talk about the person it depicts". Clearing the materials and returning to the circle. Closed the session with "I like the flowers" song.
25	27th November	Group Interaction, Communication (Verbal and Non-Verbal)	Bonding	Greeting, hello song, simple exercises and stretches. We did a simple game of embodiment "walk like a___".	Group Games - zip-zap-zoom, No. 7 Sneeze, mirroring (in pairs), word associations. We also played a dumb-charades version of "guess the emotion" (each person acted out an expression and the group had to guess how she/he was feeling).	Sharing experiences about the session, did you feel connected to the group, how? Closed with "I like the flowers" song.



26	29th November	Self-Image, Expressions (E-P-R)	Engaging with myself	Good morning song, passing the parcel game (answering questions about oneself)	We started with a creative discussion on "what is a character?". Session involved working with mirror and props. Using the props given, become any character (could be human, animal, an object, real or fictional) of your choice, say a dialogue or talk about its special powers or characteristics (role playing)	We cleared the props and returned to the circle. Session recap, sharing from the group. We ended with quiet meditation.
27	1st December	Focus, Mindfulness, Narrative capability	Abstract to Concrete	Greeting, talking about "finding meanings" - how we interpret what is unknown in terms of what is known. Showed the group some images of ink blots and asked what could they see (if they could relate it to something familiar).	create a background with colour bleeding technique. Start by wetting the art paper and randomly placing bits of coloured crepe paper and spraying water again to make the colour "run" on to the art paper. Using a string dipped in black paint, we create random art patterns.	Closure was about sharing artwork and experiences. Processing the artwork - each participant talked about the different forms they saw emerging in the art they created. Closed with bhramari pranayama.
28	6th December	Movement, Understanding Emotions, Non-Verbal Expression	Sharing	Greeting the group. We did movement with music and simple games - limbo dance, walk and freeze (group game), tap a rhythm - each participant taps a rhythm with their feet and the others will follow.	We talked about feelings - what are some of the feelings we do not like to experience (unpleasant), when do we feel them? Can you express it as a dance or a drum beat or song or enactment? Every participant got their turn to express.	We returned to the circle for some quiet time. Each participant was encouraged to look at every one else in the circle and share the space and the silence. Closed with Om chanting.

29	8th December	Mindfulness, Body movement, and breath awareness	Consciousness	Non-Verbal greeting, movement to music (aerobics style exercise to a popular song), settling down and becoming aware of the bodily sensations. Breath-work to help the group in centring within.	Embodiment of the Zen-strokes practice (creating strokes in the air while exhaling). Creating the Zen-Painting with breath awareness through brush strokes. A final chime indicating the end of process and the brushes and paint put away.	Clearing the workspace and returning to the circle. Sharing the artwork and experience of the process. Closed with Energy Circle.
30	15th December	Self-Awareness (projection), Narrative Capability, working memory	Story weaving	One word or sentence - what are you thinking about (noted down on the board), give a sound which is not a word but conveys meaning (e.g. achoo – implying a sneeze). The participants had to remember the sounds they heard.	Create a story (using the words/sentences mentioned by the participants earlier). Each participant contributes a sentence and the narrative builds. This goes around the circle a couple of times. Then we read the story with emotions and expressions.	Recall of what all sounds we heard in the beginning of the session. What are we thinking now? Discussion - how thoughts impact feelings. Close with om chanting.
31	18th December	Body movement, Non-Verbal Communication, Group Interaction	More than words	Greeting, body movement and exercises, trying to follow the drum beat to do the steps. Group members suggested exercises which were enlisted to create an exercise pattern (PT Drill) for the session. We also played one popular song and do aerobics exercise to the pulse of the song.	Communicating through mime. Each participant got a turn to pick a chit and mime what is written on it, the other participants tried to guess.	Recap of the session. Discussion on drawing meanings from non-verbal cues, teamwork and focus. Closed with "bhramari pranayama".

32	20th December	Group interaction, Bonding	Giving and Sharing	Greeting the group. Talk about Christmas - what is the significance, why do we celebrate it, what images are associated with it. The joy of giving. Passing the parcel - each participant draws a chit with the name of a fellow group member to whom they will give a gift	Create a card for the person whose name you got (even if he or she is absent today). Once done, we clear the work space and return to the circle.	The participants gave the card they have created to the respective person with a message which they tell them in person (what do I wish for you). Close with listening to Christmas Carols and wishing each other happy holidays.
33	22nd December	Group interaction, Mindfulness	Being Present	Greeting, Voice work (vowel sounds, melody), different voice techniques to say one sentence or dialogue. Passing a word or sound in the circle.	Passing a beat. The participants had to play the beat being passed only when it reaches them (working on waiting skills while in a group activity). Each participant got a turn to pass the beat. Once everyone had their turn, we practiced playing with focus on pulse, start and stop cuts, rumbles. Introduced "accent" at different positions in a 4-beat pattern.	Putting away the drums, massaging hands. Passing one calming word in the circle. Close with quiet meditation.

34	3rd January, 2018	Sharing, Narrative and Expressive Capability	Wishes and Aspirations	Greeting, chat about the vacations, we begin the year by laughing out loud (voice exercise of inhaling and laughing aloud), passing a ball to anyone in the circle by calling out their name. the receiver then passes it to another participant and continues till everyone has had a chance.	Playing the same game again but this time also passing wishes for the new year along with the ball. The sender passes the ball and a new year wish for the receiver, the receiver passes it on to the next person in the group. Song circle - every participant passes a song which they relate to, or which signifies their hopes and aspirations and the group sings it together. The participants will be asked to talk about why they have chosen that song.	Each participant will embody what they bring to the group, the participants join in the formation one by one to create a group sculpt. We return to the circle and thank each other for the gifts received.
35	8th January, 2018	Movement, Self-Expression and Narrative capability	My Space to just "be"	Greeting the group, creating an exercise schedule by taking inputs from all the group members. Incorporating the movements into a song (dance aerobics). Return to the circle, deep breathing.	Asked the group How are we feeling now? If you want to relax, where would you like to go? Close your eyes and imagine the place where you can just let yourself be and feel at peace. Can we draw it out? The participants were given art paper and crayons and sketch-pens (dry medium on paper) to depict the same.	Participants shared their artwork and talked about their space, a place for "rest and relaxation". We closed the session with quiet meditation.

## 7 ACKNOWLEDGEMENTS

With joy and gratitude, I acknowledge:

My client group, who walked this path with me, and taught me so much on the way. I will always treasure the love and acceptance I received from them.

My mentor - Rohit Ranjan, for his constructive feedback, organisational and logistical support, and his invaluable inputs in observation and documentation. His guidance on how to approach the project in the most effective manner has made this study what it is.

Snehadhara Foundation, for providing me the space and resources for the duration of the course. The organisation is nothing without its people. I hereby thank all the teachers, support staff and the children for their support and for treating me as a part of the family.

Our ABT teachers at Prajnadhara, Ms. Gitanjali Sarangan and Ms. Sumathi Ramjee for delivering this course to perfection. Thank you mam for providing us a platform to enhance our perspective and spurring us on whenever we felt inadequate. You have been a constant source of inspiration.

My husband, Bharat for being my pillar of strength. Whether it is with the technical knowhow, or the unconditional love and support, you have kept me afloat.

My family – Kabir, Ija, my parents and sister for their encouragement. You all have been as much a part of this journey as I have. Thank you for being there.

Shri Vikas Dubey – Guruji, for personal insights and the inspiration to have a larger vision.

My batch mates in the ABT course. Their stories and experiences kept me motivated and in high spirits.

Last but not the least, to the spirit of SEG, the cornerstone of ABT practice, I extend my heartfelt thanks. It has made the entire effort more meaningful.

In all humility, I dedicate this report to you all and to the welfare of all sentient beings.



## 8 REFERENCES

### Works Cited

- Chavan, B. S. (2014). Intellectual disability in India: Charity to right based. *Indian Journal of Psychiatry*, 113-116.
- Ekman SL, P. B. (1998). Social Dancing: A Way to Support Intellectual, Emotional and Motor Functions in Persons with Dementia. *JPMHN*, 6(5):545-54.
- Emunah, R. (1994). *Acting for Real: Dramatherapy Process, Technique, and Performance*. New York & London: Brunner-Routledge.
- Ganesh KS, D. A. (2008). Epidemiology of disability in a rural community of Karnataka. *Indian Journal of Public Health*.
- Jones, P. (1996). *Drama as Therapy: Theatre as Living*. Psychology Press.
- Kumar SG, D. A. (2009). Are the disability data in India appropriate? *National Medical Journal of India*.
- Leyre Zarobe, H. B. (2017). The role of arts activities in developing resilience and mental wellbeing in children and young people a rapid review of the literature. *Perspectives in Public Health*.
- MacDonald RA, W. G. (2012). In Musical Imaginations: Multidisciplinary Perspectives on Creativity, Performance and Perception. In W. G. MacDonald RA, *Improvisation as a creative process within contemporary music*. (pp. 242-255). Oxford: Oxford University Press.
- Malchiodi, C. (2005). *Expressive therapies*. New York, NY: Guilford Press.
- Pylvänäinen Päivi, M. J. (2015). A dance movement therapy group for depressed adult patients in a psychiatric outpatient clinic: effects of the treatment . *Frontiers in Psychology*.
- rohit. (2017). *sfo*. blr: we.
- Suzanne Haeyen, S. v. (2015). Perceived effects of art therapy in the treatment of personality disorders, cluster B/C: A qualitative study. *The Arts in Psychotherapy*.
- Vargas, M. E. (2015). Music as a Resource to Develop Cognition. In *Procedia - Social and Behavioral Sciences*, 2989-2994.
- Wilson, R. A. (2014). Musical improvisation and health: a review. *Psychology of Well-Being: Theory, Research and Practice*.
- Zubin Balsara, A. C. (2017). *ABT Manual*. WCCL Foundation.

## Websites, Blogs and Research Abstracts

1. Clegg, J., Hollis, C., Mawhood, L. and Rutter, M. (2005), Developmental language disorders – a follow-up in later adult life. Cognitive, language and psychosocial outcomes. *Journal of Child Psychology and Psychiatry*, 46: 128–149. doi:10.1111/j.1469-7610.2004.00342.x  
(ABSTRACT: A receptive developmental language disorder involves significant deficits in theory of mind, verbal short-term memory and phonological processing, together with substantial social adaptation difficulties and increased risk of psychiatric disorder in adult life. The theoretical and clinical implications of the findings are discussed.)
2. Noice, T., Noice, H., & Kramer, A. F. (2014). Participatory Arts for Older Adults: A Review of Benefits and Challenges. *The Gerontologist*, 54(5), 741–753.  
<http://doi.org/10.1093/geront/gnt138>
3. Social Dancing: A Way to Support Intellectual, Emotional and Motor Functions in Persons with Dementia. Stuckey, H. L., & Nobel, J. (2010). The Connection Between Art, Healing, and Public Health: A Review of Current Literature. *American Journal of Public Health*, 100(2), 254–263. <http://doi.org/10.2105/AJPH.2008.156497>
4. Ema Skeja, The Impact of Cognitive Intervention Program and Music Therapy in Learning Disabilities, In *Procedia - Social and Behavioral Sciences*, Volume 159, 2014, Pages 605-609, ISSN 1877-0428, <https://doi.org/10.1016/j.sbspro.2014.12.433>.
5. [B]Using Expressive Arts to Work with Mind, Body and Emotions: Theory and Practice By Helen Wilson, Mark Pearson. Jessica Kingsley Publishers. Copyright.
6. <https://www.goodtherapy.org/learn-about-therapy/types/expressive-arts-therapy>
7. [www.disabilityresource.org/29-top-five-advantages-of-dance-therapy](http://www.disabilityresource.org/29-top-five-advantages-of-dance-therapy)
8. <https://www.goodtherapy.org/learn-about-therapy/types/drama-therapy>
9. <http://www.arttherapyblog.com/what-is-art-therapy/#.WbfxNelLfIU>
10. <http://www.counselling-directory.org.uk/art-therapy.html>
11. <http://www.dancedeck.com/blog/how-dance-therapy-can-benefit-special-needs-children/>
12. <https://ldaamerica.org/wp-content/uploads/2014/03/Social-Emotional-Issues-Information-Sheet1.pdf>
13. <https://sharepoint.washington.edu/uwsom/sls/Documents/1990/Prac-Creati-in-Older-Adult.pdf>
14. <http://nspt4kids.com/parenting/improving-self-esteem-children-speech-language-disorders-classroom/>
15. <https://www.speechbuddy.com/blog/speech-disorders/7-ways-to-build-confidence-in-kids-with-speech-disorders/>
16. <http://www.webmd.com/parenting/news/20100628/speech-delay-in-kids-linked-to-later-emotional-problems#1>
17. [http://www.rsd.k12.pa.us/Downloads/Development\\_Chart\\_for\\_Booklet.pdf](http://www.rsd.k12.pa.us/Downloads/Development_Chart_for_Booklet.pdf)

18. <https://www.nidcd.nih.gov/sites/default/files/Documents/health/voice/NIDCD-Speech-Language-Dev-Milestones.pdf>
19. <https://www.stanfield.com/blog/2016/05/developmentally-disabled-activities-2/>