



Arts and Body-based Interventions in an Observation Home in India

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Introduction:

Studiesⁱ show that India's mental health issues are rising but only about one in 10 people with mental health disorders receive evidence-based treatment. Though there is a positive shift towards seeking and creating avenues for mental health services, the lack of awareness and stigma proves a major impediment to access. Mental health professionals are adopting arts-based methods in the process of healing and transformationⁱⁱ, in recognition of the engaging and therapeutic properties of art and the process of creation; more academic exchanges are required within this movement.

Khula Aasman (KA), literally translated "*Open Sky*", is an NGO in Mumbai set up in response to this need, envisioned as a space to explore and implement an arts-based therapeutic approach for working with marginalized groups. Founded by an artist and social activist trained in professional social work, KA is a blend of social change and art, focusing on improving quality of life, supporting personal development, enhancing social cohesion, well-being and human rights.

In 2013, action research conducted by KA at a Government Rescue Home for women showed positive results - during sessions, the women shared traumatic and joyful memories, came together to explore themes related to identity & self, tapped into their creativity to shape moments of joy. According to the institution's counselors, women who attended the sessions took less time to start the process of rehabilitation, being more open, co-operative, expressive and clear about their future. This module became the basis for working with different groups.

KA has since established its presence in the context of social action in group and community development settings, collaborating with NGOs, Government and corporate agencies. The main focus has been 'at-risk' and institutionalized populations across age groups and social strata including juvenile offenders, lower socio-economic communities, victims of abuse, exploitation and trafficking and communities whose psycho-social needs remain largely unseen. Many participants have never before been encouraged to form and share opinions, experiencing restrictions of language and difficulty in articulation in the commonly used language. Their emotions anger, frustrations, and sadness, are mainly then

expressed in the form of aggression, silence and tears. For KA it is therefore vital to encourage the participants to use the arts to communicate, explore one's thoughts, behaviours and attitudes, strengthen what is essential and drop what is not.

KA's tools for self-reflection, healing and transformation include visual art, craft, clay work, dance and movement, non-competitive games, music and rhythm, stories and metaphors, Yoga¹, creative visualization, and drama, often in conjunction with each other. The focus is the therapeutic element and process of art making, rather than the final product.

Sessions are driven by the needs of the group and structured at 60-90 minutes, for optimum participation and engagement. The emphasis is on a rights-based group process, highlighting values of co-creation, inclusion and respect and problem-solving. The facilitator's skill is important to create a safe, non-threatening, engaging and stimulating environment, manage the personalities of the group as well as facilitate meaningful dialogue and reflection.

EABT with children 'at-risk'

According to the National Crime Records Bureau, 44,171 juveniles were apprehended in 2016 for crimes, 73% were between 16-18 years of ageⁱⁱⁱ. Children experiencing socio-economic marginalization, discrimination, poverty, abuse, dysfunctional family, exposure to anti-social elements, are 'at-risk' for delinquent behavior (Dey, 2014). When apprehended by authorities these children are placed in Observation Homes (OH) that work under the Juvenile Justice (Care and Protection of Children) Act 2000. The Homes provide basic needs, educational and recreational facilities - with the aim of protection and rehabilitation- until the legal procedures are complete/ the family and relatives take them back. Children often feel caged in these Homes that offer little stimulation. The label '*offenders*' creates hurdles in rehabilitation leading to recidivism.

The use of EABT techniques with juveniles in conflict with the law is not novel, yet not much used in India. Art therapy has been found to reduce boredom, provide stress relief, increase confidence, improve the ability to concentrate and helps juveniles work through frustration (Persons, 2008). General outcomes from a review of the effectiveness of the arts and arts therapies in the offender context (Kõiv and Kaudne, 2015), reflect that they bring in stability, healing, catharsis, reduced levels of arousal (anger in males and stress in females), decrease in negative/harmful behaviour patterns and disorderly conduct, increase in self-esteem and confidence, and overall improved mental and emotional health.

Since ABT is still in a nascent stage in India, more research is required to link intervention to impact in this context. Hereunder we share about a pilot research study with children from one of the OH.

The Pilot Yoga Intervention

¹ **Yoga** is a group of physical, mental, and spiritual practices which originated in ancient India.

Bhivandi Observation Home is a residential home which accommodates juvenile offenders under jurisdiction of Juvenile Justice Board as well as non-offenders, in need of care and protection, under the jurisdiction of Child Welfare Committee. KA had started working with BOH in December 2015 with boys (14-18 years). Between August 2016-March 2017, KA conducted 24 ABT sessions with the inmates. Through the sharings of the participants and facilitator observations, there was a felt need to conduct a more focused Yoga intervention for physical and mental wellbeing. A review of research studies on the impact of Yoga indicates positive benefits on physical and mental wellness (Bussing et. al., 2012).

Methodology

During the EABT intervention, most participants reported body stiffness and pain, dizziness, and difficulty in breathing and focusing; weakness, lethargy, insomnia, and mental distress. A week-long Yoga workshop was conducted with 20 participants in response to these complaints. The objectives of the intervention were:

- To teach the basics of Yoga and breathing techniques.
- Acquisition of associated health and other benefits
- Create a cohort of individuals who can conduct basic Yoga sessions with the aim of sustainability

The programme focused on certain Asanas. Each day of the seven day intervention was structured for beginners taking into account the participants' expressed needs and schedules. Each session spanned 2 hour and were conducted twice a day.

To track impact, a questionnaire was administered to the participants, pre and post-intervention. This was an in-built scale to gauge physical, mental, and emotional shifts experienced by the boys during the workshop.

The questionnaire assessed:

- Physical: Including strength / weakness in the body, the ability to sit still, flexibility and feeling of pain in the body
- Emotional: Including specific emotions: anger, sadness, happiness and calmness
- Mental: Including concentration, listening skills, the nature and quality of thought patterns, and sleep patterns.

A limitation of the study was that the questionnaire could not be pilot tested. The facilitator who conducted the session had to do all the data collection. Since the government norms are stringent about protecting the identity of the children, access to government records is not available. Moreover, we had permission to send only one male facilitator inside the Home. This is a floating population; hence post questionnaire could not be administered for 3 participants who were released towards the end of the intervention.

Participant's profile:

About 85%² of the participants were in the 16 – 18 years age group. Most were school drop-outs before completing secondary school certificate exam; only 15% had reached 10th standard. Most of the participants reported that their parents were employed in the unskilled sector; were mainly daily wage earners and faced problems like low family income, lack of employment opportunities, no space at home, and the death or absence of one or both parents.

Results:

We found that the intervention achieved the objectives planned. 95% of the participants reported reduction in pain and better flexibility post-intervention. Less weakness in the body was reported by 70% of the boys. About 80% of them reported an increase in their ability to sit in one place, a function of ‘stillness’ as we understand it. 80% reported that they were able to listen better, and for much longer periods of time. 85% of the participants reported experiencing better concentration levels while working. Most showed marked increase in positive thoughts (90%) and 80% of the boys noted a decrease in negative thoughts. 90% of the boys reported better sleep patterns. Many boys reported that while earlier sleep was elusive and they would remain awake for hours on end, they were now able to fall asleep in under 10 minutes. 85% of all participants reported experiencing more happiness and less sadness. 80% reported experiencing lesser anger, and more calmness. *“Every day I felt very bad, lot of anger was within me, but, now I am feeling better, after Yoga practice, my way of thinking, and feeling is more positive.”*

When we asked the boys how they were feeling in the moment, 75% of them reported shifts from emotions like anger, stress and sadness to happiness. Some of the participants reported shifts from anger and stress to sadness, i.e., a shift away from volatile emotions.

“Why I did, what I did (crime) I don’t know. I should not have done that I am very sorry for that, now I am feeling very sad about it. Thanks to the Yoga class now I am feeling that I also want to give support to others.”

Most participants told the facilitator that their confidence levels increased and that the increase in strength in their own bodies made them more hopeful and positive about going out and achieving something.

The facilitator along with staff simultaneously noted an increase in group cohesion, a decrease in the number and nature of the physical fights and use of abusive language, an overall increase in energy and enthusiasm in the space, a marked increase in personal hygiene and self-care. Moreover the facilitator observed an increase in conscious breathing and better posture in most of the participants. Before the Intervention, their faces were dull, they moved around dragging their feet, with their shoulders lopsided. Post-Yoga workshop, there was some confidence in their gait, energy in their walk, they were more conscious of their bodies. They walked with shoulders straight, back straight, with smiles on their face. Their response level increased, while their response time decreased. They would answer immediately, move quicker as well.

² Some children were not sure about their age and gave an approximate age.

Follow ups with the OH indicated that the remaining participants were able to sustain their practice on their own, also teaching new entrants Yoga; thus achieving our intervention goal of sustainability.

The success of this pilot intervention has encouraged us to continue body-based programmes, in OHs, to enhance the well-being of juveniles. It is essential for ABT practitioners to study the impact of an Arts-based programme on recidivism rates among juveniles.

It is also important for more social workers to acknowledge the important role that ABT can play in individual, group and community development and include it in field practice.



Figure 1: Body Image created by inmate at OH

References:

Charlson, F., et al. (2016): The burden of mental, neurological, and substance use disorders in China and India: a systematic analysis of community representative epidemiological studies The Lancet , Volume 388 , Issue 10042 , 376 – 389

Dey, M. (2014) : Juvenile Justice in India, International Journal of Interdisciplinary and Multidisciplinary Studies (IJIMS), 2014, Vol 1, No.6, 64-70.

Persons R. W. (2008) : Art Therapy with Serious Juvenile Offenders‘, International Journal of Offender Therapy and Comparative Criminology, Sage Journals

Köiv, K. (2015): Impact of Integrated Arts Therapy: An Intervention Program for Young Female Offenders in Correctional Institution, Psychology, 2015, 6, 1-9

<http://dx.doi.org/10.4236/psych.2015.61001>

Bussing, A. (2012): Effects of Yoga on Mental and Physical Health: A Short Summary of Reviews, Evidence-Based Complementary and Alternative Medicine, Volume 2012 (2012), Article ID 165410, 7 pages, <http://dx.doi.org/10.1155/2012/165410>

ⁱ Mental illness India's ticking bomb, only 1 in 10 treated: Lancet study Source: <http://indianexpress.com/article/india/india-news-india/mental-illness-indias-ticking-bomb-only-1-in-10-treated-lancet-study-2807987/>

ⁱⁱ Art-Based Therapies help improve Mental Health: <https://timesofindia.indiatimes.com/city/pune/Art-based-therapies-help-improve-mental-health/articleshow/11692823.cms>

Therapists turn to the arts to heal others: <https://timesofindia.indiatimes.com/city/chennai/Therapists-turn-to-the-arts-to-heal-others/articleshow/10722555.cms>

ⁱⁱⁱ Crime in India 2016 Statistics, NCRB, 2017: <http://ncrb.gov.in>

