



Arts become Therapy



A JOURNEY IN ARTS BASED THERAPY



Arts become Therapy

This is a report on the journey of the students of ABT certificate Course 2007. ABT is more than just an acronym for Arts Based Therapy. It is a process of using multi arts media i.e. a combination of drama, music, movement, visual art, poetry, imagination, story telling etc. for therapeutic goals. ABT is primarily an art form practiced scientifically based on the Subtle Energy Guide.

Supported by The J.R.D. Tata Trust, Mumbai

ACKNOWLEDGMENTS

“Be grateful for whoever comes, because each has been sent as a guide from beyond.”
- Rumi

Our hearts are filled with immense gratitude to all our guardian angels in all dimensions who have been with us in the manifestation of the second ABT certificate course. They have helped us keep our vision and our hopes alive. Without them it would have just remained a dream.

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Our sincere thanks to all Organizations, who have sent their staff members to this intensive course. We appreciate your cooperation, patience and faith reposed in us throughout the course.

We value the sincere effort put in by the second batch of ABT students who are now practitioners and ambassadors embodying the essence of who they really are.

Many thanks to all our volunteers, resource persons, support staff of WCCLF, and the staff of National Insurance Academy (the venue of our course) who have shown their immense strength and support to keep us calm and composed. We are also grateful to Prime Enterprises for the designing and printing work for the Course and Periscope for the design of this report.

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PREFACE

This report captures the essence of the ABT Certificate Course offered by the WCCL Foundation. It is an intensive nine-month course where the students go through a process of self healing, self awareness and self nurturing before they set out as full fledged ABT practitioners. It takes the same amount of time for a human being to be born. The report captures this process.

Some of the highlights of the report are:

- It gives an overview of the process and contents of the course.
- It captures the synopsis of the action research projects done by students who have completed the course successfully.
- It reviews the course through feedback from mentors, peers and the participants.

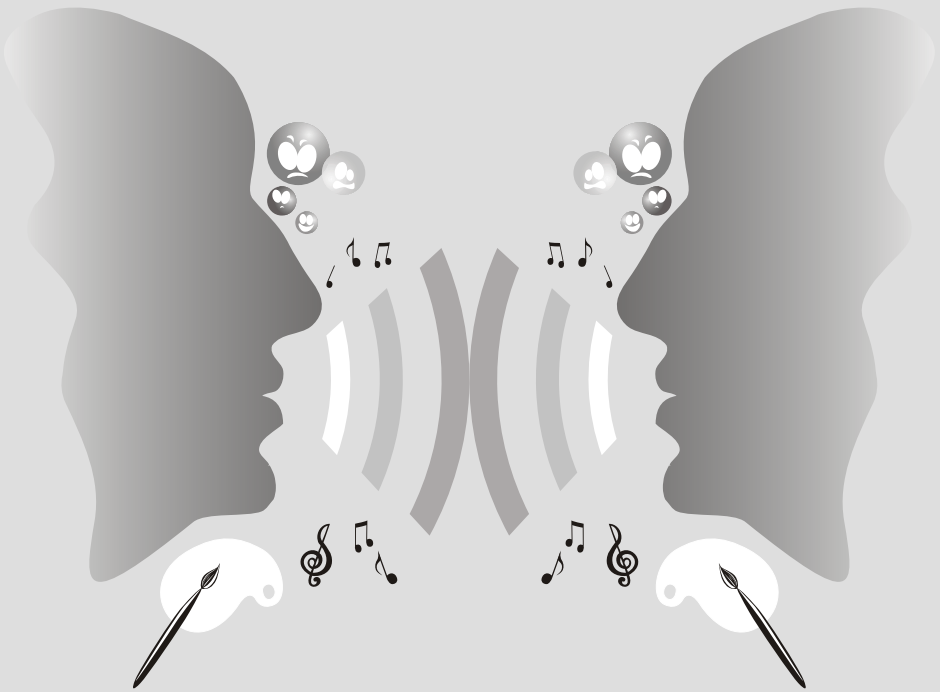
The purpose of this report is manifold. It serves as an:

- Assessment and Review tool for all stakeholders
- Introduction to Arts Based Therapy for those who need to know
- Understanding of the practice of ABT in different contexts and with different client groups
- Invitation to special educators, social workers, psychologists, therapists, health workers and the community at large to engage in ABT

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1. THE CALL AND RESPONSE



“Respond to every call that excites your spirit”

- Rumi

The call and response is one of the techniques in music to communicate to the group. The call for the second batch of students was sent to around hundred non-governmental organizations, (NGOs) all over India sometime in October 2006.

The response began to trickle in by November. There were many responses to the course. Some of which were very encouraging

“I've been waiting for a course like this”

“This really sounds interesting”

“Can I send all the teachers?”

“Our kids would love it”

“Sounds great.....let me think about it”

And some encouraged us to think, explore and advance it further-does it really work?... or we do this already!!... we do not have staff... its great but we can't afford it...and so on.

It takes a lot of courage and faith to set out on a journey like this and this experience was very humbling as well as heartening for us as a team. We are in this mission because it excites our spirit.

A few are destined to respond to the call every year. There were these precious twenty eight students, who were appointed to meet us for the second ABT Certificate Course and they appeared from different parts of India.

1.1 Profile of the group of Students:

The profile of this batch was interesting. Some of the features were:

- Age group was between twenty three to sixty four. We had three students above fifty years of age.
- Four of them in the group were organizational heads.
- 90 % of the group comprised of professional psychologists, social workers, artists, special educators etc.
- Five men enrolled for the course.

Table 1: Profile of the Participating Organizations

S.no	Participating Organizations	Populations they work with
1.	Aangan Trust, Mumbai	Children in observation homes
2.	Atmavishwas Vidyalaya, Mumbai	Adults with mental illness
3.	Bharatiya Samaj Seva Kendra, Pune	Children for adoption
4.	CCDT, Mumbai	HIV affected children
5.	Chatrabhuj Narsee Memorial School, Mumbai	Children with special needs
6.	Deepika Resource Centre, Bangalore	Children with learning disabilities
7.	Indian Council for Mental Health, Mumbai	Children with multiple disabilities
8.	Jidd Special School, Navi Mumbai	Children with multiple disabilities
9.	Muktangan RRTC - Pune	Alcohol and drug addicts
10.	Phoenix, Prism Foundation, Pune	Children with special needs
11.	Railway Children, UK Mumbai, Tamil Nadu, Delhi & West Bengal	Street children
12.	Spastic Society, Mumbai	Children with special needs
13.	Samaritans, Mumbai	Adults with mental illness
14.	Sevadaan, Mumbai	Children with special needs
15.	Navjeevan, Nagpur	Alcohol and drug addicts
16.	Welfare Society of Destitute Children, Mumbai	Destitute Children

1.2 Eligibility Criteria:

The students fulfilled the following eligibility criteria.

- Post graduation in behavioral sciences or graduation in any stream with minimum two years or more field experience of working with special needs groups.
- Graduation as a criterion was waived for applicants having field experience of working with special needs group for more than seven years.
- A clear understanding and experience of the 'pathology of the illness s/he will be working with.

- Working in an organization where s/he could directly apply what s/he learns under supervision of seniors and peers.
- Aptitude for theory and research skills
- Comprehension and reading skills in English and writing skills in English/ Hindi / Marathi.

1.3 Course Structure and Schedule:

Table 2: Course Structure and Schedule

Step	Structure	Schedule
1	Registration	15th December '06
2	Learning Workshop I	14th to 21st January '07
3	Leaders Workshop	20th January '07
4	Pilot Project Assignments	Feb to April '07
5	Learning Workshop II	23rd to 29th April '07
6	Action Research Project	May to September '07
7	Certification	30th September '07

1.4 Learning Workshop I

The twenty eight selected students arrived for the first workshop which was held at the National Insurance Academy (NIA), Pune from 14th to 22nd January 2007. The students who were representing fifteen organizations creatively introduced themselves in a play session and built rapport instantly through the art forms. That's the beauty of art- it breaks barriers and builds connections.

The first module introduced the students to the various art forms. They get to explore and practice various skills in music, drama and visual aesthetics. The students were given reading assignments and worksheets to complete during the course.

1.5 Leaders Workshop

“Experiencing Art” was a workshop organized to orient the leaders of the above participating organizations on what the students have learnt and are learning in the Course. It was held on the 20th of January '07 at NIA, Pune itself. The leaders got a glimpse of the place and were briefed on the

course content and the process of learning. Twelve leaders participated in the workshop. The focus of the workshop was on integration of ABT within organizational framework.

Some of the highlights were:

- The ABT students, faculty and the leaders coming on a common platform to discuss problems, support mechanisms, views and opinions.
- The leaders went through a session on experiencing art which they enjoyed very much.
- Sharing of mutual expectations.
- Sowing of ABT seeds in the future strategies of the organizations.

This workshop was very significant in enrolling the support of the organization to further the work of the students and to sustain the **nation-wide implementation of Arts-Based Therapies in NGOs** which is the ultimate objective of this course.

1.6 Supervision Visits

After the input on theory and skills it was time now for the students to explore and practice what they had learnt with the populations they work with.

The students began their pilot project from February'07 in their respective organizations. To extend support on field, one faculty member from WCCLF visited every student at their project site to supervise their pilot project.

The purpose of the supervision visit was:

- To observe an ABT session and give feedback to students.
- To dialogue with the mentor on the students development and the ABT experience in the organization, and
- To guide and support the students to enrich their practice.

One complete session was observed after which there was a conversation with the student, mentor and the head of the organization. Areas of improvement were shared, doubts clarified, questions answered and creative solutions found. The supervision visit enabled us to touch base with student's reality. In some of the organizations ABT was the beginning of a completely new approach to practice healing.

1.7 Learning Workshop II

The second module was held from 23rd to 29th April'07. It was sunny and bright, the weather complementing the spirit of the students. It was really wonderful to meet the students again. They were so eager to share their experiences, their joys, challenges and learning from the pilot project. Two students dropped out of the course due to ill health and family problems.

In this module students were trained to comprehend the therapeutic benefits of the music, story telling, drama, movement, voice and visual aesthetics. They also learnt how to do an action research project, plan a project and write a project report. A session was also held on how to document using video recording. Permissions were taken from their respective organizations for video documentation.

The students were also given ABT kits which composed of drums and percussion instruments to enable practice with their clients.

Students continued practicing skills, sharing insights in their personal journeys as well as through assignments and practice.



2. THE PULSE



"I learned to make my mind large, as the universe is large, so that there is room for paradoxes".

-Maxine Hong Kingston

The pulse is a beat that provides the rhythm to the group playing music together. It's the base on which the sounds integrate to make music.

Similarly the foundation of the ABT course is based on the subtle energy theory now called the Subtle Energy Guide.

The Subtle Energy Guide is the base for healing for all ABT Practitioners.

From the smallest to the largest we are all energy, the same thread running through various frequencies. It is only imperative therefore to understand the true nature of this energy and what puts it into action.

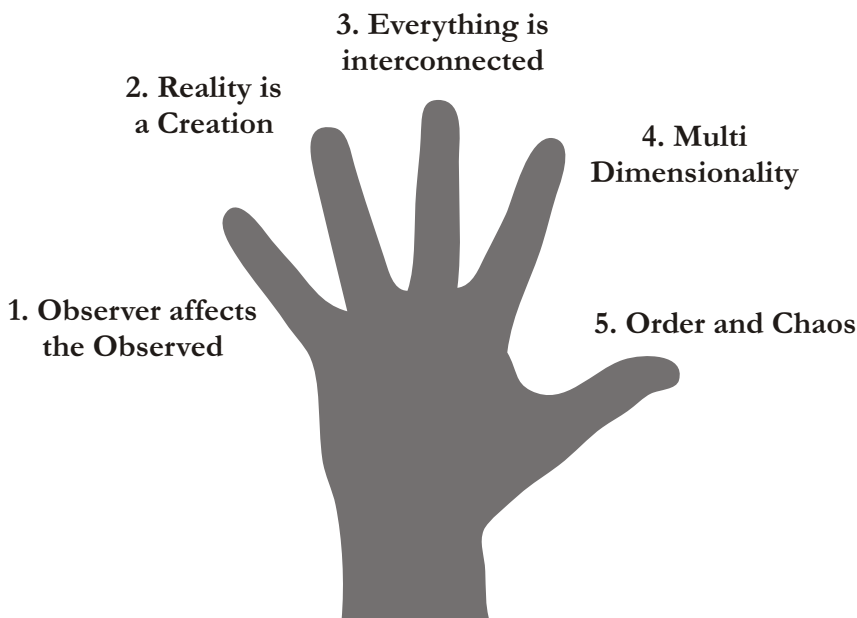
“The world of energy is subtle. It is always present, but you have to be extremely sensitive to perceive it”.

We are fortunate to live in this time where there is flow of new knowledge, innovations and access to newer dimensions. So the understanding with which the ABT approaches healing is not merely physical but is multidimensional; making it holistic and complete.

Every ABT practitioner is expected to seek true understanding only so that s/he is able to perceive differently thereby leading to a more focused and effective action both as a healer and as a human being. Without practice any understanding is of really no consequence.

The emphasis is on building capacity to perceive the world in different ways, to put together a new cognition system in order to break old habits, conditioning and beliefs. The ABT practitioner is encouraged to practice personal artistry.

There are five elements that serve as a guide to the world of subtle energy. They are:



2.1 The Five Elements

i. The First Element: The Observer Affects The Observed

This states that what you are and what you are thinking actually affects what you see. It substantiates the fact that every thought has a frequency. Somehow what is happening out there has a lot to do with who is watching. This emphasizes the role of the ABT Practitioner.

ii. The Second Element: Reality Is A Creation

This element states that the universe is a wave of possibilities. **Your intent** creates a singular reality from all possibilities. With sufficient personal power, we can create any reality.

iii. The Third Element: Everything Is Interconnected

The basis of all creation is energy. The energy field is **Guiding - Ordering - Designing**. It connects everything to everything. As a result everything is interconnected, and we are a part of the web of life.

iv. The Fourth Element: There Are Multiple Dimensions

The world is full of magic and mystery. We are multidimensional beings capable of operating in various dimensions. The body, the mind, the emotional realm, the spiritual realm and such.

This element acknowledges the fact that we are not alone and there are other intelligent life forms. Accessing one's own energy dimensions as well as others through the Chakra System.

v. The Fifth Element: Order And Chaos

This element states that any system which has a form possesses order. That which is formless or unmanifested exists in a realm of chaotic possibility. All art forms have an underlying patterns, trends, rhythms and equations.

The following concepts were also discussed and learnt under the Subtle Energy Theory.

- a) Playing with perception
- b) Intuitive imagery
- c) Role of an ABT practitioners in healing
- d) Power of intent
- e) Access to subtle realms: self
- f) Access to subtle realms: client
- g) New cognitive system and personal capacity
- h) Self protection

2.2 The Artistic Skills

The students learnt the following:

- a) Representation and image making
- b) Playing
- c) Voice, sound, speech and movement
- d) Improvisations
- e) Basics in melody and rhythm
- f) Rhythms
- g) Visual aesthetics creating a healing space
- h) Drawing and painting
- i) The world of colour

2.3 Therapeutic Application

The following concepts and practices were taught:

- a) Use of the Subtle Energy Guide for Personal Artistry
- b) Development Paradigms in Drama: Embodiment Projection Role (EPR)
- c) Development Paradigms in Music
- d) Metaphor training
- e) Arts based facilitation (groups) session boundaries, safety norms, facilitation guidelines etc.
- f) ABT Session Structure Planning the session
- g) Therapeutic application of Drama
- h) Therapeutic application of story circles
- i) Therapeutic application of music
- j) Therapeutic application of Visual aesthetics

2.4 Project Skills

A major part of the course was preparing for the action research project. Learning to create and manage a project was a integral part of learning. This included the following:

- a) Making a project plan
- b) Designing a research study
- c) Time management
- d) Influencing skills
- e) Entrepreneurial skills
- f) Feedback skills
- g) Writing project report
- h) Documentation skills



3. THE RITUAL AND RISK



“We derive both pleasure and excitement from the combination of things that we know and the things that are new and this forms the basis of much of our life and theatre experience. This is referred to as 'ritual and risk' of our structuring of our life experiences”.

- Sue Jennings (1998)

The Ritual or Risk is a principle applied in the ABT sessions. Rituals are processes which have a specific symbolic significance to contain and channelise group energy. Risk implies venturing into the unknown to stretch, explore and expand.

The rituals of the formal learning from the teacher were now complete and the students were now ready to take risks to apply creatively what they learnt with their client groups through the action research projects.

3.1 ABT Action Research Projects

“There is only one way to learn. It's through action.”

Paulo Coelho

The heart of the ABT course is the Action Research Project. This is the time for students to consolidate all that is learnt through their project.

Each student selected a specific group of clients to work with for the action research project. After doing a need analysis they framed therapeutic objectives for the individuals in the group. Almost all completed minimum twenty four sessions with their respective groups. They were enthusiastic and focused to complete their projects on time.

At regular intervals they would interact with the faculty and share their progress, challenges and triumphs. The projects were well planned and documented. It was presented through a Project Report and was supported by a video film that captured the essence of the project.

For students who could not do the video documentation, a faculty member visited their project site and witnessed a session.

We were absolutely delighted to watch the video recorded sessions and read the reports. It was inspiring to see ABT in action. There were new bridges built to connect to the clients through ABT. A new language spoken in all dimensions. **More than anything else to see and feel the responses of the clients was gratifying to the soul.**

The following is a synopsis of the student's action research projects. It captures the highlights of their projects.

i. The Blossoming - Impact of ABT on gross motor co-ordination, speech, imitation and imagination skills of the mentally challenged.

Kamal Lala

Skills and Ability School, Mumbai

- ★ **Clients Background:** Seven special people who are mentally challenged with or without related disorders. Age group youngest was nine and the oldest was forty four years. IQ level mild to moderate
- ★ **Propositions: ABT can :-**
 - Positively impact gross motor coordination
 - Improve speech, and
 - Induce imitation and imagination skills
- ★ **Data collection sources:**
 - Session record sheets
 - Direct observation
 - Feedback from peer observer, special educators and parents
 - Video documentation
 - Secondary sources : Internet, British Library & Nirmala Niketan College of Social Work
- ★ **Session Highlights:** Various creative and expressive art forms were used during the sessions: They included songs, story-telling, super brain yoga exercise, poetry, play, drama, drawing, drumming, rope play for gross motor movements and exercises on imagination, speech, imitation etc.

The direct cumulative effects of the activities that entailed gross motor coordination were to build stamina, energy and body flexibility. Fun, thrill and excitement too were the byproducts of these exercises. Overall ABT had a positive impact on gross motor movements.

The most positive and noticeable improvement through ABT sessions was the enhancement in the communication capabilities of group members. One client who was speech impaired has been attempting to verbalize and emit sounds of chakra notes. The imitation sessions positively impacted gross motor movements as well as the ability to produce sounds, words, emotions and fine motor skills.

The exercises on imagination were created to enable members to put on their thinking caps and move beyond stereotypical beliefs that mentally challenged individuals were limited in their imaginative capabilities. The other parallel benefits of the imaginative rounds included spontaneity, ability to produce sounds or words and enhanced gross motor movements.

Drumming positively impacted gross motor movements of the arms and creative drumming activities enhanced the imitation skills, imaginative capabilities, listening skills and speech of the group members.

Drama enhanced their emoting skills allowing dialogue delivery and spurts of hilarious spontaneity. Imitation through story telling generated greater interest among the group members.

◎ Project Impact: ◎

👍 Milestones achieved:

- One of the clients, who has no speech and required physical support to beat the drums, was a miracle story. He played the duffs beautifully balancing the two mallets in each hand along with a co-member. He also tried to imitate the chakra note 'a'.
- Despite long durations members expressed desire to drum.
- Recitation of the chakra notes enabled them to lead and created empathy.
- The subtle component of the sessions helped the group members positively. One of them now goes for meditation activities.
- One of the members actively participated in story telling.
- Contrary to what was called scribbles one of the members actually imitated the drawings when sat on one on one basis with the practitioner.

★ Case Highlights:

Case 1: Is fifteen years old. IQ mild.

Therapeutic Objective: To enhance gross motor co-ordination, induce imitation and imagination skills and learn to beat the frame drums softly with mallet. (Individual session)

He was able to make gross motor co-ordination movements in all sessions. He performed with gusto and enthusiasm with a nylon rope as a prop. He was able to repeat lines loudly and clearly. He actively participated in story telling. He now approaches teachers and talks to

them. His socializing skills have shown a marked improvement.

Case 2: Is forty one years old. IQ moderate.

Therapeutic Objective: To improve gross motor co-ordination, Communicate with more clarity, induce imitation and imagination skills and learn to stop beating the drum on hearing stop command. (Individual session)

After participating in the chakra recitals and the gross motor activities in the ABT sessions he has now started participating in the physical training exercises and meditation activities in the school. He now can imitate drawings, earlier he used to scribble. He also enjoys playing the drums. He can beat the drum mechanically and is learning to beat it in a rhythm.

Case 3: Is twenty seven years old. IQ moderate.

Therapeutic Objective: To improve gross motor co-ordination, attain greater speech clarity and induce imitation and imagination skills.

He has now started talking especially when the teachers are not around. He socializes with other children and readily participates in activities. He sometimes supervises the class. He likes to take the role of a leader. He was seen helping and encouraging others to play the drums. In fact he has graduated from being shy and timid to a more responsible group member. He has positively blossomed.

Case 4: Is sixteen years old. IQ moderate autistic, speech impaired.

Therapeutic Objective: To induce vocalization and drumming using the pacing method (individual session)

Now he is able to follow instructions and attempts to imitate lip movements, make vocal sounds and verbalize. He imitates actions with support. He participates well in the drumming sessions. Due to his mood swings more individual sessions were done with him.

Case 5: Is nine years old. IQ mild.

Therapeutic Objective: To improve gross motor co-ordination, attain speech clarity, enhance imitation and imagination skills.

He has become more social and mixes with other children now. His communication and speech skills have improved. He is able to speak loudly. He has also begun talking to his parents.

Case 6: Is twenty years old. IQ mild

Therapeutic Objective: To enhance gross motor co-ordination, attain greater speech clarity and enhance imitation and imagination skills.

His speech clarity has improved. He imitates vocal sounds and actions well. He has a flair for drumming and loves to play on the frame drums. His imitation skills in drawing are also good. His partnership and support with another group has helped both to blossom especially in rhythmic interplay in drumming.

Case 7: Is seventeen years old. IQ mild, speech impaired (has no speech at all)

Therapeutic Objective: To improve gross motor co-ordination, attempt to induce vocalization and to be able to beat the frame drums independently (individual session)

He now follows instructions and willingly participates in activities and tries to communicate through eye contact. He observes the teachers lip movements and attempts to understand what they are saying.

He demonstrated remarkable progress in drumming. He started beating the frame drums on his own. He also played the drums with his hands. Drumming has positively impacted his gross and fine motor coordination.

- ★ **Summary :**The all encompassing nature and the 'awesome potent' of the intent was a impressive feature of the ABT Project.

If the intent is strong then everything falls under the 'realm of the possible'.Where there is a room for multiple possibilities, there can be no room for doubt. The 'creative' and 'ritualistic' manner in which ABT utilises the channel of communication produces amazing results.

The test of the ABT practitioner was not just to complete the task, but also leave behind 'positive footprints' and ensure the well being of all concerned. The above are some factors that have contributed to the success of the ABT project - The Blossoming.

ii. ABT with children in the autism spectrum disorder of varying degrees.

Anita Bhaskaran

Skills and Ability School, Mumbai

- ★ **Clients Background:** Six children in the age group eight to ten years diagnosed with autism spectrum disorder (ASD).
- ★ **Propositions: ABT can:-**
 - Augment spontaneous speech
 - Increase the understanding of emotions
 - Substantially increases the listening skill
 - Bring about gross motor imitation skill.
- ★ **Data collection Sources:**
 - Session Planning sheets
 - Therapists reflective notes
 - Weekly inputs from the clients teacher
 - Interaction with the parent
- ★ **Session Highlights:** Exploration of the room provided a settling time for the clients. Using colours and its texture helped the clients calm down and enabled further proceedings. They loved the walks in the garden.

◎ Project Impact: ◎

★ Case Highlights:

Case 1: Is diagnosed ASD. Is ten year's old. IQ level is mild.

Therapeutic Objective: To increase memory skills, listening skills, spontaneity in speech, social interaction and understanding of emotions or preferences.

Sitting tolerance has improved from two to three minutes to five to seven minutes. Increase in acceptance of different feelings or sensations. Initially he was very reluctant. There is reduction in temper tantrums; it is present but can be dealt with. Increase in communication with teacher and at home.

Case 2: Is diagnosed ASD. Is nine year's old. IQ level is mild

Therapeutic Objective: To increase spontaneity in speech, self confidence, understanding of emotions and to decrease the requirement of routine or reduce rigidity.

She has started taking initiative without being prompted. She used to grunt a lot but now she has started to smile. Listening skills have improved which was observed in drumming. With music and through imitation she started moving her hands away from the body Initially it was centered towards the middle of the body.

Case 3: Is diagnosed ASD. Is ten year's old. IQ level is moderate.

Therapeutic Objective: To increase attention span, meaningful spontaneous speech, decrease echolalia speech and listening skills.

She is able to match drum beats with the song and waits for her turn showing improvement in listening skills. She narrates at least two activities and tells it in sequence. Motor skills have also improved. Her movement in colouring has improved.

Case 4: Is diagnosed ASD. Is eight year's old. IQ level is mild.

Therapeutic Objective: To increase self confidence, spontaneity in speech, listening skills, gross level imitation skill, understanding of emotions or preferences.

Increased tolerance to sound-Initially he used to close his ears with hands now he has stopped doing that. He has started imitating during dance sessions briefly.

Case 5: Is diagnosed ASD. Is eight year's old. IQ level is mild.

Therapeutic Objective: He is non verbal. He has started to express his emotions through touch and hugging when happy.

Case 6: Is diagnosed ASD/muscular dystrophy. Is eight year's old. IQ level is moderate.

Therapeutic Objective: Increase attention span, gross motor imitation and group interaction.

He now tries to match gross movements although the response comes later. He tries to locate the sound and looks in that direction.

★ **Summary:** A noticeable positive change was seen in the group and trust was built after the ABT sessions. Some conclusions: ABT

- Brings about emotional responses
- Enhances motor imitation
- Improves listening skills
- Non threatening environment reduces tantrums
- Helped in providing real life experiences

iii. ABT with children who are mentally challenged.

Pooja Jadhav

Sevadaan Special School, Mumbai

★ **Clients Background:** Seven children in the age group twelve to fifteen years who are mentally challenged.

★ **Propositions: ABT can:-**

- Improve social interactions
- Improve vocalizations and articulation
- Increase attention span
- Enhance memory, and help
- Develop self confidence

★ **Data collection Sources:**

- Session Planning sheets
- Therapists reflective notes
- Observation Sheets
- Feedback from the family members or care givers.

★ **Session Highlights:** Every session included music meditations and energizers. The seating arrangement was changed and the entire feel of the room was changed to match the theme of the session. Each session had two art forms which included drum circles, song rhythm movements, art and craft, story telling, voice work, drama etc.

The children loved acting out the characters in the story. The music and singing sessions also evoked a good response.

© Project Impact: ©

👍 Milestones achieved:

- Three clients have improved in remembering the sequence in stories.
- One of the client's attention span has improved by 40%
- Two of them have shown improvement in vocalization.

★ Case Highlights:

Case 1: Is eleven years old. Is moderate mentally handicapped.

Therapeutic Objective: To improve social interaction skills, enhance her memory and vocalization.

Based on the data collected from the observation formats she has shown maximum growth in social interaction and attention span i.e. by 57% .Her vocalization has also improved. She sings loudly using words and rhythms.

Case 2: Is fifteen years old. Is moderate mentally handicapped.

Therapeutic Objective: To improve memory and cognitive ability, communication and social interaction.

He has shown maximum improvement in vocalization i.e. by 75% and significant improvement in attention span (74%) and social interaction (73.5%).He loved music especially exploring the sound of the drums. His rhythm walk has also improved and his memory and attention span in listening and narration of stories has been progressive.

Case 3: Is thirteen years old. Is moderate mentally handicapped.

Therapeutic Objective: To improve social interaction, articulation and memory.

Maximum improvement has been in her self confidence (63 %) followed by social interaction skills (59%).She still needs to improve in other areas.

Case 4: Is thirteen years old. Is in the mild category .

Therapeutic Objective: To improve memory, vocalization and enhance social interaction.

He has begun vocalizing, earlier he only made actions. He also imitates the sounds of the syllables and simple sounds.

His maximum growth has been in vocalization (75%) followed by social interaction (72%)

Case 5: Is fifteen years old. Is moderate mentally challenged.

Therapeutic Objective: To improve articulation and conversational skills, enhance social interaction and develop self confidence.

His maximum growth has been in attention span (77%) and social interaction (76%). His memory and narration skills in story telling have improved. He has shown improvement in vocalization using words and rhythm. He speaks fast and is learning to articulate.

Case 6: Is ten years old. Is moderate mentally challenged.

Therapeutic Objective: Improve social interaction, memory, cognitive ability and increase attention span.

She has improved in social interaction by 67%. She is involved and focused in art and craft activities. She has begun to recognize stories, numbers and rhythm sequences.

Case 7: Is thirteen years old. Is moderate mentally challenged with emotional difficulties.

Therapeutic Objective: Improve social interaction and increase attention span.

Her attention span has improved a little in rhythm walk and story telling. Her attention span in drumming has improved by 40%. She now communicates with peers; earlier she used to hit them. She is still in the process of learning.

- ★ **Summary:** The group needs around twenty more sessions to fulfill the therapeutic objectives. Positive changes were seen in the group after the ABT sessions. Some inferences:

ABT

- Is a powerful intervention in promoting mental health of children and families
- Makes the whole teaching process interesting and engaging
- Helps to express and identify emotions
- Is nonjudgmental and gives individual self respect so children feel more at ease and are comfortable with the process.

iv. The Joyous Journey

ABT project with children with multiple learning disabilities

Sumathi Ramjee

Deepika Resource Centre, Bangalore

- ★ **Clients** Background: Six adolescents in the age group fourteen to seventeen years with learning difficulties.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT can:-**
 - Improve attention span, and
 - Improve reading & comprehension of children with learning difficulties
- ★ **Data Collection Sources:**
 - Session record sheets
 - Therapists notes
 - Feedback from staff members and observer
 - Video documentation
 - Pre and Post ABT reading comprehension tests

The data driven method was adopted so that a pattern could be established from collected data. This led to inductive conclusions, which could be verified using video recording.

- ★ **Session Highlights:** All the arts based activities ie. singing, drawing, painting, story telling, drama, drumming, visualization exercises, mask making etc., had an impact on this group.

The rituals were done in barefoot for grounding. Most of them enjoyed drumming and music. One of them was very creative in making new rhythms. Another client's audio perception increased.

The colour game evoked a lot of fun, laughter and learning. The painting session also revealed a lot. The mask making process was also very interesting as it depicted emotions.

◎ Project Impact: ◎

👍 Milestones achieved:

- Attention span of three clients has definitely increased. This was reflected in their ability to answer questions in the class.
- Two of the clients have improved their social skills, they were hesitant earlier
- One of the clients, who has dyslexia could associate a similar letter with the colour and his name which was an accomplishment.

★ Case Highlights:

Case 1: Is fifteen years old and is very good with rhythms and has good sense of humour.

Therapeutic Objective: To build self esteem, improve reading comprehension and expressive language.

He is very attentive during drumming, drama and games. He pays attention in class and manages to answer all questions. His reading comprehension is still the same. He loves excitement and wants action. Attention span has definitely improved and his self esteem is boosted after the sessions

Case 2: Is fifteen years old. She is intelligent, has a good memory and is helpful.

Therapeutic Objective: To build self esteem, increase attention span and improve social skills.

Her involvement in the school has changed. Her bonding with the peers and her acceptance of all is remarkable. She interacts with everyone without bias now. She has also become sensitive to others. She makes profound observations and discusses them.

Case 3: Is seventeen years old. He is sincere, truthful and simple.

Therapeutic Objective: To increase attention span, build self esteem; improve reading comprehension, body coordination and spatial orientation.

The change in his attention span shows what rhythm can do for helping children who are attention deficit. Despite his spasticity, he is able to be in complete sync with the rhythm being played. His reading comprehension has undergone some change for the better.

Case 4: Is fifteen years old. He is intelligent, has a good sense of humour, good memory, truthful and frank.

Therapeutic Objective: To build self esteem, increase attention span and improve expression of emotions.

His attention span has undergone a lot of change. His commitment to his school lessons has brought about a change in his academic performance. He agrees to read aloud in class. Something he never did earlier. His reading comprehension has improved considerably. His involvement in class activities have also improved.

Case 5: Is fourteen years old. Is hardworking, participative, attentive and has a good memory.

Therapeutic Objective: To build self esteem and body coordination, increase attention span, improve expression of emotions and social skills.

He is able to answer indirect questions now. He can now infer from notes and select the correct answer implying an improvement in his reading comprehension. His self confidence has also increased and his need for approval decreased.

Case 6: Is sixteen years old. Is sincere and never perturbed by emotions.

Therapeutic Objective: To build self esteem and body coordination, increase attention span, improve expression of emotions and reading comprehension.

His reading comprehension has improved. His attention span has also improved remarkably. His whole personality has gone through a change after the sessions. He puts in more effort now in academics and his memory skills have improved.

★ **Summary:**

“I understood the power of intent and the flow of energy when I let it flow in peace. The clients were my guiding factor and each day created a theme for itself”

ABT is a very safe platform for the children to perform without fear of failure. This led to a form of expression which was very therapeutic. Being non-judgmental, non-reactive and being able to go behind the façade of unwanted behavior takes one towards therapy.

Having gone through non-achievement of academic excellence and being branded has put them under a lot of pressure. Arts is the only media through which we can reach out and bring about holistic development to restore their damaged self esteem.

v. ABT with moderately mentally challenged children.

Vidya Bhagwat

Prism Foundation , Pune

- ★ **Clients Background:** Eight moderately mentally challenged children were selected for the project. These children lack confidence, have communication problems, face fear due to expectations and social negligence.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT can:-**
 - Improve inter- personal interactions, and
 - Improve auditory skills
- ★ **Data Collection Sources:**
 - Psychological tests
 - Questionnaire
 - Observer's notes
 - Session record sheets
 - Video documentation
- ★ **Session Highlights:** Each session had a different objective defined as per the propositions like attending sounds, recognizing sounds, auditory discrimination, auditory memory, interaction improvement, listening to others etc.

The clients responded well to drumming, drawing, food grains and sounds, role playing of shop, birthday, hotel, singing bhajans etc. Pronunciation of sounds with actions worked well. They displayed confidence and enthusiasm in most of the sessions.

◎ Project Impact: ◎

★ Case Highlights:

Case 1: Is ten years old, speechless boy with Down's Syndrome.

Therapeutic Objective: To reduce hyperactivity, improve speech, develop interaction and improve visual and auditory sensory abilities.

Initially during the pilot phase he was non cooperative, used to throw a fit and hit others. Gradually he started involving himself in the rituals. He attempted making sounds and actions on his own. Earlier he would not part with anything in his hands. Now, he happily hands over when requested. He was firm in exchanging money for things in the 'session shop'. He is also helpful in the session. He serves everyone magic water (i.e. blessed water) first, before he drinks it. He patiently uses his body language, gestures and babbling sounds to interact. He recognizes his drawings in the displayed pictures. Now he is also good at following sounds in the blind fold game.

Case 2 and Case 3: They both have shown good progress in their auditory abilities. They can follow the direction of sounds with blind folds accurately. Newness of a sound can be identified. One of them correlates the sound with day to day experiences. Observation skills have also improved.

Case 4: His auditory skills and observation have improved to a great extent. He can recollect the previous session and recognize sounds made by coins. He was the only one who initiated singing while playing drums. He changes the way he greets every time.

Case 5 and Case 6: They were initiated to actions with no sound. They initially took time to understand the concept but later adapted the procedure very effectively. Now, they do without sound like the action of opening the mouth like 'OO' or instead of clapping loudly they just make one action of clap without any sound. This indicated that they can follow non-verbal interaction.

★ Summary:

In Auditory Skills:

- Auditory Discrimination: Four of the clients progressed very well in following the sounds and progressed in recognizing the sounds.

- Auditory Attending: Some of the clients have shown progress in all processes in all parameters.
- Auditory memory: four of the clients have shown very good progress.

Interaction Skills:

In initiating communication on their own: Two clients communicated on their own and others need to be instructed.

- Listening to others: Five of them are attentive and communicate with eye contact.
- Give others scope to talk: Three clients have progressed.
- Answers appropriately: One client answers appropriately by gestures and facial expression as he is speechless, two others have shown progress.
- Two of the make a dialogue in one sentence, others use one word only.

The sessions also helped in increasing attention span, develop leadership qualities, increase cooperation, enhance vocabulary and express confidently. Three of the clients have not shown much progress in the group but one to one sessions will be helpful in their improvement.

vi. Beyond the horizons

ABT project with children in high risk communities

Bhavini Gandhi

Aangan Trust, Mumbai

- ★ **Clients Background:** Eleven community children in the age group seven to ten years .The parents of these children are working and have a low economic status. Some of them go to school. Many of them do not live in hygienic conditions.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT can:-**
 - Improve attention span or concentration levels, and
 - Reduce hyperactivity, and
 - Bring in discipline.
- ★ **Data Collection Sources:**
 - Therapists notes

- Feedback from care givers
- Peer feedback
- Video documentation
- Pre and Post - draw a man test

- ★ **Session Highlights:** What worked well were songs, story building with clay, story narration, making shapes, games, dance and movement exercises, simple touch exercises, guided imagery with music, mirroring exercise, imaginary painting exercises, making a wish corner and warm up exercises.

They enjoyed all the exercises and took along time to settle in the guided imagery. It was difficult for them to close their eyes and sit for a while. Initially they demanded a lot of physical games and exercises and wanted more art activities after the fourth session. Some of them were very sensitive to touch. They could do well individually than in pairs.

◎ Project Impact: ◎

👍 Milestones achieved:

- Most of them were regular and punctual for the sessions.
- Almost all except for two or three children, were able to sustain for the whole session
- Fighting decreased and listening to instructions increased
- A sense of a group belonging emerged
- Sitting tolerance increased
- Attempts to seek and give help

★ Case Highlights:

Case 1: Easily distracted, does not sit in one place, does not listen or follow instructions, unable to work in a group.

Therapeutic Objective: To follow basic discipline, increase sitting tolerance, increase focus and ventilate feelings.

Now comes to the sessions regularly, on time, attends full sessions, listens and follows instructions, has started sitting in one place for a longer period of time. Still needs help to complete activities.

Case 2: Easily distracted, does not sit in one place, does not listen or follow instructions, unable to work in a group and is attention seeking.

Therapeutic Objective: To follow basic discipline, increase sitting tolerance, increase focus and ventilate feelings.

Now comes to the sessions regularly, on time, attends full sessions, listens to instructions, has stared sitting in one place for a longer period of time. Still needs help to focus, following instructions, completion of tasks given.

Case 3: Short attention span, low sitting tolerance, unable to work in a group and is very talkative.

Therapeutic Objective: To enable him follow simple discipline procedures, increase attention span and sitting tolerance and expression of feelings.

Now comes to the sessions regularly, needs to come on time, attends full sessions, listens and follows instructions, has stared sitting in one place for a longer period of time. Focus has increased and activities completed.

Case 4: Does not follow instructions, hits and abuses a lot, unable to work in a group and has a short attention span.

Therapeutic Objective: To enable him follow simple discipline procedures, increase attention span and sitting tolerance and expression of feelings.

Comes to sessions regularly, listens to instructions, has increased his focus on a task to some extent but needs more work with following instructions, coming on time, attending the full session, completion and involvement in activities.

Case 5: Easily distracted, does not sit in one place, does not listen or follow instructions, unable to work in a group ,abuses a lot, defiant, does not take any effort and is attention seeking.

Therapeutic Objective: To enable him to follow simple discipline procedures, increase attention span and sitting tolerance and expression of feelings.

Now comes to the sessions regularly, on time, attends full sessions, listens to instructions, has stared sitting in one place for a longer period of time. Still needs help to focus, following instructions, completion and involvement of tasks given.

Case 6: Is shy but hits, does not take any mental effort for a task, unable to work in a group.

Therapeutic Objective: To enable him follow simple discipline procedures, increase attention span and sitting tolerance and expression of feelings.

Comes to sessions regularly, listens and follows to instructions, has increased her focus on a task to some extent but needs more work with more involvement in activities.

Case 7: Is shy but verbally abuses her peers, does not take any mental effort for a task and is easily distracted.

Therapeutic Objective: To enable her to follow simple discipline procedures, increase attention span and sitting tolerance and expression of feelings.

Comes to sessions regularly, listens and follows instructions, has increased her focus on a task to some extent but needs more work with more involvement in activities.

Case 8: Hits and verbally abuses her peers, is defiant, does not listen or take any mental effort for a task, is attention seeking and is easily distracted.

Therapeutic Objective: To enable her to follow simple discipline procedures, increase attention span and sitting tolerance and expression of feelings.

Listens to and follows instructions, completes a particular activity / exercise .She needs to improve her timeliness, attending the full session, involvement with artistic material and sustain alertness of self and others.

Case 9: Is shy and has a very low personal hygiene, unable to work in a group, hits and verbally abuses a lot, short attention span and is easily distracted.

Therapeutic Objective: To enable him follow simple discipline procedures, alert to self and others, increase attention span and improve personal hygiene and expression of feelings.

Now comes to the sessions regularly, needs to come on time, attends full sessions, listens and follows instructions, has started sitting in one place for a longer period of time. Focus has increased and activities completed. She needs to be more involved with artistic material /activity. Her personal hygiene has improved but she still needs to be reminded.

Case 10: Unable to work in a group, hits and verbally abuses a lot, does not follow instructions

Therapeutic Objective: To enable him to follow simple discipline procedures, increase attention span and expression of feelings.

Listens to and follows instructions, completes a particular activity or exercise .Focus has also improved. He needs to improve his timeliness,

attending the full session, being regular and get more involvement with artistic material.

Case 11: Has a low self esteem, is attention seeking, hits and verbally abuses, low personal hygiene, short attention span and does not follow instructions.

Therapeutic Objective: To enable him follow simple discipline procedures, alert to self and others, increase attention span and improve personal hygiene and expression of feelings

Listens to and follows instructions, completes a particular activity or exercise .Focus has also improved. He needs to improve his timeliness, attending the full session, being regular and get more involvement with artistic material. His personal hygiene has improved but still needs to be reminded.

★ **Summary:** Creative Processes like story with songs, actions, guided imagery, touch exercises, art activities and high energy physical exercises worked well with this population. It improved the following:

- Attention span
- Reduction of hyperactivity (after the 5th session)
- Involvement in activities
- Ability to work with each other
- Sensitivity towards each other.

More ABT processes need to be explored with the group to meet the long term objectives i.e. to increase self esteem, building empathy, group bonding, discipline issues and appropriate self expression.

vii. The Focus Band Experience

Neha Patel

Chatrabhuj Narsee Memorial School, Mumbai

- ★ **Clients Background:** Eight Children in the sixth to eight grade who were finding it difficult to reach their optimal level of functioning academically as well as non-academically. They are inattentive, lack focus, impulsive, aggressive etc
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT-**
 - Can improve and increase attention span of children having low attention span
 - Can decrease impulsive behavior in children who are overly impulsive.
- ★ **Data Collection Sources:**
 - Observation
 - Video documentation
 - Observer' notes and feedback
 - Checklists
 - Feedback from class mates
- ★ **Session Highlights:** The sessions consisted of an eclectic mix of movement, dance, drama, story telling, visual arts and music as the children were inattentive and impulsive in nature. The group named themselves- The Focus Band so as to bring back their attention and learn to focus.

Drumming helped in improving attention, coordination and concentration. Expressing emotions with facial and body expressions and sounds was done well by the group. The members also expressed themselves through theatre experiences.

◎ Project Impact: ◎

👍 Milestones achieved for the above group:

- Four of the members attention span increased
- There was a decrease in impulsive behavior of one member
- Confidence level has increased
- Some of them have improved their timeliness and have completed tasks on time.

★ Case Highlights:

Case 1: Is in eighth standard and faring poorly in studies. She has been reported to have low attention span, restlessness, lack of concentration and does not complete her tasks. Has a low self image and does not communicate much.

As per the feedback post ABT sessions there has been a positive shift in her attention span in the classroom. Her assignments are completed on time has she has started communicating with others.

Case 2: Is studying in standard seven. She does not speak at all in school. Very aggressive and rude to family. Inattentive and impulsive.

She has started speaking to the group when required. No other change has been reported. A long term ABT one on one session has been suggested.

Case 3: Is repeating a year in standard six. Is restless, inattentive and impulsive in class.

Mild shifts were noticed in areas of focus and impulsive behavior. His attention span has increased. He loves to dance. He is cooperative with the group. It is suggested that he continues ABT sessions.

Case 4:Is studying in standard seven. She is diagnosed with learning disabilities. Unable to concentrate, is impulsive and restless.

Significant shifts were noticed by all .She is able to concentrate and focus better and there is decrease in her aggressive behavior.

Case5: Is studying in standard seven. Reported to be very disruptive in school and home. Attention seeking behavior and is restless.

No change was observed by all. He has some medical problems and is referred for medical help. Long term ABT sessions have been suggested.

Case 6: Is studying in standard seven. Is inattentive, seeks attention, impulsive and is unable to concentrate.

Mild shifts were noticed by parents and teachers. There was a decrease in impulsive behavior. She is able to complete tasks on time.

Case 7: Is repeating standard seven. Fairs poorly in studies. Is restless, impulsive, disorganized and careless.

Positive shifts were noticed in the area of attention span, impulsive behavior and self confidence.

Case 8: Is studying in standard eight. Diagnosed with learning difficulties. She has poor attention span, impulsive, disorganized, aggressive, restless and lacks timeliness.

There is a decrease in her impulsive behavior and increase in attention span. She is cooperative and completes tasks on time.

★ **Summary**

- Most of the children in the group started showing changes although at a slow rate.
- The children's self concept was highly affected by their characteristic difficulty.
- In the process of helping the children there was an increase in their attention span; other issues related to self confidence, self image communication patterns and emotional expressions were also addressed.

viii. ABT with children from marginalized backgrounds and vulnerable families.

Anil Bade

CCDT, Mumbai

★ **Clients Background:** Eight children from an institution called Ashray were selected. They are children whose parents are HIV /AIDS. Some of them have mothers who are commercial sex workers. They are orphans and some have single parents. They are drop outs from school. They miss love, compassion in family environment. They have a lot of anger and they lack self confidence and concentration and have a low self esteem.

★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT will:-**

- Positively affect the social interaction of the clients.

★ **Data Collection Sources:**

- Observation
- Observer's notes and feedback
- Questionnaire Ratings were given for initiative, concentration, confidence, group participation and self awareness.
- Facilitators notes

- ★ **Session Highlights:** Imagination, story telling, mask making and colour therapy worked well for this group. They could express their feelings and work well in the group. They used voice, movement, body language, enactment, role play while doing drama. Drama Therapy was helpful as they got a safe environment to express their feelings. Drumming also was very helpful in calming them and also in reducing anger.

◎ **Project Impact:** ◎

👍 **Milestones achieved for the above group:**

- Most of the group member's confidence level increased. They could express and interact with the group.
- Two of the members have calmed down
- The concentration level of four of the group members has increased.

★ **Case Highlights:**

Case 1: She is lost in her own world, constantly teases and has poor concentration levels.

She has now started using her body while communicating, is taking initiative and is able to concentrate better. Her ratings have also gradually improved in all the criteria's especially in concentration. She has also reduced her teasing behavior.

Case 2: She is shy and short tempered.

She has gradually improved in her ratings on all the criteria's. She has remarkably improved in taking initiative, confidence and group participation. She has started participating in the school and center activities without hesitation. She is still working on her temperament.

Case 3: She is very quiet and shy.

She has become more vocal now. She has also started interacting with others. Her ratings are also gradually improved. Colouring and drumming has helped to improve her concentration. Drama has helped her gain confidence.

Case 4: He is very shy and does not take any initiative.

His ratings indicate an excellence in taking initiative. His teacher has also given feedback on his improved listening ability and concentration in activities.

Case 5: She is very quiet and reserved.

She has slowly begun to talk. She participates very well in drawing. She has also started taking initiative and has become more confident.

Case 6: She is also very quiet prefers to be on her own.

She has slowly started answering questions when asked. Her ratings have shown a very gradual improvement. Colour therapy has helped her to concentrate better. Her energy level is also improving.

Case 7: He is very quiet, shy and has poor concentration levels.

He has started taking initiative in the sessions and also participates well in the centers activities. He is still working on improving his concentration levels.

Case 8: Is very quiet and shy.

He has become more vocal in his sessions and is still working on his concentration levels. He takes initiative in the drumming and a role play sessions. His rating in group participation has improved.

★ **Summary:**

The ABT project has been helpful for the children as well as the facilitator. A change in behavior is seen in both. The children are showing interest in studies and other curriculum activities of the school as well as the center. The care takers have also observed the change in the behavior of the children. There is more joy in the sessions.

ix. Swabhiman

ABT with street adolescents who are institutionalized.

Tanushri Dayal

Welfare Society for Destitute Children, Mumbai

- ★ **Clients Background:** Twelve adolescents in the age group thirteen to sixteen years who are institutionalized and have not got admissions after fourth standard. Now they are studying through National Open School.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT can:-**
 - Help in increasing self esteem of adolescents who are institutionalized children.
- ★ **Data Collection Sources:**
 - Weekly chart for self esteem from teacher
 - Weekly chart for self esteem from ABT Practitioner
 - Pre and post test for organizational data from the counselor
 - Rosenberg's Self Esteem Scale before and after sessions
 - Therapists notes
 - Video Documentation
- ★ **Session Highlights:**

A tree with branches was made on which there were twelve envelopes. Everyone had a secret friend who would write positive messages and put it in the envelopes. Mirroring, story telling, sharing life stories through drama, drum circles, letting go of fear through balloons, self esteem barometer and many more self esteem building exercises using art forms were used.

All activities worked well with the group .They loved the drums, leading the group and making music. They also creatively used material for drama.

(The Rosenberg's self esteem scale didn't work with the group since it was in English. It was not a reliable scale for this group.)

◎ Project Impact: ◎

👍 Milestones achieved:

- Positive shift in the level of self esteem in the individuals and as a whole group.

★ Case Highlights:

Case 1: Has a low self esteem, low tolerance level, fearful, submissive and has adjustment problems.

Therapeutic Objective: To build self esteem and train him to be assertive to deal with his adjustment problems.

He has shown a shift in his behavior. He has started taking initiatives, is leading the group with confidence which is the last level in the pre and post session data compiled by the organization and the ABT Practitioner. He has identified the group as his friend and is beginning to empathize with others.

Case 2: He is very reserved, prefers being alone, stubborn, aggressive, jealous, disgusted and is not liked by the group.

Therapeutic Objective: To build self esteem, learn to be assertive and improve social interaction.

He has now started interacting more with the group and has become livelier in the sessions. He has also shifted from taking initiatives to leading the group with confidence.

Case 3: Has a low self esteem, is confused, lacks emotional expression, very hesitant to speak and is an underachiever.

Therapeutic Objective: To build self esteem and improve social interaction.

Compared to others in a group he has confidence but still gets a little nervous to lead the group. His self esteem has improved and was reflected in different areas of his work. He has also shifted from taking initiatives to leading the group which is the last level.

Case 4: Has a low self esteem and moderate self confidence, does not gel with his peers prefers to interact with younger kids and has inappropriate communication skills

Therapeutic Objective: To build self esteem, motivation and confidence. His self esteem has improved a lot. He has become very confident. From the observed data he has shifted from level two to the highest level i.e. leads groups confidently.

Case 5: Low self esteem and self image, attention span is short, low self confidence and has poor communication skills.

Therapeutic Objective: To build self esteem and self image, increase attention span and improve communication skills.

He has moved from not taking initiatives to taking initiatives i.e. from the first to the fourth level. There is very little change in him but he is taking initiative to learn, which is a good sign.

Case 6: Low self esteem and self image, attention span is short, low self confidence, poor communication skills and has a tendency to steal.

Therapeutic Objective: To build self esteem and self image, increase attention span, improve communication, decision making and social skills.

He is still shy and exhibits some speech problems. He has become fearless and he sang a song in the group in one of the sessions. He is taking initiative to learn which is a positive sign. He has moved from the second level to the fourth level i.e. taking initiative without help.

Case 7: Low self esteem and self image, very cynical, reserved, lacks emotional expression and is an underachiever.

Therapeutic Objective: To build self esteem and self image, get himself motivated and practice social skills.

He has become more open. In the sessions he speaks a lot and takes initiative. He loves to sing and enjoys drumming. He moved from the second level to the fifth level i.e. leading the group.

Case 8: Low self esteem, poor concentration, aggressive, dependent, poor communication and social interaction skills.

Therapeutic Objective: To build self esteem, get himself motivated and improve social skills.

There is not much change in him as he is still learning many things. He has started answering more when asked questions. It has been observed that he has moved from level three to level five.

Case 9: Is impulsive, immature, emotionally unstable, low self esteem, attention seeking and dependent.

Therapeutic Objective: To build self esteem, get her to be more patient and to work on her emotional insecurity.

She is still shy and reluctant to take initiative in any activity. One possible reason maybe because she is the only girl in the group.

She has moved from the first level to the third level.

Case 10: Is very passive, reserved, has a low self esteem and academically average.

Therapeutic Objective: To build self confidence, enhance self esteem & practice social skills.

A lot of change has been observed in him by all. He has opened up a lot and interacting well with all. He has become more cheerful. His confidence has increased. He went up on stage and performed with Shivamani (a world renowned percussionist). He has moved from the first to the fourth level.

Case 11: Is very naughty, aggressive, is not motivated and has a moderate self esteem.

Therapeutic Objective: To build self confidence, enhance self motivation and reduce aggression.

He has become more open and interactive. He hardly used to interact earlier now he spends a lot of time in the counselors room. He has begun speaking to everyone and has become confident. He has moved from the first to the fourth level i.e. taking initiatives and sometimes leading the group.

Case 12: Is academically average, lacks social skills, moderate self esteem and is very emotional.

Therapeutic Objective: To build self confidence, enhance self esteem and practice social skills.

His confidence level has increased. He has moved from the second level to the fifth level.

- ★ **Summary:** The whole experience of the ABT project was great. The ABT practitioner also enjoyed and learned from the sessions. The children would look forward to the ABT sessions. Since they have a street background they are very familiar with rhythmic music and therefore enjoy and express themselves better with drums. It helped in removing their frustrations and

anger and made them feel comfortable. Drama sessions helped them to revisit past and seek interventions. All creative activities helped them discover their talents.

ABT can be used very effectively with this population. They are more receptive to this creative medium because they love music and drama.

x. ABT with street children from Victoria Terminal (VT) Station, Mumbai

Vikramjeet Sinha

Railway Children- UK, Mumbai

★ **Clients Background:** The group consists of street children who have grown up and have lived for a long time on the footpath. They have run away from home, some have a single parent and some are orphans. The population is floating in nature. They do what they call Jhol (to hang around) and do Jugad (gather food or money). They were between five to eleven children in each of the sessions. All of them were boys.

★ **Project Format:**

There were no specific therapeutic objectives: The project was divided into two sections: The first section consisted of seven sessions i.e. twelve hours was done with street children on the street corner at VT. The young boys need a more holistic intervention i.e. they need medical attention, detoxification from substance abuse and counseling with art based work.

The second section consists of a workshop done with children below fourteen years of age from in and around VT station. The workshop was organized and supported by Amchi Kholi and was held at Lonavala.

★ **Data Collection Sources:**

- Observation
- Checklists
- Feedback from individual clients

★ Sessions Highlights:

For the first group drawing was the art form used. Different metaphors were provided. Every metaphor provided an insight into the psyche of these children. The metaphors explained that they felt they were incomplete, wanted help and wanted many wishes and desires fulfilled.

In the hero exercise everyone drew their friends as heroes. They acknowledged their drug addictions, indulgence in 'bad deeds' and such. The stories were about themselves which they shared in a displaced manner. The heroes were their best friends and role models. There were also anti heroes who did not do anything constructive.

One of the sessions was drawing of a safe space at the top of a ladder. The images that emerged were jail, heaven, graveyard, house, a boat for escape, etc. In their collective imagination a physical safe space did not exist except in death. All of them were very involved and eager to do the exercises. Some of the needs expressed through drawings were:

- Wanting a job, meaning and growth
- Need for a structure and safety
- Need for medical attention
- Need for detoxification

★ Summary

Art can be engaging but they need food also to keep them engaged as they feel the work also takes up their time. They are also bitter, angry and despite their manipulative trickery, there is a brutal honesty about them which is refreshing from the jargon of the development world. The experience has helped me to study closely the realities of the street with art as an engagement tool. The engagement tool helps in the reflective experience of the street boys.

Lonavala Camp: The workshop was based on the ABT where the children went through ABT work. From an acutely restless bunch there was a calm and poise and they finished the exercises without any disruptions.

There were distinct shifts in energy in the end of the session and they (children) wanted to go home...a safe spacewhich is not the road. It was an extremely challenging process and this process brought about

certain distinct shifts in the behavior of the children by making them more reflective and less disruptive.

“The moment of stillness, alertness and responsiveness in very disturbed, hyper-active children without their solutions (i.e.drugs) was like magic, and whenever that moment happened, I felt transformation is a possibility”.

xi. ABT with children from marginalized families.

Frahinsa Pinto

CCDT, Mumbai

- ★ **Clients Background:** Six children from the community whose fathers are alcoholics and mothers work as domestic help. The children work very hard supporting the mother in house work and in earning an extra income by making bindi's, hairclips etc. They are abused and beaten. They live in an environment of fear, lack of love and understanding.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT will:-**
 - Improve trust and confidence level in the children.
- ★ **Data Collection Sources:**
 - Facilitators observation
 - Group observer's notes
 - Rating scale questionnaire
- ★ **Session Highlights:**

This group enjoyed the ABT sessions. They were enthusiastic and full of energy. Story making, voice work and movement worked well with this group. Music helped them experience more meaningful ways of communication. They enjoyed drawing and playing with colours. Drama helped them deal with fear.

🎯 Project Impact: 🎯

👍 Milestones Achieved:

- Vocalization and expression of views and ideas
- Group bonding
- Building of confidence

Case 1: She is a very shy girl.

She has shown an increase in her progress overall. She has become vocal and freely expresses without any hesitation. She has also started using her body freely.

Case 2: She is reserved does not participate in the group.

She has improved in her participation level. She now actively takes initiative and responsibility in the sessions. She is still working on improving her comprehension ability.

Case 3: She is shy and restless.

She has now started using her body and voice to express her views. She gives new ideas and is active.

Case 4: She is dominating.

She has now started to listen and involve herself in the group and accept others ideas and opinions.

Case 5: She displays attention seeking behaviour and is short tempered.

She has shown improvement in cooperating with the group. She has started saying sorry if she does anything wrong and says please when she wants something. She does get angry but she has learnt to manage it better.

Case 6: She is very quiet and shy.

She has now started taking initiative and participates actively in the group. She expresses more through colours and drawings. Her confidence level has improved.

★ **Summary:**

The ABT Project brought changes in the group and also the facilitator. The group has bonded well. The parents have shared that children who have lived in fear are seen to be happy in a different world. They have become more organized in their work and things.

They have also become more creative and caring towards each other. ABT has helped these children in the community to channelise their energy positively.

**xii. The impact of ABT on social interaction
among underprivileged institutionalized children**

Walesa Barretto

Aangan Trust, Mumbai.

★ **Clients Background:** Nine boys from slum communities. Although they know each other and live in the same locality there is a lot of infighting, bullying, aggression and disruptive behavior. Most keep blades in their pockets to protect themselves. Substance abuse is common. Five children have just been enrolled to a school. They are impatient and restless and find it difficult to follow rules and a structure.

★ **Propositions: ABT can:-**

- Help in enhancing the group bonding and social interaction of the children.

★ **Session Highlights:** Singing, story telling, acting, imagination, dancing and drumming were an integral part of the sessions. Drawing and colouring also helped in calming them down. Since the energy of the group was high it took time for them to focus concentrate, listen and stay within boundaries.

★ **Data Collection Sources:**

- Therapists notes
- Peer observations
- Video Documentation

◎ Project Impact: ◎

👍 Milestones Achieved:

- The children learnt there is a structure for everything and they followed it.
- They also learn to follow norms
- They have become more calm and composed. The fights have reduced considerably.
- Attention span of some members increased they like sitting by themselves and do an activity for a longer time.

★ Case Highlights:

Case 1: He is thirteen years old. Very disruptive and restless. Fights often. Bully's other children. Did not go to school for a long time.

Of late he has started attending school regularly, dressing up neatly and is more composed. He still does not follow any rules. He needs individual sessions for further sessions

Case 2: He is twelve year old. He has natural leadership qualities.

He would get angry easily but would control his actions. He follows instructions and is now less restless.

Case 3: He is twelve years old. He never follows any instruction. A natural leader.

There has been a drastic change in his behavior and attitude towards the staff and other children in the group.

Case 4: He is twelve years old. He is very silent and aggressive

He was reprimanded for fighting once. He has now shown many positive changes. He is more calm and patient.

Case 5: He is thirteen years old. He finds it difficult to bond with the group. He is silent and aggressive. He refuses to participate.

Case 6: He is thirteen years old. He displayed highly disruptive and rebellious behavior. He threw tantrums etc. He is now more composed, dresses neatly and more respectable towards elders and others.

Case 7: He is fourteen years old. A good leader and can be entrusted with responsibilities.

He has developed good leadership skills. He helps in bringing the group together.

Case 8: He is thirteen years old.

He has stopped acting impulsively and has started making his own decisions. He is now able to keep his priorities and does not get influenced by others easily.

Case 9: He is nine years old. (Individual Session)

Initially he was very aggressive and abusive for his age. He could not concentrate on any one thing for along time. He was given a lot of individual attention and it has helped him a lot. There has been a drastic change in him. He has become more calm and composed. He dresses more neatly and is able to concentrate on a particular task.

He still needs further sessions to help him bond and interact with the group.

- ★ **Summary:** The group was tough initially. They had their own way with no restrictions whatsoever. They were impatient and restless. Gradually they became calm and composed and began to follow the group norms.

ABT is working well with this group. It has helped in channelising their energy positively. There are many small changes visible. The challenge is to sustain this change.

xiii. ABT with orphan children in an institution.

Vaijyanthi Thakar

Bharatiya Samaj Seva Kendra, Pune.

- ★ **Clients Background:** The group consisted of seven institutionalized orphan children in the age group four to seven years. They display a range of behaviors which have its roots in the past. The behavioural issues include having nightmares, bed wetting, thumb sucking, stubbornness, being aloof and alone and not being emotionally expressive at all.

★ **Propositions: ABT can:-**

- Reduce aggression, enhance clarity in speech and expression and reduce fear.

★ **Session Highlights:** All forms of art were used which included breathing exercises, humming, walking, drama, playing with colour, clay work, games story telling, singing, dancing and craft work.

★ **Data Collection Sources:**

- Therapists notes
- Peer observations
- Video Documentation

◎ **Project Impact:** ◎

👍 **Milestones Achieved:**

- There was an increase in the concentration levels.
- A realization of self confidence
- Increase in the mental and physical activity
- Increase in attention span

★ **Case Highlights:**

Case 1: She is thinking clearly for her future. She does not refuse anything. She plays with smaller children well. Her mood swings have reduced. She does not say 'no' often now. She has adjusted well in her new school. She also says bye without crying.

Case 2: She has prepared well for adoption. She manages her emotions in a better way. Her aggression has reduced and she feels less jealous.

Case 3: She has settled well in the school.

Case 4: She used to bite her lips and babble. Now she has more clarity in speech and her biting of lips has reduced.

Case 5: He used to keep fluttering his eyelids but now the fluttering has reduced. He is reserved and enjoys painting.

Case 6: She used to be very lethargic but now she has started becoming a little active.

Case 7: Her attention span increased, thumb sucking and bed wetting has reduced. She suddenly lapses into silence and is still moody.

- ★ **Summary:** The children enjoyed the ABT sessions. They became more confident and stronger emotionally.

“This course has helped me increase my will power. I have to work hard to be healer.”

xiv. Healing and rehabilitation of adults with mental illness using arts based therapy techniques.

Rekha Krishnan

Samaritans, Mumbai

- ★ **Clients Background:** Seven adults with different forms of mental illness, some are mentally challenged, some with schizophrenia and related mood disorders.
- ★ **Propositions: ABT can:-**
 - Increase attention span and comprehension; stimulate focused positive thinking
 - Increase mood balance and interest in life
- ★ **Data collection Sources:**
 - Session record sheets
 - Table for monitoring indicators
 - Feedback from staff members
 - Video Documentation
 - Subtle energy report - before and after ABT sessions
- ★ **Session Highlights:** All the arts based activities i.e. drumming, story telling, drama, dancing, play, drawing and painting had an impact on this group. It was necessary to start with a form of art activity which would help move energy, because only if the energy is free flowing can there be focused thinking and attention.

Drumming, singing, toning chakra sounds helped in activating their energy fields. Toning the chakra sounds along with breathing helped clear the chakras as well as their minds; their senses also became alert. The chakra sound awareness was quite good in most of the group. They also were able to 'see' colours while hearing sounds.

Drumming made them more active and released lethargy. It helped bring attention to the present moment keeping pulse and rhythm.

Drawing or painting was a part of every session. 'When the contents of the mind are revealed in images, there is a sense of relief and release'. This is true for all the clients. There was a lot of spontaneity in expression after doing these activities.

Visual art work was significant in this group as it was used as indicators to monitor their mental and emotional states using line, form and colour. For example, after drumming each one was given a sheet of paper with a square, circle and parallel lines. They were asked to create a picture using the shapes and colour it. They all used the square (square shape represents stability) to represent either the drum or rhythm in some form and many of them coloured the square green which is a healing colour.

Story telling and drama held their attention and in some of the sessions their attention span and memory had improved.

Feeling of subtle energy: Every session started or ended with breathing exercises. It helped free stagnant energy and feel more connected with each other.

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👍 Milestones achieved:

- One of the clients was able to speak more clearly. His comprehension improved. He had a couple of therapeutic experiences during the sessions that helped him express long-suppressed feelings.
- Two other clients became more expressive and vocal. They were non-participative earlier. But now they smile and have normal conversations.

★ Case Highlights:

Case 1: Is diagnosed manic depressive or bipolar. Has attempted suicide.

Therapeutic Objective: To increase mood balance, social adjustment and increase attention span.

First few sessions the client was unwilling to listen to others and was very impatient, sometimes moody, did not want to participate. She needed constant reminders to stay in the group.

In the last few sessions the client's mood was steadier. She waited for her turn to talk, ready to join the session, narrated stories more logically and fluently. She was able to express her own dreams in her life and also her feelings. Her attention span also improved.

Case 2: Is mentally challenged.

Therapeutic Objective: To increase mood balance, increase comprehension and attention span.

In the earlier sessions she enjoyed playing but always ended up quarreling with the rest of the group. She always focused on relationships in her stories. She described all tiny details.

Gradually her mood improved, drawing and painting helped her focus and concentrate. Her attention span improved with story telling and painting. Whenever she got depressed she would see others enjoying and join the group immediately and participate happily.

Case 3: Is schizophrenic. Would keep to himself. Eye contact was missing. Does not speak much. Does not display free body movement. Often walks with arms crossed across his chest.

Therapeutic Objective: To increase attention span, self expression and interest in life.

Gradually after a few sessions he started opening up. He enjoyed drumming and started singing Hindi songs. This was rare and was a major improvement i.e. being present to external reality. He made an effort to link all pictures and tell a story since he saw everything in bits and pieces each in its own context. He seemed more animated after painting and also spoke a lot about his art work something which he did not do earlier. The sessions helped him communicate and express himself.

Case 4: Is schizophrenic. Would keep to himself. Did not make eye contact. Did not want to eat or participate in activities.

Therapeutic Objective: To increase interest in life, make eye contact and communicate with others.

Initially he would not like to be in the group or even touch anyone. He drew very neatly but did not colour. Gradually he started expressing what he drew and also started colouring. He is opening up and communicating with others too. He said while painting he felt soothed and calm. There was

tremendous improvement in communication, expression of feelings, moods and concentration.

Case 5: Diagnosed as neurotic and hysterical, moody at times.

Therapeutic Objective: To improve mood balance.

She helped in creating balance in the group. She had a good sense of sound and vibrations. She participated freely in all sessions except movement related sessions. She quickly gets into art work and her imagination is simple and limited. Her mood seemed stable after the drawing, painting and story telling sessions.

Case 6: Is mentally challenged.

Therapeutic Objective: Increase attention span, comprehension and increase self expression.

He loved drumming and art work. He constantly talks and does not listen to others. Initially all his images were small forms and he did not colour. Gradually his stokes and forms became larger and bold which was a big step forward for him. He improved his comprehension in the story telling session and is just opening up in his expressive abilities.

Case 7: Is mentally challenged.

Therapeutic Objective: Increase clarity in communication, comprehension and self expression.

He was very sensitive to the energies of sound and colour. Drumming always had a positive energizing effect on him. He displayed a lot of concentration while colouring. The colour yellow had an effect on his emotions. He started crying and released a lot of pent up emotions which was a healing moment. All the rituals and activities helped him connect to the group. He looked much happier and he felt he was achieving something.

★ **Summary:** A noticeable positive change was seen in the group after the ABT sessions. There was a definite shift in attitudes, behavior and energy levels. The changes noticed in the group with improvement in percentile terms are as follows:

- Mental Activation ;interest in life in general :80%
- Expression of feelings constructively;vocalization:80%
- Social Interaction:70%
- Improvement in mood:80%
- Improvement in physical activity:75%

xv. ABT with young adults with severe Emotional disturbances

Indira Bhende

Atma Vishvas Vidyalaya Valsad, Gujarat.

- ★ **Clients Background:** Nine young adults in the age group nineteen to thirty two years. They experience severe emotional disturbances that hamper their academic advancement and restrict their career growth and adjustment to the demands of life.
- ★ **Propositions:** Based on the need analysis the following propositions were formed .**ABT can:-**
 - Bring change to their thinking (attitudes) and feelings (view) about themselves thus gain confidence and return to functioning life to achieve their potential.
- ★ **Data Collection Sources:**
 - Therapists notes
 - Peer therapists observations
 - Video Documentation
- ★ **Session Highlights:** Drama worked very well with group especially the embodiment of expressing various emotions. Various roles made them shift some easily and some with difficulty....it brought them out of their role of being a victim and the metaphorical message that they have a choice. Each session brought a lot of change in energy. Drawing brought out their internal confusion or clarity of thought and emotions.

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★ Case Highlights:

Case 1: Is nineteen years old. Is infantile and impulsive and is a school dropout because of dyslexia.

He enjoyed participating in drawing sessions as it gave him a chance to express himself with greater ease. It helped him focus to all and many aspects of the stories or films. Drama helped him become aware of the others in the community.

Case 2: Is twenty two years old and is a graduate. Is a sports person and loves hard work and animals. Inability to trust himself and others. Very uncomfortable with people.

He was active in all sessions and was also very clear, focused and reality oriented. He was feeling confident in the drama sessions. He spoke very clearly about himself. He was leading the group and also gave chance to others to lead. He benefited from the sessions.

Case 3: Is twenty nine years old and has completed twelfth standard. He is depressed and fearful.

He never used to talk and would answer only in monosyllables very softly. But in drama he expressed in short sentences without any inhibition. His drawings were reflective and he was able to grasp changes in music. He has become active and cheerful and enjoys being in the group.

Case 4: Is twenty seven years old. He is depressed and is unable to accept the erroneous decision of his career. Has panic episodes. Is highly intellectual.

He gradually started participating in the sessions. He refuses to watch TV and films but he watched a movie in the session and enjoyed it. He drew a rainbow of hope. His panic attacks reduced. He was able to sit through the session and participate. He looks happier in the group.

Case 5: Is thirty years old and is mentally challenged. She has speech problems, throws tantrums and is depressed because of inadequacy. She was very active in the group. She tried to draw and explain. With help she could express herself.

Case 6: She is thirty two years old. She is depressed and has delusions.

She was clear about the themes. She was very dull in most of the sessions due to medication. She expressed through drama, her desire to get over her fear.

Case 7: She is thirty one years old and is divorced. She has bouts of depression, laughter and episodic anger. She could sometimes grasp a bit during drama and then gets lost. She expressed her anger as being a volcano. In later sessions she calculated time and was beginning to think of her future.

Case 8: She is divorced twice and speaks irrelevantly. She also preaches and argues most of the time.

She was disconnected most of the time and is in a different reality. In the later sessions she was able to connect to the theme and express through her drawings. She played music well.

Case 9: Is twenty nine years old. She is depressed and keeps laughing and talking to herself. No social contact and maintains poor hygiene and self care standards.

She started participating in the later sessions and expressed through bold pictures.

★ Summary

This client population has deep seated maladaptive schemas which renders them dysfunctional to reach their full potential. Le doux explains the biology of the brain and the understanding of maladaptive schemas' as during traumatic learning situation.

Embodiment Projection Role (EPR) in drama therapy of (or other art based drumming, music, dance movement, drawing) is the only means to reach these deep seated unconscious somatic memories. All talk therapies focus on illness and the dysfunctionality.

ABT forces them to be in the present and not subjective reality .The potential of EPR in Arts Based Therapy is stupendous and at a time the group as a community brings faster results than many of the talk therapies.

xvi. A Silver Line

ABT with adults having mental and emotional disorders.

Dhara Shah

Samaritans, Mumbai

- ★ **Clients Background:** Nine adults in the age group thirty to sixty years who attend the day care center. They are suffering from schizophrenia and associated mood disorders. They lack social and functional skills. Some other features are lethargy, lack of attention span, lack of hygiene, low self esteem, incoherent speech, disconnected thoughts are some of their peculiar symptoms.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT will:-**
 - Cause the integration of the clients senses causing further enhancement of physical and mental activities.
 - Help in obtaining an optimal way of emotional expression and communication by being present in external realities.
- ★ **Data Collection Sources:**
 - Observation subtle, intuitive imagery, metaphoric transformation
 - Video documentation
 - Observer's notes and care givers notes
 - Organizations case records
- ★ **Session Highlights:**

All forms of art were used. Playing with colours and using different craft material according to different themes was effective in many ways. It helped in making them calm and relaxed. It provided a healthy way of releasing negative emotions. The process and the end product boosted most of the participant's confidence. The drum circles also boosted most of their confidence levels. It also helped in increasing attention span, raising energy levels and channelising aggression. It also aided memory skills, gross motor development and creativity.

Singing songs helped in stress relief. It increased enthusiasm and excitement. Songs and stories together worked on their imagination and reactive time. It also made the group more cohesive.

Using chakra sounds, vowel sounds and making soundscapes encouraged communication and imagination. The process made them all very happy and energetic.

Body movements and dance helped in reducing shyness, complexes and made them less inhibited gradually. Stories helped in organizing their thoughts, imagination, problem solving and decision making.

Drama helped a lot in speech development for this group. A lot of play was done for this group. It helped remain active, alert, humourous and fresh. The whole process was very therapeutic.

◎ Project Impact: ◎

👍 Milestones achieved

- Increase in attention span.
- Improvement in communication with family and within the agency.
- A realization that art helps therefore there is an increase in the use of art.
- Improvement in expression of feelings and emotions.
- Reduction of lethargy.
- Maximum time in their external realities, away from hallucinations
- Improvement in cognitive functioning and speech.

★ Case Highlights:

Case 1: Is fifty two years old and is diagnosed with schizophrenia

Therapeutic Objective: To integrate and awaken senses, reduce lethargy, increase enthusiasm, organize thoughts, enhance attention span and be present to external reality.

There has been a remarkable improvement in expansion of attention span and increase in focus during activities as per the feedback from the organization and family. His restlessness has been controlled and he is present to the external reality most of the time. He has begun communicating with family which was not present earlier. His lethargy is reduced by 40% and there is an increase by 60% in his mental and physical activity.

Case 2: Is fifty four years old and is diagnosed with schizophrenia

Therapeutic Objective: To integrate and awaken senses, reduce lethargy, facilitate emotional expression and communication.

He has remarkably improved in audibility, clarity of speech and communication. He makes an active effort in recognizing hidden feelings and expressing it through speech and facial expressions. He has also begun talking to his family. His overall grooming has noticeably improved. He helps in resolving fights and his energy levels and enthusiasm has increased.

Case 3: Is forty seven years old and is diagnosed with schizophrenia with mild retardation.

Therapeutic Objective: To facilitate emotional expression and communication.

He left the group for sometime due to ill health. In the few sessions he attended he enjoyed playing with colours and drums. There was an improvement in his emotional expression by 20%. His fear of being in a group reduced and he was willing to participate.

Case 4: Is fifty one years old and is diagnosed with schizophrenia.

Therapeutic Objective: To integrate and awaken senses, reduce lethargy, facilitate emotional expression and communication.

According to his psychiatrist ABT has benefited him a lot. His willingness to participate in physical activity increased by 40% and mental activity by 60%. His thinking, imagination, problem solving skills and decision making has improved. He now helps in documentation, maintaining a budget and reading the newspaper to the group. He is beginning to make friends and stays fit with regular exercise. His family has also communicated the improvements they have seen in him.

Case 5: Is thirty three years old and is mentally challenged with behavioral problems.

Therapeutic Objective: To enhance his residual skills, reinforce adult behavior and channelise aggression

He has made remarkable improvement. His residual skills have improved by 50%, reinforced adult behavior has improved by 30% and his positive emotional expression improved by 30%.

Individual sessions have also been done with him. His behavior has improved in family functions, speech has improved earlier he used to just grunt and he is also expressing his feelings verbally and non-verbally. Colours, drumming, breathing exercises and craft work have calmed him down. A behavior chart

was used before the session and he decided if he wanted a star or a cross. He is still learning to express his anger in positive ways.

Case 6: Is thirty six years old and is diagnosed with schizophrenia.

Therapeutic Objective: To understand various emotions and express them appropriately, enhance physical and mental activity and communication.

She did not attend the last few sessions as she was hospitalized; hence there was some limitation because of the increased chemical imbalance. She has started expressing more i.e. by 30%. Her physical activity has increased by 50% and her mental activity by 30%. Her feedback from her family has been positive. Her control over anger has improved. Her overall energy level has increased. She benefited from drumming, story circles, body movement and drama.

Case 7: Is fifty six years old and is diagnosed with schizophrenia.

Therapeutic Objective: To integrate and awaken senses, reduce lethargy and increase enthusiasm.

ABT positively motivated her in being more physically active and this led to the reduction of lethargy and increase in enthusiasm and alertness. Her anger bouts and fights have decreased. Her attention span has expanded, she talks relevant things and can express over visual cues.

Case 8: Is twenty eight years old and is diagnosed with schizophrenia.

Therapeutic Objective: To control anger, organize thoughts, enhance attention span, physical activity and be present to external reality.

Her attention span has expanded and her control over temper has increased by 30%. Her willingness for physical activity has also increased by 40%. She uses her body to express her ideas and she also expresses her thoughts well verbally. She often slips into the past but ABT helps her stay longer in her present reality.

Case 9: Is thirty four years old and is diagnosed with paranoid schizophrenia.

Therapeutic Objective: To control anger and understand various emotions and express them appropriately.

She attended a few sessions only as she went out of station. Her anger fits have decreased by 30%. Drumming had a healing effect on her. There was an increase in her physical activity and she also started making friends.

- ★ **Summary:** ABT definitely helps people with mental illness and emotional disorders. It is different and it breaks through all the rigid and regular psycho therapies in which the patient is just helpless and dependent.

It has shown the power of intent to achieve. The clients and staff of the organization have faith in the power of ABT after its major role in the overall healing process. There has been an increase in demand for ABT from the clients.

“At times I would sit to paint or drum and it helps me lighten up. It personally made a difference to me. It has set us as an organization free from the rigid ways of functioning. It has given deeper insights of the clients through intuition and helped me realize my strengths.”

ABT with clients in a de-addiction center

Deepali Sable

Muktangan De-addiction Center, Pune

- ★ **Clients Background:** The group consists of approximately fifteen to twenty clients in the age group eighteen to fifty years. All are adult male clients. The energy level is very high. The group had a floating population.
- ★ **Propositions:** Based on the need analysis the following propositions were formed. **ABT:-**
 - Enhances motivation
 - Positively reduces anxiety within the second week
 - Helps in getting insight about self and disease
 - Helps in regulating emotions
 - Helps to develop interpersonal relationships
- ★ **Data Collection Sources:**
 - Observation
 - Care Givers notes and feedback
 - Checklists
 - Group counselors feedback
 - Feedback from individual clients

★ Session Highlights:

The sessions included all the art forms i.e. painting, music, dance, story circles, drum circles, play and body movements. Drum and story circles worked very well every time along with drama, painting and play. Making stories and acting them out was also a great experience. It was also a challenge to get the senior citizens to participate.

◎ Project Impact: ◎

👍 Milestones achieved :

- Clients who did not participate in other counseling sessions were participating very freely in the ABT sessions
- Drumming sessions truly helped in reducing anxiety, stress release and enhanced the motivation of the clients.
- ABT is now an integral part of the organization along with other therapies.
- ABT is helping in generating positive energy in filling up the void created by the absence of chemicals.

★ Group Highlights:

The observable changes were noticeable very gradually after a few sessions. The group's motivational level was increased. The clients felt more relaxed and relieved after the sessions.

Clients who were reluctant to join the treatment showed gradual improvements.

The group was more expressive in drama and playing drums. They were more participative in the painting and drama sessions. The individual client feedback showed development of positive self esteem, feelings of being energized, enhanced motivation and decrease of anxiety and fear.

As per data collected from the ward in charge, group counselors and the individual feedback the outcome was as follows:

- Motivation was enhanced by 68% and anxiety level was decreased to 39%.

As per the group counselors:

- 65% increase in the motivation levels was after four sessions. They also mentioned that their interpersonal skills showed improvement.

According to the individual feedback:

- 63% of the clients experienced positive changes in their motivational levels after four sessions. This was observed through behavioral indicators devised such as punctuality, participation etc.
- 70% of the clients reported feeling energized, relaxed, relieved and stress free.

★ Summary:

ABT is being accepted as an equally important therapy in the treatment protocol of Muktagan De-addiction center.

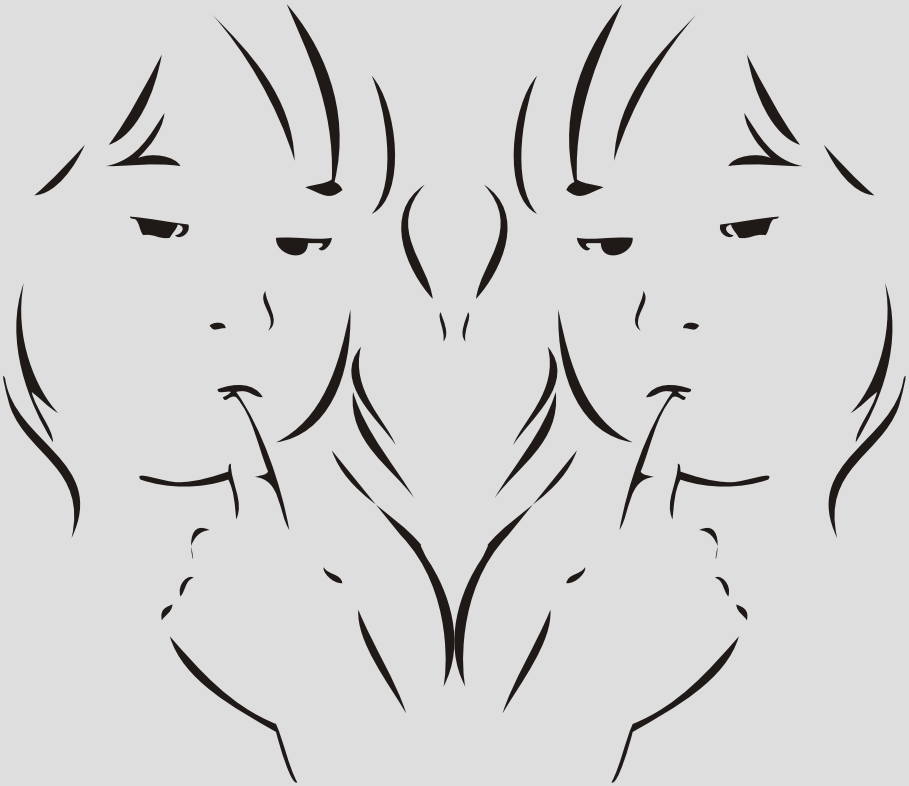
The ABT project supports the propositions formulated.

ABT by and large provided the people the chance to be involved in their own care, to make vital decisions about their own health, to be touched emotionally and to change psychologically in the process.

ABT helps in the clients to develop insight of self. It allows clients to regulate their emotions thereby providing them various positive ways to bring out those emotions that are said to be in appropriate.



4. REFLECTIONS



“Success is not measured by what one brings, but rather what one leaves.”

Looking back, the best part of the ABT project was the ripples created by the healing intent of the ABT Practitioners. Most of the students have worked hard on themselves, their own personal artistry and thereby enriched the organisations and their clients with this approach. The fact that the clients are looking forward for the ABT sessions indicate they have found a new language to communicate. As a part of the process we revived remarkable feedback from the peers and mentors of the ABT practitioner. Some of which are listed below:

4.1 Feed back from Mentors

“She is a very sensitive, enthusiastic girl and this course has helped increase the positive things in her”.

“She has become more confident in her work than before. I appreciate the increased energy level. The ABT training has helped her to facilitate the counseling activities in the society better. Her approach is now more compassionate and loving to the entire community of children and staff members. She has a firm belief in what she practices.”

“After ABT she appears to be calm and relaxed. She verbalizes her discontentment now. She has become more focused in attaining the goals professionally.”

“She now has a broader outlook and is more creative. She has been able to spread her attitude to her peer group and energize them successfully.”

“She is a fountain of creativity. She is already planning to implement ABT to many more students. She has become very confident through her experiences in the sessions. After the ABT training she has found 'what works' and 'what does not' with mentally challenged children.”

4.2 Feed back from Peers

“She has become more open minded and creative. Post training she is affirmative and uses her resources effectively”

“Earlier she used to get panicky before sessions but after the ABT course she is confident in using her creativity and ideas for the sessions. She now takes care of her health and takes her own decisions”.

“I find her even more approachable and open. There is a different kind of openness which has an ability to look at things in a neutralized way. She has increased quality, with a more systematic and scientific approach to her way of doing things. There is a finer degree of empathy while considering or listening to someone else's situation.”

“She has managed to control her aggressiveness during her sessions. She has become flexible in her sessions and in her personal life. She has also become more aware, alert to self and efforts are put for self growth.”

“She has become more artistic in her approach. After the training she has become more integrated as a person. She has a strong conviction now. Her thoughts and concepts are clearer. I worked with some children who were a part of the ABT sessions and I could make out a marked difference in their behaviour.”

“She is more organized and alert to observe changes among the children. She is enthusiastic and patient at the same time and tries out different ways to systematically intervene.”

“She is such a happy and patient person. And this has helped the group to calm down. She always thinks in a positively way and is confident.”

4.3 Feedback on the Project:

“The most striking aspect of the ABT project was the prominence accorded to the 'subtle' component which comprised the intent, visual imagery, cleansing of inner self and the physical environment, removal of interferences, keeping at bay any emotional baggage and meditation.

In simple words the ABT practitioners had to conduct the sessions with a clear and clean mind. This singular aspect itself distinguishes ABT projects from other therapies and also the manner in which the sessions are usually conducted.”

“The objectives of the project were on attention, impulsive control and aggression. And today I can see that there is change in the behavior of the target group who attended all the ten sessions. Children have become calmer, relaxed and they are now able to concentrate etc it can be seen in their behavior. In percentage wise I can say 80% of the project goals have been achieved.”

“Many of them (institutionalized children) have come forward and shown confidence in themselves. They face problems use the skills learnt in the ABT sessions to solve them. The clients have overall changed their view of life. Now they are more positive, assertive and focused in life.

I have seen two cases talking in a high tone which they never did. They always whispered, never smiled or even cracked a joke. I think ABT is a child friendly therapy where results are bound to be seen.”

“I feel the project has been a magical space to rediscover their goodness and it has achieved the goal of making each one (institutionalized adolescents) feel good in their fullness.”

“The project (with mentally challenged children) has achieved its goals to the extent that we can apply and implement it ‘one on one’ as well as a group activity. The degree of effectiveness has varied as per the individual difference. Due to this cohesive groups are possible in the future. This will enhance the chances of developmental progress.”

“This project has benefited the organization a lot. Working with children from the community is a challenge. The project has managed not only to generate interest levels in children but has a good response from parents too. Many parents from the community urged others to send their children to sessions. Thus, the rapport with the community increased. The children were involved keenly and thus evolved in the process.”

4.4 Suggestions and Insights to further ABT

The course was a wonderful learning experience for the students and the teachers. As the process of refinement continues new insights and suggestions emerged to keep the spirit of continuous learning awake.

Some of them are:

i. Community Building

- Continue having courses for trained ABT practitioners in other cities.
- More workshops on ABT for deeper understanding and experience. Frequent interactions with the teachers and ex-students. Also, increase the course duration for optimum experience.
- Conduct refreshers courses from time to time.

- Regular contact between therapists to share information and experiences. This could be either formal or informal. This also includes sessions led by different members to keep the sharing not just intellectual but also experiential.
- Creating an alumni network of ABT students with a directory, website etc

ii. Development of Support Staff

- Personal Developmental modules for all teachers in Special Education Schools.
- Workshops for management personnel in schools so that they experience the effect of ABT.
- Introduce ABT for mainstream schools as therapy for stress related problems
- Training group observers.
- To spread ABT into mainstream schools, institutions and workplaces in all fields
- Sensitization at the organizational level would help the participants to design the project for implementation. Involve other staff in ABT.
- To conduct sessions with parents, caretakers in support group meetings.
- Involve the head of the institution in the process
- Interest in learning increased during ABT Sessions. Hence children want to learn academics through ABT.

iii. Research and Publication

- Collecting research material from all the participants for publishing paper.
- Spread greater awareness about ABT through publication of research conducted on this subject in journals published by institutions working in the field of social work and allied disciplines
- Publishing research findings through internet or journals

iv. Enhancing the Project Work

- More practical sessions within the workshop
- Need more time for sessions
- Involve the head of the institution in the process
- Increase project duration i.e. the number of sessions for data analysis and findings for research.
- More time needed to plan the required indicators for the main project.
- Twenty four sessions are not enough with mentally challenged children.

v. Some action taken:

Base on the above feedback and reflections WCCL Foundation has initiated the following:

- To conduct Refresher Courses once a year for the past students (to begin in 2008.)
- Support and guidance in being provided through the ABT group yahoo network.
- We are in process of publishing research articles and books.
- Creative way to enroll the support staff in the organization is in the being considered.
- Project work is enhanced for the next batch.



5. COMPLETION & CELEBRATION



"Drop a pebble in the water: just a splash, and it is gone; But there's half-a-hundred ripples circling on and on and on, Spreading, spreading from the center, flowing on out to the sea. And there is no way of telling where the end is going to be."

The ABT practitioners reached another milestone in their journey. Out of the twenty eight who enrolled for the course seventeen successfully completed the course. Some of them have expressed that they would complete it the following year. The reasons the others could not complete were:

- Inability to express what they learnt
- Illness in the family
- Lack of support from organization
- Incompletion of Projects.

To celebrate the completion of the course a certification ceremony was held on 28th Sept '07 at the National Insurance Academy Pune. The ABT practitioners came along with their family, friends and mentors for the ceremony.

The theme for the day was water and the new batch of ABT Practitioners embodied that. Our connection with water is spiritual and therapeutic. And, this day symbolized that.....The rituals of the day also were the expression of the same. The new ABT Practitioners went through a process of cleansing to wash fears and difficulties and begin anew a journey of faith and goodwill. The ripples have already begun and now flowing towards the ocean.

The ambience was solemn, placid and free flowing. The ABT Practitioners shared the highlights of their projects and their personal journeys in the course.

The feedback was overwhelming and very encouraging. The moments were special, emotional and precious for the teachers and students. The nine month of nurture had ended ...the birth of new ABT practitioners was celebrated with lot of love.

Each Student received their Certificate of Completion which had their grade along with a score card which captured their assessment during the entire course. They also received a memento to cherish the experience they have gone through.

Just as a tiny pebble creates innumerable ripples in the water....So have the ABT practitioners embarked on this never ending journey of infinite possibilities of creation and healing.

6. ABOUT WCCL FOUNDATION

The World Centre for Creative Learning Foundation (WCCL FOUNDATION) is a registered NGO established in Nov. 2001 by professionals in the field of the arts & human development. WCCL FOUNDATION collaborates with other NGOs to implement ABT in areas of psychosocial rehabilitation, special education, developmental disabilities, and neuro-physiological rehabilitation.

OUR MISSION is to:

- Establish ABT as a healing model applied, replicated and sustained in clinical, special educational and rehabilitative environments.
- Conduct Research and Development generate evidence and data on ABT and its effectiveness in India, create better products for special needs groups.
- Create more ABT Practitioners increase human resource in this area. Eventually ABT practitioners will be having a legal and professional designation.

WCCL FOUNDATION has been funded by The J.R.D. Tata Trust, Sir Dorabji Tata Trust, Sir Ratan Tata Trust, United Way of Mumbai, Mahindra British Telecom Foundation, Human Factors International (HFI).

WCCL FOUNDATION therapists are associated with and mentored by Ms. Sue Jennings, Founder of Rowan Studio (UK) www.suejennings.com and pioneer of dramatherapy and Ms. Heather MacTavish, founder of New Rhythms Foundation (USA) www.newrhythms.org and a pioneer in the field of music and cognitive disabilities.

Some of the NGOs where we have implemented ABT are :

- Muktangam & Kripa De-Addiction Centre, Pune (June 02 - 03)
- Sadhana Village, Mulshi Pune (June 03 - 05)
- Manaswardhan De-Addiction Centre, Pune (June 04 - 05)
- Rewachand Bhojwani Academy, Pune (June 04 - 05)
- Bapu Trust, Pune (June 04 - 06)
- Cipla Palliative Care, Pune (June 05 - 06)
- Prasanna Autism Centre, Pune (June 05 - 07, ongoing)
- Asha School for the physically and mentally disabled, Pune (Feb 07 ongoing)



ABT Certificate Course 2007



World Centre for Creative Learning Foundation

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