

Expressive arts therapy for management of loneliness and psychological well being

A Thesis

submitted for partial fulfillment of the requirement for the award of degree of



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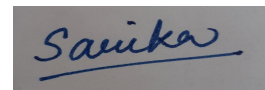
CERTIFICATE

This is to certify that the dissertation entitled “Expressive arts therapy for management of loneliness and psychological well being” submitted by Manya Khanna (Regd. No. 862102031) in the partial fulfillment of the requirement for the award of the degree of Master of Arts in Clinical Psychology, to Thapar Institute of Engineering and Technology is a record of a student's own work carried out by her under my guidance and supervision. The report has not been submitted for any other degree or certificate award in this or any other university or Institute.



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CANDIDATE'S DECLARATION

I, hereby declare that the work being presented in the thesis entitled, “Expressive arts therapy for management of loneliness and psychological well being” in the partial fulfillment of the requirement for the award of the degree of Master of Arts in Clinical Psychology, Thapar School of Liberal Arts and Sciences, Thapar Institute of Engineering and Technology, Patiala, India. The content in this dissertation has not been submitted to any other university or institute for the award of any other degree.



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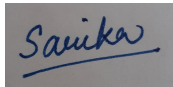
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ABSTRACT

Loneliness is often used interchangeably with the term isolation. Isolation can be feeling alone, but loneliness is feeling alone in a group full of people or while living alone. It is not just a feeling; many emotions, like anger, sadness, frustration, etc, accompany it. According to the Loneliness Model, an individual starts feeling unsafe in their environment, making them hypervigilant of people around them and increasing their loneliness. Lonely individuals often fights a lot of battles with themselves during the day. One's psychological well-being can also get hampered in this process. There are six variables under psychological well-being: Self-Acceptance, Purpose in Life, Personal Growth, Environmental Mastery, Positive Relations with Others, and Autonomy. The study focuses on managing loneliness and psychological well-being in females with Expressive Arts Therapy. The therapy is a collaboration of modalities like art, writing, movement, poetry, narrative writing, play, and clay therapy. The study is done using pre and post-treatment with a control group design (20 participants: 10 participants in the Experimental group and 10 in the Control Group). An intervention plan for five weeks was planned, and activities were designed focusing on loneliness, psychological well-being, and all the variables under it. Using the Mann-Whitney U test, we analyzed the changes in the feelings of loneliness and psychological well-being in both groups, which were significant at 0.05. Using the Wilcoxon Sign Rank Test, the pre and post-intervention scores were analyzed separately for both groups. In the Experimental Group, the results revealed a significant change at 0.05 level within-group design.

Keywords: Loneliness, Isolation, Psychological Well-being, Expressive Arts Therapy, Self-Acceptance, Purpose in Life, Personal Growth, Positive relations with others, Environmental Mastery and Autonomy.

CONTENTS

Certificate	i
Candidate's Declaration	ii
Acknowledgement	iii
Abstract	iv
List of Tables	v
CHAPTER 1 INTRODUCTION	1-8
1.1 Loneliness	1
1.1.1 Emotional Loneliness	2
1.1.2 Social Loneliness	2
1.2 The Loneliness Model	3
1.3 Effects of Loneliness	3
1.4 Well-being	4
1.4.1 Psychological Well-being	7
CHAPTER 2 REVIEW OF LITERATURE	9-11
CHAPTER 3 RESEARCH GAP	12-13
3.1 Research Gap	12
3.2 Motivation of the study	12
3.3 Objectives	12
3.4 Conceptual Framework	13
3.5 Hypothesis	13
CHAPTER 4 METHODOLOGY	14-17
4.1 Sample	14
4.2 Participant's Inclusion and Exclusion Criteria	14
4.3 Design	14
4.4 Tools	14
4.5 Intervention Package	14
4.6 Procedure	18
4.7 Statistical Analysis	19
CHAPTER 5 RESULTS	20-31
CHAPTER 6 DISCUSSION	32-34

CHAPTER 7 CONCLUSIONS, IMPLICATIONS, LIMITATIONS AND FUTURE DIRECTION	35-36
7.1 Conclusions	35
7.2 Implications	35
7.3 Limitations	36
7.4 Future direction for research	36
REFERENCES	37-39
APPENDICES	40-44
APPENDIX A Consent Form	40
APPENDIX B Loneliness	41
APPENDIX C Psychological Well-being	42

LIST OF TABLES

Table No	Description	Page No
1.	Descriptive Statistics	20
2.	Showing Levels of Loneliness in Experimental and Control Group	20
3.	Showing Baseline Status of Loneliness and Psychological Well-Being of Experimental and Control Group.	21
4.	Showing Status of Loneliness and Psychological Well Being on the Experimental Group and Control Groups after Intervention	24
5.	Showing Status of Loneliness and Psychological Well-Being on UCLA and Ryff's Psychological Well-being in Experimental Group Pre and Post Intervention (Within Group Design).	27
6.	Showing status of Controlled Group on Loneliness and Psychological Well-being after intervention (within group)	29

CHAPTER 1

INTRODUCTION

1.1 Loneliness

"Loneliness is having other people and society and community around you, and having a deep sense of being excluded from them."

-Ichiro Kishmi

Loneliness is something that is universally felt yet uniquely experienced. As a child finds its mother's comfort and warmth as the basic need of survival, being in the womb, an individual sees this warmth with people around us. As social beings, we rely on our social surroundings to be safe, at peace, and have that sense of warmth again. As explained by Maslow, safety is as crucial as thirst and hunger. But often, people don't find this safe feeling, making them believe that every situation threatens them. This feeling is something that most of us go through, but we are forced to eliminate it as if it's a physical disease. This feeling of being empty, not feeling safe around people, and constantly blaming oneself for feeling this way can be explained as loneliness.

It is not just a sad, melancholy feeling; it is to be in a constant state of fight-flight. Unlike a headache, it doesn't occur for a couple of minutes or hours. Instead, one is living with it for years. It is dangerous not only for the individual dealing with it but also for people nearby. It is often seen that they never let others know what's going on inside them.

It is essential to understand the difference between Loneliness and Isolation. The two are often used interchangeably though they have very different meanings and ideas behind them. While isolation is being alone, loneliness is feeling alone either in isolation or in a group.

Loneliness is believed to be a natural phenomenon that can occur in any age group, gender, social and economic status, etc. The prevalence of loneliness is higher in young adults due to the transitional phases that they encounter. They are also at a high risk of depression due to this.

However, how the two factors influence each other is still not clear. It is also seen most commonly in females as compared to males. Often males indulge in substance abuse to suppress their feelings.

It is often seen in people as a weakness or with pity. While facing such feelings, they are asked to cure it, as if it will fade away, just like popping a pill for physical pain. It is a complex mixture of emptiness, desperation, shame, and guilt and a never-ending cycle of negative and self-deprecating thoughts and emotions of anger, frustration, sadness, and anhedonia. They often have difficulty accepting themselves and are under constant pressure to act or pretend to fit in. Recently, it was categorized into emotional and social loneliness to understand the term better categorically.

1.1.1 Emotional Loneliness

Emotional loneliness can be defined as not feeling connected with people around us. It is different from emotional isolation or social loneliness. Loneliness itself is an emotion. It can occur at any age, gender, and socio-economic status. It is believed that emotional loneliness can be caused due to a lot of factors, some of which are childhood trauma, childhood neglect, substance abuse, or people who often feel like an outcast in their life. Childhood trauma can include bullying, lying to, physical or mental abuse, etc. These factors contribute to helping the individual not trust people around them. After such events, the child or an individual often builds a preconceived notion stating that they can't rely on others for their well-being affecting their personalities and relationships.

1.1.2 Social Loneliness

Social Loneliness or Social Isolation is a term used to define how an individual feels alone even after being connected with social beings and having social relationships. This feeling often accompanies a lack of understanding, feeling abandoned, considering oneself an outcast, and feeling emptiness. This often results when an individual expects too high from the relationships. This can happen due to unconsciously finding threats in their environment and thinking everyone is against them. They often do not feel safe in their environment.

1.2 The Loneliness Model

The Loneliness Model given by Cacioppo and Hawkley (2010) explains how loneliness perpetuates from the feeling of being unsafe. This feeling of being unsafe leads to the individual being on high alert to scan their environment for potential threats. Being hypervigilant often leads to building up cognitive biases against their environment, especially the people in them. The individual slowly and steadily starts the scanning unconsciously, and is reflected in their behaviors and everyday decisions. The unconscious surveillance helps increase negative social interactions among them, and as our brain tends to remember adverse events more, the individual is aware only of them. The memories often elicit negative behaviors from their side, getting caught in a self-fulfilling prophecy creating the social distance that the individual often does. The self-reinforcing loop affects the individual not only emotionally but also physiologically.

1.3 Effects of Loneliness

Loneliness can have adverse effects not only on our mental health but also physical and neurobiological health. Studies have shown that loneliness can accelerate one's physiological age. It is responsible for body dose imbalance, often impacting various physiological responses. Individuals with loneliness are at a greater risk of cardiovascular diseases with increasing systolic blood pressure levels. Studies have also shown that feelings of being lonely can increase the risk of heart disease by 29% and strokes by 32%. Surprisingly, loneliness is a giant killer than obesity regarding heart disease.

It is also associated with personality disorders, psychoses, and increased suicide rates. Researchers have also shown an increased risk of Alzheimer's and depressive symptoms in individuals. These depressive symptoms are linked with increased fear of negative evaluation, anxiety, anger, and decreased self-esteem and optimism. Impaired cognitive performance and reduced executive control are also seen in individuals. These cognitive declines are often linked with the onset of dementia. These impairments may hamper one's social interactions, which prompts social withdrawal leading to loneliness. And loneliness is a precursor of cognitive decline. Hence, loneliness can lead to dementia and vice versa.

Another significant effect of loneliness is on the brain. A recent study used a seed-based approach to determine the functional connectivity of our brain in a resting state in young adults with loneliness. The study critically investigated the functional connectivity, majorly recognizing the affected areas: the Inferior frontal gyrus, supplementary motor area, precentral gyrus, and superior parietal lobule. It was concluded that the greater the levels of loneliness, the greater the impacted visual attention brain will be.

Overall, it seems that something related to our sense of connectedness with each other is inside the physical organism and includes the integrity of physical and mental health and well-being. What that "something" is the area being explored.

1.4 Well-being

Well-being is an essential aspect of our health, and one of the most critical types of well-being is psychological well-being. It can be understood as the holistic being of an individual's mind, feelings, and emotions. How one wants to live their life, how one interacts with others, their growth as an individual, and how they know and manage their environment. As a young adult, one faces a lot of changes while focusing on their well-being. While being constantly questioned about their life and how they have planned to lead it often leaves them with a dilemma. Increased feelings of being lonely often accompany the dilemma. Three major types of well-being are Emotional Well-being, Social Well-being, and Psychological Well-being. The major area that gets affected by a lot of variables is Psychological Well-being.

1.4.1 Psychological Well-being

Carol Ryff gave the concept of Psychological Well-being. According to her, it is feeling and being healthy and performing as a fully-functioning person. Ryff reached the image by digging deep into Aristotle's idea of Eudaimonia. According to her, the model of psychological well-being had two major bases; firstly, well-being resulted from growth and human fulfillment, which was affected by the individual's surroundings and the contexts of their life, wherein the opportunities for self-realization are not equally distributed—secondly, eudaimonic well-being helped in addressing various physiological systems and their effective regulation.

Aristotle wanted to formulate a doctrine to help people in living their lives. He mentioned it to be like guidelines to lead a fulfilled life. His theory was based on a question, the highest goods achievable by human action. He curated the concept of Eudaimonia differently and gave the field another dimension of happiness and well-being. He insisted that what a human can achieve the highest in life is for the soul concerning the virtues in life. If one has more than one virtue, it will act as best and most complete for them. He beautifully explained the nature of these virtues, like confidence, fear, anger, and pity, which cause too much pain or pleasure. But in both aspects, it doesn't help an individual. Unless it is done at the right time, with the right intention, and with suitable objects, these are defined as the characteristics of virtue. That's how he explained Eudaimonia as being the happiest under the virtues, and the higher the virtues, the more meaningful it is for the individual.

Ryff then dug deeper into the concept and got six dimensions of psychological well-being. These dimensions were influenced and based on the previous approaches. The dimensions are as follows:

1. Self Acceptance- The factor emerged out of the need to have a positive self-regard. It was formulated by integrating various perspectives like the Central feature of mental health (Jahoda), Maslow's self-actualization, and the concept of optimal functioning by Rogers, focusing on maturity given by Allport. The life span theories also made the dimension by infusing the importance of acceptance of oneself and one's past life. The concept of Individuation and Shadow given by Jung also helped pay attention to self-esteem and self-awareness.
2. Positive Relations with Others- The factor emerged from Aristotle's concept of Ethics. He explained how friendship and love could work towards leading an excellent achievable life. Mill's autobiography describes how greatly influenced love in his life makes him, while Russel highlights affection as one of the sources of happiness. Jahoda's idea of Mental health is linked centrally to the ability to love. Even Self-Actualisation, as explained by Maslow, is achieved when an individual has strong empathy and affection for everyone around them. As put up by Allport on Maturity, warm relations with others help you achieve that state. Erickson also focused on Intimacy and Generativity, i.e., close unions with others and guidance and directions of others. The priority of love and affection with empathy is also symbolic of the cultural endorsements of how to live.

3. Personal Growth- Aristotle's Eudaimonia was the stepping stone for the concept. It made one realize their inner potential, which is explained and elaborated by Maslow and Norton in Self-Actualization. Jahoda's positive conception of mental health and the fully functioning person defined by Rogers gives a new light to the concept. It explains openness to experiences and consistently growing rather than being stuck until the solution is achieved. At the same time, the life-span theory talks about the never-ending growth of the new challenges encountered at every phase in life.
4. Purpose in life- The main intention behind this dimension comes from Logotherapy. As Viktor Frankl explains, it will Live or Search for Meaning. Frankl explains that it is vital for a person to find meaning in their survival or what makes them live this life. Russel also explains the concept using Zest, while Jahoda's definition of Mental Health is based on the belief in the sense of purpose and meaning in life. While exploring Maturity, Allport establishes how it is achieved through directionality and a person's intentions toward their life. While explaining the developmental stages, life span theories beautifully explain creative and productive lives during middle age and a more emotionally integrated one later.
5. Environmental Mastery- This dimension works on the factors like making and choosing the environment suitable for our mental health, as explained by Jahoda. The life-span theory emphasizes how an individual manipulates and controls complex environments in midlife, which enables them to have the capacity to change and act accordingly based on both physical and mental activities. As a significant criterion for Maturity, Allport mentions that an individual should possess "the extent to self." In totality, mastery of the environment and active participation with a sense of control and self-efficacy helps in an integrated framework of positive psychological functioning.
6. Autonomy- The dimension includes various qualities such as self-determination, independence, and regulation of behavior from within an individual. Self-Actualization represents how autonomous functioning is done while showing resistance to enculturation. As explained by Rogers, a fully functioning person manages the internal locus and does not seek others' approval for everything. Individuation by Jung significantly talks about how a person should be free of collective belief systems, fears,

and laws. The life-span theories also focus on the importance of thinking inward in later life, gaining a sense of freedom from the norms of our everyday life.

1.5 Expressive Arts Therapy

Expressive Arts Therapy is a newer form of psychotherapy founded in the 1970s by Shaun McNiff and Paolo Knill. The idea behind devising the therapy involved two or more expressive therapies and sensory modalities with the interrelatedness of the arts, like the action, the use of arts, the non-verbal expression used, and commitment to creative transformation. Psychotherapy works on sensory-based expression, i.e., using and focusing on non-verbal expressions to access experiences, one's thoughts, and feelings that do not depend exclusively on either Verbal Language or Narrative Disclosure. It acts as an amalgamation of affective, somatic, and cognitive expressions. The approach focuses on cultivating sensitivity to all modes of expression. The therapy involves various categorizations, and an intensive intervention is often devised using all or some of them; these are as follows:

1. **Visual Art Therapy:** It uses visual art media, images, and creative processes and respects the client's expression or the representations of their development, abilities, personality, interests, concerns, and conflicts that they encounter in their daily life. Using this therapeutic means, we can reconcile emotional conflicts, foster self-awareness, develop social skills and manage behaviors while solving problems, reduce anxiety, aiding reality orientation, and increase self-esteem.
2. **Dance Movement Therapy:** It uses movement to promote the emotional, social, cognitive, and physical components of an individual by fulfilling the purpose of improving their health and well-being. It works as a holistic approach towards healing which is entirely based on an assertion of the mind, the body, and the spirit, which are inseparable and interconnected. The changes in the body reflect the changes in the mind and vice versa. Is the therapy as crucial as a movement-based approach which is often difficult to describe, and it is actively engaging as the process gets to a true sense of what it is, making the individual more and more intrigued and relaxed?
3. **Music Therapy:** It uses music, both actively and passively, to affect the various positive changes, which are often physiological, physical, cognitive, or social, affecting the functioning of an individual concerning their health, education, and problems. The

approach utilizes the rhythm of the sounds, the percussion of the instruments, the string instruments, for example, guitar, sitar, Tabla, drumsticks, etc, and body percussion. It includes object percussion as well.

4. Poetry/ Creative Writing: The use of poetry or other forms of literature in psychotherapy is often done by reading or writing. Each individual has their interpretation of a text or any written communication. It is a tendency to believe that whenever you read a text it makes a different meaning to you every time you read it. This is done because our brain interprets the text according to what we see. Poetic therapy and Bibliotherapy are used synonymously to explain the intentional use of poetry with other forms of literature, which are used for healing purposes and personal growth.
5. Drama Therapy: Therapy is a systematic and intentional use of drama, theater, and processes. The products and associations must achieve the therapeutic goals of symptoms, relief, emotions, and physical integration and involve personal growth. It is used as an active approach that helps the clients to tell the story or to solve a problem. It often helps achieve catharsis, meaning the extended depth and breadth of the inner experience, understanding the images and their meaning, and strengthening the ability to observe personal rules by increasing the flexibility between the roles.
6. Play Therapy: Play therapies and systematic use of a theoretical model, which is used and formulated as an interpersonal process wherein the therapist uses the therapeutic powers of clay to help the client prevent or resolve psychosocial difficulties and achieve optimal growth and development. It is used with clients healing from trauma and specifically with kids. The therapy helps build a kinaesthetic environment by connecting the body with the mind and gives the individual a different perspective to think, feel, and act simultaneously.

CHAPTER 2

REVIEW OF LITERATURE

Aydin, M. and Kutlu, F. Y. (2021). studied the effect of group art therapy on Loneliness and Hopelessness in elderly people who were randomized controlled study. The study was done on 60 participants who were living alone. The participants were randomly divided into two groups; Experimental Group and Control Group. The experimental group was given six sessions of one and half hours with group art therapy with clay and face to face interviews were taken. The control group was only interviewed face to face. The pre and post assessment was done using UCLA Scale and Beck Hopelessness Scale. The results showed how statistically significant the difference between Experimental and Control Group showed reduced loneliness and hopelessness levels in older adults living alone.

Bennington, R., Backos, A., Harrison, J., Reader, A. E., & Carolan, R. (2016). studied social connectedness and psychological well-being in older adults using art therapy in the art museums. The studies were done on eight older adults and understanding how the art museums, its exhibits and journals can impact on their psychological well-being and social connectedness. The themes were aligned with art and writing. The results indicated that the emotions, thoughts and memories were expressed beautifully enhancing their psychological well-being and increased social connectedness.

Crockett T. (2020) did a review on Loneliness and Expressive Arts Therapy. The focus of the review was on majorly three groups i.e emerging adults, adults and young adults in relationships. It was primarily done to understand loneliness with social isolation and its connection with expressive arts. They got to know how mediums are used in expressive arts therapy using human connection with academic and non-academic resources interventions. They concluded that further research with expressive arts is required as most researches focus on art therapy.

Mishra K. (2021) did a pilot study to see the effect of expressive arts therapy on subjective happiness and loneliness feelings in institutionalized elderly women. The therapy was done to reduce feelings of happiness and reduce loneliness. A sample of 5 elderly women in the age

group 60-71 years of age was taken. Subjective Happiness Scale and UCLA was used to assess the variables. Pre and post-analysis were done, and the results concluded that expressive arts therapy helped increase feelings of happiness and reduce loneliness.

Dilawar K and Tripathi N (2014) studied Art Therapy as an expressive and creative process. Art can enhance communication, overcome stress, and overcome different types of personalities. They help in enhancing psychological disorders and other mental health issues. Art helps express self, self-esteem, and resolves issues or conflicts, etc. Thus, as art helps in it, it can also help with psychological disorders and mental health issues.

Gorny-Wegrzyn, E. and Perry, B. (2022) studied the effect of creative art therapy on health and well-being. The study talks about the therapy's effect on individuals' decreasing loneliness, depression, pain, and many other psychologically related disorders. Clients were given creative arts therapy and certain issues were addressed and helped in reducing these symptoms.

Hankir A. (2017) studied the impact of performing arts on psychological well-being. The study was done on a large scale with 25,222 participants who were on psychiatric morbidity in the UK. The therapy was focused on a holistic approach that includes various treatment procedures wherein the patients safety was preferred. The growing approach towards the psychotherapeutic technique has powers to heal psychological wounds. Moreover, drama therapy has being said to enhance psychological aspects of an individual.

Pizarro J (2011) understood the efficacy of art and writing therapy and how it increases positive mental health in traumatic patients. Earlier research has shown that writing about trauma has brought a significant impact on their mental health but not on their social inclusion. Thus, art therapy helped the clients to express themselves freely. They enjoyed the process and recommended it to other family members as well. Further, a mixed therapeutic intervention will be done to see the impact both therapies create.

Pond, S. S. C. (1998). did a study on two lonely children who understood acceptance and belongingness in them using group art therapy. The children were in third grade, one boy and one

girl who were given eight sessions of art therapy intervention to see the impact of loneliness in them. The pre and post intervention was done with Asher's Children's Loneliness Scale and Self Inventory of Loneliness. The interventions were focused on art, and employing various modalities of media, focused on understanding relationships, and relationships within the groups and for fulfilling personal needs of the students. The results showed mixed results for both the children.

Puig, A , Lee, S. M , Goodwin, L , and Sherrard, P. A. (2006). understood the efficacy of creative art therapies to enhance one's emotional expression, their spirituality and psychological well-being in newly diagnosed breast cancer patients with Stage I and Stage II breast cancer patients. As it is one of the most common cancers among women, there is a lot of psychological impact on them including adjustment disorders, depression and anxiety, along with feelings of stress, guilt, emotional expression and psychological well-being. The study was done on thirty nine patients who were randomly divided into experimental groups who were given creative arts therapy and the controlled group who did not receive the treatment or delay of the treatment. The results were computed using analysis of covariance. The results concluded that there was a significant increase in the psychological well-being and reduction in negative emotional states.

Radl, D et al (2018) studied the effect of self help books created using art therapy on cancer-related distress in female cancer patients during their treatment using randomized control study. Sixty women with cancer who have given their consent were given six sessions of self-art therapy. Data was collected using Distress Thermometer, perceived emotional distress inventory, psychological well-being and spiritual well-being. The measurements were done at the baselines, week 3, week 6, and post intervention of 1 to 2 months. The results concluded that there is no significant difference between the groups and it was seen that self-help art books may have clinical value.

CHAPTER 3

RESEARCH GAP

3.1 Research Gap

Most of the studies do not include expressive arts therapy as an intervention. Only arts or writing or Dance Movement Therapy is used. The interventions are done on Western populations, which cannot be generalized to Eastern and South Asian Countries, particularly India. Loneliness and Psychological well-being are not explored together, and no sought of intervention planning is done. Most of the studies are focused on Older adults and thus, we did it on young adults. The purpose of the research is to see the effect of expressive arts therapy on the management of loneliness and psychological well-being.

3.2 Motivation for the Study

The findings of this study would benefit society considering all the variables which include Loneliness and Psychological Well-being. The therapy would help in improving and contributing towards the positivity in human nature, thus enhancing and improving the daily functioning of human beings. The study therefore draws attention towards the positive aspects of an individual and how loneliness can be coped with; which would be helpful in maintaining and enhancing the psychological well being of people.

3.3 Objectives

To study the effect of expressive arts therapy on the management of loneliness.

To study the effect of expressive arts therapy on managing psychological well-being.

3.4 Conceptual Framework

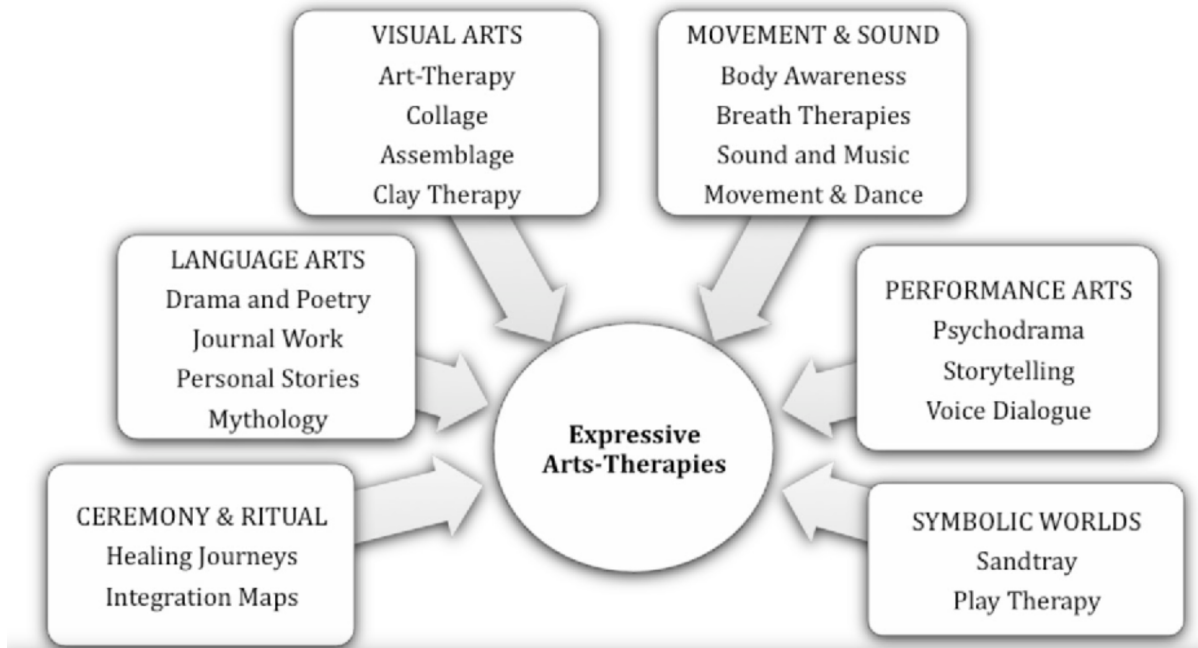


Figure 1 shows the conceptual framework of Expressive Arts Therapy and different modalities used in it.

3.5 Hypotheses

H1 There will be no significant effect of expressive art therapy in managing loneliness.

H2 There will be no significant effect of expressive art therapy on the management of psychological well-being.

CHAPTER 4

METHODOLOGY

4.1 Sample

A purposive sampling was taken from a screening of 120 participants (which has 60- Males and 60- Females). Twenty female participants (10 experimental groups, ten control groups) were selected whose loneliness levels were moderate to severe and impacted their psychological well-being.

4.2 Participant's Inclusion and Exclusion Criteria

Inclusion Criteria

- Participants suffering from feelings of loneliness based on assessment on UCLA Loneliness Scale, with scores between Moderate to Severe Levels.
- Age range within 20 to 25 years.
- Only females were taken.
- At least educated up to graduation level.
- Participants who gave informed consent to participate in the study.

Exclusion Criteria

- Participants with comorbid psychological conditions.
- Family history of mental illness.

4.3 Design

The study was done using pre and post-treatment with a control group design.

4.4 Tools

The tools used for the pre and post-assessment were:

1. Psychological Well-being Scale by Carol Ryff
2. UCLA Loneliness Scale

4.5 Intervention Package

The main goal of the treatment was to reduce the levels of loneliness in young adults and enhance their psychological well-being overall while increasing its factors like Autonomy,

environmental mastery, purpose in life, positive relations with others, personal growth, and self-acceptance levels.

This was done using Expressive Arts Therapy. The sessions were curated using all the forms of modalities, i.e., Art, Music, Dance, Movement, and Writing. Each session had a theme to reduce our variables and help the client increase their well-being. After each activity of the session, participants were asked about the activity, how they are feeling, and if they experienced any change.

Session I: Enhancing Self-Acceptance and Personal Growth

Warm-Up Activity:

1. Praise Greetings- Greeting each other with one quality that they see in the other person. It was done to enhance self-esteem and focus on the good aspects of their personality.

Theme-Based Activities:

1. Inside Out- The clients were supposed to represent their inner qualities, skills, and things that they don't often show to others while representing those skills outside that they often show to others.

Material Required- A-4 size sheets, Colors, Pencil Colors, Sketch pens.

2. Cupcake Tower- The clients were asked to make a cupcake tower for themselves, wherein each frosting layer would represent their skills, achievements, all things they wanted to do, things they have done, and constant reminders that they wanted to give themselves.

Material Required- A-4 size sheets, Colors, Pencil Colors, Sketch pens, craft material.

Closing Activity-

1. Guided Imagery- The clients were asked to feel like a flicker of the candle and its movements and then blow the flame with all the tension in their body.

Session II: Working on loneliness

Warm-Up Activity:

1. White Noise Movement- The clients were asked to imitate one movement or gesture that helped them feel comfortable when they feel scared, lonely, etc. Everyone had to do the same as the other.

Theme-Based Activities:

1. Powerful Ally- Guided imagery was given first, instructing them to focus on a moment when they felt the most lonely. Then thinking about someone they needed at that time, anything they wanted to hear from them. Then they were asked to write a letter to the ally they met and talked to during the session.

Material required- A-4 size sheets, sketch pens.

Closing Activity-

1. My Perfect Healing Hospital- The clients were asked to make their hospitals and add doctors or nurses as people who they need when they feel scared, alone, or anxious. Chemists could use medicines as things that comfort them, etc.

Material Required- A-3 size sheets, Colors, Pencil Colors, Sketch pens, craft materials.

Session III: Working on improving relations with others

Warm-Up Activity:

1. Trust Fall- The activity was done with partners. After every 3-4 minutes, partners were changed.

Theme-Based Activities:

1. Mirror reflection- They were asked to act, move, dance, or use props, and the other person had to enact them. The key was not to use one's voice. The activity helped the clients build relationships with the other person, understanding their body movements, and enacting them helped to better understand the person.
2. Wise Puppets- The clients were supposed to make puppets. The puppets should have represented wisdom, and then they were asked to make a story where every character had one dialogue at a time. The activity helped them understand what wisdom meant for another person and how someone else perceived things.

Material Required- Clay

Closing Activity-

1. Guided Imagery/JPMR- It was done to help them relax and let whatever they accept and understand about themselves stay with them.

Session IV: Getting to know about their achievements and their Autonomy

Warm-Up Activity:

1. Move how you feel- The clients were asked to move according to different situations like When I am not able to do something, When I am asked not to do something, When I am stressed, When I am tense etc.

Theme-Based Activities:

1. Treasure Map- They were asked to write on one corner, Beginning, and on the second, another success following a windy path between the two corners. They were asked to add tiles to the paths and any hurdles or pebbles they would encounter during the path. Examples were crossing the desert of loneliness, climbing the mountain, and resting in the shade of a friend. Then they were asked to make themselves a character with the clay that would go through the map.
Material Required- A-3 size sheets, Colors, Pencil Colors, Sketch pens, craft materials, clay.

Closing Activity-

1. A poem or Haiku- The clients were asked to write a poem or Haiku that would help them to get inspired, motivated, or something that represented their dreams, etc.

Session V: Enhancing their Psychological Well-being

Warm-Up Activity:

1. Object Percussion- Every client had to create a sound with either their body part or an object, and everyone had to copy it. They had to slowly include the new sound to form a nice small song.

Theme-Based Activities:

1. Layers Of Feeling- The activity started with some introduction and discussion about how we act in difficulty, which is usually anger; behind the anger is the fear of being hurt. Behind the fear of being hurt is sadness or pain, which comes from the need for love or respect. The clients were asked to remember one negative event or one such event where they found themselves in a difficult situation, acted out like this, and broke down.
Material required- A-3 size sheets, Colors, Sketch pens, Pencil colors.
2. Body Talk- The clients were asked to sit facing each other's back in a pair. The clients were asked to not communicate and think of one thing they want to change in their body.

They were asked to represent it on a piece of paper. Then they were supposed to switch it with their partners. Then they were asked to write or draw whatever they felt after seeing the picture.

Material required- A-3 size sheets, pencils, colored pencils, sketch pens, and pencil colors.

Closing Activity-

1. Self-help guidebook- Each page of the book represented whatever they wanted to have with themselves as a guide in the future. So that whenever they face any difficulty or feel low, they can go back to that book and help themselves see how they're gonna cope with it.

Material required- A-3 size sheets, pencils, colored pencils, sketch pens, and pencil colors.

After five weeks of assessment, the participants and the Group B participant were reassessed.

Total Number of Session= 5

Time required per session= 1.5 to 2 hours

Gap between the sessions= 7 days

Total duration of therapy= 30 days

Post Assessment was carried after one day of the last session.

4.6 Procedure

Participants suffering from feelings of loneliness were screened on UCLA Loneliness Scale and Ryff's Psychological Well-being Scale. The screening was done on 120 participants and 20 female participants, who fulfilled the inclusion and exclusion criteria. Informed Consent was taken from each participant before conducting the study. The nature and purpose of the study was explained to them. They were also explained and introduced with Expressive Arts Therapy so that they become aware and comfortable with it. Socio-demographics were filled for initial information. Baseline assessment for all the participants were done. UCLA Loneliness Scale was administered to assess feelings of loneliness in the participants and Ryff's Psychological Well-being was used to assess the psychological well-being, autonomy, positive relations with others, personal growth, environmental mastery, purpose in life and self-acceptance.

After baseline assessment; the drawn sample was randomly divided into two groups- Group A (Experimental Group) and Group B (Control group) with 10 participants in each group. Only the experimental group received Expressive Arts Therapy for five weeks.

Patients were reassessed after completion of five weeks of therapy. The total duration of time taken for data collection was one month.

4.7 Statistical Analysis

The Statistical Analysis was done with the help of Statistical Package for Social Sciences 29 (SPSS 29).

- To analyze group differences between control and experimental group on certain socio-demographic variables like age and loneliness, descriptive statistics were computed.
- For Loneliness, a chi-square test was applied.
- To analyze group differences Mann Whitney tests were applied to data for Loneliness, psychological well-being and its factors, viz, intervention group and the control group at baseline after the pre and post assessment.
- Wilcoxon Signed Rank Tests was applied for analyzing the data to evaluate the changes in all the variables, i.e loneliness, psychological well-being, personal growth, self-acceptance, environmental mastery, purpose in life within each group. Evaluation was done from change from baseline and post assessment.
- Wilcoxon Signed Rank Tests was applied for analyzing the data to evaluate the changes in all the variables, i.e loneliness, psychological well-being, personal growth, self-acceptance, environmental mastery, purpose in life within the Experimental Group. Evaluation was done from change from baseline and post assessment.
- Wilcoxon Signed Rank Tests was applied for analyzing the data to evaluate the changes in all the variables, i.e loneliness, psychological well-being, personal growth, self-acceptance, environmental mastery, purpose in life within the Control Group. Evaluation was done from change from baseline and post assessment

CHAPTER 5
RESULTS

5.1 Descriptive Statistics

Table 5.1 Showing descriptive statistics of Experimental and Control group

S.NO	Variables	Experimental Group Mean + SD	Control Group Mean + SD
1	Age	21.9 ± 1.1	22.1 ± 0.87
2	Loneliness	29 ± 11.63	32.4 ± 8.48

Table 5.1 Shows the descriptive statistics of Experimental and Control Group, each group was randomly divided into the group with ten participants in each group. The mean age of the participants of the experiment was 21.9 ± 1.1 years. The mean age of the participants of the control group 22.1 ± 0.87. No significant difference was found between experimental and control groups regarding age. And the mean level of loneliness for the experimental group was 29 ± 11.63. The mean level of loneliness for the control group was 32.4 ± 8.48.

5.2 Sample Characteristics

Table 5.2 Showing Levels of Loneliness in Experimental and Control Group

Groups	Level of Loneliness	N	Chi Value
Experimental	Severe	5	0.26
	Moderate	5	
Control	Severe	5	0.24
	Moderate	5	

Table 5.2 shows the level of loneliness i.e either severe or moderate in the Experimental and Control Group. Only Female participants were included in the sample. Ten females were placed in the Experimental Group and ten in the Control group. All of them are currently pursuing their Masters. The socio-demographic characteristics of the Experimental and Control group were

taken as feelings of loneliness. The scores were divided into two groups i.e Severe and Moderate, having five participants in each category of each group. The chi square value of the experimental group was 0.26 which was not significant and that of the control group was 0.24.

5.3 Showing Baseline Status of Loneliness and Loneliness and Psychological Well-Being of Experimental and Control Groups.

Table 5.3: Showing Baseline Status of Loneliness and Psychological Well-Being of Experimental and Control Group.

Areas of Assessment	Experimental Group	Control Group	Mann Whitney U Test	
	Mean \pm SD	Mean \pm SD	U value	z-score
Loneliness	29 \pm 11.63	32.4 \pm 8.48	35.00	-1.13 (NS)
Psychological Well-Being	84.1 \pm 9.55	76.8 \pm 12.07	32.50	-1.32 (NS)
1. Self Acceptance	14.3 \pm 3.71	12.9 \pm 3.72	40.00	-0.76 (NS)
2. Purpose in Life	14.1 \pm 3.41	12.6 \pm 3.23	36.50	-1.02 (NS)
3. Environmental Mastery	13.8 \pm 3.48	12.7 \pm 2.54	30.50	-1.48 (NS)
4. Positive Relations with Others	14.4 \pm 3.74	12.4 \pm 2.59	33.50	-1.25 (NS)
5. Personal Growth	15.7 \pm 2.71	13.3 \pm 4.96	36.50	-1.02 (NS)
6. Autonomy	11.8 \pm 2.93	12.9 \pm 2.88	39.50	-0.8 (NS)

(NS) Not Significant

Table 5.3 shows the baseline status of Loneliness and Psychological well-being of the experimental and control group. The mean feelings of loneliness for the experimental group is 29 \pm 11.63 and 32.4 \pm 8.48 for the control group. By assessing Mann Whitney U test, the U value was 35 and z-score -1.13 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between loneliness in the experimental and control group.

The mean score of Psychological Well-being in the experimental group is 84.1 \pm 9.55 and in the control group 76.8 \pm 12.07. By assessing Mann Whitney U test, the U value is 32.5 and z-score

-1.32 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between psychological well-being in the experimental and control group.

The sub variables of Psychological Well-being are Self Acceptance, Purpose in Life, Environmental Mastery, Positive Relations with Others, Personal Growth and Autonomy.

The mean feelings of Self Acceptance for the experimental group is 14.3 ± 3.71 and 12.9 ± 3.72 for the control group. By assessing Mann Whitney U test, the U value is 40 and z-score -0.76 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between Self Acceptance in the experimental and control group.

The mean feelings of Purpose in Life for the experimental group is 14.1 ± 3.41 and 12.6 ± 3.23 for the control group. The U value was 36.50 and z-score -1.02 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between Self Acceptance in the experimental and control group.

The mean feelings of Environmental Mastery for the experimental group is 13.8 ± 3.48 and 12.7 ± 2.54 for the control group. The U value is 30.50 and z-score -1.48 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between Environmental Mastery in the experimental and control group.

The mean feelings of Positive Relations with Others for the experimental group is 14.4 ± 3.74 and 12.4 ± 2.59 for the control group. The U value is 33.50 and z-score -1.25 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between Positive Relations with Others in the experimental and control group.

The mean feelings of Personal Growth for the experimental group is 15.7 ± 2.71 and 13.3 ± 4.96 for the control group. The U value is 36.50 and z-score -1.02 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between Personal Growth in the experimental and control group.

The mean feelings of Autonomy for the experimental group is 11.8 ± 2.93 and for 12.9 ± 2.88 the control group. The U value is 39.50 and z-score -0.8 which is non-significant. Thus, the scores analyze that there is a non-significant relationship between Autonomy in the experimental and control group.

Thus, the results represent no significant differences between the experimental and control groups for Loneliness, Psychological Well-being, and its elements i.e Self Acceptance, Purpose in Life, Environmental Mastery, Positive Relations with Others, Personal Growth and Autonomy. Though in the Control group, Loneliness scores are slightly higher than in the Experimental group, and Psychological well-being is lower than in the Experimental group. However, other areas score almost similar to each other. As scores and the analysis show that the scores are much similar concerning Loneliness, Psychological Well-being, and its subscales; hence, both groups were taken for the study with respect to the variables.

5.4 Efficacy of Expressive Arts Therapy

Table-5.4 Showing Status of Loneliness and Psychological Wellbeing on the Experimental Group and Control Groups after Intervention

Areas of Assessment	Experimental Group Mean \pm SD			Control Group Mean \pm SD			Mann Whitney U Test	
	Pre	Post	Difference (Pre-Post)	Pre	Post	Difference (Pre-Post)	U value	z-score
Loneliness	29 \pm 22.63	18.5 \pm 7.51	10.5 \pm 6.55	32.4 \pm 8.48	36.1 \pm 8.91	-3.7 \pm 5.01	0.00	-3.79**
Psychological Well-Being	84.1 \pm 9.55	100.6 \pm 10.94	-16.5 \pm 5.38	76.8 \pm 12.07	74 \pm 11.46	2.8 \pm 9.75	2.50	-3.59**
1. Self Acceptance	14.3 \pm 3.71	17.2 \pm 1.87	-2.9 \pm 3.1	12.9 \pm 3.72	12.6 \pm 3.30	0.3 \pm 2.4	21.00	-2.22*
2. Purpose in Life	14.1 \pm 3.41	15.9 \pm 3.66	-1.8 \pm 2.04	12.6 \pm 3.23	12.8 \pm 3.04	-0.2 \pm 2.29	26.50	-1.802
3. Environmental Mastery	13.8 \pm 3.48	15.9 \pm 3.24	-2.1 \pm 2.28	12.7 \pm 2.54	12.5 \pm 2.59	0.2 \pm 1.47	19.00	-2.40
4. Positive Relations with Others	14.4 \pm 3.74	16.7 \pm 2.58	-2.3 \pm 4.13	12.4 \pm 2.59	11.9 \pm 1.96	0.5 \pm 2.59	25.50	-1.89
5. Personal Growth	15.7 \pm 2.71	17.4 \pm 3.23	-1.7 \pm 2.79	13.3 \pm 4.96	12.3 \pm 3.97	1.00 \pm 3.88	28.50	-1.64
6. Autonomy	11.8 \pm 2.93	15.3 \pm 2.16	-3.5 \pm 2.27	12.9 \pm 2.88	11.9 \pm 1.96	1.00 \pm 1.76	4.00	-3.52**

Table 5.4 depicts the status and differences in Loneliness and Psychological Well-being on UCLA Loneliness Scale and Ryff's Psychological Well-being Scale for both groups after intervention. To understand the efficacy of Expressive Arts Therapy, differences between the pre and post-intervention scores are calculated for both the experimental and control groups. The table shows the severity of loneliness of the experimental group after the sessions of intervention is significantly less than that of the control group. The differences seen between the experimental and control group on loneliness on UCLA Loneliness Scale is significant at 0.01 level

For the Experimental group, the mean feelings of loneliness for the pre intervention is 29 ± 22.63 and for post intervention is 18.5 ± 7.5 . The mean difference between the pre and post intervention is 10.5 ± 6.55 . For the Control group, the mean feelings of loneliness for the pre intervention is 32.4 ± 8.48 and for post intervention is 36.1 ± 8.9 . The mean difference between the pre and post intervention is -3.7 ± 5.01 . By statistical analysis of Mann Whitney U test, U value is 0.00 and z score -3.79 respectively which is significant at 0.01 level.

For the Experimental group, the mean psychological well-being for the pre intervention is 84.1 ± 9.55 and for post intervention is 100.6 ± 10.94 . The mean difference between the pre and post intervention is -16.5 ± 5.38 . For the Control group, the mean psychological well-being for the pre intervention is 76.8 ± 11.46 and for post intervention is 74 ± 11.46 . The mean difference between the pre and post intervention is 2.8 ± 9.75 . By statistical analysis of Mann Whitney U test, U value is 2.50 and z score -3.59 respectively which is significant at 0.01 level.

For the Experimental group, the mean Self Acceptance levels for the pre intervention is 14.3 ± 3.71 and for post intervention is 17.2 ± 1.87 . The mean difference between the pre and post intervention is -2.9 ± 3.1 . For the Control group, the mean Self Acceptance levels for the pre intervention is 12.9 ± 3.72 and for post intervention is 12.6 ± 3.30 . The mean difference between the pre and post intervention is 0.3 ± 2.4 . By statistical analysis of Mann Whitney U test, U value is 21.00 and z score -2.22 respectively which is significant at 0.05 level.

For the Experimental group, the mean Purpose in Life for the pre intervention is 14.1 ± 3.41 and for post intervention is 15.9 ± 3.66 . The mean difference between the pre and post intervention is -1.8 ± 2.04 . For the Control group, the mean Purpose in Life for the pre intervention is 12.6 ± 3.23 and for post intervention is 12.8 ± 3.04 . The mean difference between the pre and post intervention is -0.2 ± 2.29 . By statistical analysis of Mann Whitney U test, U value is 26.50 and z score -1.802 respectively which is not significant.

For the Experimental group, the mean Environmental Mastery for the pre intervention is 13.8 ± 3.48 and for post intervention is 15.9 ± 3.24 . The mean difference between the pre and post intervention is -2.1 ± 2.28 . For the Control group, the mean Environmental Mastery for the pre

intervention is 12.7 ± 2.54 and for post intervention is 12.5 ± 2.59 . The mean difference between the pre and post intervention is 0.2 ± 1.47 . By statistical analysis of Mann Whitney U test, U value is 19.00 and z score -2.40 respectively which is not significant.

For the Experimental group, the mean Positive Relations with Others for the pre intervention is 14.4 ± 3.74 and for post intervention is 16.7 ± 2.58 . The mean difference between the pre and post intervention is -2.3 ± 4.13 . For the Control group, the mean Positive Relations with Others for the pre intervention is 12.4 ± 2.59 and for post intervention is 11.9 ± 1.96 . The mean difference between the pre and post intervention is 0.5 ± 2.59 . By statistical analysis of Mann Whitney U test, U value is 25.50 and z score -1.89 respectively which is not significant.

For the Experimental group, the mean Personal growth for the pre intervention is 15.7 ± 2.71 and for post intervention is 17.4 ± 3.23 . The mean difference between the pre and post intervention is -1.7 ± 2.79 . For the Control group, the mean Personal growth for the pre intervention is 13.3 ± 4.96 and for post intervention is 12.3 ± 3.97 . The mean difference between the pre and post intervention is 1.00 ± 3.88 . By statistical analysis of Mann Whitney U test, U value is 28.50 and z score -1.64 respectively which is not significant.

For the Experimental group, the mean Autonomy for the pre intervention is 11.8 ± 2.93 and for post intervention is 15.3 ± 2.16 . The mean difference between the pre and post intervention is -3.5 ± 2.27 . For the Control group, the mean Autonomy for the pre intervention is 12.9 ± 2.88 and for post intervention is 11.9 ± 1.96 . The mean difference between the pre and post intervention is 1.00 ± 1.76 . By statistical analysis of Mann Whitney U test, U value is 4.00 and z score -3.52 respectively which is significant at 0.05 level.

The differences seen between the experimental and control groups is significant at 0.01 levels for Psychological Well-being, Autonomy, and Self Acceptance at 0.05. However, no significant difference is found between the experimental and control groups on Environmental Mastery, Positive Relations with Others, and Personal Growth. It might be because the intervention program is only for five sessions, limiting the growth and exploration of a person on an individual difference basis.

5.4.1 Status of Loneliness and Psychological Well-Being Experimental Group Pre and Post Intervention.

Table 5.4.1.1 Showing Status of Loneliness and Psychological Well-Being on UCLA and Ryff's Psychological Well-being in Experimental Group Pre and Post Intervention (Within Group Design).

Areas of Assessment	Pre intervention Mean \pm SD	Post Intervention Mean \pm SD	Wilcoxon Sign Rank Test		
			Sign	Mean rank	z-score
Loneliness	29 \pm 22.63	18.5 \pm 7.51	-	5.50	
			+	0.00	-2.80*
Psychological Well-Being	84.1 \pm 9.55	100.6 \pm 10.94	-	0.00	
			+	5.50	-2.80*
1. Self Acceptance	14.3 \pm 3.71	17.2 \pm 1.87	-	2.00	
			+	5.89	-2.62*
2. Purpose in Life	14.1 \pm 3.41	15.9 \pm 3.66	-	3.00	
			+	5.25	-2.35*
3. Environmental Mastery	13.8 \pm 3.48	15.9 \pm 3.24	-	5.50	
			+	5.50	-2.29
4. Positive Relations with Others	14.4 \pm 3.74	16.7 \pm 2.58	-	5.25	
			+	5.56	-1.74
5. Personal Growth	15.7 \pm 2.71	17.4 \pm 3.23	-	4.00	
			+	5.29	-1.73
6. Autonomy	11.8 \pm 2.93	15.3 \pm 2.16	-	0.00	
			+	5.00	-2.71*

The status of loneliness and Psychological Well-being, Self Acceptance, Purpose in Life, Environmental Mastery, Positive Relations with others, Personal growth, and Autonomy in the Experimental Group (within group) is shown in Table 5.4.1.1. The table represents pre and post intervention scores and the therapeutic gains post intervention in the Experimental Group on UCLA Loneliness Scale and Ryff's Psychological Well-being Scale.

For the Experimental group, the mean feelings of loneliness for the pre intervention is 29 ± 22.63 and for post intervention is 18.5 ± 7.5 . Using the Wilcoxon Sign Rank Test, Negative scores in Loneliness are seen in all the ten participants indicating the enhanced efficacy of the therapy, with mean rank at and z score -2.80 corresponding to which is significant at 0.01 level.

For the Experimental group, the mean psychological well-being for the pre intervention is 84.1 ± 9.55 and for post intervention is 100.6 ± 10.94 . All the ten participants show positive growth in their scores with mean rank corresponding to 5.50, and z score at -2.80 , which is significant at 0.01 level.

For the Experimental group, the mean Self Acceptance levels for the pre intervention is 14.3 ± 3.71 and for post intervention is 17.2 ± 1.87 . Out of ten participants, nine show positive growth with a mean rank 5.89 and one individual with reduced scores with a mean rank 2.00, z score at -2.62 which is significant at 0.01 level.

For the Experimental group, the mean Purpose in Life for the pre intervention is 14.1 ± 3.41 and for post intervention is 15.9 ± 3.66 . Out of ten participants, eight participants have enhanced positive growth in this sphere corresponding to mean rank at 5.25 and one with negative score at mean rank of 3.00 and one individual shows no change at all. The z score is -2.35 which is significant at 0.01 level.

For the Experimental group, the mean Environmental Mastery for the pre intervention is 13.8 ± 3.48 and for post intervention is 15.9 ± 3.24 . Out of ten participants, nine show an increased positive score, with mean rank at 5.50 and one participant with negative scores, with mean rank at 5.50. The z score is -2.29 which is not significant.

For the Experimental group, the mean Positive Relations with Others for the pre intervention is 14.4 ± 3.74 and for post intervention is 16.7 ± 2.58 . Out of ten participants, eight people show an increased growth, with mean rank at 5.56 and two negative growth with mean rank at 5.25. The z score is -1.74 which is not significant.

For the Experimental group, the mean Personal growth for the pre intervention is 15.7 ± 2.71 and for post intervention is 17.4 ± 3.23 . Out of ten participants, seven participants show positive growth, with mean rank at 5.29 and two participants with reduction in their scores, with mean rank at 4.00 and one showing no change at all. The z score is -1.73 which is not significant.

For the Experimental group, the mean Autonomy for the pre intervention is 11.8 ± 2.93 and for post intervention is 15.3 ± 2.16 . Out of ten participants, nine participants show positive growth with a mean rank at 5.00 and one show no change at all. The z score is -2.71 which is significant at 0.05 level.

Table 5.4.1.2 Showing status of Controlled Group on Loneliness and Psychological Well-being after intervention (within group)

Areas of Assessment	Pre intervention Mean \pm SD	Post Intervention Mean \pm SD	Wilcoxon Sign Rank Test		
			Sign	Mean rank	z-score
Loneliness	32.4 ± 8.48	36.1 ± 8.91	-	0.00	-2.37*
			+	4.00	
Psychological Well-Being	76.8 ± 12.07	74 ± 11.46	-	5.58	-0.61
			+	5.38	
1. Self Acceptance	12.9 ± 3.72	12.6 ± 3.30	-	4.43	-0.036
			+	8.00	
2. Purpose in Life	12.6 ± 3.23	12.8 ± 3.04	-	3.25	-0.17
			+	5.00	
3. Environmental Mastery	12.7 ± 2.54	12.5 ± 2.59	-	4.10	-0.35
			+	5.17	
4. Positive Relations with Others	12.4 ± 2.59	11.9 ± 1.96	-	5.88	-0.12
			+	4.30	
5. Personal Growth	13.3 ± 4.96	12.3 ± 3.97	-	6.38	-0.36
			+	3.90	
6. Autonomy	12.9 ± 2.88	11.9 ± 1.96	-	5.00	-1.72
			+	3.00	

The status of loneliness and Psychological Well-being, Self Acceptance, Purpose in Life, Environmental Mastery, Positive Relations with others, Personal growth, and Autonomy in the Control Group (within group) is shown in Table 5.3.1.2. The table represents pre and post assessment scores on the Control Group on UCLA Loneliness Scale and Ryff's Psychological Well-being Scale.

For the Control group, the mean feelings of loneliness for the pre intervention is 32.4 ± 8.48 and for post intervention is 36.1 ± 8.9 . Using the Wilcoxon Sign Rank Test, positive scores in Loneliness are present in seven participants, with mean rank at 4.00 and three show no change at all. The z score -2.37 corresponding to which is significant at 0.01 level.

For the Control group, the mean psychological well-being for the pre intervention is 76.8 ± 11.46 and for post intervention is 74 ± 11.46 . Out of ten participants, six showing reduced scores with a mean rank at 5.58 and four positive scores at mean rank 5.38. The z score is -0.61 which is not significant.

For the Control group, the mean Self Acceptance levels for the pre intervention is 12.9 ± 3.72 and for post intervention is 12.6 ± 3.30 . Out of all ten participants, seven showing reduced scores with a mean rank at 4.43 and three positive scores at mean rank 8.00. The z score is -0.36 which is not significant.

For the Control group, the mean Purpose in Life for the pre intervention is 12.6 ± 3.23 and for post intervention is 12.8 ± 3.04 . Out of the ten participants, four show a negative growth with mean rank at 3.25 and three with positive growth at 5.00 mean rank, while the rest had no change at all. The z score is -0.17 which is not significant.

For the Control group, the mean Environmental Mastery for the pre intervention is 12.7 ± 2.54 and for post intervention is 12.5 ± 2.59 . Out of ten participants, five show reduction in their scores and mean rank at 4.10 and three with positive growth with mean rank at 5.17 and two with no change at all. The z score is -0.35 which is not significant.

For the Control group, the mean Positive Relations with Others for the pre intervention is 12.4 ± 2.59 and for post intervention is 11.9 ± 1.96 . Out of ten participants, four show reduction in their scores and mean rank at 5.88 and five with positive growth, with mean rank at 4.30 and one with no change at all. The z score is -0.12 which is not significant.

For the Control group, the mean Personal growth for the pre intervention is 13.3 ± 4.96 and for post intervention is 12.3 ± 3.97 . Out of ten participants, four show reduction in their scores and mean rank at 6.38 and five with positive growth, with mean rank at 3.90 and one with no change at all. The z score is -0.36 which is not significant.

For the Control group, the mean Autonomy for the pre intervention is 12.9 ± 2.88 and for post intervention is 11.9 ± 1.96 . Out of ten participants, six show reduction in their scores and mean rank at 5.00 and two people with positive growth, and mean rank with 3.00 and two people showing no change at all. The z score is -1.72 which is not significant.

CHAPTER 6

DISCUSSION

The main focus of the present study was to see the effect of expressive arts therapy on managing Loneliness and psychological well-being in females. The study was divided into Phase I: Pre Assessment Phase, and Phase II: Post Assessment Phase with Intervention. For this, we first conducted a pre-assessment through questionnaires on Loneliness, i.e., UCLA Loneliness Scale, and on Psychological Well-being, i.e., Ryff's Psychological Well-being Scale. Informed Consent was taken from the participants, and interested ones were reached for the second half of the research. Participants with mild to moderate levels of Loneliness were selected and grouped into Experimental and Control Groups.

The baseline scores for both variables, like Age and loneliness levels were analyzed, and the results indicated a non-significant relationship between both the groups. An Intervention Plan was designed with five sessions, each focusing on all the subscales of Psychological well-being, i.e., Self Acceptance, Purpose in Life, Environmental Mastery, Positive Relations with Others, Personal Growth, and Autonomy. The Experimental Group was given the intervention, while the control group was not given anything during those five weeks. Each session was given a theme on which activities were based on. The intervention plan was made by considering and incorporating almost every modality used in Expressive Arts Therapy. Modalities used in the package included Art, Writing, Movement, Clay and Story/Narrative Writing. Session one was focused on Enhancing Self-Acceptance and Personal Growth, while the second one was working on loneliness, the third one was working on improving relations with others, Getting to know about their achievements and their autonomy and lastly, enhancing one's Psychological Well-being.

It was hypothesized that there would be no significant effect of expressive arts therapy in the management of Loneliness and psychological well-being, which was rejected. As the results revealed, using the Mann-Whitney U Test, a significant effect of expressive arts therapy is seen in managing Loneliness, which is significant at 0.01 level, along with psychological well-being. Nam, E. Y. C. (2021). used Chinese calligraphy with Expressive Arts Therapy collaboratively in

teenagers in group therapy. He emphasized the beauty of writing the language and using different modalities to cope from loneliness. The results showed a significant decline in the scores of loneliness in the teenagers. Pond, S. S. C. (1998). used an eight week Expressive Arts Therapy intervention plan with two third grade students, one boy and one girl. The study was a pre and post intervention design, to see their levels of loneliness with respect to their acceptance and belongingness levels. They employed a variety of techniques in the intervention primarily focusing on relationships, one's relationship within groups and on meeting personal needs in the group. The results were mixed for both the children and was in regard to their connectedness with others.

The subscales of Psychological well-being, Self Acceptance, and Autonomy also showed significant changes in pre and post-intervention at 0.05 level and 0.01 level, respectively, compared to the control group. Puig, A. (2006) studied the efficacy of creative arts therapy to enhance emotional expression, spirituality and psychological well-being of newly diagnosed females with Stage I and II with breast cancer patients. It was done on thirty-nine women who were randomly placed in the experimental group or controlled group of delayed treatment. The experimental group was given individual Creative Arts Therapy sessions. The results were analyzed based on covariance which showed that there was no effect of the intervention on their emotional expression or spirituality. However, it was effective in coping with psychological well-being, by reducing negative emotional states and enhancing positive emotions in the experimental group. Darewych, O. H. et al (2018). used positive arts intervention while collaborating clinical tools to enhance psychological well-being in individuals. Activities like Scribble Drawing, Strength collage, Tree of Life, Bridge Drawing with Path, Favorite kind of day, Sources of meaning and Spiritual Pathway. All the activities were designed to include positive emotions, building their strength, exploring their achievements in their life, identifying paths in their life to reach spirituality. Each of these were correlated with the elements of psychological well-being. The intervention helped in increasing positive emotions, promoting an individual's growth and healing and transforming an individual's repressed unconscious materials.

Wilcoxon Sign Rank Test was done to better understand the management of both variables for both groups. There was a significant reduction of feelings Loneliness in the participants post-intervention in the experimental group and an increase in scores for some participants post-intervention in the control group. Mishra K. et al. (2021) studied feelings of Loneliness in older women using Expressive Arts Therapy, and the results revealed a significant decline in loneliness feelings in the participants.

Additionally, psychological well-being scores saw an increase in the participants' scores post-intervention in the experimental group and a decrease in scores for some participants post-intervention in the control group. Bennington R. et al. (2016) studied art therapy in art museums in psychological well-being in older adults. The results revealed how psychological well-being increased the scores from different aspects of art forms and being surrounded by art in museums. Kim, S. K. (2013). examined the effects of art therapy on older adults belonging to Korean-American cultural groups on their well-being in totality and healthy aging. The study was done on 50 older adults primarily focusing on reduction of negative emotions, promoting healthy aging, improving their self-esteem and reducing anxiety levels. The results showcased a significant increase of positive emotions by 84.6% and a positive change in the state of anxiety by 70.6%. Thus, it was concluded that art therapy, if designed for each individual with a theme to work on, can be an effective therapy to heal and transform into a better individual.

Crockett, T. (2020). did expressive arts therapy and specifically used clay as a medium to cope with feelings of Loneliness in older adults. The results revealed a significant decline in the scores compared to the intervention and control groups. Moafipour, S (2022) did a study to reduce feelings of Loneliness in ten orphan female teenagers aged 12 to 18 years by compiling Expressive arts therapy with Mandalas. Mandala helps in understanding one's inner feelings and reaching a relaxing state. There was a significant decline in the scores compared to before and after the sessions.

CHAPTER 7

CONCLUSION, IMPLICATIONS, LIMITATIONS AND FUTURE DIRECTION

7.1 Conclusion

The findings of the study indicate that feelings of loneliness can be reduced, while an individual's psychological well-being can be enhanced using expressive arts therapy. While using almost all the modalities of the therapy, there was a significant reduction of Loneliness in the experimental group and an increase in the psychological well-being significantly. While, the post assessment in the control group indicated an increase in feelings of loneliness in some individuals and decrease in psychological well-being. Though, factors of psychological well-being like Self-Acceptance, Purpose in Life and Autonomy were also increased and factors like Personal growth, Environmental Mastery and Positive relations with others showed no change in the experimental group. More research is required to understand loneliness and its impact on psychological well-being and using Expressive Arts Therapy as an intervention.

7.2 Implication

The findings of this study have some important implications. The variables listed in the study are positively related with one another and if they are improved in an individual the others will also be improved and enhanced. Different types of psychological well-being can be enhanced and fostered, like Self-Acceptance, Positive Relations with others, Environmental Mastery, Purpose in Life, Autonomy and Personal Growth. If all the variables of psychological well-being are at moderate and high levels, feelings of loneliness can be reduced as well.

With levels of loneliness being moderate and severe, the psychological well-being can be extremely low, especially factors like Self-Acceptance, Purpose in Life, Positive relations with others, autonomy and personal growth of an individual. This in totality can affect an individual's daily life and can hamper their functioning. Usually, people who live alone have more difficulties and challenges to face which is why they score higher on loneliness as well. People who live alone can either feel isolated or lonely. Feelings of loneliness are often linked with lower scores on psychological well-being. Expressive Arts Therapy being a newer approach to therapy involves the amalgamation of all the forms of creative arts like art, writing, movement, poetry,

clay and play therapy etc. While growing up we often stop using these techniques that were once calming to us. Thus, in this therapy we collaborate all the calming and techniques along with a purpose of the activity done.

The activities can be done in groups or individually. It can be implied in colleges, especially hostels, orphanages, and in the corporate sector. Youth of our country is filled with feelings of loneliness and it is important for us and them to focus on not only their productivity but also their own self. Using this form of therapy, it is easier to express one's feelings and emotions and understand them once they are represented with some modality. Thus, just like our results show, Expressive Arts Therapy can be used and has been found effective in managing loneliness along with psychological well-being.

7.2 Limitations

The present study was done adopting the adequate methodology, procedures and accordingly analysis was made. However, there are certain limitations:

1. The instruments used to collect the data were the self report measures. So it was completely upon the participants whether they performed honestly or not
2. The sample size of this study is relatively small.
3. The study was done on Females, hence, the results can't be generalized.

7.3 Future Direction

For future research, both genders can be included to understand the efficacy of expressive arts therapy in the management of loneliness and psychological well-being. The sample size can be bigger and the study can be done on working adults to understand it through their perspective. The number of sessions in the intervention plan can be increased for more promising results along with a follow up assessment.

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APPENDICES

APPENDIX A: CONSENT FORM

I am a student of M.A. Psychology is going to conduct a research study on well being. As a part of this I need to collect and record some personal information from you. Your participation in the research is entirely voluntary. You may change your mind later and stop participating even if you agreed earlier. The information recorded is confidential, your name is not being included on the forms, only your initials will identify you. The information will be kept only for research purposes. The study is divided into two parts. This is the initial phase and the second phase will be done based on your interest in the same.

I have read the foregoing information. I am eligible and give my consent voluntarily to be a participant in this study.

- a. Yes
- b. No

If you are interested in the second phase of the project, please mark interested else not interested.

- a. Interested
- b. Not Interested

Age:

Gender:

(Signature)

APPENDIX B: UCLA LONELINESS SCALE

Indicate how often each of the statements below is descriptive of you.

O indicates “I often feel this way”

S indicates “I sometimes feel this way”

R indicates “I rarely feel this way”

N indicates “I never feel this way”

STATEMENTS

RESPONSES

1. I am unhappy doing so many things alone	O	S	R	N
2. I have nobody to talk to	O	S	R	N
3. I cannot tolerate being so alone	O	S	R	N
4. I lack companionship	O	S	R	N
5. I feel as if nobody really understands me	O	S	R	N
6. I find myself waiting for people to call or write	O	S	R	N
7. There is no one I can turn to	O	S	R	N
8. I am no longer close to anyone	O	S	R	N
9. My interests and ideas are not shared by those around me	O	S	R	N
10. I feel left out	O	S	R	N
11. I feel completely alone	O	S	R	N
12. I am unable to reach out and communicate with those around me	O	S	R	N
13. My social relationships are superficial	O	S	R	N
14. I feel starved for company	O	S	R	N
15. No one really knows me well	O	S	R	N
16. I feel isolated from others	O	S	R	N
17. I am unhappy being so withdrawn	O	S	R	N
18. It is difficult for me to make friends	O	S	R	N
19. I feel shut out and excluded by others	O	S	R	N
20. People are around me but not with me	O	S	R	N

APPENDIX C: PSYCHOLOGICAL WELL-BEING

Tick the most apt response below each statement to indicate how much you agree or disagree with it.

1-Strongly Agree

2-Somewhat Agree

3-A little Agree

4-Neither Agree nor disagree

5-A little disagree

6-Somewhat disagree

7-Strongly disagree

STATEMENTS	Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree
“I like most parts of my personality.”	1	2	3	4	5	6	7
“When I look at the story of my life, I am pleased with how things have turned out so far.”	1	2	3	4	5	6	7
“Some people wander aimlessly through life, but I am not one of them.”	1	2	3	4	5	6	7

“The demands of everyday life often get me down.”	1	2	3	4	5	6	7
“In many ways I feel disappointed about my achievements in life.”	1	2	3	4	5	6	7
“Maintaining close relationships has been difficult and frustrating for me.”	1	2	3	4	5	6	7
“I live life one day at a time and don't really think about the future.”	1	2	3	4	5	6	7
“In general, I feel I am in charge of the situation in which I live.”	1	2	3	4	5	6	7
“I am good at managing the responsibilities of daily life.”	1	2	3	4	5	6	7
“I sometimes feel as if I've done all there is to do in life.”	1	2	3	4	5	6	7
“For me, life has been a continuous process of learning, changing, and growth.”	1	2	3	4	5	6	7

“I think it is important to have new experiences that challenge how I think about myself and the world.”	1	2	3	4	5	6	7
“People would describe me as a giving person, willing to share my time with others.”	1	2	3	4	5	6	7
“I gave up trying to make big improvements or changes in my life a long time ago”	1	2	3	4	5	6	7
“I tend to be influenced by people with strong opinions”	1	2	3	4	5	6	7
“I have not experienced many warm and trusting relationships with others.”	1	2	3	4	5	6	7
“I have confidence in my own opinions, even if they are different from the way most other people think.”	1	2	3	4	5	6	7
“I judge myself by what I think is important, not by the values of what others think is important.”	1	2	3	4	5	6	7