Presents

Quantitative report of the Jaipur Literature Festival Youth Outreach Program - 2020

IMPACT OF EXPRESSIVE ARTS IN ENHANCING EMOTIONAL INTELLIGENCE AND SELF-ESTEEM AMONG ADOLESCENTS FROM URBAN AND RURAL POPULATION

CONTENTS

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ABSTRACT

Emotional Intelligence touches and influences every aspect of our lives EI has an impact on all areas of our personal and professional development (Faltas, 2017). Self-esteem is considered a very significant trait in an individual. It is regarded as the key to health, success and personal fulfillment, as well as an antidote to underachievement, crime, and drug abuse. Self-esteem is associated with depression, anxiety, motivation and general satisfaction with one's life. There is a strong and well-established relationship between self-esteem and psychological well-being (Blascovich & Tomaka, 1991). Adolescence is a period of transition with dramatic biological, cognitive, social and emotional development, when individuals shift from positions of relative powerlessness and dependency characterizing childhood to the responsibilities and in some contexts autonomy experienced in adulthood. These transitions can be relatively difficult and certain risks and deficiencies experienced by the adolescents can have debilitating consequences for those concerned, their families and communities. Today, Expressive Arts therapies have an increasingly recognized role in mental health, rehabilitation, and medicine. Expressive Arts Therapies focus on subjective experiences, feelings and expression so that emotional disturbances can be brought into active awareness and addressed (Carr, d'Ardenne, Sloboda, Scott, Wang, & Priebe, 2012). They also provide youth to alternative ways to express insecurities, negative feelings and their vulnerabilities instead of acting out in destructive ways (see also Rogers, Tudor, Tudor, & Keemar 2012). Adolescence is a period of transition with dramatic biological, cognitive, social and emotional development, and these transitions can be relatively difficult and certain risks and deficiencies experienced by the adolescents can have debilitating consequences for those concerned, their families and communities. Susceptibility to risks is heightened, and deficiencies and trauma often have permanent consequences.

Although there are some studies conducted to see the effectiveness of expressive art therapy in improvement of emotional intelligence and self-esteem, the number is still very less, specifically in India. Therefore, the present study was planned to assess the impact of expressive arts in enhancing emotional intelligence and self-esteem among

adolescents from urban and rural population. A total of 48 participants comprising from 23 urban adolescents and 25 rural adolescents aged 14-18 years participated in the present study. The information related to Emotional Intelligence and Self-esteem was collected using Emotional Intelligence Scale (Singh, & Narain, 2014) and Self-Esteem Scale (Singh & Srivastava, 2010). The results of the study revealed significant correlation between Emotional Intelligence and self-esteem. The results also reveled that Expressive arts interventions resulted in statistically significant increase in Emotional Intelligence of participants from both urban and rural populations. An increase in self-esteem was recorded as well, however the results were not statistically significant. In addition, results revealed significant difference in self-esteem between urban and rural participants at the post intervention stage. No significant difference in emotional intelligence was recorded.

Key words- Emotional Intelligence, Self-Esteem, Adolescence, Urban adolescents, rural adolescents, Expressive Arts.

CHAPTER-1

INTRODUCTION

CONCEPT OF EMOTIONAL INTELLIGENCE

Emotion can be described as '*a natural instinctive state of mind that derives from our current and past experiences and situations'* (Faltas, 2017). On the other hand, Emotional Intelligence is an ability- it is having the awareness, and skill, in order to know, recognize, and understand feelings, moods, and emotions and use them in an adaptive way (Faltas, 2017). The pioneer work on Emotional Intelligence was done by Dr. Peter Salovey and Dr. John D. Mayer. Emotional intelligence has been defined as the capacity to manage emotions, perceive them and regulate them to promote personal growth (Mayer and Salovey, 1997).

Emotional Intelligence "concerns the ability to carry out accurate reasoning about emotions and the ability to use emotions and emotional knowledge to enhance thought" (Mayer, Roberts, & Barsade, 2008, p. 511). In 1990 they gave 'The Mayer-Salovey Ability Model of Emotional Intelligence'. This model included following abilities in Emotional Intelligence-

- Perceiving and Identifying Emotions - the ability to recognize how you and those around you are feeling.
- Using Emotions to Facilitate Thought - the ability to generate emotion, and then reason with this emotion.
- Understanding Emotions - the ability to understand complex emotions and emotional "chains," and how emotions transition from one stage to another.
- Managing Emotions - the ability to manage emotions in yourself and in others.

CONCEPT OF SELF ESTEEM

There is widespread acceptance of the psychological importance of self-esteem. As per popular notion, self-esteem is considered a very significant trait in an individual. According to the dictionary definition- "To esteem a thing is to prize it, to set a high

mental valuation upon it, when applied to persons, esteem carries also the warmer interest of approval, cordiality, and affection (Williams, 1979. p. 309). In common language, self-esteem is the extent to which an individual values, prizes, approves, or likes oneself. Self-esteem is usually thought to be the evaluative component of a broader representation of self, the self-concept, regardless of the exact definition of label one chooses to employ. Self concept being a more inclusive construct than self-esteem, one that contains cognitive and behavioral components as well as affective ones. Another important point to note is that cognitions about the self (which are contained in the self-concept) may or may not influence self-esteem.

CONCEPT OF EXPRESSIVE ARTS

"When art and psychotherapy are joined, the scope and depth of each can be expanded, and when working together, they are tied to the continuities of humanity's history of healing". -Shaun McNiff, The Arts and Psychotherapy

Arts have consistently been part of life as well as healing throughout the history of humankind. (McNiff ,1981, 1992). Expressive arts Therapy had its beginnings during 1970s in Lesley College Graduate School (now Lesley University) through the work of Shaun McNiff, Paolo Knill, Norma Canner, Elizabeth McKim and others. Even at that time, it was understood that arts has the capacity to express outwardly what is felt inwardly. One of the key difference between 'Expressive Arts Therapy' and 'Creative Arts Therapy' is that the former draws upon all the arts and multiple modalities, rather than working with one specialized form. *"Expressive Arts Therapy use various arts – movement, drawing, painting, sculpting, music, writing, sound, and improvisation – in a supportive setting to facilitate growth and healing"*- Natalie Rogers, The Creative Connections, 1993. According to International Expressive Arts Therapy Association, *"Expressive Arts combine the visual arts, movement, drama, music, writing and other creative processes to foster deep personal growth and community development."*

CONCEPT OF ADOLESCENCE

Adolescence is a period of transition with dramatic biological, cognitive, social and emotional development, when individuals shift from positions of relative powerlessness and dependency characterizing childhood to the responsibilities and in some contexts autonomy experienced in adulthood. These transitions can be relatively difficult and certain risks and deficiencies experienced by the adolescents

can have debilitating consequences for those concerned, their families and communities. Susceptibility to risks is heightened, and deficiencies and trauma often have permanent consequences. It is a time to develop knowledge and skills, learn to manage emotions and relationships, and acquire attributes and abilities that will be important for better functioning in life as an adult.

CHALLENGES IN ADOLESCENCE PERIOD

Emotional responses develop rapidly during adolescence period. During early stages of adolescence, youth develop an understanding that internal feelings differ from external expressions of emotions (Holodynski, 2004). Adolescents also show flexibility and effectiveness of their emotional responses, as they grow older (Garnefski & Kraaij, 2006). Adolescent's positive and negative emotional responses are more frequent, intense and long lasting as compared to younger children and adults (e.g. Goodenough, 1931; Greene, 1990; Larson, Moneta, Richards, & Wilson, 2002). Poorly regulated and overly intense emotions in adolescents can disrupt attention, interfere with problem solving, and harm social relationships; on the other hand well regulated emotions help adolescents focus their attention, solve problems and relate well to others (Cole, Martin & Dennis, 2004).

CHAPTER-2

METHODOLOGY

RATIONALE OF THE STUDY

Today, Expressive Arts therapies have an increasingly recognized role in mental health, rehabilitation, and medicine. Expressive Arts Therapies focus on subjective experiences, feelings and expression so that emotional disturbances can be brought into active awareness and addressed (Carr, d'Ardenne, Sloboda, Scott, Wang, & Priebe, 2012). They also provide youth to alternative ways to express insecurities, negative feelings and their vulnerabilities instead of acting out in destructive ways (see also Rogers, Tudor, Tudor, & Keemar 2012).

Various studies have proven positive impact of Expressive arts on Emotional Intelligence. Clark (2014) investigated the relationship between fine arts education participation and the emotional intelligence of 506 fifth-grade elementary students attending schools in 4 school districts in Utah. Findings of the study indicate that participants of the arts program scored significantly higher on tests of emotional intelligence than non-participants and that students in the dance and music emphasis groups outperformed those in the drama, visual art, theatre/drama, and control groups. Goyal and Keightley (2008) reviewed evidence of effectiveness of expressive art interventions in the form of theatre for populations with difficulties in physical, emotional, cognitive, or social functioning. The findings revealed the effectiveness of drama therapy in terms of improvements in psychological health, emotional intelligence, cognitive function, social integration, but not necessarily community integration. The findings indicate that theatre skills training might facilitate community integration in addition to social integration in adolescents with acquired brain injuries if it is formally measured as such.

In addition to Emotional Intelligence, Expressive arts have also been researched to have a positive impact on Self Esteem of adolescents. Strader (2012) studied the

impact of an expressive arts group therapy process on anxiety and self-esteem for highly sensitive adolescents. The finds of the study revealed that overall there was a significant decrease in anxiety as measured by the STAI and a significant improvement in self-esteem as measured by the RSES. There was an overall improvement of 57% in self-esteem and a strong improvement in self-esteem for individuals who attended more sessions. Rickard, Appelman, James, Murphy, Gill and Bambrick (2012) investigated the impact of school based music classes on children's social competence and self-esteem. Results of the study indicated that school-based music classes prevented a decline in global self-esteem measures experienced by the control group in both the younger and older cohorts, and in general and academic self-esteem for the older cohort. The data implied that increasing the frequency and quality of arts-based activities could be beneficial for the self-esteem of primary school-aged children.

Several studies have been reported in the area of social, educational, health and emotional intelligence of school students. Some researchers studied the variables like achievement, age, sex, socio-economic status, parental education, parental occupation and so on. But studies regarding specific locale differences as urban and rural are very few. Although some of the studies conducted to see the effectiveness of art expressive art therapy in improvement of emotional intelligence and self-esteem, still the number is very less; specifically in India it is a negligible field of research by many professionals. Therefore, the present study was planned to assess the impact of expressive arts in enhancing emotional intelligence and self-esteem among adolescents from urban and rural population.

OBJECTIVES

- To see the level of Emotional Intelligence of the rural adolescent participants at baseline level.
- To see the level of Self-Esteem of the rural adolescent participants at baseline level.

- To see the level of Emotional Intelligence of the urban adolescent participants at baseline level.

- To see the level of Self-Esteem of the urban adolescent participants at baseline level.

- To observe the impact of Expressive Arts on Emotional Intelligence at post intervention session on rural adolescents

- To observe the impact of Expressive Arts on Self- esteem at post intervention session on rural adolescents.

- To observe the impact of Expressive Arts on Emotional Intelligence at post intervention session on urban adolescents

- To observe the impact of Expressive Arts on Self-Esteem at post intervention session on urban adolescents.

HYPOTHESES

- There will be a significant difference of Emotional Intelligence of rural adolescents from baseline to post intervention due to the impact of Expressive Arts.

- There will be a significant difference of Self-Esteem of rural adolescents from baseline to post intervention due to the impact of Expressive Arts.

- There will be a significant difference of Emotional Intelligence of urban adolescents from baseline to post intervention due to the impact of Expressive Arts.

- There will be a significant difference of Self-esteem of urban adolescents from baseline to post intervention due to the impact of Expressive Arts.

SAMPLE

A total of (N=48) participants comprising (n1=23) from the urban adolescent population and (n2=25) from rural adolescent population participated in the present study. The age group of the participants from both groups was 14 to 18 years. The level of education and gender was random in nature. All the participants were selected without knowing their level of Expressive Art abilities. The socio-economic status, parenting style, parent child relationship and other psycho-social variables were random.

MATERIALS

- **Emotional Intelligence Scale (Singh, & Narain, 2014):** This is a 31-item scale, which can be administered for participants above 12 years of age. The test re-test reliability was calculated by administering the test on the same sample (N=100) with the gap of fortnight. It was found to be 0.86 alpha coefficients, which was significant at 0.01 level. The present scale was correlated against the Emotional Intelligence Scale developed by Hyde, Pethe and Dhar (2001). The concurrent validity was found to be 0.86, which was significant at 0.01 level. For this purpose, both scaleshad been administered on the same sample (N=100).

- **Self-Esteem Scale (Singh & Srivastava, (2009):** This Self-Esteem Scale is based on the Self-Esteem Scale originally developed by Eagly and revised by Robinson and Shaver (1973). This scale consist of 20 items (9 positive and 11 negative). This scale assessing the self-esteem using the five alternative response categories which ranged from very much to low. With a view to

obtained responses on various items of the scale. Five response categories were determined which ranged in the following order- very much, much, average, low, very low. The items of the original scale were translated into Hindi language. In all, ten sets were prepared for evaluation by a team of the experts. The test consists of 20 items and each item is accompanied by five alternative response categories, namely very much, much, average, low and very low. The Hindi version of self-esteem scale was administered on different groups of respondents in order to determine its reliability. In all, 500 respondent were randomly administered the Hindi version of the scale. The same population was again administered the above scale after a gap of 45 days. In the second phase of the testing 20 respondents of the first phase of testing were found to be absent and thus 480 respondents only participated for the second phase of testing. The validity of the Hindi version of the Self-Esteem Scale was determined with criterion validity technique. This technique proves to be a convenient method if there is a need of translating some existing, valid and standardized test into some other language. The Hindi and English version of the self-esteem scale were administered on the sample, which participated in the first phase of the testing. The scores obtained in the two sessions were correlated and thus a coefficient of correlation of .89 was obtained for the English/Hindi versions of the scale.

RESEARCH DESIGN

An experimental ABA group design was followed in the present study, where Expressive Arts intervention and the locality (urban and rural) were the independent variables followed by Emotional Intelligence and Self-Esteem, which were the dependent variables.

ETHICAL GUIDELINES

Before conduction of the present study, the researcher took permissions from the respective school, NGOs and parents for the collection of information from the respective adolescents. Further, the researcher also took the consent from each participant by briefing about the purpose of the present study. All the participants were assured that their personal and demographic information will be kept confidential and will only be used for academic purpose. Besides this, they all were assured that participation in the present study was purely voluntary if they would agree, they could come and join in the present study. No such personal, social, financial and other pressures were used for the collection of information in relation to the objectives of the present study.

SETTING

Professional Expressive Arts facilitators conducted The Expressive Arts workshops, and the data was collected. As the researcher was also working as a facilitator, it was be easy to coordinate and collect the data from the participants.

PROCEDURE

Rapport: The researcher struck a rapport with all the participants in the study. They were made comfortable and ensured about voluntary participation and confidentiality. The researcher also shared the purpose of the study. The participants were encouraged to ask for any clarification/information wherever necessary.

Instruction: At the baseline stage, the researcher made proper sitting arrangement and requested all the participants to sit with proper gap. Instructions for Emotional Intelligence Scale were provided following its respective manual. Similarly, the information related to Self-Esteem scale was provided followed by 10-minute rest interval. The same instructions were maintained at the post intervention assessment. The medium of instruction was mixed i.e. both English and Hindi for the better comprehension of the participants.

Administration: After proper rapport formation with each and every participant, and providing appropriate instruction in regard to the respective manuals of Emotional Intelligence and Self-Esteem Scales, the researcher circulated the Emotional Intelligence questionnaire first among the participants. After a 10 minutes rest interval, the researcher circulated the Self-Esteem questionnaire among the participants. After the pre-test of both variables are accomplished, participants went through intensive Expressive Arts workshops. The duration of the workshops was two weeks, and each day the duration of the workshop was 6 hours, which were designed in 3 sets of two hours each. Same administration procedure as the baseline will be followed at the post intervention assessment.

SCORING AND DATA ANALYSIS

After collection of information related to Emotional Intelligence Scale (Singh, A. K. & Shruti Narain, 2014); Self-Esteem Scale (Singh & Srivastava, 2009) and the personal information like age gender etc., the researcher entered all the data item wise in excel sheet. Both descriptive and inferential statistics were used in the present study. In Descriptive statistics the researcher used frequency percentage mean and standard deviation whereas in the inferential statistics the researcher used both

independent and dependent Student's 't' test. For the comparison of Emotional Intelligence Scale (Singh, A. K. & Shruti Narain, 2014) and Self-Esteem Scale (Singh & Srivastava, (2009) between Adolescent from rural and urban population at baseline and post test, the researcher used independent student's 't' test and to see the effectiveness of expressive art therapy between the pre and the post intervention stage, the researcher used the dependent students 't' test for both urban and rural adolescents. Besides that, the Pearson's Product movement correlation was used to see the inter-relationship between, Emotional Intelligence Scale (Singh, A. K. & Shruti Narain, 2014) and Self-Esteem Scale (Singh & Srivastava, (2009) for both adolescent from the rural and urban populations. The entire data was analyzed using IBM-SPSS 22.0.

Chapter-3

RESULTS

Descriptive Results:

Participants from Rural population

Age Wise Distribution: The mean age of the participants from rural population at the pre-intervention stage is 16.52±1.36. Out of 25 participants who participated at the pre-intervention stage, 3 (12.00%) were of the age of 14 years, 2 (8.00%) were of the age 15 years, 7 (28.00%) were of the age 16 years, 5 (20.00%) were of the age 17 years, and 8 (32.00%) were of the age 18 years.

Table-3.1: Age Wise Distribution of participants from Rural population at Pre-Intervention Condition

S. No	Age	Frequency	Percent
1	14.00	3	12.0
2	15.00	2	8.0
3	16.00	7	28.0
4	17.00	5	20.0
5	18.00	8	32.0
Total		**25**	**100.0**

Gender Wise Distribution participants From Rural population at Pre-Intervention Condition: Out of total participants from Rural population at pre-intervention condition, 18 (72.00%) were female and 7 (28.00%) were male.

Table-3.2: Gender Wise Distribution of Participants from Rural population at Pre-Intervention Condition

S. No	Gender	Frequency	Percent
1	Male	7	28.00
2	Female	18	72.00
Total		**25**	**100.0**

Total Emotional Intelligence Score Wise Distribution of participants from Rural population at Pre-Intervention Condition: The mean Total Emotional Intelligence score of the participants from rural population at the pre-intervention stage is 16.08±3.46. Out of 25 participants who participated at the pre-intervention stage, 22 participants (88.00%) scored low on Emotional Intelligence, 3 participants (12.00%) scored moderate on Emotional Intelligence and 0 participants (0.00%) scored high on Emotional Intelligence.

Table 3.3 : Emotional Intelligence Score Wise Distribution of participants from Rural population at Pre-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	20 and below	Low EI	22	88
2	21-26	Moderate EI	3	12
3	27 and Above	High EI	0	00
Total			**25**	**100.0**

Total Self Esteem Score Wise Distribution of participants from Rural population at Pre-Intervention Condition: The mean Total Self Esteem Score of the participants from rural population at the pre-intervention stage is 64.12±5.74. Out of 25 participants who participated at the pre-intervention stage, 0 participants (00.00%) scored low on Self Esteem, 25 participants (100.00%) scored moderate on Self Esteem and 0 participants (0.00%) scored high on Self Esteem.

Table 3.4 : Self Esteem Score Wise Distribution of participants from Rural population at Pre-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	40 and below	Low Self Esteem	00	00
2	41-80	Moderate Self Esteem	25	100
3	81 and Above	High Self Esteem	0	00
Total			**25**	**100.0**

Total Emotional Intelligence Score Wise Distribution of participants from Rural population at Post-Intervention Condition: The mean Total Emotional Intelligence score of the participants from rural population at the post-intervention stage is 21.36±2.97. Out of 25 participants who participated at the post-intervention stage, 12 participants (48.00%) scored low on Emotional Intelligence, 11 participants (44.00%) scored moderate on Emotional Intelligence and 2 participants (8.00%) scored high on Emotional Intelligence.

Table 3.5 : Emotional Intelligence Score Wise Distribution of participants from Rural population at Post-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	20 and below	Low EI	12	48
2	21-26	Moderate EI	11	44
3	27 and Above	High EI	2	8
Total			**25**	**100.0**

Total Self Esteem Score Wise Distribution of participants from Rural population at Post-Intervention Condition: The mean Total Self Esteem Score of the participants from rural population at the post-intervention stage is 65.16±6.51. Out of 25 participants who participated at the pre-intervention stage, 0 participants (00.00%) scored low on Self Esteem, 25 participants (100.00%) scored moderate on Self Esteem and 0 participants (0.00%) scored high on Self Esteem.

Table 3.6 : Self Esteem Score Wise Distribution of participants from Rural population at Post-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	40 and below	Low Self Esteem	00	00
2	41-80	Moderate Self Esteem	25	100
3	81 and Above	High Self Esteem	0	00
Total			**25**	**100.0**

Participants from Urban population

Age Wise Distribution: The mean age of the participants from urban population at the pre-intervention stage is 15.83±1.07. Out of 23 participants who participated at the pre-intervention stage, 4 (17.40%) were of the age 14 years, 3 (13.00%) were of the age 15 years, 9 (39.10%) were of the age 16 years, and 7 (30.40%) were of the age 17 years.

Table-3.7 : Age Wise Distribution of participants from Urban population at Pre-Intervention Condition

S.No.	Age	Frequency	Percent
1	14.00	4	17.4
2	15.00	3	13.0
3	16.00	9	39.1
4	17.00	7	30.4
	Total	**23**	**100.0**

Gender Wise Distribution participants From Urban population at Pre-Intervention Condition: Out of total participants from Urban population at pre-intervention condition, 16 (69.60%) were female and 7 (30.40%) were male.

Table-3.8: Gender Wise Distribution of Participants from Urban population at Pre-Intervention Condition

S. No	Gender	Frequency	Percent
1	Female	16	69.6
2	Male	7	30.4
Total		**23**	**100.0**

Total Emotional Intelligence Score Wise Distribution of participants from Urban population at Pre-Intervention Condition: The mean Total Emotional Intelligence score of the participants from urban population at the pre-intervention stage is 16.48±2.97. Out of 23 participants who participated at the pre-intervention stage, 21 participants (91.30%) scored low on Emotional Intelligence, 2 participants (8.70%) scored moderate on Emotional Intelligence and 0 participants (0.00%) scored high on Emotional Intelligence.

Table 3.9 : Emotional Intelligence Score Wise Distribution of participants from Urban population at Pre-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	20 and below	Low EI	21	91.30
2	21-26	Moderate EI	2	8.70
3	27 and Above	High EI	0	00
Total			**23**	**100.0**

Total Self Esteem Score Wise Distribution of participants from Urban population at Pre-Intervention Condition: The mean Total Self Esteem Score of the participants from urban population at the pre-intervention stage is 67.96±8.42. Out of 23 participants who participated at the pre-intervention stage, 0 participants (00.00%) scored low on Self Esteem, 22 participants (95.65%) scored moderate on Self Esteem and 1 participant (4.35%) scored high on Self Esteem.

Table 3.10 : Self Esteem Score Wise Distribution of participants from Urban population at Pre-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	40 and below	Low Self Esteem	00	00
2	41-80	Moderate Self Esteem	22	95.65
3	81 and Above	High Self Esteem	1	4.35
Total			**23**	**100.0**

Total Emotional Intelligence Score Wise Distribution of participants from Urban population at Post-Intervention Condition: The mean Total Emotional Intelligence score of the participants from urban population at the post-intervention stage is 22.70±3.79. Out of 23 participants who participated at the post-intervention stage, 6 participants (26.08%) scored low on Emotional Intelligence, 13 participants (56.52%) scored moderate on Emotional Intelligence and 4 participants (17.40%) scored high on Emotional Intelligence.

Table 3.11 : Emotional Intelligence Score Wise Distribution of participants from Urban population at Post-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	20 and below	Low EI	6	26.08
2	21-26	Moderate EI	13	56.52
3	27 and Above	High EI	4	17.40
Total			**23**	**100.0**

Total Self Esteem Score Wise Distribution of participants from Urban population at Post-Intervention Condition: The mean Total Self Esteem Score of the participants from urban population at the post-intervention stage is 70.39±11.35. Out of 23 participants who participated at the pre-intervention stage, 0 participants (00.00%) scored low on Self Esteem, 21 participants (91.30%) scored moderate on Self Esteem and 2 participants (8.70%) scored high on Self Esteem.

Table 3.12 : Self Esteem Score Wise Distribution of participants from Urban population at Post-Intervention Condition

S. No	Score	Levels	Frequency	Percent
1	40 and below	Low Self Esteem	00	00
2	41-80	Moderate Self Esteem	21	91.30
3	81 and Above	High Self Esteem	2	8.70
Total			**23**	**100.0**

Comparison of Variables between Pre and Post Intervention of participants From Rural Population (df-24): The mean score of the variable Understanding Emotions (UE) of Emotional Intelligence Scale at Pre Intervention level of participants from Rural Population is 1.08±0.76. The mean score of UE at Post Intervention level of participants from Rural Population is 2.72±1.02. The mean difference of the UE of participants from Rural Population between pre and post intervention condition indicates a significant difference (t=6.44, P=0.000**).

The mean score of the variable Understanding Motivation (UM) of Emotional Intelligence Scale at Pre Intervention level of participants from Rural Population is 4.24±1.83. The mean score of UM at Post Intervention level of participants from Rural Population is 5.08±1.41. The mean difference of the UM of participants from Rural Population between pre and post intervention condition does not indicate a significant difference (t=1.81, P=0.076).

The mean score of the variable Empathy (E) of Emotional Intelligence Scale at Pre Intervention level of participants from Rural Population is 6.20±0.87. The mean score of E at Post Intervention level of participants from Rural Population is 7.12±1.13. The mean difference of the E of participants from Rural Population between pre and post intervention condition indicates a significant difference (t=3.23, P=0.002**).

The mean score of the variable Handling Relations (HR) of Emotional Intelligence Scale at Pre Intervention level of participants from Rural Population is 4.56±1.50. The mean score of HR at Post Intervention level of participants from Rural Population is 6.44±1.35. The mean difference of the HR of participants from Rural Population between pre and post intervention condition indicates a significant difference (t=4.64, P=0.000**).

The mean score of the Emotional Intelligence Scale at Pre Intervention level of participants from Rural Population is 16.08±3.46. The mean score of EI at Post Intervention level of participants from Rural Population is 21.36±2.97. The mean difference of EI of participants from Rural Population between pre and post intervention condition indicates a significant difference (t=5.79, P=0.000**).

The mean score of the Self Esteem Scale at Pre Intervention level of participants from Rural Population is 64.12±5.75. The mean score of SE at Post Intervention level of participants from Rural Population is 65.16±6.52. The mean difference of the SE of participants from Rural Population between pre and post intervention condition does not indicate a significant difference (t=0.60, P=0.552).

Table 3.13 : Comparison of Variables between Pre and Post

Intervention of participants From Rural Population

Variables	Condition	Mean	Std. Deviation	Std. Error Mean	t-Value	P-Value
UE	Pre-	1.0800	.75939	.15188	6.443	0.000**
	Post	2.7200	1.02144	.20429		
UM	Pre-	4.2400	1.83212	.36642	1.816	0.076
	Post	5.0800	1.41185	.28237		
E	Pre-	6.2000	.86603	.17321	3.231	0.002**
	Post	7.1200	1.12990	.22598		
HR	Pre-	4.5600	1.50222	.30044	4.644	0.000**
	Post	6.4400	1.35647	.27129		
Total_EI	Pre-	16.0800	3.46314	.69263	5.786	0.000**
	Post	21.3600	2.97041	.59408		
Total_Self-esteem	Pre-	64.1200	5.74688	1.14938	.598	0.552
	Post	65.1600	6.51716	1.30343		

Comparison of Variables between Pre and Post Intervention of participants From Urban Population (df-22): The mean score of the variable Understanding Emotions (UE) of Emotional Intelligence Scale at Pre Intervention level of participants from Urban Population is 1.96±0.82. The mean score of UE at Post Intervention level of participants from Urban Population is 3.09±0.90. The mean difference of the UE of participants from Urban Population between pre and post intervention condition indicates a significant difference (t=4.44, P=0.000**).

The mean score of the variable Understanding Motivation (UM) of Emotional Intelligence Scale at Pre Intervention level of participants from Urban Population is 3.43±1.16. The mean score of UM at Post Intervention level of participants from Urban Population is 5.91±1.53. The mean difference of the UM of participants from Urban Population between pre and post intervention condition indicates a significant difference (t=6.18, P=0.000**).

The mean score of the variable Empathy (E) of Emotional Intelligence Scale at Pre Intervention level of participants from Urban Population is 6.22±1.24. The mean score of E at Post Intervention level of participants from Urban Population is 6.43±1.97. The mean difference of the E of participants from Urban Population between pre and post intervention condition does not indicate a significant difference (t=0.45, P=0.658).

The mean score of the variable Handling Relations (HR) of Emotional Intelligence Scale at Pre Intervention level of participants from Urban Population is 4.87±1.32. The mean score of HR at Post Intervention level of participants from Urban Population is 7.26±1.18. The mean difference of HR of participants from Urban

Population between pre and post intervention condition indicates a significant difference (t=6.47, P=0.000**).

The mean score of the Emotional Intelligence Scale at Pre Intervention level of participants from Urban Population is 16.48±2.97. The mean score of EI at Post Intervention level of participants from Urban Population is 22.69±3.79. The mean difference of EI of participants from Urban Population between pre and post intervention condition indicates a significant difference (t=6.19, P=0.000**).

The mean score of the Self Esteem Scale at Pre Intervention level of participants from Urban Population is 67.96±8.42. The mean score of SE at Post Intervention level of participants from Urban Population is 70.39±11.35. The mean difference of the SE of participants from Urban Population between pre and post intervention condition does not indicate a significant difference (t=0.83, P=0.413).

Table 3.14 - Comparison of Variables between Pre and Post Intervention of participants From Urban Population

Variables	Conditions	Mean	Std. Deviation	Std. Error Mean	t=Value	P=Vale
UE	Pre	1.9565	.82453	.17193	4.441	.000**
	Post	3.0870	.90015	.18770		
UM	Pre	3.4348	1.16096	.24208	6.176	.000**
	Post	5.9130	1.53484	.32004		
E	Pre	6.2174	1.24157	.25889	0.447	.657
	Post	6.4348	1.97314	.41143		
HR	Pre	4.8696	1.32474	.27623	6.474	.000**
	Post	7.2609	1.17618	.24525		
Total_EI	Pre	16.4783	2.96755	.61878	6.189	.000**
	Post	22.6957	3.79515	.79134		
Total_Self Esteem	Pre	67.9565	8.41794	1.75526	0.826	.413
	Post	70.3913	11.34876	2.36638		

CHAPTER 4
DISCUSSION AND CONCLUSION

The mean difference of Emotional Intelligence of participants from Rural Population between pre and post intervention condition indicates a significant difference (t=5.79, P=0.000**). In this context, hypothesis number 1 i.e. there will be a significant difference of Emotional Intelligence of rural adolescents from baseline to post intervention due to the impact of Expressive Arts – is accepted.

The mean difference of the Self-Esteem of participants from Rural Population between pre and post intervention condition does not indicate a significant difference (t=0.60, P=0.552). In this context, hypothesis number 2 i.e. there will be a significant difference of Self-Esteem of rural adolescents from baseline to post intervention due to the impact of Expressive Arts- is rejected.

The mean difference of Emotional Intelligence of participants from Urban Population between pre and post intervention condition indicates a significant difference (t=6.19, P=0.000**). In this context, hypothesis number 3 i.e. there will be a significant difference of Emotional Intelligence of urban adolescents from baseline to post intervention due to the impact of Expressive Arts – is accepted.

The mean difference of the Self-Esteem of participants from Urban Population between pre and post intervention condition does not indicate a significant difference (t=0.83, P=0.413). In this context, hypothesis number 4, i.e. there will be a significant difference of Self-esteem of urban adolescents from baseline to post intervention due to the impact of Expressive Arts – is rejected.

CONCLUSION

From the results of the present study and reviewing a range of literature in relation to the assessment of the impact of art therapy for fostering and/or improving Emotional Intelligence and Self Esteem in adolescents, it can be concluded that there is a positive impact of Expressive Arts Therapy in enhancing Emotional Intelligence in adolescents. Through Expressive Arts, adolescents can understand and express their emotions, as well as emotions of others around them.   In addition, through

interpersonal communication and intrapersonal communication, they can improve their Self Esteem as well.

In India, there is a major lack of platforms, opportunities and sources to avail art-based interventions by the adolescents. Since the positive impact of this domain in enhancing emotional intelligence, self esteem and overall well being of participants is proven, therefore, it can be suggested that adolescents must be exposed to different form of Expressive Arts therapy in variety of setting like home, school etc. For overall development and enhancing life skills of adolescents, Expressive Arts could be integrated as part of curriculum as well.

LIMITATIONS

- The sample size of the study is very small and data is collected from a limited number of NGOS and schools.
- The participants were exposed to Expressive Arts intervention for a limited amount of time.
- Some of the participants were illiterate, and even though all the questions from standardized questionnaires were verbally communicated as well, there could be error due to lack of understanding.

SUGGESTIONS

It can be suggested that a further study can be planned comprising large number of adolescents from different regions of India. In addition to urban and rural demographic, suburban demographic should be studied as well in order to see the better effectiveness of Expressive Arts therapy in enhancing Emotional Intelligence and Self Esteem of adolescent population. In addition, follow-up study can be done to see the efficacy of the interventions in real life situations.