



Effects of group art therapy combined with breath meditation on the subjective well-being of depressed and anxious adolescents[☆]



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ARTICLE INFO

Article history:

Available online 13 October 2014

Keywords:

Depressed and anxious adolescent
Breath meditation
Group art therapy
Subjective well-being

ABSTRACT

The purpose of this study is to investigate the effects of group art therapy, including breath meditation, on the subjective well-being of depressed and anxious youngsters. The subjects were 24 first-grade students at high school in a urban city (Daegu) of South Korea. The art therapy program was implemented in 13, 80-min sessions, held once or twice a week from September 28, 2010 to February 2011. The study tool was the subjective well-being scale of Han (1997), which was adapted from the subjective well-being scale of Campbell, Converse, and Rodgers (1976). The data were analyzed using SPSS WIN 18.0. To determine the homogeneity of the pre-test results, one-way analysis of variance (ANOVA) was performed. To analyze effect of subjective well-being, two-way repeated measures ANOVA was performed. Scores were significantly higher in experimental group 1 (who experienced art therapy combined with breath meditation) and 2 (who experienced only art therapy), than in the control group (who received no therapy). Scores were significantly higher in group 1 than in group 2. The results were the same in the follow-up test, which indicated the durability of the effects.

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Introduction

Adolescents are young people in a transitional stage from puberty to adulthood. In the adolescent stage, they experience physical, cognitive, mental and social development. Adolescents are psychologically very uncomfortable due to worries or plans about entering schools or selecting occupations. They are highly distressed by their parents' or teachers' excessive coercion, intervention or expectation, and any strong disharmony between reality and ideal. Such factors cause frustration and psychological conflicts, and threaten emotional stability. Especially while taking a passive attitude to avoid and reduce problems, adolescents show mental problems such as aggressiveness, depression and anxiety or show problematic behaviors such as violence and suicide. The problematic behaviors include internalized ones such as atrophy, physical symptoms, depression and anxiety, and externalized ones, such as misdeeds and aggressive actions (Achenbach, 1991). In particular, adolescents are easily subject to depression and anxiety (Barber, 1992; Cantwell & Baker, 1991).

Adolescent depression and anxiety restrict peer relationships and cause social isolation by increasing the dependence on human relations and academic performance. Moreover, depression and anxiety in human relations can degrade social skill and competence (Lewinsohn, Rohde, & Seeley, 1998). Further, depressed and anxious adolescents have low self-esteem. The depression, found in many adolescents, causes not only suicide, smoking, alcohol or drug addiction, but also troubles in human relations and general life functions. Anxious adolescents show higher levels of anger, sorrow, and tiredness and lower levels of happiness and well-being (Henker, Whalen, Jamner, & Delfino, 2002). In short, depression and anxiety deter the well-being of adolescents who grow up physically, psychologically and socially. Therefore, it is crucial to promote well-being among depressed and anxious adolescents.

Well-being is similar to happiness, life quality and mental health in meaning. A high level of well-being is a state in which one feels happy and one's spirit is healthy (Lee, 2008). Ryan and Deci (2001) divide well-being into two spheres: subjective and psychological. In subjective well-being, well-being is related to happiness and is seen as satisfaction with life and subjective emotion evaluation (Diener, 1984). In psychological well-being, well-being is related to potential and is seen as a psychological function (Ryan & Deci, 2001). Subjective well-being means a subjective psychological state in which one experiences one's life positively. Subjective well-being comprises positive and negative emotions. Positive emotion is strongly experienced as happiness, pleasure, and joy. On the

[☆] This manuscript is a part of Soonja Kim's doctoral dissertation of Art Therapy, Yeungnam University in Korea and it was modified and supplemented.

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contrary, negative emotion is experienced as depression, sorrow, anxiety and envy. A high level of subjective well-being is a state in which one is satisfied with life and has more positive emotion experiences (Gong & Lee, 2006; Lee, Kim, & Lee, 2005). Subjective well-being is important for depressed and anxious adolescents who grow up physically, mentally and sociologically. Therefore, continuous concern and mediation are needed to ensure that depressed and anxious adolescents stabilize their body and soul and live a happy life. Group art therapy (Kim & Lee, 2007), cognitive-behavioral art therapy (Lee, 2011), reality therapy (Park, 2011), therapy play (Roh, 2009), laughing activities (Kim, 2010), and breathing meditation (Yoo, 2010) are presented as mediation methods.

This study examines the effectiveness of group art therapy together with breath meditation in promoting the subjective well-being of depressed and anxious adolescents. Group art therapy, which introduces art into group psychological therapy, is used to diagnose and treat people with psychological difficulties through art activities. The art activities, which extract sub-consciousness naturally and express images for injuries, are effective for revealing sub-consciousness and hidden thoughts and emotions. Moreover, art activities can reduce fear or emotional stress by causing physiological reaction to transform and relax feelings (Malchiodi, 2003). Group art therapy is especially effective for self-insight, self-recognition and improvement in human relations.

Breath meditation can strengthen internal spirit by directing the consciousness clinging to the outside toward the internal world by right breath and purifying mind. Thus, breath meditation can accept psychological problems such as anger, depression and anxiety, and treat them effectively (Lee, 2008). Group art therapy combined with breath meditation is considered to help those adolescents who are depressed and anxious by suppressing excessive behaviors, allowing them to express themselves properly, and promoting their subjective well-being. Although several previous studies have examined meditation therapy (Brown & Ryan, 2003) and group art therapy (Chung, 2010; Kang & Yum, 2008; Lee & Choi, 2009), very few have investigated the combined effects of group art therapy and breath meditation.

Therefore, this study implemented group art therapy accompanied by breath meditation to promote the subjective well-being of depressed and anxious adolescents. To verify the effects of the program, the study subjects were separated into experimental group 1, in which group art therapy combined with breath meditation was implemented, experimental group 2, in which only group art therapy was implemented, and the control group, who received no therapy. The differences between the three groups were investigated.

Methods

Subjects

The subjects are 24 first-grade high school male students. First, Beck's depression inventory and anxiety test were implemented with 360 first-grade students at T high school in K city. The results were collected from 89 students who scored 27 and 50 or more points in depression and anxiety, respectively. After the art therapy course was explained to 89 students, 24 chose to be enrolled in the study. They were classified into three groups: group 1 (for group art therapy combined with breath meditation), group 2 (for only group art therapy), and the control group. 8 students were assigned to group 1, group 2 and the control group, respectively. Tables 1 and 2 represent the personal features of groups 1 and 2.

Before implementing the program for the depressed and anxious adolescents, one-way analysis of variance (ANOVA) was

Table 1
Personal feature of group 1.

Byname	Personal feature
A	Talks bluntly, swinging his legs very much. Hot-blooded, sometimes showing aggressive behaviors to his friends.
B	Expressionless and dislikes talking. Easily acts irritated and often fretful. Hurt in his hand backs and arms by self-injury.
C	Lies on the face for most of class time, with a gloomy face. Has little talk with his friends and dislikes being active.
D	Fretful and talkative. Tired of and has difficulty in his school life (Ed-you stated that all subjects were male).
E	Gloomy-faced, taciturn and timid. Mostly spends his time playing computer games due to his fear of human relations.
F	Shows strong mood swings and verbally abuses much in the dialogs with his friends.
G	Not motionless, distracted and gluttonous.
H	Grimaces, taciturn, and often bites his nails with his mouth or trembles his legs.

performed to test for any homogeneity between groups 1 and 2. The results are as follows.

As seen in Table 3, the three groups proved to be homogeneous, since they showed no statistically significant difference in subjective well-being.

Measurements

Subjective well-being scale

"The subjective well-being index" adapted by Campbell, Converse, and Rodgers (1976) was used to measure subjective well-being. This scale consisted of nine questions of the Index of General Affect and one question of the Life Satisfaction. The subjective well-being scale included paired emotion adjectives and consisted of six positive and four negative questions. Each question had 1–7 points, and each negative question was scored in reverse order. The personal subjective well-being score was obtained by summing the scores of all questions, with a higher score indicating a higher subjective well-being. The reliability coefficient was determined to be Cronbach's $\alpha = .826$.

Procedures

The program was conducted by the study author (a PhD student in art therapy) and one observer, and was preceded by a pilot test (pre-test). Group art therapy combined with breath meditation was implemented for 13, 80-min sessions, held once to twice

Table 2
Personal features of group 2.

Byname	Personal feature
A	Shows restless behaviors by being talkative, not motionless and trembling his legs very much.
B	Physically small, answers questions alone, and dislikes activities. Often stays alone at home, playing computer games. Says he is relieved of stress, when seeing persons shot to death in computer games.
C	Talkative, but does not express his opinions to others who speak high-handedly. Weak in subjectivity and does not listen to others. Says he lies on the face or sleeps seven hours in eight class hours a day.
D	Gloomy, nervous and answers only, "yes," or "no." Interested in eating and hard to reveal his thoughts to others.
E	Expresses his opinions in words well, but is negative toward himself by thinking he does not do so.
F	Has a cold face and often shows nervous responses. Attacks his friends with fists.
G	Poker-faced, taciturn, and says he is lonely without friend. Says he is the most comfortable when playing computer games, since his family members have no dialog.
H	Has a gloomy look and taciturn. Sits silently with a feeble posture and always answers, "I don't know."

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