

# Art therapy for mental health workers in areas affected by violence: a rarely explored resource

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*Experiences with survivors of extreme violence demonstrate that treatments that focus exclusively on verbal expression are often insufficient. Furthermore, evidence has shown that art therapy, as an initially non-verbal therapy, has an important role to play in the treatment of people from a wide variety of cultural backgrounds. However, most of the evidence gathered to date is through work with refugees in the West. Therefore, this field report adds to the body of evidence through describing the application of art therapy, in daily practice, in areas affected by violence. The author, an art therapist from the Netherlands, has done trainings in art therapy, with trainees of over 35 nationalities and in 15 different post conflict areas. Participants were primarily unfamiliar with art therapy and are mental health workers. The author reports that use of art therapy techniques often resulted in surprising and stimulating effects on the level of commitment, and the development of insight, of the trainees.*

**Keywords:** areas affected by violence, art therapy, psycho trauma, psychosocial, training, unexplored potential

## **Introduction: art therapy**

Experience with survivors of concentration camps in World War II, and of the many wars that have followed since, demonstrates that treatments that focus exclusively on verbal expression are often insufficient, as some survivors may be unable to articulate experienced events. At the same time, more and more evidence has emerged that art therapy – as an initially non-verbal treatment – has an important therapeutic role to play with people from a wide variety

of cultural backgrounds who have experienced traumatic events (Gilroy, 2006; Howie, Prasad & Kristel, 2013; Malchiodi, 2008; 2012; Goodman, 2009).

Art therapy is defined as a form of psychotherapy in which verbal expression is either replaced, or supported, by other means of (art based) communication, such as: painting, drawing or working with materials (e.g. clay, etc.). In art therapy, a creative process that easily evokes a set of emotions precedes talking about experience. Compared to other forms of psychotherapy, what is created in art therapy is visible, tangible and can be preserved for later examination. The therapeutic environments, where these creations are made, are often playful and personal. However, the most essential feature of this therapeutic form is that clients who make the object initially may not realise the significance of it. Clients may deny the (devastating and painful) stories that their creations contain, until they *feel up to the confrontation?* As a result, this form of treatment is particularly useful in providing assistance to children and adults who are unable to verbally express experienced events. Additionally, those that may have the words, yet suppress the verbal expression of their emotions, can also benefit from this therapy. Importantly, no specific or artistic abilities are required to benefit.

Depending on the nature of the problems experienced, and the possibilities of the participant, art therapy treatment can lead to increased awareness, change, acceptance and increased ability to cope. Exercises can

focus on the past, the present, or the future. The objects or images can also be helpful for the therapist to understand the nature of the problem, the current circumstances of the patient, and/or the client's own potential solutions. Art therapy is also useful when working with people from different cultural backgrounds and languages, providing both a method to connect with clients, and to open possibilities for change. Also, these methods can be applied individually, or in groups. While there are various publications about the use of art therapy in traumatised refugees in the West (e.g. Wertheim-Cahen et al., 2004), little has been written about the use of art therapy in post conflict countries.<sup>1</sup> Therefore, this field report aims to contribute to documented experience through sharing insights developed during several training missions in conflict affected areas. The author has implemented the training missions over the course of many years, in more than 15 countries, with participants of over 35 different nationalities.

### **Why use art therapy in post conflict settings?**

In many cultures, it is uncommon or generally unaccepted to openly communicate emotions, desires or painful experiences. Art therapy therefore, has the great advantage of circumventing such limitations, as well as overcoming accompanying emotional barriers. Unfortunately, while art therapy can bring great value to psycho-social and mental health work with people who have experienced collective violence, it remains a largely under-utilised and often ignored resource. Art therapy is a resource that, in the author's experience, has several aspects that set it apart from other forms of therapy, including:

- *Taking control:* Art therapy offers an opportunity to be active and to use one's own capacities and creativity (empowerment).

- *Specific appeal:* Each material makes its own specific appeal to a variety of motor and emotional responses, and offers the opportunity to experiment and play. For example: finger paint encourages smearing or clay encourages kneading, etc.
- *Direct experience:* The person enters a situation where they actively experience the smell and colour of the paint, the sound of the pencil on paper, and witness and participate in the emergence of an entirely personal creation. Only afterwards does reflection take place on what has happened and been created.
- *Diminished conscious control:* Often a situation of trance occurs, in which unexpected or even unwanted images arise. The control, or censure, that one tends to impose is lost or overcome.
- *Creation:* A creation occurs that is tangible, visible and (mostly) durable. This creation is a lasting symbol of the experience gained at that moment, and as such it can also have a function after that moment. One can distance oneself from it, be surprised by it, rejoice in it, or get excited by it.
- *Absence of a linear character:* There is no inevitable beginning nor end, as is the case in a verbal story. Many things can be seen simultaneously, side by side, at one glance. In this way, new connections can be made: past and present, unity and division, far and near. They can all come together in one piece of work.
- *Disclosing wordlessly stored experiences:* Within the memory of some experiences, only fragments exist: an image, a smell, or the memory of an emotion. This does not only apply to memories from the time when our ability to verbalise and understand language had not yet developed, but it also applies to overwhelming events that have initiated a primal level of response, such as experiences with violence, abuse, natural disasters, etc.  
(Based on: Meijer-Degen & Lanssen, 2006)

## Art therapy training within post conflict settings

Before training within post conflict zones, the author had worked for years in the Netherlands, the United States and South America as an art therapist with participants from a wide diversity of cultural backgrounds that had experienced violence, and as a teacher in advanced training in art therapy. These experiences proved to be very valuable.

They were not, however, enough preparation for the additional challenges of working in post conflict settings, where the logistics of being within the location were often intrinsically demanding and difficult. Not only in terms of the different needs of the local population, but also the constant threat, the destruction, the demoralisation of the trainees and the awareness of running risks myself, all contributed to making it difficult.<sup>2</sup>

Another challenge was that in most countries where support was requested, there was no specific demand for art therapy. Often, local organisations had asked for professional development programmes and/or improvement of existing methods of the treatment of psycho trauma, among others. What form and content these programmes or improvements should take was often unclear. For most aid workers in areas with collective violence, art therapy is unknown. They have no idea what to expect and are mostly ambivalent about this approach. For example, prior to art therapy training in Nepal, experienced psychosocial trainers warned me that such training would most likely fail. In fact, the opposite happened, the arrival of a new group of trainees after the first week of training led to protest by the first group of trainees, as they wanted to continue. The author worked with trainees from various educational backgrounds: from professional (aid) workers to teachers, and from artists to psychology students. Some trainees had a high level of education, but most had only had short courses in psychosocial counselling. These trainings occurred

against a backdrop where a portion of the population had been severely traumatised.

A related problem, frequently encountered, was that most trainees also form part of this population, and have often survived damaging experiences themselves. They tend to be exposed to the same difficulties as the people they want to support.

Additionally, an initial aversion to art therapy surfaced sometimes, especially with highly educated trainees and trainees that were *'high-ranking'* within existing hierarchies. As they too were unacquainted with art therapy, they asked for literature and theory at the start of the training. Trainees are usually hesitant to apply the unknown. However, the author's approach is based on learning by doing and experiencing. Only later in a training are theoretical aspects gradually introduced.

## Developing training

In general, the objective of art therapy training is to provide the trainees with the ability to apply art therapeutic interventions in their assistance to traumatised people, through:

- deepening of self-knowledge;
- expanding professional attitude;
- increasing theoretical knowledge;
- increase of therapeutic skills;
- learning to establish an effective therapeutic relationship; and
- learning how to work with simple art materials.

Time available is also often a decisive factor when setting training objectives. These objectives may vary from enabling trainees to apply basic therapeutic interventions to enabling them to work out treatment plans and to convey the application of art therapeutic interventions to colleagues, through cascade training. It is not, however, the intention to train the trainees to become art therapists.

The emphasis is rather on experiential learning or *'doing before talking'*. The trainees

experience a lot of pleasure in being active themselves and often enjoy working with visual materials and games. They appreciate they do not have to listen passively to an expert and often enthusiastically share what they have experienced during the creation of an object or image, and what the end results mean to them.

Through a series of exercises that appeal to the imagination of the trainees and evoke different, sometimes strong, emotions, the trainees observe and experience (in themselves and other participants) that their clients may go through when exposed to an art therapeutic approach. During the first phases of the training they learn about the specific qualities of different materials, and how and when to introduce them. Later on, theoretical issues on art therapy, psycho trauma and psychiatry are introduced. Gradually, the focus shifts from sharing personal reactions to discussing and practising possible applications in real life, therapeutic situations. Over the course of time, the author has collected a series of assignments that have proven effective and illustrative, and encountered least resistance from the trainees. In 2006, this method was laid down in the training manual: *'Coping with loss and trauma through art therapy'* (Meijer-Degen, 2006). During the trainings, the possibilities of using local materials are always explored. Clay, sand, stone, feathers, charcoal and many other materials are often directly available, or available at low cost.

A special point of attention in each training proved to be to teach the trainees to pay attention to the (emotional) significance of their creations for themselves, instead of conforming to general ideas of the meaning of colours, of right and wrong, of beautiful and ugly. Many trainees had to learn to be non-judgemental and/or not to adhere exclusively to their own interpretations of artwork made by others. The focus during training was to connect with the meaning that people themselves had given to their

own creations and to look at an artwork as a resource where many meanings are visible. Trainees have to learn through asking open questions about the artwork of others, and to stimulate the creator to *'open up'* and share their experiences while creating the artwork and about the artwork itself.

## **Opportunities during training**

Training in art therapy has some particular features that may be used as opportunities.

### 1. *Focusing on emotions of trainees*

Art therapy focuses on the individual emotional experience of the trainees themselves. When the trainees are unable to recognise their own feelings, it is not likely that they can help their patients effectively with the reliving and integrating traumatic experience. Training in art therapy creates a climate that facilitates the exchange of these private, emotional experiences. Art therapy also offers methods that can overcome the barrier of language. Many victims are unable to talk about what they have experienced. This may be caused by a variety of factors, including: the incapability to put experiences into words (particularly in young children); detachment from physical and emotional experiences (dissociation), which can be a coping mechanism to master, minimise or tolerate stress; feelings of guilt and shame (e.g. torture and/or having been forced to become an accomplice); practical problems such as when trainees within a group do not share a language or culture, and; fear of political consequences. In art therapy, each participant can give shape to their own experiences. It allows people to disclose and express what they have experienced without the need for spoken language.

*Practice example: ask the trainees to draw a life line where the highlights and low points of their personal life are made visible. After*

the trainees have drawn their lifelines, the trainees are invited to examine each other's drawings and to exchange (in couples) what they have expressed.



**Illustration 1: Life line (drawing by a trainee in Cambodia)**

2. *Learning to reflect on emotions*

Art therapy encourages trainees to reflect on their experiences and show genuine interest in the motivations of others. Assignments such as: 'the day I will never forget', or 'the obstacles in my life', provide opportunities for the trainees to exchange personal experiences.



**Illustration 2: 'The day I will never forget' (drawing by a participant from Iraq)**

*Practice example: have the trainees draw or paint an 'emotional map' that expresses the emotions they feel at that moment, within a circle.*



**Illustration 3: Emotional maps created by participants in Cameroon**

Art therapy does not allow the trainees to hide behind a shield of words. Where some have no words to express their traumatic experiences, others use words abundantly to cover their feelings and emotions. Some participants start the training by asking a lot of questions, such as: 'is art therapy evidence based?', or 'is the trainer qualified?'. Or they may try to avoid expressing their emotions by indicating that they are well acquainted with trauma theory, or that there is a particular need for the newest western



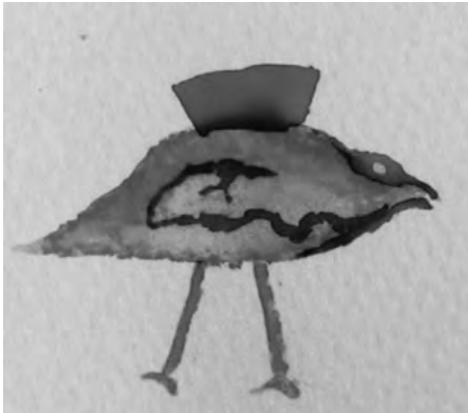
**Illustration 4: Expressing emotions without words (the Netherlands)**

methods. This as a way to keep the unknown at a 'safe' distance. Usually, this sort of resistance is overcome by the first assignments, after which the participants are better able to give shape to their feelings, and are often surprised at the content of their own images. This is due to the fact that in art therapy the 'language' of the image is used, allowing experience and emotions to be made visible and accessible.

3. *Building on personal abilities and strengths*

The methods of art therapy appeal to the trainees' own personal abilities, solutions and creativity.

*Practice example: have the trainees close their eyes and create a scribbled line on paper. Then, with their eyes open develop the line into an animal. This assignment will stimulate the trainees' own abilities, solutions and creativity.*



**Illustration 5: Assignment with scribbled line (training in Lebanon)**

4. *Overcoming helplessness and low self-esteem*

Art therapy offers the trainees the possibility to actively participate, instead of simply passively listening and taking notes. A strong appeal is made to their own abilities and creativity. This can put an end to feelings of helplessness, which are often amplified by traumatic experience, and as a result can reinforce the trainees' self-esteem.

5. *Developing an open attitude*

Training provides opportunities for the trainees to experience that what is good for them, may not necessarily be good for another.

*Practice example: ask the trainees to create a 'supporting image' that can help in difficult times. During a training in Cameroon most images contained religious elements. In discussion, it became clear that often aid workers also advised their clients to pray frequently in difficult times. However, some trainees created images of nature, family, music and dance. In this way, when examining the drawings, it could be made visible and be discussed that what is good for one, isn't necessarily good for another.*

6. *Creating a safe space*

Feelings of a lack of safety can be surmounted by giving the trainees time, and by creating an atmosphere of trust. This can be done by allowing the trainees to determine whether they want to participate actively, or would rather (at first) sit on the side and observe. This approach can also be applied with respect to the evaluation of the artwork. Although a trainee's work might raise questions, the trainer should wait to pose these until the trainee has decided to share (their) experiences. It is important to allow each trainee to work at their own pace, and thereby retain control.

7. *Breaking through existing hierarchies*

A concomitant advantage of art therapy trainings is that it can break through existing hierarchies. Almost all trainees are unfamiliar with art therapy, and therefore start at the same level. Especially female and 'lower tier' trainees can realise their potential and thereby gain another position within the group.

8. *Encouraging trainees to discover local art*

One of the elements of the training is to have the trainees (re)discover the use of local art and materials from within their own culture. By focusing thereon, the trainees are encouraged to have pride in their own background, and to help to

restore traditions to their former glory. One recurring assignment is to have the trainees search for expressions of art in their surroundings. These can be hut decorations, decorated window frames, masks, frescos and/or jewellery, but can also include music, festivals, dances and/or rituals. All too often this local, cultural richness has been disregarded or discarded as a result of war and/or violence (Cohen, 2013).

### Appraisal of the trainings

As the trainings took place in many different countries, and with participants of many nationalities, it was not possible to systematically measure the effectiveness of the training. Hence, the objective of the training to stimulate the trainees to work with art therapy was measured in terms of the satisfaction of the trainees, both during and after the trainings.

Informal evaluations showed predominantly positive results. In terms of personal relevance, almost all trainings were highly valued. Especially, the mutual cooperation and the overall atmosphere had been experienced as helpful and usable. The presentation and the information given

by the trainer were also highly appreciated. (See Box 1).

### Concluding remarks

Art therapy training helps trainees to mobilise their own resources and provides them with a common approach and 'non verbal language' that helps to connect with clients from various cultural backgrounds, and to open possibilities for change. The training changed the attitude of the counsellors from teaching and preaching to exploring, together with the patients, what was needed to feel better and what may help to tackle their problems. A major benefit of art therapy is that it creates space for unconscious processes. A patient's art often shows us what they are unable to articulate verbally. Often when therapist and patient/client try to work in a problem focussed manner, their vision becomes narrowed and they may get stuck. Art therapy is an approach that allows perspectives to open up, by inviting creativity. As one of the trainees remarked:

*'I think art therapy training was very valuable to all involved as it opened their minds to many other ways of communicating. It*

#### Box 1: Some feedback from trainees

*'The training courses certainly helped to mobilise my own resources. Since I and the other participants in the courses worked with people from many different cultural backgrounds, whose spoken language we did not share, we needed an approach, a language that could help us to connect with clients and to open possibilities for change. In contrast to the more verbal training, the training in art therapy provided me (and I dare say others) with those possibilities.'* Trainee from Namibia

*'An important difference between art therapy training and more verbally oriented training courses I took part in is that the former enabled me to experience the impact of the approach and the methods on a personal level. I found that the training courses provided me with well founded theoretical knowledge and, more importantly, provided me with an experience of the transformative power of art therapy.'* Trainee from Iraqi Kurdistan

*'Recently I had a patient that was raped and could not express herself in words. I applied the assignments from the art therapy training to this situation. As a result thereof she was able to express herself to me through art. The training was very worthwhile to me.'* Trainee from Iraq

*gave them permission to be more creative, to get out of their boxes of right and wrong, and to find new and unusual ways to enjoy themselves.*

(trainee from Cameroon)



**Illustration 6: trainees from Iraqi Kurdistan**



**Illustration 7: Creating a board game for children who have experienced traumatic events (trainees from Serbia)**

These experiences have shown that art therapy training is appropriate in many

countries and cultures. However, to date, much of the opportunities created by art therapy remain under-exposed and under utilised.

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flew around freely and goats wondered about the grounds. The palm trees had lost their leaves, as the crowns had been blown away. There was not a single home without bullet holes.

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<sup>1</sup> Some exceptions are Chu (2010) who used art therapy with genocide survivors in Rwanda, and Byers (1996) who used art therapy with children in the Westbank and Gaza.

<sup>2</sup> For example, in 2003 in Jaffna (northern Sri Lanka), the location of the training was a bombed school without a roof, where pigeons

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