

How can Art Therapy be Beneficial to Children Who are Experiencing Anxiety as a result of Trauma?

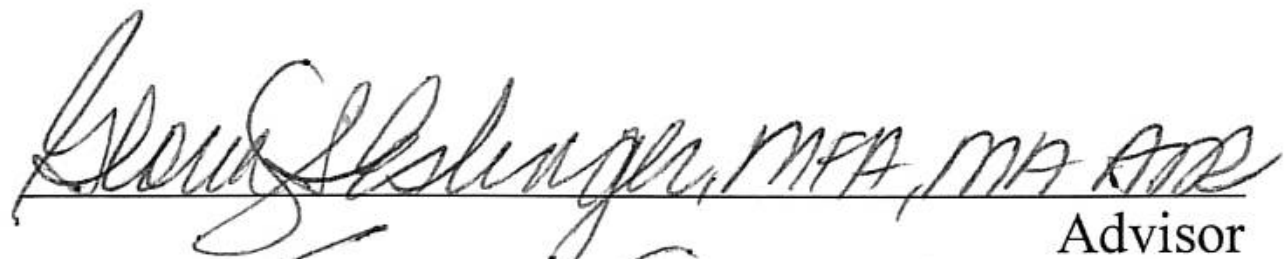
By

Victoria Schneider

University of Wisconsin Superior

A Thesis Submitted to the Graduate Faculty in Partial Fulfilment of the Requirements for the

Degree of M.A. in Art Therapy

  
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**Abstract**

Art therapy is a process that can help children that are struggling with anxiety as a result of trauma. The art acts as a communication tool that can lead to further discussion based upon the subject created and the process the artist went through. The art materials and play techniques can allow children to communicate, face, understand, cope, and process the difficult situations in their lives that lead to trauma and anxiety. When words fail, art and play can form a bridge, allowing the art therapist to better understand what the child is trying to share. Through the process of art therapy, children who have experienced anxiety and trauma are able to feel empowered and confidently take control of their lives, instead of allowing the anxiety and trauma to control them.

### **Acknowledgement**

I would like to express my special thanks and gratitude to my sister who has been an endless source of support and guidance in my educational ambitions. Additionally, I would like to thank my family and friends for their support and encouragement throughout my education career, through the late-night studying, phone calls, and everything in between. I would also like to express my appreciation for my advisor, professor, and mentor Gloria Eslinger of the art therapy graduate program at the University of Wisconsin- Superior for her guidance, inspiration, and creativity. Without the help and support system, this accomplishment would not have been possible. Thank you.

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**How can art therapy be beneficial to children who are experiencing anxiety as a result of trauma?****Introduction**

Art therapy is a form of communication that allows for therapist and clients to talk without using words. The art acts as a communication tool that can lead to further discussion based upon the subject created and the process the artist went through (Rubin, 2005, p. 129). Words tend to be a more complex form of communication for children, so the art can help speak for them. If a child is experiencing anxiety or trauma and trying to figure out if this behavior is “normal” but unable to explain or is unsure how to express their concerns or fears about the information, the art can act as a tool to help them release the information in a safe, expressive way (Rubin, 2005, p.29). Since creating art is a familiar activity for younger children, it creates a form of communication that is more comfortable to them. This allows for the children to express themselves in a familiar form that they are comfortable with in order to better communicate with the therapist (Rubin, 2005, p. 125). The familiar form of communication helps the child feel safe during sessions as well. Anxiety and trauma can co-occur in children, having similar symptoms (ZERO TO THREE, 2016, p.50,114). Anxiety and trauma can affect the developmental growth of children, which can affect them throughout their future. The anxiety and trauma a child might experience can also affect their brain development. A child’s brain is constantly creating new synapses, causing a constant change in children’s brains from the ages three to ten years old (Stien, 2004. p.19). During this time, it is crucial for children to be learning and creating new connections in their brains. Anxiety and trauma can affect the development of these new connections the brain is making. Stien (2004) continues to explain that, “a child’s brain is rapidly making new synapses, it is much more malleable than an adult’s” (p. 19). This allows for children who have anxiety and have experienced trauma in their life to



overcome and continue brain development with the process of working through their anxiety and trauma.

Some ways of working through anxiety and trauma is to seek clinical help, such as a therapist. A therapist can then help meet the child where they are at and start the healing processes in the child's life; art therapy and play therapy being the most beneficial to children. Art and play are languages that children are more comfortable with, since that is what surrounds their environment the most at this stage in life. Malchiodi (2012) explains that during the art making process "time is the essence of the art therapy process, when nonverbal processes take over and people are working things out using paint, crayons, or clay" (p.373). If the client has a way to express themselves that they feel more comfortable with, then they will be more likely to share concerns they might be having in their world. Allowing children to find their voice in life is crucial because this can help build their confidence levels and self-esteem, which can impact the rest of their lives. It is important to meet the clients where they are at in order to have a starting point to work from. If the client doesn't feel safe or ready to share a vulnerable part in their life, then as a therapist it is key to make them feel comfortable during session, allowing the safeness to be present, and let the client decide when they are ready to open up with the therapist (Rubin, 2005, p. 62). In order to start the healing process, one must be ready and open to the idea of accepting themselves and what has happened in their life.

### **What is Art Therapy?**

*Art therapy is based on the idea that the creative process of art making facilitates reparation and recovery and is a form of nonverbal communication of thoughts and feeling...it is used to encourage personal growth and has been employed in a wide variety of setting with children, adults, families, and groups...that can help individuals of*

*all ages create meaning and achieve insight, find relief from overwhelming emotions or trauma, resolve conflicts and problems, enrich daily life, and achieve and increased sense of well-being.*

- Cathy A. Malchiodi (Malchiodi, 2012, p. 1)

Art Therapy may help your physical and mental well-being by allowing expression through different art media to better communicate your emotions and thought process. Art therapy allows for pictures to be translated into words and is used as a form of communication to better understand oneself. Clients can create an image or artwork that represent a feeling or event. This artwork that is created acts as a communication tool that can be further discussed with the client or speak for itself, based on how the clients process was and what the image created is showing us. Malchiodi (2012) explains that “the therapist’s focus is not specifically on the aesthetic merits of art making but on the therapeutic needs of the person to express him- or herself” (p. 1). The therapy takes place in the process of the creator expressing themselves through the art materials. The art therapist and client then work through the art that was created by having the art therapist encourage the client to share the art making experience verbally when possible. By having a bridge between client and art therapist through the artwork allows individuals to communicate easier and sooner than other possible therapeutic techniques. Art therapy integrates the ideas of art and psychology together (Malchiodi, 2012, p.6). Art therapy allows individuals to find their connections between the body and mind.

Two of the founders of developing art therapy were Margaret Naumburg and Edith Kramer (Malchiodi, 2012, p. 9). Margaret Naumburg and Edith Kramer had an understanding of Sigmund Freud and Carl Jung and combined their theories to create a dynamic called art therapy (Malchiodi, 2012, p. 9). Naumburg focused her ideas more on the concept that “the clients’ art

productions were viewed as symbolic communication of unconscious material in a direct, uncensored, and concrete form that...would aid in the resolution of the transference” (Malchiodi, 2012, p.9). Naumburg believed that the artwork created by clients had symbolic qualities that came from the subconscious. The artwork acts as a connection to release the unconscious thoughts that the client might not be fully aware of while creating the artwork. Kramer focused her theory more specifically on techniques from Freud’s personality approach that helped her explain the art therapy process (Malchiodi, 2012, p.9). Malchiodi (2012) explains Kramer’s theory as “her “art as therapy” approach [which] emphasizes the intrinsic therapeutic potential in the art-making process and the center role that the defense mechanism of sublimation plays in this experience” (p. 9). This idea focuses more on the art being the therapy practice. Kramer believed that art therapy was a way of integrating conflicts on an aesthetic plane. Both Naumburg and Kramer believed overall the process of creating art itself is therapeutic. So much can be learned about oneself by creating an artwork and processing the information that is revealed through the art.

Art therapy brings the connection of mind and body together in a variety of ways to help individuals. Malchiodi (2012) explains that “science learns more about the connection between emotions and health, stress and disease, and the brain and the immune system, art therapy is discovering new frontiers for the use of imagery and art expression in treatment” (p. 17). Making the connection between mind and body through a person’s health allows someone to become more aware of their behaviors and the environment around them, thus leading to a healthier lifestyle. Most individuals believe there are certain ways to create art, and with art therapy the barrier of creating art “the wrong way” is removed, because there is no wrong or right way to create art. The art is there to help individuals be able to process whatever

information they need to process; however they feel best fit at that current time. Malchiodi (2012) explains that “through art making clients are invited to reframe how they feel, respond to an event or experience, and work on emotional and behavioral change” (p. 18). Art therapy can help people to better understand themselves through their emotions and social aspects in their lives. Overall the creation of making art can help individuals to grow in a stronger understanding of oneself.

A natural language for children is art, thus making art therapy a beneficial way to help children process things in their world. Children are in the process of developing their ability to express themselves through words based on their emotions and their environment. This makes communicating through art easier for children to “speak” with others about things happening around them. This is especially true for children who have experienced critical situations in their lives. Cathy Malchiodi (2012) explains that “children do not have the verbal capacity to articulate crisis, and for those who have been violated or abused art is a way to communicate feelings and experiences without words” (p. 141). For anyone, trauma is a lot to process and take in. For children, who are learning how to express themselves, it is extremely difficult to find words to share with someone the trauma they have experienced. Through art making and playing out what they have viewed, or experienced, children are better able to communicate their trauma and anxiety they might be feeling. Allowing children to express themselves through art can help decrease anxiety they are having, which in turn will help them feel more comfortable working with a therapist (Malchiodi, 2012, p.141). Creating a safe environment for children to freely express themselves can allow them to open up and become more vulnerable, being able to share their fears, worries, and/or trauma they are experiencing.

Art therapy can also aid in helping children to expand their memory and help organize the stories they create in the artwork and play during sessions (Malchiodi, 2012, p. 141). This process can be extremely beneficial for those children who have experienced trauma in their lives. ZERO TO THREE (2016) discusses that various things can cause trauma for young children including “the presence of stressors and traumas, ... the absence of necessary stimulation, ... and the loss of a primary caregiving relationship” (p. 114). These behaviors can in turn affect the development of the constant brain growth in children, because the brain in children are constantly creating and developing new connections and patterns to better expand and grow their mind (Stien, 2004, p. 19). ZERO TO THREE (2016) continues to explain that stressors and traumas can include “frightening/terrifying events or a series of events, such as exposure to physical or sexual abuse, intimate partner or community violence, natural disasters, armed conflict, motor vehicle accidents, painful and frightening medical procedures, or similar events” (p. 115). With trauma, children sometimes try to forget the horrible events that occurred in their life. The artwork can help them to recall the trauma and anxiety in order to process the information and create a way to cope with this difficult information. Because children are more familiar with art making, art therapy “may prompt children to tell more than they would during a solely verbal interview” (Malchiodi, 2012, p. 141). This typically occurs because children are more familiarized with communicating through art and play while still learning how to translate this information into words. A technique that art therapists can incorporate into sessions with children is play therapy. Play therapy is an expressive therapy technique that Malchiodi (2012) defines as a “visual art-based process that naturally promote performance, sound, and movement” (p. 31). An art therapist can incorporate art making into exploring client’s emotions and expression, for example in puppet making, that allows children to naturally express various

characters and the various emotions each character has. This process can help the therapist to get a better understanding on how the child views the world around them and how they see various people in their world. Art therapists can also incorporate cognitive-behavioral techniques into therapy sessions. Moon (2017) explains that “cognitive-behavioral art therapists use art processes to help clients recognize false, destructive, and unhelpful beliefs and thoughts that negatively influence their behaviors and feelings” (p. 41). Cognitive behavioral techniques can allow art therapists to incorporate a more directive focused session for clients that can help strive to achieve set goals for therapy sessions. This technique can help clients to view unpleasant patterns that have been established and allow the client and therapist to figure out how they can better express the patterns of behavior in their lives.

Trauma can affect anyone who has experienced it in their life and at varying stages of development it can affect different ages differently. Osofsky (2004) discusses how some people even believe that trauma doesn’t have any effect on children (Osofsky, 2004, p. 5). Some behaviors for children’s development include consistency, reliability, and protectiveness from their caregivers. Unfortunately, children who have experienced trauma tend to decrease the likelihood of having these behaviors in their life. Osofsky (2004) explained that “for traumatized young children, ...these behaviors and attitudes that are so important for their physical, cognitive, social, and emotional development are lacking” (p. 4). This can lead children to fall behind developmentally in their physical, cognitive, social, and emotional development. Because children are not necessarily aware of how to cope with the trauma that has occurred in their life, this can lead to making the child feel more anxious, which in turn can be seen in their behavior. They could externalize these behaviors, acting out and becoming more aggressive with peers and those around them, or they could internalize their emotions more, shutting down

and keeping to themselves. There is also a possibility to see the child both shut down and show more aggressive behaviors, depending on their environment and if they have possible triggers, an event, object, or memory tied to the traumatic experience they have gone through. Osofsky (2004) also discusses how “intensive caregiver response to heightened infant arousal may promote dysregulated response to stress in the infant, characterized by under- or overactivity in the stress response system” (p.70). This can affect the developmental levels of anxiety that the child develops overtime.

Art therapy has two main approaches that the founders of art therapy talk about. Moon (2017) explains Edith Kramer’s view that “the art therapist establishes the conditions for nurturance and support of the creative process by maintaining the studio space and offering technical advance and emotional support” (p. 32). This approach focuses more on that the therapy occurs more in the process of making art, focusing on sublimation. Moon (2017) continues to explain Margret Naumburg’s view which “emphasized the importance of free association in relation to spontaneous imagery to bring unconscious forces into conscious awareness and stimulate insight” (p. 33). Her approach uses the Freudian psychoanalytic concepts to look more into what one might be thinking about, but not fully aware that the person was thinking of that. There are also other approaches in art therapy that can be beneficial for people that come to work with an art therapist.

### **How can Anxiety and Trauma Co-occur in children?**

The American Psychiatric Association (2015) defines anxiety disorders to be when a person has “extreme fear or worry that impairs their life function and goes beyond what is normal for their age or the setting” (p.75). Anxiety can affect a person throughout their lifespan, fluctuating to be more extreme at times than others. Typically, this diagnosis is not fully

recognized until adolescence but can still affect children, especially when they are also experiencing trauma in their life (American Psychiatric Association, 2013, p. 223). For children, communication might be a barrier in showing others around them that what they are experiencing could possibly be anxiety. Also, children might not be capable of having a specific name for what they are going through. It is important to be aware of the trauma symptoms as well as anxiety disorders. Although it is a challenge, it is possible to help assess if a child is struggling with anxiety in their lives. In ZERO TO THREE (2016) they explain “that early childhood anxiety and associated symptoms can reach clinically significant levels, cause significant impairment in infants/ young children, and their families, and increase risk for anxiety and depression later in childhood and adulthood” (p.50). Taking the time to identify possible symptoms that a child could have associated with anxiety, can reduce their anxiety throughout the rest of their lives. It can also help family members become more aware of what anxiety looks like and allowing the family to collaboratively work together to strengthen their communication and understanding of the child. Evaluating a child’s levels of anxiety is typically done through observation by caregivers, teachers, and child care focusing on the child’s behaviors and distress or fears that they might have going on around them, or are expressing (ZERO TO THREE, 2016, p.50). The symptoms are close to older age groups who are experiencing anxiety, including uncontrollable behaviors with two or more events that occur regularly relating to fears and anxiety, that persist for a minimum of two weeks and affects the family and child’s daily living significantly (ZERO TO THREE, 2016, p.50). These symptoms can also affect the process of the child’s developmental skills emotionally and physically. If children have been exposed to trauma, this can also increase the likelihood of the child having anxiety.



The American Psychiatric Association (2015) defines a traumatic event to be “something horrible that people have lived through or seen...caused by events or circumstances that overwhelm the person, often threatening or causing serious injury, neglect, or death” (p. 107). The trauma can affect the person’s entire life and cause strong emotions to occur throughout their daily activities. The American Psychiatric Association (2013) talks about how symptoms can be seen through detached behaviors and externalizing behaviors (American Psychiatric Association, 2013, p. 265). It is possible for children who have experienced trauma in their life for symptoms to not be seen or developed, possibly surfacing more later in life, and vary in how the child’s symptoms develop (ZERO TO THREE, 2016, p.114). For young children to be diagnosed with post-traumatic stress disorder ZERO TO THREE (2016) states that the diagnosis “requires exposure to frightening/ terrifying event or a series of events, such as exposure to physical or sexual abuse, intimate partner or community violence, natural disasters, armed conflict, motor vehicle accidents, painful and frightening medical procedures, or similar events” (p. 115). These experiences would occur directly to the child or be witnessed by the child for the diagnosis to occur. These symptoms can lead to children becoming withdrawn and affect their responses related to the traumatic experience they have witnessed or experienced. Children can also develop fears related to the traumatic event/s that can lead to the child re-encountering the event in their mind, dreams, and through their playing. Children who have experienced trauma show their symptoms through their behaviors, compared to adults who are more capable in reporting the events using words as their main form of communication (ZERO TO THREE, 2016, p. 117). Children that have been through trauma tend to fixate on the subject revolving around their trauma, coming up in their play and environment, finding a connection however big or small related to the trauma they have experienced or witnessed. This can lead to an increase

in the child having negative thoughts and emotions in addition to stronger feelings of detachment and withdrawnness, which in turn can spiral into the child experiencing anxiety (ZERO TO THREE, 2016, p. 117).

The connections between anxiety and trauma is that they can co-occur. If a child is starting to have signs of anxiety in their life and has experienced a traumatic event, then this can spiral into a deeper level of anxiety causing the child to go into hyper fight-or-flight response mode. Over time, this can become exhausting for anyone and affect their daily activities. Pat-Horenczyk discusses how treatments for children coping with trauma allow for therapists to explore the behavioral, cognitive, emotional, interpersonal, and neurobiological frames of mind to better understand the child and how to aid the healing process with them (Pat-Horenczyk, 2014, p. 243). Most children coping with trauma and anxiety tend to stay in the survival mode of fight or flight response, which in turn can become emotionally and physically draining because they always have their guard up and cannot necessarily find a relaxing or calming state of mind. This in turn can lead to the child expressing anger and negative emotions to people around them and affects their environment. Cohen (2006) explains that “ongoing traumas that start early in life have the potential to dramatically alter the trajectory of young children’s development more than chronic traumas that begin later in adolescence” (p.4). Children’s development is crucial, because it is their foundation in which they continue to grow and develop throughout the rest of their lives. Cohen also discusses the fact that the traumatic experience is affected by the exposure and the children’s response to the experience (Cohen, 2006, p. 4). The response to the experience affects the child’s trauma because of the unique perspective children have on their environment around them (Cohen, 2006, p.4). Some ways to help children through the anxiety and trauma they are experiencing is art therapy, play therapy, and cognitive-behavior art therapy.

The art therapy approaches discussed can be beneficial to help children through anxiety and trauma in their life in addition to cognitive-behavioral art therapy. Moon (2017) explains Cognitive-Behavioral therapy to have four main characteristics including “(1) a mutual and collaborative relationship between therapist and client; (2) a belief that psychological dysfunction results from disturbances on the thinking process; (3) a focus on changing thoughts to change behavior and affect; and (4) time-limited therapy focused on specific problematic feelings or behaviors” (p. 40-41). Once a sense of ethical professional therapist and client relationship has been established, the client is able to feel safer in the environment of art therapy sessions. Safety is important because typically anyone who does not feel safe will keep conversations to topics that don’t bring up controversy and tend to steer clear from vulnerable subject matters for them. Once a child feels supported in the therapeutic environment, the therapist can have a better understanding of the view of their world and be able to incorporate how the subject being discussed, created in art, and/or seen in play, could differ and reflect on how that might result if they took another path of action. Rubin (2005) discusses how the “ability to facilitate that process is as important a component of successful art therapy as his or her equally refined understanding of the symbolic meanings of the child’s visual communications” (p. 351). Once the child acts out a play scene or creates an image in art, the art therapist then has the opportunity to figure out what the child is trying to communicate through this image or scenario. This step is important in the therapeutic process because the child is trying to communicate with the therapist through the image or play scenario. The use of cognitive-behavioral therapy techniques focuses on learning that allows children to practice exposure-based strategies and building up coping tools for clients to use throughout their lives

when they are experiencing anxiety or come in contact with triggers related to their traumatic experience (Morris, 2004, p. 306).

A factor that can affect children with anxiety is their social development growth. Morris (2004) states that “the perspective stresses the assumptions of multicausality and multifinality—essentially the notion that there are multiple entry points (i.e., risk factors) that may place a child on the path toward anxiety disorder and, conversely, multiple points at which a child may be diverted from the path (i.e., protective factors)” (p.59). Therefore, children may be more vulnerable to anxiety disorders because they have yet to fully develop their protective factors and how to keep themselves safe in the world around them. Parent, child, and peer interaction can affect the children’s social development based on what the social norm for the parents are and what was typical behavior is found in the family dynamic. Morris (2004) discusses that social interactions are reliant on the primary caregivers and “it is not a far reach to propose that parents who are anxious in social situations may be less likely to facilitate their children’s social engagement” (p. 62). Given this information, the children are more prone to develop similar behaviors that could possibly lead to anxiety disorders. Morris (2004) continues to discuss that anxiety is very common among children and adolescents and can cause a ripple effect in “more serious consequences, such as poor academic functioning and suicide” (p. 71). Because of this, it is important to have a way to decrease the likelihood of anxiety and talk with someone about ways to help identify and cope with this disorder. Morris (2004) also discusses how it is very common for depression to be linked with someone who is also struggling with anxiety (Morris, 2004, p. 82). For children to be going through anxiety and possibly depression, it can be a very overwhelming world to them; they may not even know how to talk to someone about this. Art therapy can allow this information to be revealed in a safe manner through a language the child

is more comfortable at communicating through. If the child is able to speak to someone through means of communication that they feel more comfortable in, it can allow for the child to feel safer in opening up more. Children know communication through play and creating art best because they have had the most exposure to these in their life, which results in the child feeling the safest in communicating through these forms.

### **Art Therapy with Children**

When working with children in art therapy sessions, it is first important to establish a safe environment for the child, so they can freely express themselves. Once a safe environment has been established between therapist and client, it is easier for the client to express what is going on in their world. The child's developmental levels depend on where the starting point is for art therapy. When a child is developmentally delayed, there are factors to consider. Rubin (2005) explains these factors, saying "whether the youngster is consistently delayed, or is rather more variable in artistic performance...is whether the lag is caused by something organic, such as a neurological deficit, or is caused by something psychodynamic, such as an internalized conflict, resulting in performance anxiety" (p. 47). The internalized conflict can range from a variety of things, including past trauma they have experienced or anxiety they are having about events or their environment. On the other hand, children could be further along in developmental levels of art yet underdeveloped in other aspects of their life. Children tend to test safety and their limits out, seeing what the therapist approves of and disapproves of, pushing limits of time, behaviors, and the space. By pushing their boundaries, children gain an understanding of what they can or cannot do during therapy sessions. Rubin (2005) explains this as "even the most needy child, though hungry for the adult's attention and approval, is likely because of past disappointments, to have trouble believing in the dependability of a new adult" (p.58). During the initial time

period, children also learn what is expected in the given space and become familiar with the routine that is put into place. Having a session start and end similarly over time can help establish a sense of safety for the children. Rubin (2005) explains how it is crucial in the beginning to “develop trust and a generally positive relationship with the therapist, it is important to be not only consistent but also as nonthreatening as possible” (p.60). This is another factor that can contribute to the child feeling safe and more reluctant to come back the next time. Also, safety of routine can lead to the child trusting the therapist more, which is the next stage that Rubin talks about in therapy with children (Rubin, 2005, p. 61). The stages Rubin describes that children go through in art therapy can be viewed as happening as a ripple effect (Rubin, 2005, p.58).

Establishing trust can take varying time, depending on each client. Building up trust and confidence are key factors to help children feel safe in art therapy sessions. Rubin (2005) explains that “it matters that one meets with the child at a consistent place and time, that one has the same supplies available in the same locations, and that one handles routine transactions in a predictable manner” (p. 61). Having consistency with the time, materials, and overall session can help decrease anxiety children might have, which can help children feel safer. It is also important to consider if a child does reveal information that needs to be shared with others, such as teachers or caregivers for safety purposes of the child, such as names of abusers revealed in therapy sessions, that the children are aware of what is being said to them, to keep the trust that has been established between child and the art therapist, providing a protective framework (Rubin, 2005, p.61). By sharing the information from sessions with children to the child and caregiver or teacher, it can help establish a stronger trust between therapist and child, even though the child might also be confused about the confidentiality of trust by adding a third party

to knowing such vulnerable information about the child. Rubin (2005) explains that “the development of trust is a gradual process, and like any other kind of growth can regress under stress” (p. 61). If children are anxious or distressed, regression can occur more often, especially if the information that they are holding onto is overwhelming and scary in the eyes of the child relating to the trauma that has occurred in their life. As the ripple effect continues, the child starts to take more risks in sessions, disclosing thoughts and feelings that have been hidden for a while, such as possible trauma they have experienced or concerns that they might have in their world. The information usually comes out all at once and then the children tend to backtrack or regress some. Then, when they feel comfortable revisiting the information, more details are added (Rubin, 2005, p. 62).

Communication is another key stage to art therapy with children. Depending on the child you are working with, Rubin (2005) explains that “finding an appropriate and workable wavelength on which to communicate is a challenge, and may require a good bit of risk-taking and creativity on the part of the therapist, but very little work can get done without effective communication” (p. 63). After creating an artwork with the client, art therapists typically spend some time discussing the process and possible meaning behind the art, using age appropriate questions and discussion techniques based on the level of the client. Children’s communication can come from play therapy in addition to being through art therapy. Playing or acting out information that the children are familiar with is a communication modality that younger children feel more comfortable using. The Axline approach is one that Rubin (2005) describes as when “a child, given supportive environment and a reflective therapist, can play out his or her problems” (p. 351). This is one of the approaches used at my current internship for the Child Development Project working with the preschoolers who have experienced trauma in their lives,

among other things. Rubin (2005) continues to explain “the clinician’s ability to facilitate that process is as important a component of successful art therapy as his or her equally refined understanding of the symbolic meanings of the child’s visual communications” (p. 351). In order to help children create the play therapy in the space, Rubin (2005) continues to explain how it is important for the therapist to “be comfortable with childish thoughts, feelings, and impulses” (p. 352). This can help the child accept the behaviors that they are expressing to therapists in session. The art part of art therapy can be useful in communicating because a lot can be said from an artwork without using any words. It is helpful for the client to discuss information about their artwork in order for an art therapist to better understand and communicate with children. Meanings of colors and various designs can vary in children, depending on their likes, dislikes, and the environment that they are familiar with.

Facing the traumatic or delicate situation can be very overwhelming for a child. Rubin describes this to be the hardest part of the therapeutic process (Rubin, 2005, p. 64). For some children, the facing of the situation might be seen in play through characters that they develop, and some children may or may not need the therapist to ask questions that bring the subject information from the play forward to a real-life scenario. Depending on each child, there might be different ways of expressing themselves that come more naturally. Rubin (2005) explains that “it is not easy to decide in advance when a child may need to do more than gain integration through a sublimated expression in order to get well” (p. 65). If a child comes into the space and focuses their main play on the doll house or a certain art material, and then when children come back for their following session it might be good to bring those items to the center of the room to continue focusing the play or art making through those tools, allowing the child more ease and comfort when facing the delicate situation. The consistency of using a main material for therapy



can also help establish safety for the child. Although, the client might want to try other materials provided in the beginning to see what they like more and what they want to explore in the space during their time. Once children are able to face their delicate situation or trauma that has been a part of their life, an understanding has to be developed. Rubin (2005) clarifies this by saying “it takes a long time, from the first glimmer of hard-to-handle, conflicted aspects of the self, to reach the point at which the child can accept, without undue anxiety, these previously hidden secrets” (p. 66). Depending on each child and how much of an impact the delicate situation or trauma had on the child will determine how much time the child needs to come to terms with the information at hand. At this point, there are an array of emotions that the children work through before arriving at this point. Rubin (2005) explains that “this *working-through* process is often accomplished by repetitive confrontations with the feared idea or through drawing or playing out a loaded theme, often with a limited amount of modification” (p. 68). When children are able to face their fear or idea repeatedly through the drawing and the play, the child is able to process different endings to see all of their possible options of what might happen.

Once children are able to accept what has or what is happening that is making them feel anxious or traumatized, it is important to figure out coping mechanisms that are helpful to each individual child. Figuring out how to cope with the information can take just as long to reach as realizing it exists, if not longer according to Rubin (Rubin, 2005, p. 69). Children cope differently, having the play and art shift themes throughout therapy sessions overtime. Rubin explains that transitional objects can help aid in this process, such as artwork created in sessions and finding their proper home with the client in their room, or where ever they see best fit in their life (Rubin, 2005, p. 69). At this point in therapy, the client and therapist need to figure out together how they would like to end their time together. Rubin (2005) says “as with earlier

separations, the step out of therapy represents growth and progress, but also entails loss” (p. 70). It is important to start bringing up interests of the child that they could possibly use to fill the time they had been spending in session. This helps transfer the children’s emotions about ending therapy and creates a different activity in the place of therapy.

### **Art Therapy Practicum Experience with Children Experiencing Trauma and Anxiety**

When I began my graduate career, I started working with children at the Boys and Girls Club of the Northland in Superior, Wisconsin for my internship experience. This organization supports a safe environment for children to grow, develop, and promote their success with social and emotional behaviors through a variety of activities. An overall goal I focused on was building up self-awareness, social skills, teaching skills, and strategies for the children to become more successful in school, at home, and with their peers within the safe environment of the group. I have always had a big heart for children and enjoy their company and curiosity for whatever comes to their mind at that moment. As I started to get to know the children there, I learned more and more about their home life and some of the things that they have experienced that could possibly lead to a development of anxiety, and in some cases, trauma, for the children. I typically worked with a larger group of children varying from ages five to eighteen years old. Throughout my two years of working with this group of children, I have been able to gain a stronger connection with the children which allowed me to formulate art therapy directives that could benefit the children I worked with. I plan to share how art therapy has impacted a few of the children here during my experience with them. For confidentiality of the clients that I worked with, names have been changed in the case examples provided. These clients are not specifically diagnosed with anxiety or trauma, but they have had experiences of anxiety and or trauma in their lives.

**Jake: Self-expressionism and the therapeutic process of art.** Jake is a ten-year-old boy who has one younger brother and two older brothers. His mother has had struggles with substance abuse in the past and the children have been present during past arrests relating to the substance use. He and his sibling have had to also cope with being moved out of the house on several occasions. Jake was one of the first clients that stood out to me during the group art therapy sessions. He typically started the session out by helping the art therapist prepare the space for the group “art time.” I was told by my supervisor that he was often known as a troublemaker at the club and within his family life there seemed to be a lack of structure;

specifically when it

came to following

through with

consequences for the

actions in his life. My

supervisor indicated that



*Figure 1 Jake: Paper plate shields*

Jake was a very intelligent child who sometimes didn't know what to do with himself. This led to him causing trouble, such as stealing bikes with his brother and showing frustration and resentment to the other children and staff by swearing and arguing. When Jake started creating within the art therapy space, his personality seemed to shift, and he became quiet and focused on the art materials in front of him. One of the first art therapy directives Jake focused on was making paper plate shields. This directive helped allow children to consider how they would protect themselves and what they should keep to themselves. This process can help children to establish boundaries within their lives. It also allows them to become more aware of what is appropriate to share with others and when is it appropriate to share. Jake communicated mostly



*Figure 2 Jake: Mask*

through the art and kept his descriptions of his art short and concise. His process of focus and concentration on whatever art materials was kept in front of him due to the quantity of other children around him and the constant chaos right outside the room in the gym. Jake related that he found lions to be strong and brave animals, while he did not have words for the second and third shield that he created. Another session Jake came in and decided that he needed to make a mask that day to wear while he and his friends played in the gym together. He decided to focus his mask to mimic a favorite TV character, Deadpool. This character allowed Jake to feel unstoppable in the world and expressed how he wished others to see him while he wore the mask. He was able to communicate this through the power of expressing himself through the art, without using words. He was able to integrate the art with his play to best express what he needed to share and communicate that day.

Another art therapy directive that Jake participated in during our group sessions was creating worry monsters. This directive focused on allowing the clients to transfer their fears, worries, and anxieties they might have into a creature that they would be able to talk to and contain however the client felt necessary. Again, the art therapy intern found Jake completely focused and absorbed in the art materials around him and the process of making a worry monster. As time progressed, Jake would come into the art therapy space and become absorbed in the art materials around him. Sometimes Jake came in and found that he needed to create his own agenda, using the markers and colored pencils to form lines and colors to create without a specific idea or focus in mind. More recently, an art creation Jake said that he was making was

something abstract. As the group talked throughout the session, the state of California was mentioned. This caused Jake to share that his older brother that lived in California was having a baby soon and that he was going to go to visit him and the baby. For his final creation that day, he asked this art



*Figure 3 Jake: California drawing*

therapy intern to keep his picture safe. When he was asked about what the creation showed, he explained that it was what he thought California looked like. No matter what else is going on in Jake's life, the art therapy allowed him to focus and be in control of the materials in front of him. Whether it was a directive that he focused on, or an idea that he wanted to share through art, the process of making allowed Jake to cope with whatever was going on in his life.

The art therapy sessions were a time where he was able to unplug, reboot, and control what he wanted to focus on. My supervisor often made notice later in his time at the club, when Jake would be playing in the gym, that his behaviors and communication tended to be more positive on the days he participated in the art therapy sessions. For Jake, the art therapy acted as a safety container in order to allow for control and self-expressionism during his time with the materials. It gave him a sense of control and identity that he wished to share with the world while he experienced his own chaotic world.

**Sarah: Coping with anxiety, turning to hopefulness.** Sarah is another client that I met near the beginning of my practicum experience at the Boys and Girls Club. She is an eleven-year-old with four siblings, one being biologically related to her, living within a more chaotic

environment with little to no structure in various parts of her life. Early on in meeting her, she shared a powerful story through her artwork. The art therapy directive focused on creating a story from magazine images found. This directive helped the group to explore their imagination and creativity in a more explorative way. Sarah created an informational story book that talked about cancer and drugs and why they were bad. When discussing with her about her story she started to share some of the meaning and purpose for creating what she created that day. She

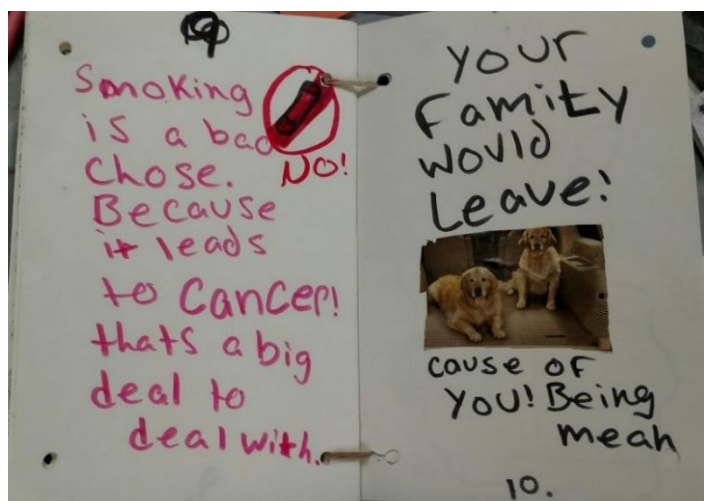


Figure 4 Sarah: Storybook

said that her dad had left her and her family for music and drugs and that she had not seen him in a long time. As she continued to flip through the pages of her storybook, she paused on the page where she talked about God and being hopeful in life. At this point in our discussion she became very hesitant, yet disclosed that

she believed in God. After concurring that I had the same belief, Sarah seemed to relax more, continuing to share about her story and things going on in her life. As time progressed, Sarah continued to come into the “art time” with the group and quietly worked with the materials in front of her. Before leaving the art therapy session she would make sure to share at least one aspect of what she had worked on during the time together.

As Sarah continued to come in for art therapy sessions, she became more and more comfortable taking lead of how she wanted to use the materials on that particular day. Another art therapy directive that she worked on was the dream mandala. By creating dream mandalas, the process engaged the children to think about their hopes and dreams that they have that can

help them aspire to their goals in life. Initially, Sarah said that she was not sure what her dreams were, but in that moment, she started to explain that she had a passion for cooking and baking while she talked about her favorite dishes to make. The art therapy intern reassured her that

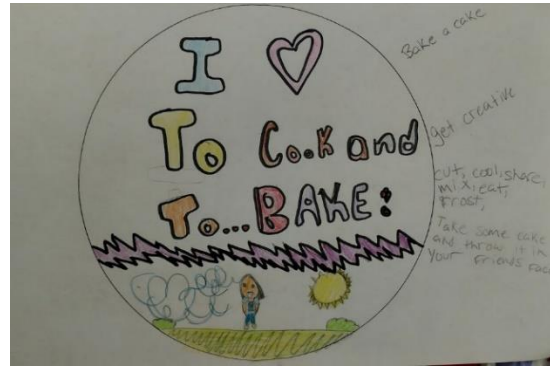


Figure 5 Sarah: Mandala

that was a wonderful passion to have, and that she could definitely see her using her passion to aspire to her hopes and dreams throughout life. With this reassurance of her passion and dreams for the future, Sarah started to work on her dream mandala incorporating inspirational words and phrases on the outside of the mandala. As time progressed, Sarah started to disclose more information on what she was thinking about and emotions that surface through the process of creating the art. Specifically, she has shared that she has hurt and anger towards her dad and what he did to her. This has also led Sarah to thoughts of possible suicidal ideation. Through the art she is able to discuss and express herself more easily than through just open discussions.

The art therapy process acts as a bridge to ease more difficult conversations that children might be more resistant to. Through the creation of art, Sarah was able to continually communicate and share her hope that she has in her life that at times may be harder to see. In turn, she has her creations as reminders for hopefulness in difficult times. Art therapy can be an experience involving powerful emotions that is often difficult to put into words, at least in the beginning. The art becomes a backdoor for even the most resistant clients, being able to express themselves more easily and allowing individuals thoughts and feelings to be heard. This in turn can help children to acknowledge different ways to cope and grow from situations in their lives.

I also have had the opportunity in working with children one-on-one in a more clinical setting in the Child Development Project at the local preschool in Superior Wisconsin, with preschool aged children and other children from the community. This setting helped integrate my art therapy techniques and incorporate play therapy techniques to best fit the client's needs for the sessions. For confidentiality, the client's names have been changed in the case examples provided.

**Olivia: Processing, coping, and self-expression.** For about one year, I was able to work one on one with a four-year-old girl who has shown signs of struggling with initiative, attachment, depression, emotional control problems, attention problems, and behavioral concerns. Her teacher also had suspicion of possible abuse in her life. Olivia used both play and art to communicate during sessions. Initially, she came to the space playing through the life of the dolls she associated with and illustrated her thoughts, behaviors, and emotions through the play. Olivia continued to use our time together to act as a safety container where she could express her anger and resentment she had going on in her life. One day, she specifically asked if we could meet twice the following week so that she could have time to play and paint. She wanted to start with painting first. Working together, the art therapy intern and Olivia prepared the space to paint, letting Olivia choose the colors and where the paper should be at. She seemed so excited to paint that day. She first started on a big piece of paper with the color pink saying she made herself, then adding blue around it. As she continued to paint she asked the art therapy intern to help her paint. By allowing her to still be in control of the materials, the art therapy intern had her guide their hand around the page with the brush. She then took over painting, adding eyes to the person. As she continued to paint on this paper, it was noticed that she was starting to explore the colors on the page. Olivia started to talk about her friends and what she





*Figure 6 Olivia: Painting*

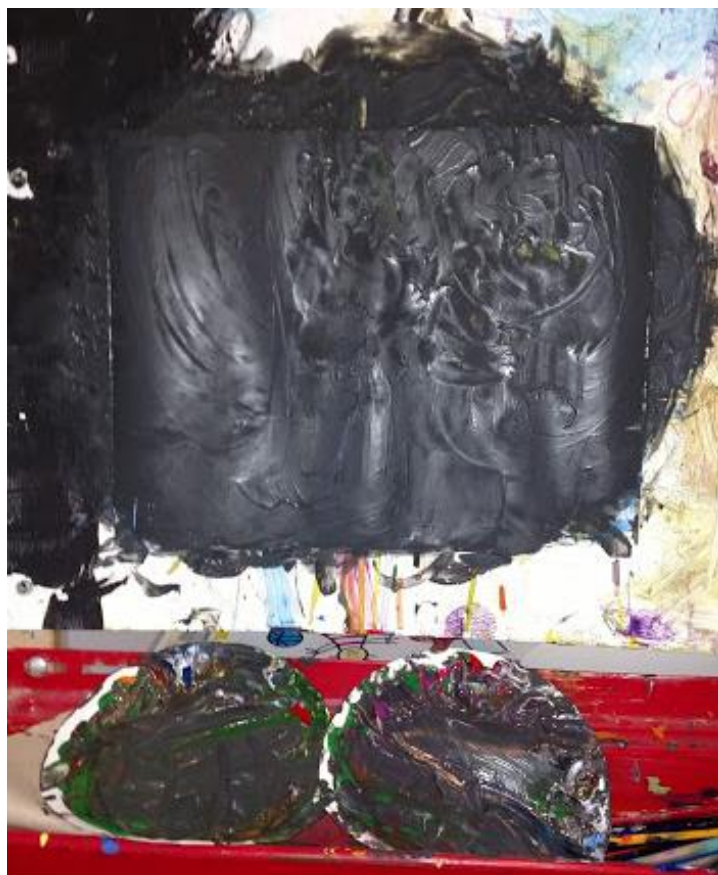
it didn't run down the page too much. When Olivia started to add the brown, she became very specific were her marks needed to be made. When asked what she was creating, she responded that in the painting there was some kind of animal and person that were friendly. Then, she said it was a cat stuck in the water and a dog was there too, continuing to explain that the dog was going to save her by jumping into the water. At this point she started to look for a specific color that she needed from the cabinet, finding black paint and more brushes. After adding some black paint to the paper, we then found some darker green paint in the cabinet to use. Squeezing the paint out from the tube this time, she added some onto the paper with her finger explaining it was a different green and rubbing her hand into the paint on the paper. Then a monster started to take over the people and she started to laugh. Olivia then started mixing the two different greens on her hand and decided to do a print with the back side of her hand, this was the last thing she wanted to add to this painting.

After washing up, we carefully moved Olivia's first painting to the table to dry and got the second paper ready to paint. She started out with black paint first on this one. As Olivia painted,

liked to play with them. Then she asked to paint together again, adding water to remove the stiffness of the brush before painting. This led to the paint and water running down the page, catching Olivia off guard, and she quickly caught the drip with her finger so that

she said it was going to be dark, and added a person with a head and eyes and a nose on the left side of the page. She said the person is angry because they want their mamma, but she was unable to make a mamma, and she was mad at mamma because she is lost. Olivia went on to explain that someone took her and abandoned her in a green oval with lines through it that she had painted on the right side of the page. The people in the oval said, “wahhaha.” Then she started to add blue because blue is good and safe. Olivia then said the girl jumps out the window and goes back home where it is safe. And the bad girl asks, “oh where is that girl.” Olivia said a bad girl and the good girl were in the green scary oval, adding the bad girl next to the good girl in the painting making hard dots with the brush on the good girl. Then a bad kitty made big green dots all over the page. Olivia started to add more colors in and mixing all of the colors together on the plate adding more dots to the paper. Asking how the good girl escapes the green room, she said someone knocks on the door and says they can come in, then a bad boy comes into the room. As she mixes the paint more, Olivia discusses how they hurt the good girl because she misses her parents, so they hit her. First in the teeth, then her head, then the bad cat did it all over the place. The art therapy intern verified that this was not very nice or friendly to the girl and she agreed. She repeated part of the story including other specific places they hit her, the face and knee. As time progressed, Olivia continued to verify that what the people were doing was wrong with the therapist and it was happening everywhere while making big smacks with a mixture of all the paint colors. When asked if the bad girl and bad boy had a name she confided with the art therapy intern the names of the people in her story she was depicting. Then the paper turned black everywhere. She said the bad boy and girl hurt the girl a lot, adding paint to her hands and starting to smear the paint into the paper. While she painted, she talked about how the people hurt her and that it happens every day, never stopping during the night at her

house for the party. She also discussed it happening at her brother's house, brothers' room, the kitchen, and the cat's room. As she talked, she continued to add paint to the paper with her hands smearing it in circles faster and faster as she talked. She said that her pet cat is usually there, too. Discussing the kitty scratching, she started making scratches in the paint leaving claw marks on the paper everywhere because they are making noise. She then proceeded to cover the



*Figure 7 Olivia: Finger painting*

cat scratching marks up in the paint. Becoming very quiet and looking emotionally drained, the art therapy intern expressed that that was a lot of hard stuff to be holding on to and thanked her for sharing this with her. Olivia then said that she has been holding on to that forever. Verifying how she was feeling, the art therapy intern and Olivia decided to find a spot in the room where she was able to keep her paintings safe before proceeding to clean up and transition back into the classroom. The process of working through everything she had been holding on to and having a sense of release and a safe container to keep this information in allowed Olivia to transition back to the rest of her daily activities.

As she was able to work with the art materials, Olivia was able to express and release the emotions and thoughts that she had been holding onto. This process allowed Olivia to feel a

sense of relief that let her find a safe spot to contain her thoughts that she had shared during her time in the painting. Being able to acknowledge and share the past trauma is one of the first steps to the recovery process, finding a way to cope and continue about their daily lives. The art acted as a bridge of communication for Olivia in order to get the difficult information out. This in turn allowed her to remove some of the anxiety and stress she had from holding onto this information. It was a nonverbal way to process her feelings, thoughts, emotions, and the trauma that had happened to her. The painting within the space acted as a container that she felt safe enough to transfer everything into. This in turn helped Olivia to get a sense of relief to help decrease the anxiety in her life.

**Noah: Communicating words through art and play.** Noah is a six-year-old boy who struggles with initiative, attachment, depressive symptoms, emotional control, and aggression. He focused his sessions on communicating through his doll, castle, and sand play during sessions to better understand his thoughts, feelings, and behaviors. Throughout the play time, Noah bounces back and forth between the sand tray and the other toys in the room. One day he started in the sand creating battles and protecting the family and pet tiger and fly. He repeated various similar scenarios of the family being protected with soldiers and knights trying to get to them. Burying the family to protect them and then unburying them from the sand after they won. Then he switched to the castle and town area, setting one across from the other and equally distributing four people on each side. He explained that it was red versus blue teams, elaborating on the play with train tracks that lead from one team to the other. As our sessions progressed, Noah tended to focus his play on certain topics and ideas. This one was repeated a few times, having various endings to the plotline. Noah started in the sand tray and the art therapy intern was a girl dragon and he was a boy that can change into a dragon. In the sand, the dragon and boy were fighting,

protecting, and making coffee and tea for each other. They decided that they needed new property, and moved to a castle. Dad dragon was only eating vegetables because he was a vegetarian while mom dragon was a meat/human eater. Mom dragon got sick and her belly hurt so dad checks it out by sticking his hand up her butt saying yes, she is pregnant. Mom ends up having twins George and Rino. The children are also vegetarians like dad. Dad went to the store a few times with the kids, but mom stayed home and took a bath. Then the uncles came to live with them and mom was told to get a job on the railroad while dad was off with the children. At the end of the day, everyone came home at the same time.

More recently, Noah focused the play on the little people dolls in the house and castle. He had an evil car watching a family outside the doll house and the car kept sending poison apples to them. It even had the car eat a police officer that came over to check out what was going on. The family was able to escape to the castle safely, though. At the end of the time, Noah moved over to the sand and had one big dragon at first that battled the army soldiers, and after the dragon found out that he was surrounded, the dragon called for backup. The dragons ended up winning the battle, burying the soldiers in the sand. As time progressed, he started to also explore through the art materials as well.

Noah decided to explore with the painting materials using free expression and creating an image of a rainbow, naming it every color. During this painting process, Noah explored the colors and the materials to be in charge of the space and what he wished to include in his painting. By allowing Noah to be in charge of the space and what he needed to create, it allowed him to freely express his ideas through the materials. Another time, he focused on painting a rainbow cat, creating the entire painting himself and only asking the art therapy intern to help



*Figure 8 Noah: Rainbow cat*

with the ears. Working together, the painting was made with Noah guiding the art therapy intern's hand on the page. This still gave Noah complete control over the materials in front of him, figuring out how his ideas needed to be expressed through the painting.

As he worked, he would take a step back to view his progress, and thoughtfully paused to think about what he needed to add or do next on the page. For his final touches on the cat, he decided to add white thick polka dots, explaining that this gave the cat more texture and personality.

Through the play therapy, Noah was able to work through his feelings, thoughts, and emotions relating to possible events occurring in his life. This allowed him to find a sense of control among the chaos in his life with the various characters and the roles they needed to play during his art therapy sessions. No matter how small or large the difficulties that children are facing, the art therapy can help them to solve any problems they are going through, difficulties that they are facing, or even just reducing the stress in their lives. Art therapy can be an experience involving powerful emotions, but it can also be peaceful, relaxing, and comforting because it gives people a chance to discover something new about themselves.

### **Outcomes and Observations**

Throughout my experience working with these children and other children, I have gained a stronger sense of how children best communicate with the rest of the world. I have been given this wonderful opportunity to expand my education by working with these groups to further grow

and develop my skills needed to work with children. Overall, the art materials and play techniques have allowed the children to communicate, face, understand, cope, and process the difficult situations in their lives that lead to trauma and anxiety. Creating art is a familiar activity for younger children, so it creates a form of communication that is more comfortable to them. This allows for the children to express themselves in a familiar form that they are comfortable with in order to better communicate with the therapist. When words fail, art and play can form a bridge, allowing the art therapist to better understand what the child is trying to share. The creative process allowed the clients to have a sense of relief and understanding that someone was able to take the time for their voices to be heard. This in turn gave them the confidence boost they needed in the session to know that they have a voice in this world.

For people who have been through traumatic experiences or struggle with coping with anxiety, expressing their emotions is sometimes even more difficult to cope with. Through art therapy, people are able to learn more about how to work with and through the range of different emotions they can feel, giving them a sense of relief and confidence in the world. This can help empower them to become the people they wish to be. For children who are learning how to express their emotions and live in the world around them, this can be even more of a challenge, especially if they have been through traumatic events. Through creating a safe environment in art therapy, clients are able to work through their trauma and learn how to deal with and explore the many emotions people have. In art therapy, clients can process and learn how to understand the trauma and anxiety, comprehend and face the information, and figure out how to cope and separate from the trauma and anxiety, preventing the trauma and anxiety from controlling their life. The process of figuring out how to cope with their trauma and remembering it can be a difficult task that they typically do not want to relive, or at least it is harder to discuss. Through

the process of art therapy, clients are able to communicate through other means, such as art or play, that can help communicate with the art therapist even if no words are spoken. When the clients are ready to talk, they are in charge of when they communicate with words to the art therapist. Communication can also be seen through behavior, such as acting out in school, at home, or in social settings. A child's brain is constantly developing, and if anxiety and trauma interrupts the brain development, then the children need to allow time to work through and process their trauma and how to cope and separate the information for themselves. This will help them to continue building up their capacity to allow them to go about their daily life with a little more ease.

### **Conclusion**

In conclusion, art therapy is a process that can help children that are struggling with anxiety as a result of trauma. The art acts as a communication tool that can lead to further discussion based upon the subject created and the process the artist went through. Anxiety and trauma can affect the developmental growth of children, which can affect them throughout their future. Art is also a language that children are more comfortable with, which is key in meeting the clients where they are to best help them through the process of art therapy. If the client has a way to express themselves that they feel more comfortable with, then they will be more likely to share concerns they might be having in their world.

Art therapy can help children of all ages by empowering them to figure out how to work with the anxiety and trauma that has been a part of their life. Creating a sense of safety is an important part of art therapy. Making children feel safe allows the children to have a healthy professional therapeutic relationship during sessions. Once the relationship is established, it can lead to the clients feeling more relaxed about sharing their traumatic experiences with the



therapists. Allowing oneself to become vulnerable is not an easy task, and takes time. It is important to allow the clients to establish goals, allowing them to be in charge of their sessions in a way that can empower them, giving them more confidence in their life. It can be very risky for clients to talk about their traumatic experiences. After communicating their trauma to the art therapist, facing the events can help lead to healing, but is also a difficult process to work through. In order to work through the trauma, clients have to be able to face the events and later separate themselves from them. Once the client is able to accept the trauma as a part of their past and find a way to help themselves cope with the memories, then they start to grow and learn more about themselves and how to live in the world around them.

Developmental growth is an important factor that can later affect the rest of their life. It is important for children to have proper caregiving and developmental progress, allowing them to live in the world around them. For children who have experienced anxiety and trauma, it is important for them to gain an understanding of how to cope with the trauma they have experienced. When a child is acting out, it typically means they are trying to communicate something to us but are unsure how to explain or show it in that moment. Art therapy can help children who have had traumatic events to express themselves through various art material and play to help communicate the traumatic events. Art therapy is a form of communication that occurs between therapist and children that can effectively help each child to find their own way to communicate and cope with the challenges they will overcome. Withdraw and regression can tend to occur in younger years because of uncertainty of where to go or how to continue their life after this traumatic experience. Art therapy can be used to help allow the information that is kept bottled up, to come out. In the beginning, though, there might be an uncertainty because a therapeutic relationship of trust and safety need to be established first. Once clients have found

ways to cope with their trauma, they are able to keep their coping tools nearby if the they start to think about the trauma again. Through the process of art therapy, children who have experienced anxiety and trauma are able to feel empowered and confidently take control of their lives, instead of the anxiety and trauma controlling them.

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