

Positive Effects of Art Therapy for Women and Children from Backgrounds of

Domestic Violence

Sarah Riley

University of Wisconsin- Superior

Table of Contents

- I. Introduction: Art Therapy for the Survivors of DV
- II. History, Definitions, and Applications of Art Therapy
- III. Art Therapy and the Brain
- IV. Effects of Domestic Violence on Women and Children
- V. Practicum Experience
- VI. Conclusion
 - a. Art therapy: a positive and effective modality for helping victims of domestic violence to cope and heal

Abstract

Domestic violence, specifically, that which is perpetrated against women and children, causes physical, mental, and emotional trauma, resulting in a variety of pervasive injuries and disorders. The purpose of the research and practicum experience outlined in this thesis is to present art therapy techniques and activities as a viable and effective modality of treatment for the aforementioned disorders inflicted upon the survivors of domestic violence and abuse. The intrinsically expressive nature, as well as the sensory aspects, of engaging in the creative process which is facilitated through the use of art therapy, allows women and children from backgrounds of domestic violence to gain positive and therapeutic benefits. These benefits help them to cope with a multitude of mental and emotional disorders, and to aid in the overall healing process, thereby having marked, and lasting, positive effects in the lives of the individuals involved.

Introduction: Art therapy for survivors of DV

Art therapy is an effective modality for helping people to cope with symptoms of a wide array of mental and emotional disorders commonly caused by exposure to, and victimization from, domestic violence. In the cases of survivors of domestic violence and/or abuse, art therapy techniques can be utilized to enable the expression of their emotions through the use of visual arts (and a variety of other multi-modal artistic approaches), as well as to develop beneficial coping and self-soothing skills, both consciously and unconsciously, through the intrinsic sensory benefits of engaging in the creative process.

The applications of art therapy are vast and versatile; art therapy techniques can be used to aid in emotional expression and to improve emotional, mental, and in some cases, physical health for any number of particular diagnoses, and they can be tremendously helpful and valuable for survivors of domestic violence. Studies have shown that the sensory benefits which are present in many art therapy techniques can stimulate the middle brain, which is responsible for self-soothing, and emotional regulation. Developing calming skills through learning and engaging in art therapy techniques which aid in this pursuit is an invaluable practice for individuals who have experienced abuse and/or domestic violence.

Art Therapy: Definitions, History, and Common Applications

There exist many and various definitions of therapy versus art therapy. A commonly accepted definition of *therapy* is “the treatment of disease or disability, physical or mental.” (apa.org) A definition of *art therapy* is “the use of creative activities related to the visual arts to improve physical, mental, emotional, or spiritual well-being;” this definition is encouraging, but

is still somewhat limited in that art therapy spans much more than just the visual arts.

(psychology.about.com/od/psychotherapy/f/art-therapy) By simply reading the differences in the definitions, it is strikingly apparent and clear that art therapy is significantly more promising as an effective tool for expression, personal growth, and recovery from traumatic events and emotional weight. A more specific and specialized version of therapy, *art* therapy can be molded and designed around each and every individual patient and issue, addressing not only the physical and mental aspects, but also reaching deeper into the emotional and spiritual.

There are two main recognized aspects of art therapy: art *as* therapy and art psychotherapy. (Dalley, 1984, p. 24) In the concept of art *as* therapy, it is believed that the process of creating art is therapeutic in and of itself. Working with one's hands (or feet, or any other body part), whether one uses paint, clay, charcoal, or any other artistic medium, can have intensive healing properties. Art has the ability to calm the artist, and to instill a sense of peace regardless of whether the artist creates a great masterpiece, or simply enjoys the use and manipulation of the medium; creating a final product is not necessary to achieve emotional and spiritual expression and fulfillment. In fact, working with artistic mediums with the intention of rendering a specific finished product could potentially have a hindering effect on the therapeutic process. Sometimes, simply playing and spreading paint around a canvas or getting messy with clay up to one's elbows is all one needs to feel a release from one's current stress or set of problems.

Art psychotherapy places more emphasis on the finished products- paintings, sculptures, drawings, etc., and the interpretation of the symbolism found within them. (Dalley, 1984, p. 12) Many people are unable to fully express themselves verbally; art psychotherapy directly addresses this issue. Children and people with disabilities are able to express themselves, often

without realizing it, through their art in ways that they would never be able to verbalize. The methods, mediums and colors utilized along with the people, places and objects depicted, as well as the manner in which they are depicted, can speak volumes about the artist and their personal situation. Art can be used to communicate, to get an idea across, or to convey an emotion. Art can open a window and allow a glimpse into the life of the artist, enabling the therapist to understand the conflicts or difficulties with which the artist is trying to cope. Through interpreting the symbols within the artworks, art therapists are able to gain a better understanding of the issue and therefore gain the insight and ability to help. (Wadeson, 2000, p.12)

Since prehistoric times when people scrawled and carved images into the walls of caves and all the way onward to modern times, art has been used as a method of expression and communication. Art has been used to depict and worship deities, to describe the zeitgeist world and environment (of any and all time periods), and to portray people and the socio-economic systems in which they existed. Although people have been using art as a form of expression since the beginning of time, it was not until the 1940's that art therapy became an accepted and credible psychological field. Margaret Naumburg, known as the "Mother of Art Therapy", along with Edith Kramer, Hanna Kwiatkowska, and Elinor Ulman were among the first people in psychology to define and separate art therapy as a valid field in itself. (Malchiodi, 2003, p. 8-9)

In the early 1900's, therapists and educators began to take notice and acknowledge the powerful emotion and symbols found within their patients' and students' artworks. Patients suffering from illness, both mental and physical, were using art not only as a distraction from the pain or mental anguish they were experiencing, but also as a visual form of expression. People also began to realize that drawings which were created by children were not merely playful

depictions of the world as they saw it, but were filled with expression and indicative of the levels of the young artists' mental and emotional growth and personal development.

In the 1950's, psychiatrists more broadly recognized the effectively therapeutic properties of practicing art and began implementing art therapy alongside the traditional methods of having their patients talk about their problems, via *talk* therapy. Since then, the field of art therapy has become a wonderful and vitally important branch of psychology, utilized by people in all walks of life as a method of communication and expression, and particularly important to people who are otherwise unable to express themselves or communicate verbally or through the written word. Art therapists use art both as a method of diagnosis, or a way of finding the source of the problem and assessing the situation, and also as a method of treatment- art *as* therapy. Art therapy is now recognized as a viable tool in psychology, holistic healing, and education.

(History & Background, n.d.)

Like any method of therapy, art therapy is designed to help the patient, to seek out the sources of conflict and to address them, to improve the patient's mental health and emotional well-being. Art therapy accomplishes this through encouraging people to create. Art therapists can help their patients understand and overcome their problems through interpreting their creations of artwork. Many people think of themselves as incapable of being artists and often dismiss art as a practical option for them; through practicing art therapy, they are given a marvelous new method of expression which allows people to feel inherently peaceful and free as well as artistically accomplished.

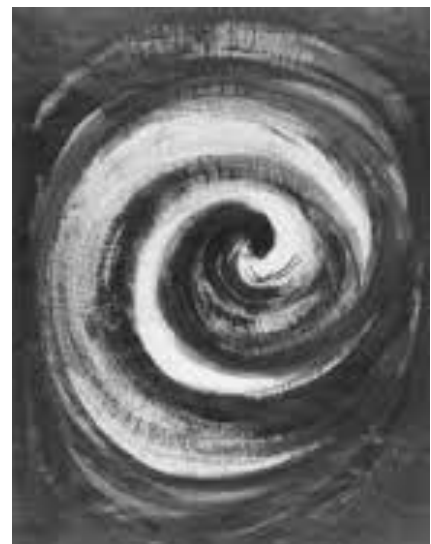
The purpose of expressive arts therapy, or art as therapy, is to employ and take advantage of the virtually endless different modalities and mediums which art has to offer, such as drawing, painting, sculpting, writing, playing, and so on, and through these modalities, find an outlet- a

mechanism or technique which allows one not only to express oneself, but also to gain a sense of release and emotional and spiritual fulfillment. Art possesses natural therapeutic properties; a person who engages in the act of creating something, via artistic mediums, can begin to feel relief from his or her problem without even having to directly focus on said problem- this is what sets art therapy apart from more traditional “talk therapy.” The very act of creating something has a pleasant side effect of being therapeutic or beneficial to the creator. (Rogers, 1993, p. 50)

People practice minimal forms of art as therapy throughout everyday life. People often doodle during a lecture, or while talking on the phone, because doodling is a subconsciously soothing action; it often helps people to focus in addition to its soothing aspects. Without realizing that they are being artistic or creative, people commonly keep journals to help them blow off steam and vent, as well as to aid them in organizing their thoughts. People waiting in a doctor’s office, or a lounge-maybe preparing for a job interview, will frequently stack sugar cubes or magazines. Actions such as these may be viewed as nervous habits or mere distractions, but the results of these actions are often filled with therapeutic power. (Rogers, 1993, p. 7)

In the practice of art *as* therapy, expressive arts therapy, the object is not to create a masterpiece. The object has nothing to do with making something which is fit to hang on the wall or display on the mantel. Through expressive arts, people are able to reach into themselves and pour out whatever feelings and emotions might be bottled up inside of them.

For example, anyone who has lost a loved one,



[https://www.psychotherapy.net/article/ex 1](https://www.psychotherapy.net/article/ex-1)
"Black Wave," Natalie Rogers.

anyone who has known what it is to grieve, knows that words alone are not enough; talking about one's loss is extremely important, but there are no words which can truly express and embody the all-consuming and agonizing feeling of grief. Artistic mediums can help facilitate the expression of the kind of gaping wound that grief leaves on a person's psyche. Through drawing, for example, a person might be able to release some of their pent up pain and emotions without going through the futile struggle of finding the right words. The texture of charcoal or oil pastels scraping and smudging onto the paper, the motion of one's hand and arm pressing and swirling, the dusty and waxy smells, the selection of colors which seem so perfect and accurate without fully being able to comprehend why, can truly allow for emotional expression and release. Through drawing, or any other visual form of expressive therapy, one is able to express, and consequently, expel pain and stress onto a canvas or a page through one's finger tips instead of having to do it verbally out of one's mouth. The resulting image may in fact look like grief, such as Natalie Rogers' *Black Wave* (1993, p. 8), but the important part- the therapeutically beneficial aspect, was simply the act of creation.

Art Therapy for Emotional and Developmental Assessment

In art psychotherapy, there are many accepted, if not standardized, art-based assessments. Some of these include the Draw-A-Man test, the MARI (Mandala Assessment Research Instrument), the HTP (House-Tree-Person) assessment test, the Road Drawing assessment, and the DDS (Diagnostic Drawing Series), as well as many other visual personality tests which are specifically designed to identify different neuroses and other sources of mental and emotional strain such as terminal illness, grief, discriminatory issues, trauma and abuse.

Some of the first cognitive drawing tests were developed by Fritz Mohr, a German psychologist who studied and interpreted the drawings of children, at the turn of the twentieth century. Psychological researcher Florence Goodenough created the Draw-A-Man test, now called the Draw-A-*Person* test, which was originally developed as a method of determining the level of intelligence in children, i.e. the more details included in the drawing, the more intelligent the child. It was then administered to elderly people in a study used to determine an estimate of the intelligence quotient levels of aged adults. (Jones & Rich, 1957) It was later realized, by Goodenough and other psychologists, that the Draw-A-Person test had a great deal more to do with personality, and the values with which a person was raised, than intelligence.

For example, the drawings of children vary a great deal depending on whether the child is a boy or a girl. The drawings of male and female toddlers display very little variation, but as they get a little older, typically around five or six years of age, many differences can become apparent to the viewer. These differences are believed, by some, to do with genetics and biological differences between the sexes, but are more generally attributed to social and environmental reasons- the way the children are brought up.

Throughout most societies around the world, boys and girls are raised differently, and brought up to believe, to varying extents, that men and women are inherently different and therefore have different roles to fulfill in society. These concepts have early effects on the artwork of children. When asked to draw a person, most girls will frequently draw what they would consider to be a pretty woman, accentuating details such as stylized hair, long eyelashes, and patterned clothing. Boys have a tendency to be fascinated with more “macho,” grotesque and grisly subject matter, often depicting athletes, monsters, trucks, eyeballs, dinosaurs and other typical “boy interests.” (Edwards, 1989, p. 72)

The mandala is traditionally a Buddhist phenomenon; Carl Jung, one of the first, most recognized and ground-breaking psychologists in the history of the field, referred to the mandala as “the centre of personality, a kind of central point within the psyche, to which everything is related, by which everything is arranged and which is, itself, a source of energy.” (Takei, 2010) Although there are many skeptics about this particular belief, due to the concept that different cultures around the world may use different symbols to represent various feelings and ideas, many people believe that there are vast numbers of symbols which are universal and brimming with profound meaning. Jung developed a series of “archetypes” called the Archive for Research and Archetypal Symbolism (ARAS) which catalogs and defines the symbols which are depicted within artwork around the world and throughout time. ARAS.org is an excellent modern resource which provides a wealth of information about these cataloged symbols. (aras.org) When practicing the MARI method, the patient is asked to draw a mandala, generally a square, circle or other geometric shape, which contains various symbols, shapes and colors which are significant to the patient, either consciously or subconsciously, which the therapist can subsequently interpret.

The House-Tree-Person assessment is a projective technique used by psychologists, psychiatrists, and other mental health professionals; it helps to shed some light on the personality, developmental stage, and emotional/mental state of the artist. The therapist asks the patient to draw these three subjects, and by examining the ways in which they are depicted and their relationships to one another, the therapist is able to determine a great deal about the personality and perceptions of the patient (House-Tree-Person, n.d.). The HTP test is also used to help determine the level of brain damage which a patient may have suffered; when different areas of the brain are damaged, people are often unable to render commonplace images in ways

that are considered recognizable or the patient may portray the three subjects in ways which are not typical of their age group or level of cognitive development.

In the Road Drawing assessment, the patient is simply asked to draw a scene featuring a road. The art therapist can then interpret the drawing with the idea that the road is a sort of proverbial “road of life.” Without knowing it, the patient will include many symbols and concepts which exemplify their perspectives, attitudes, and views of life- where they have been, where they are now, and where they think they may be going. (Art Therapy, 2009)

The Diagnostic Drawing Series is used by art therapists to help give their patients a sense of liberation through creative expression- art as therapy combined with art psychotherapy. The patient is asked to first draw anything they please, often with a soft and blend-able medium such as chalk pastels which are very user friendly, even to the inexperienced artist. Secondly, the patient is asked to depict a tree, any kind or variety of tree, in any way they see fit. And lastly, the patient is asked to try to depict how they are feeling, using non-representational shapes, colors, and lines. The therapist can help the patient to discover and begin to address any unconscious problems which may be harming or hindering them at present. (Art Therapy, 2009)

Art Therapy and the Brain

For quite some time, art has been acknowledged as beneficial to its creators and viewers on emotional and mental levels, but more recently, studies have been done to link art therapy with physiological and neurological effects. This is extremely exciting and important to the field of art therapy and psychology in general, because it displays physical proof of the effectiveness of art therapy. In the late 1990’s, studies employed the use of biofeedback mechanisms which measured body temperature, blood pressure and pulse rates of school-age students participating

in a mandala drawing study, and found that this therapeutic practice had measurable physical impacts on the participants. (Malchiodi, 2003, p. 17)

Studies continue to be done on the effects of art therapy on the human brain and the neurological responses of art therapy patients. The physical act of participating in expressive arts therapy can stimulate the limbic system of the brain, which is related to sensory memories of trauma and stressful occurrences in a person's life. (Malchiodi, 2003, p. 20) Practicing art as therapy can also increase dopamine and serotonin levels in the brain which effect the patient's mood and level of contentment, resulting in a sensation of serenity and peacefulness. (Schacter, Gilbert, & Wegner, 2009, pp. 73-120)

Effects of DV on Women and Children- Common Mental and Emotional Disorders



Domestic violence can be defined as the misuse of power exerted by one adult in a relationship to control another being; violence and manipulation are used in order to establish power, and to wield control over another individual. Domestic violence and abuse can be physical, psychological, social, financial, or sexual.

(ncbi.nlm.nih.gov) Frequently, people are subjected to multiple manifestations and combinations of abuse simultaneously.

Domestic violence can be perpetrated against all genders, of all ages, but the people who are most commonly victimized are women and children.

Abuse can happen sporadically, only one or two times, or it can be systematic and cyclical. Studies have shown that it takes an average of 7 attempts for a woman to leave an abuser before she is able to fully go through with it, and successfully leave without returning. (newlyweds.about.com)

There are many long-term and short-term effects of abuse: physical, which may take the form of bruising, lacerations, burns, broken bones, etc., as well as pervasive mental and emotional trauma, resulting in several common disorders. These disorders require immediate, and sometimes on-going, medical attention, and often, psychological treatment, including the use of art therapy.

Some common afflictions, injuries, and effects experienced by women who are subjected to domestic violence include (but are not limited to) bodily harm, gynecological and reproductive problems, temporary or permanent disabilities (frequently resulting in the loss of the ability to work and earn an income), depression, dangerously low self-esteem, and suicidal ideations. (ncbi.nlm.nih.gov) Due to the physical, mental, emotional, and economical impairments caused by domestic violence, many women experience an interruption or halt of their education, a disruptive flight or relocation, and the loss of their employment; these detrimental effects cause many women, and their children, to be plunged into poverty and struggle.

Children who experience, or even *witness*, domestic violence, are likely to be afflicted with developmental, emotional, and behavioral problems and disorders, which have the potential

to affect them for the rest of their lives. Children who witness domestic violence, or who are victimized themselves, can develop conduct disorders, such as ODD (Oppositional Defiant Disorder) which can result in extreme physical aggressiveness, and engaging in violent and illegal activities. (Kring, 2012, p. 426)

Children and teenagers who grow up in abusive households are more likely to respond with violent reactions (in public or at school, for example), abuse drugs, commit violent crimes, become abusers later in life, or commit suicide. (ncbi.nlm.nih.gov)

Victims of domestic violence, of all genders and ages, are all too commonly afflicted with PTSD (Post Traumatic Stress Disorder), for which there is no known cure. (psycnet.apa.org) Mental health professionals, and their clients, must strive to develop skills which help them to cope with this disruptive and debilitating disorder.

Practicum: Activities and Positive Outcomes

Throughout my Practicum experience, I have designed and applied several art therapy directives which have been specifically developed for people belonging to the demographic of women and children from backgrounds of domestic violence and abuse, most of whom were residing in a domestic violence crisis shelter at the time of our sessions together. Although some are more specific than others (having been designed for specific people, or to coincide with certain things going on in the clients' lives or environments), the common purpose for all of these directives and techniques has been, and continues to be, to help the clients to express themselves, and to provide them with a much needed modality of coping, as well as to provide them with a sense of safety and security, so that they could feel comfortable to engage in the

creative process, and to reflect upon their thoughts and emotions without fear of judgment or repercussion.

“A Peaceful World,” incorporated the media of origami paper, scrap book paper with circle templates, and water soluble oil pastels. The population being served included women and children from domestic violence backgrounds, although this directive is applicable to most any demographic of people.

Clients were directed to fold an origami dove (tutorial was provided); the use of origami was intended to set the tone of the session as being focused, quiet, and thoughtful. Origami requires concentration, precision, and effort; ideally, it will help to temporarily clear the clients’ minds of any stress inducing thoughts and worries. The clients discussed the symbolic characteristics of the dove: peace, fragility, freedom, faith, etc.

Clients were also led through a discussion of the relevance of this symbol and how it could be compared to that of a child, or an individual who is seeking a safe and peaceful existence. Verbal focus on peace and safety was designed to help the clients to formulate ideas of what they wish to strive for in their lives, and potentially, the lives of their children.

After the dove had been created, the clients were directed to create a safe place, a peaceful world, in which the dove could live. The clients were directed to choose colors which represent happiness, contentment, and peacefulness to them, and the idea of a “safe place” was left up to each individual’s interpretation. This interpretation could be literal, figurative, or completely abstract and expressive. The creation of peaceful imagery was designed to illicit calmness in the clients during the creative process, and the finished piece could be kept and later

be used as a visual reminder and a source of soothing thoughts. The use of soft, smooth, vibrant drawing medium was intended to add a pleasant, tactile benefit to the experience.

Upon the completion of this directive, clients were asked to present their worlds and to say a few words about what makes them feel safe and peaceful, and how they can work to apply these ideas to their current lives and situations. Many clients utilized some of the same colors; they expressed that they had similar notions about certain colors (such as light blue and green) having calm and peaceful associations. One of the mothers who participated in this activity expressed that she wished it was this easy to create a safe and beautiful world for her children, and that she wanted to try to do just that.

“A Letter to My Future Self,” incorporated the media of envelopes, scissors, magazine clippings, glue sticks, stationary, pens and other writing utensils. The population being served included women and teenagers from domestic violence backgrounds who were residing at a DV crisis center at the time.

The clients were directed to select and cut out a handful of hopeful and positive words from magazines; the light and simple task of finding and cutting out positive words is approachable for those who feel they are lacking in artistic ability. These words provided a source of inspiration for a demographic of people who often have difficulty thinking of themselves as being worthy of positivity and happiness. After between 5 and 10 words had been selected, the clients were directed to select a writing utensil and paper, and to write a letter to their future selves. “Write about your hopes and wishes, give positive advice and encouragement, remind yourself of how far you’ve come, and that you’re a strong survivor-capable and resilient. Write about where you hope to be in the future.” Bibliotherapy techniques

were employed to engage the clients in a self-soothing activity of dragging and doodling a pen across their papers, and to provide a safe and private way to express their hopes and wishes for the future.

Clients were encouraged to apply and glue the positive word magazine clippings intermittently throughout the letter, where appropriate.

When finished, the clients were directed to seal the letters into their envelopes and address it to themselves, to be opened in 1 year. The sealed letter can be kept as a physical reminder that the clients deserve to be happy, and have every right to strive for a happy future, and in 1 year's time, the clients can read the letter and compare it to their current lives- they can reflect on how they've worked hard to get to where they are.

Throughout the process, the clients expressed that it was a strange and interesting sensation to write a letter to themselves, as though their future selves were a different person- and hopefully and happier and more successful one. Several clients expressed excitement and anticipation at re-visiting this letter in a year; they wondered if they will have achieved some of the goals that they outlined in their letters. The clients discussed where they thought the best place would be to store their letters; ideas included in photo albums of their kids, in their Bibles, and in their jewelry boxes.

“Handmade Positivity Journals,” incorporated the media of construction paper, scissors, drawing medium, pens, glitter glue, and staplers. This group consisted of two children, ages 6 and 11, who have backgrounds of domestic violence, as well as of having witnessed domestic violence perpetrated against their mother.

The clients were given materials and guided, step-by-step, through the journal making process. The clients began by folding and cutting the pages of their journals from construction



paper, and were then directed to use a stapler to create the spine of the books. The act of following step-by-step instructions required the clients to focus all of their attention on the task at hand, which was intended to help them to dismiss any thoughts or feelings which may have been causing them distress at the time, as well as to help them to develop peaceful interaction skills through following directions and sharing art supplies.

When the books were finished being constructed, the clients were

directed to decorate the covers and to, over time, fill the pages with positivity (inspirational quotes, collage, doodles and drawings, etc). The intent of this directive was to provide the client with a handy mode of expression which they can continue to source on later dates, either to add new positive insights, or to re-read and to gain positive fulfillment from the work of art that they have previously created. The act of teaching the children how to create these journals was also intended to give them a valuable skill, which they can continue to duplicate, and which they can

draw on to help further a sense of independence, as well as to use as a tool for emotional regulation.

Both clients expressed that they had had a lot of fun with the book making process, particularly decorating the cover, and that they were excited to continue to add drawings and other media, such as stickers, on later dates. The clients expressed that having an art project which they could continue to work on without adult supervision or assistance was, reportedly, a great idea.

The mood and demeanor of the clients was markedly changed from being anxious and irritable at the beginning of the project, to being calm and expressing happiness and a sense of accomplishment at the completion of the project.

“Peace Wreaths,” incorporated the media of construction paper, paper plates, glue sticks, pompoms, ribbons, and *washable* markers. The population which participated in this art therapy directive consisted of children between the ages of 3 and 12 who were living in a DV crisis shelter at the time.

The clients were directed to trace their hands 7 to 10 times on colorful construction paper. While they were working, they were asked to think about the meaning of ‘peace’ - where it comes from, how people can make more of it, locally and throughout the world. The intention of this discussion prompt was to encourage the children to begin thinking about their own ability to influence, inspire, and work toward creating and facilitating peaceful environments at an early age, and to hopefully instill a desire to create and exist in an environment which contains little or no violence.

Possibly due to some of the children being so young, and therefore having a more simple and personal perception of the world, some their responses were very microcosmic, referring to

their own families- one child said, “don’t hit your brother,” and thereby brought peace down to a level of personal responsibility. Once the tracing was done, the kids were directed to carefully cut them out (some assistance was necessary at this point for the younger children). After all of the hands were cut out, the clients were directed to glue them around the outside of the paper plate, with the fingers on the outside edges to achieve the effect of foliage on a wreath. When they were finished, the kids were encouraged to write a message in the center of the wreath, and to further embellish and decorate with mixed media.

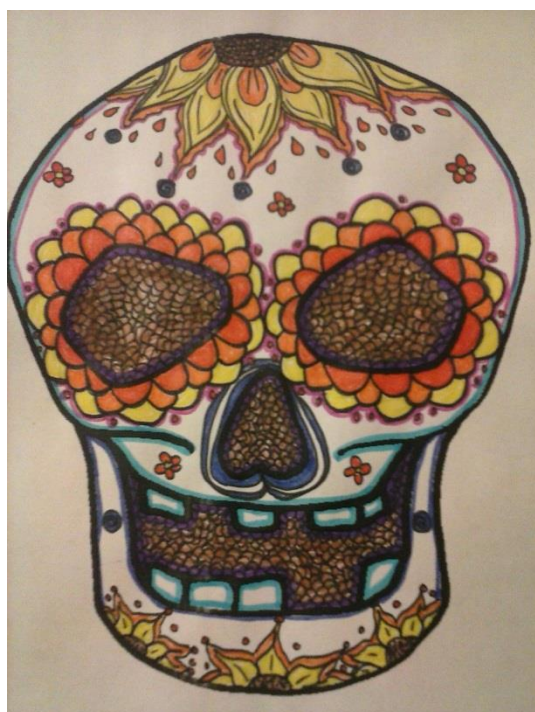
The actual creation of the physical wreath was a simple and fun, according to the clients, and they seemed to be taken aback by the deeper level of discussion- peace is a complicated subject for adults, let alone for children, but they concentrated and tried their best to come up with thoughtful and sincere answers. The intention of this directive was to plant a mental seed in the minds of these young clients which could grow to help them work toward a more peaceful world in their futures.

“Sugar Skulls,” incorporated the use of printed templates of skulls, and the media of markers, colored pencils, and crayons. This was a family therapy activity- the demographic of this group consisted of wide range of ages (age 5 to adult), mothers and their children who were residing at a DV crisis shelter at the time.

The intention of utilizing printed templates was to make the project approachable to people of all ages, especially targeting those who felt that they did not possess any viable artistic ability. While the templates were distributed, and drawing media were selected, the group was lead through a discussion of the historical and cultural significance of the sugar skull to El Dia De Los Muertos (Day of the Dead), a traditional Mexican holiday; the intent of this discussion

was to create a valuable learning experience as well as a fun and relaxing coloring project, and a functional holiday decoration for the clients' rooms at the shelter.

While the clients worked, they were lead through a discussion about the juxtaposition of something being both morbid and beautiful; the possible action of taking something ugly and



making it beautiful was the theme of this project. The clients were asked to discuss the possible implications of this concept to their own current situations.

During and after the creative process, clients discussed examples in their lives when something beautiful came from something dark or ugly- the positive outcomes of difficult or tumultuous situations.

This directive was intended to provide a healing metaphor which can be instrumental in helping people to find peace within themselves about

traumatic or negative experiences from their pasts, and it was also a great opportunity to teach the kids about another culture's holiday celebratory traditions, as well as to give them a modality to decorate, personalize, and beautify their surroundings while staying in a strange and unfamiliar place.

“Inner Self-Portraits,” incorporated the use of mixed media- acrylic paints, magazine collage, paper mache masks, glue, feathers, as well as other miscellaneous media. The population which participated in this group consisted of a small group of adult women who were all survivors of domestic violence and/or sexual abuse, which had occurred in their pasts. These women were no longer living in abusive situations, but they participated in this art group in order

to seek out continued therapeutic benefit through the use of art therapy techniques, as well as to meet and spend time in the presence of other people who had had similar experiences and were therefore able to empathize and relate to what they had been through.

The clients were directed to use a variety of media to create a portrait of who they really were, on the inside. Suggestions of how this could be accomplished were given, such as, “Choose images, colors, and textures which have personal meaning and symbolism to you.”

During the creative process, the clients talked openly about things that were going on in their personal lives which had been causing them some distress; some of this discussion had little to do with the project at hand, but it was encouraging to know that they felt comfortable to share in this setting. One client seemed upset about something, and she explained that her mother was experiencing health issues and that she was concerned. She worked mainly with magazine clippings and mod podge; she seemed very comfortable and content with collage and the creative process seemed to have a genuinely soothing effect.

Another client made her “Inner Self-Portrait” an acrylic painting on canvas. She used broad brush strokes and warm pastel colors. She discussed her plans of



putting a vague figure of a woman in the foreground with fluttering pieces like flower petals floating toward her to form her body; she explained that this imagery represented the healing transformation that she had experienced while learning to cope with the abuse that she had experienced as a young woman.

The clients expressed that the task of finding symbols and words to describe their inner selves was pleasant and calming. The clients also expressed that they continue to feel comfortable and happier while engaged in the creative process, as well as accomplished after having completed the projects.

“Scribble Drawing,” incorporated the media of drawing paper, crayons, oil pastels, and markers. The population that participated in this project consisted of women and teenagers who were residing at a DV crisis shelter at the time.

The clients were directed to take a piece of paper, select a drawing medium, and to fill the entire paper with completely random scribbles; clients were directed to use their non-dominant hand to complete the scribble if they had difficulty with the concept of creating non-representational scribbles. The directive of creating scribbles was intended to allow the clients to loosen up, relax, and to feel free and easy with their movements, as well as to benefit from the tactile experience of scribbling with soft drawing media.

After scribbles were completed, clients were directed to find shapes and symbols within the scribble; they had essentially created their own Rorschach tests, and were then asked to find meanings which could potentially help them to gain some insight of their emotional states at the time. One client found an executioner’s mask (the way she imagines they would look, from medieval times), and another client found a woman’s face, looking at a poppy.

The clients expressed that it was entertaining and interesting to try to pick out shapes and their possible interpretations from their scribble drawings- like finding meaning in the chaos of life. Through creating and interpreting their own works, the clients were able to reflect and begin to sort out some of the tumult of emotions they had recently been experiencing in their lives.

“See Yourself through Someone Else’s Eyes,” incorporated the media of drawing paper, crayons, oil pastels, and markers. The demographic for this project consisted of a small group of women who were currently residing in a DV crisis shelter, and who had all expressed that they were experienced makers of art.

The clients were directed to draw a portrait of the person sitting across from them; this was a small group who were comfortable with each other, and who had expressed interest in portraiture. The intention behind directing the clients to draw portraits of other people, rather than of creating self-portraits, was to create an interesting challenge which required extreme concentration and focus (thereby temporarily taking their minds off of their current worries), as



well as to give the person being drawn some perspective on how they are viewed by other people.

While drawing and rendering likenesses with crayons and oil pastels, the clients chatted about her lives and situations. When the drawings were completed, the clients presented their portraits to the people who had posed for them, and they engaged in a discussion of their reactions. One client began to cry, at which point the artist started to apologize (explaining

that she did not draw very often anymore, and offered try again in order to capture a better likeness). The client who was crying explained, “You made me look so strong,” to which the artist replied, “Because you are.”

This directive was intended to help the clients to gain a greater understanding of themselves through getting to know how they are viewed by other people. People who are subjected to domestic violence and abuse often have extremely low self-esteem, and their sense of self-worth and confidence can be boosted through reassurance from people outside of themselves and their own doubts and thoughts.

“Helping Hands,” utilized the media of drawing paper, colored pencils, crayons, and markers. The demographic of this group consisted of women and children, ages 7 to adult, who were currently residing in a DV crisis shelter; this was a family therapy activity in which mothers and their children participated.

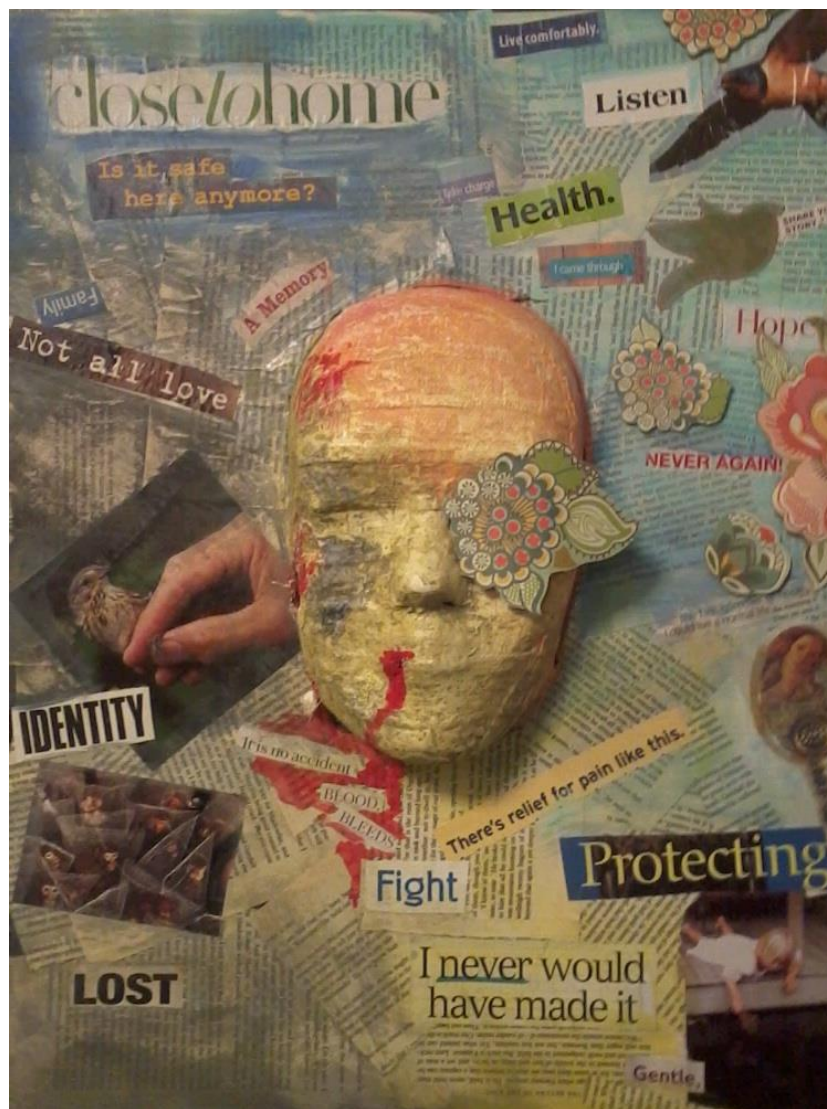
The clients were directed to trace their hands multiple times in different directions on the same sheet of paper, and then to fill in the resulting shapes created by the overlapping hand outlines. The women and children were encouraged to trace the hands of all of the family members who were present on the same sheet of paper to create a collaborative work of art. The clients were directed to use a variety of colors and mediums, and to also incorporate meditative doodling to fill in the shapes. The clients were encouraged to take their time and work slowly, and to enjoy the soothing properties of the creative process. Without any prompt, a couple of the women talked about the reasons that they were in shelter- they talked about their recent abuse.

The completed images were vivid and beautiful abstract artworks, designs for stained glass windows or mosaics. One of the teenagers in the shelter, a child of one of the participating women actually made the comment of, “Wow Mom, it looks like something a rich lady would

have hanging in her house,” implying that he thought his mom’s art looked like a credible abstract artwork, possessing value.

The clients expressed that they seemed to get a deep healing and meditative benefit from the creative process. The clients also expressed that they were happy to have a collaborative artwork which would commemorate a special memory with the mothers and their children. This is a great directive for people who feel that they have no artistic ability because tracing hands and coloring the spaces is simple and easily approached. Also, the finished products are very beautiful- an added bonus to the benefits of the creative process.

“Unmasking Me/Unmasking the Future,” incorporated the use of mixed media- paper mache masks mounted on foam-core board, silk flowers, twigs, wall-paper swatches, feathers, magazine clippings, acrylic paint, and more. The demographic of the participants of this directive were women from backgrounds of domestic



violence and sexual abuse.

The clients were each provided with a paper mache mask which was mounted on a large piece (approximately 16x20”) of black foam-core board. Mixed-media was employed in order to provide the clients with a broad range of options to help bring their creative ideas to fruition. The clients were directed to decorate and embellish their masks with mixed-media in such a way that it would describe who they were, and who they wanted to be in the future. The intention of this directive was to provide the clients with a template that allowed for the outlet of emotional expression, as well as for prompting some reflection about what they wanted for themselves in their futures.

Many of the masks featured a duality- expressing both darkness (depression, loss, fear) and lightness (hope, happiness, positive outlooks).

“Turning Over a New Leaf,” utilized the media thick paper leaf templates, markers, colored pencils, glitter glue, magazine words. The population of the group which participated in this activity consisted of women and children, ages 8 to adult, who had backgrounds of domestic violence and were residing in a DV crisis shelter at the time.

The clients were directed to think about something that had previously gone wrong for



them, and how they wanted things to unfold for them in the future. On one side of the leaf, the clients were directed to visually depict one or some of the negative experiences they had had, and on the other side of the leaf, they were directed to visually depict a happy resolution to the problem(s) or negative

experience(s).

The intention of this directive was to help the clients to isolate the negative occurrences of their lives in a way that made them seem smaller and more manageable, and to then think about possible resolutions and happy futures for themselves. This thought process, as well as the benefits of engaging in the creative process, was designed to help the clients to develop a way of thinking that could aid them in finding emotional strength and healing from within.

“Body Outlines: What we look like on the inside and the outside,” incorporated the media of body outline templates, markers, crayons, and colored pencils. The demographic which participated in this activity consisted of two children, brother and sister, ages 6 and 11, who have backgrounds of domestic violence.

The clients were directed to use drawing media to visually depict how they felt that the world perceived them, i.e. how they looked on the outside, on one side of the paper, and to visually depict how they felt on the inside, i.e. their inner emotional selves. The intention of this directive was to help the clients to become more aware and mindful of themselves as individuals, and to further help them to develop coping skills and emotional regulatory skills.

The 6-year-old took a literal approach to the directive and drew internal organs on the inside. This could be interpreted as an indication of his developmental stage; he had difficulty with the abstract concept of representing his inner emotions in a visual manner, which requires a more complex thought process. The 11-year-old filled the inside image with their favorite colors and wrote words all around the body outline which represent things that she is interested in: dancing, swimming, fashion, etc. She demonstrated that she strongly identifies herself with her interests, passions, and hobbies.

For both clients, the outside, or external self, imagery was very literal and surrounded by favorite objects, archetypally happy symbols (such as hearts, stars, and smiley faces), and brightly colored clothing. The 11-year-old client depicted herself with a happy facial expression and placed extra visual importance on her hair and eyes. The 6-year-old client also portrayed himself with a smile, but included furrowed, angry looking eyebrows; perhaps this was an acknowledgement of his lack of self-calming skills when upset.

The use of templates for this activity made the directive less daunting and much more approachable, allowing for a wide range of artistic ability. The concept of visually depicting the external perception of the self as well as the internal emotional self is an excellent reflective practice that can help clients to become more aware of their feelings, and therefore help them to develop more control and confidence regarding them.

“Safe Place,” incorporated the media of drawing paper- black and white, and water soluble oil pastels. The population of this group consisted of children, ages 4 to 12, who were currently residing in a DV crisis shelter.

At the beginning of the session, this group was directed to draw and color freely, whatever content they chose, and to have fun playing with the drawing medium. The water soluble oil pastels are an especially soft and blend-able medium; they soft, smooth texture of this medium was intended to create a pleasant and soothing sensory benefit for the participating clients. Beginning the session with free drawing was intended to allow the clients to explore the medium, and to warm up and prepare for a more mentally engaging directive. There were several young children who participated in this particular activity, so the free and fun directive of scribble drawing helped them to gain enthusiasm about the prospect of engaging in the creative process.

At one point, the big box of pastels was accidentally knocked onto the floor by one of the kids, resulting in a loud crashing sound and one of the children responded with extreme fear (quite possibly exhibiting symptoms of an undiagnosed case of PTSD); the client dove under the table, covered her ears, rocked back and forth, and repeated the sounds “nee no nee no.” The other children were calmly told that it was ok, and to please keep coloring or to feel free to leave the table if they no longer felt comfortable.



I joined the distressed child under the table and proceeded to pick up the fallen pastels, saying reassuring words such as, “it’s ok, no harm done, accidents happen,” in order to help put the child at ease, and to let her know that she was not in any trouble, and therefore, there was no need to fear any potentially violent repercussions. After a little while, the child put her hands down. A piece of paper and a pastel were placed in front of the child, and she was asked, if/when she felt comfortable, if she would like to draw something that made her feel safe. The resulting image was a self-portrait with me (the art therapy intern), in the shelter (the shelter was very small and fit snugly around the two figures).

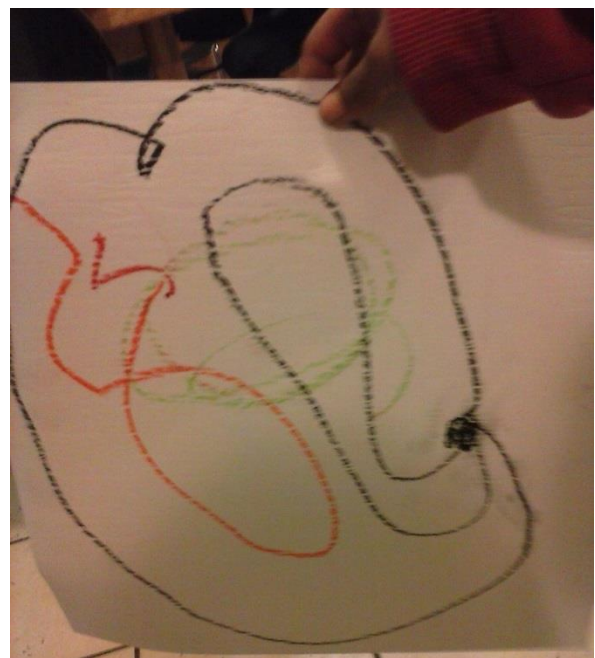


Other children chose to follow this ‘safe place’ directive; one child created a habitat for her stuffed animal, projecting her desire for safety and security onto the inanimate, yet sentimentally relevant object of her stuffed animal- a dog named “Furball.” Another child drew plates of food, expressing his notion that regular, and complete, meals represented safety for him; this visual representation of plates of food could also be indicative that he had not always access to regular meals in the past, an insight which could assist

in the creation of more person-centered directives in the future for this particular client.

This was an impromptu directive, spontaneously designed in order to address a client’s intense fear response to an unexpected calamity proved to be a tremendously powerful expressive outlet for all parties involved. The directive of creating, or visually depicting, a representation of safety helped the clients to think about the concept of being and feeling safe, which was, in turn, a great modality for coping and self-soothing which can continue to be drawn upon at future dates.

“**Mother’s Day Cards,**” incorporated the use of the media of drawing paper, crayons, card stock, scrapbooking paper, and markers.



The demographic who participate in this activity consisted of primarily children, ages 6 and up, and some adult women, who were currently residing in a DV crisis shelter.



The clients were directed to create handmade cards for their mothers. Different examples of traditional folded cards, as well as ideas of what sort of messages could be written inside, were discussed. The idea behind this directive was to give kids (of all ages) an opportunity, and a creative outlet, to express their gratitude and respect for their mothers and primary caregivers. The

clients were encouraged to get as creative and expressive as possible, and to make their cards truly special with individual and stylized drawings and other original artwork.

A lot of the kids took this project very seriously; one boy asked how to spell 'beautiful' and explained that it was very important that it was spelled correctly. He expressed that he needed his mom to know just how important she is to him, and that he knows that she struggles with self-esteem issues (a very astute observation for a child of 8 years). One girl decided that a traditional single folded card was not sufficient for everything that she wanted to include, so she made a small booklet for her mom, filled with drawings and messages on every page. Through providing an expressive modality, and a broad range of art supplies, the clients were able to create a card for their mothers, which was deeply heartfelt. This activity was beneficial not only

to the clients who participated, but also to the recipients of the beautiful and profoundly personal gifts that were created.

Conclusion

Although art therapy is often defined in the two separated schools of thought or psychological approaches- art *as* therapy and art psychotherapy, many psychiatrists, psychologists, and therapists (and other professionals in the mental health field) find that combinations of both art as therapy and art psychotherapy result in the highest therapeutic success rates for their patients; the use of art as a form of therapy and communication is also renowned by educators and parents around the world.

Art therapy is an effective modality for helping people to cope with symptoms of a wide array of mental and emotional disorders commonly caused by exposure to, and the victimization from, domestic violence. In the cases of survivors of domestic violence and/or abuse, art therapy techniques can be utilized to enable the expression of their emotions through the use of visual arts (and a variety of other multi-modal artistic approaches), as well as to develop beneficial coping and self-soothing skills, both consciously and unconsciously, through the intrinsic sensory benefits of engaging in the creative process.

Art therapy is tremendously beneficial to the people who practice it; art therapy acts as a tool for expressing feelings and emotions, it reveals unconscious pains and fears, and it has physiological effects which are capable of bringing people a sense of relief from multitudes of mental, emotional, and physical ailments. Artworks which are created via the multi-modal and varied art therapy approaches are capable of opening a window into the artists' minds and souls.

Art therapy expedites healthy, beautiful expression, aiding and facilitating personal growth and overall well-being.

In the case of women and children with backgrounds of domestic violence, a demographic which requires the utmost attention, awareness, and future prevention, art therapy directives can be specifically designed and deliberated to enable and assist in the healing process. In other words, for survivors of abuse and domestic violence, art therapy has innumerable positive effects and lasting benefits.

References

- Art therapy. (2009, December 4). *Counselor.org*. Retrieved April 5, 2011, from <http://www.counselor.org/art-therapy.html>
- Barber, V. (2002). *Explore yourself through art*. New York, N.Y., U.S.A.: Plume.
- Burt, H., Schaverien, J., & Lala, A. (2011). *Art therapy and postmodernism creative healing through a prism*. London: Jessica Kingsley Publishers. Retrieved from <http://public.eblib.com/EBLPublic/PublicView.do?ptiID=770592>
- Center for History and New Media. (n.d.). Zotero Quick Start Guide. Retrieved from http://zotero.org/support/quick_start_guide
- Dalley, T. (2008). *Art as Therapy: An Introduction to the Use of Art as a Therapeutic Technique*. Routledge.
- Edwards, B. (1989). *Drawing on the right side of the brain: a course in enhancing creativity and artistic confidence* (Rev. ed.). Los Angeles: J.P. Tarcher/Putnam.
- History & background. (n.d.). *American Art Therapy Association*. Retrieved March 29, 2011, from <http://www.americanarttherapyassociation.org/aata-history-background.html>
- House-tree-person est. (n.d.). *Encyclopedia of Mental Disorders*. Retrieved April 5, 2011, from <http://www.minddisorders.com/Flu-Inv/House-tree-person-test.html>
- Jones, A. W., & Rich, T. A. (1957). The Goodenough draw-a-man test as a measure of intelligence in aged adults. *Journal of Consulting Psychology*, 21(3), 235-238. Retrieved March 29, 2011, from the PsycARTICLES database.

- Kaur, R., & Garg, S. (2008). Addressing Domestic Violence Against Women: An Unfinished Agenda. *Indian Journal of Community Medicine : Official Publication of Indian Association of Preventive & Social Medicine*, 33(2), 73–76. doi:10.4103/0970-0218.40871
- Kilpatrick, K. L., & Williams, L. M. (1997). Post-Traumatic Stress Disorder in Child Witnesses to Domestic Violence. *American Journal of Orthopsychiatry*, 67(4), 639–644. doi:10.1037/h0080261
- Kring, A. M., Johnson, S. L., Davison, G. C., & Neale, J. M. (2012). *Abnormal psychology*. Hoboken, N.J.: John Wiley & Sons
- Malchiodi, C. A. (2003). *Handbook of art therapy*. New York: Guilford Press.
- Barber, V. (2002). *Explore yourself through art*. New York, N.Y., U.S.A.: Plume.
- Rogers, N. (1993). *The creative connection: expressive arts as healing*. Palo Alto, Calif.: Science & Behavior Books.
- Rubin, J. A. (1999). *Art therapy: an introduction*. Philadelphia, PA: Brunner/Mazel.
- Rubin, J. A. (2005). *Child art therapy*. Hoboken, N.J.: John Wiley. Retrieved from <http://search.ebscohost.com/login.aspx?direct=true&scope=site&db=nlebk&db=nlabk&AN=131941>
- Rubin, J. A. (1984). *The art of art therapy*. New York: Brunner/Mazel.
- Schacter, D. L., Gilbert, D. T., & Wegner, D. M. (2009). *Psychology*. New York: Worth Publishers.

Schroder, D. (2005). *Little windows into art therapy small openings for beginning therapists*.

London; Philadelphia: Jessica Kingsley. Retrieved from

<http://search.ebscohost.com/login.aspx?direct=true&scope=site&db=nlebk&db=nlabk&AN=129935>

Signs of an Abusive Marriage and How to Get Help for Domestic Violence. (n.d.). *About.com*

Newlyweds. Retrieved May 10, 2014, from

http://newlyweds.about.com/od/gettingalong/a/domesticviolence_3.htm

Takei, M. (2010, August 15). Information about MARI. *MARI Creative Resources* . Retrieved

March 29, 2011, from <http://www.maricreativeresources.com/information-about-mari-mandala-assessment-research-instrument/>

Therapy. (n.d.). <http://www.apa.org>. Retrieved May 10, 2014, from

<http://www.apa.org/topics/therapy/index.aspx>

Wadeson, H. (2000). *Art therapy practice: innovative approaches with diverse populations*. New

York: Wiley.

Walker, L. E. (1989). Psychology and violence against women. *American Psychologist*, 44(4),

695–702. doi:10.1037/0003-066X.44.4.695

What Is Art Therapy? (n.d.). *About.com Psychology*. Retrieved May 10, 2014, from

<http://psychology.about.com/od/psychotherapy/f/art-therapy.htm>