ART THERAPY, WOMEN AND TRAUMA IN A THERAPEUTIC COMMUNITY

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“IN MY BEGINNING IS MY END.”

T.S. Eliot (Eliot, 1943)
SHARON*

Under 18

- Physically & Emotionally abused: Degraded, slapped, hit and pushed
- Sexually abused: By uncle
- Mother: Had mental illness, threatened by husband
- Father: Problematic drinker, victim of abuse
- Parents: Separated

* Sharon: a fictional character
WHAT ARE THE CHANCES?

Of Sharon growing up and becoming addicted to some substance?

- 1 in 100 / 1%?
- 1 in 10 / 10%?
- 1 in 1 / 100%?
700% - 1000% CHANCE

The % increase of becoming addicted to substances, if you live through significant Adverse Childhood Experiences (ACE’s)

(Felitti, 2004)
SHARON

Now

- Homeless
- 28 years old
- 3\textsuperscript{rd} Time in treatment
- Problematic heroin use
- 2 children, 8 + 10, in care
- Significant health problems
Research aims: How can art therapy help someone like Sharon?

To look at:

The value and challenges of art therapy in a women only therapeutic community, using a trauma-informed approach.
THE ELEMENTS OF THIS STUDY

Art Therapy

Women

Trauma

Therapeutic Community
METHOD

• Eight x 2.5 hour art therapy groups over a two and a half month period, 20 hours total.
• Sessions were semi-structured.
• Semi-structured questionnaires were completed towards the end of the course.
• Themes derived and coded.
• Results verified and discussed with group.
RESULTS: 4 THEMES

1. Non-verbal as gateway
2. Trauma - Informed
3. Client - Practitioner friendly
4. Skills and outcomes
RESULTS: 4 THEMES

1. Non-verbal as gateway
   - Suitable for hard to reach clients
   - Reaching unmet needs
   - No experience necessary
   - Creative process

2. Trauma Informed
   - Creating a safe space
   - Dealing with feeling
   - Peer support
   - Facilitator support

3. Client-Practitioner friendly
   - Relationship building
   - Peer collaboration
   - Graduated approach
   - Ready engagement

4. Skills and outcomes
   - Self-defined issues
   - Issue ice-breaker
   - New way of talking
   - Accessible visual Outcomes
   - Sustainable processing

1. Non-verbal as gateway
2. Trauma Informed
3. Client-Practitioner friendly
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THEME 1: NON-VERBAL AS GATEWAY

- **Accessible:** Suitable for hard to reach clients
- **Can by-pass vocabulary:** Can reach unexpressed needs
- **Beginners welcome:** There is no experience necessary
- **Artistic:** It’s a creative process, participants become artists

Art Therapy is not just about the art produced, it is about the opportunity and intention to create, the expression itself, the process of the artist engaging with the materials in the creation of a piece of work, and then reflecting on it.
THEME 2: TRAUMA-INFORMED – 5 WAYS TO DO IT

1. Understand
2. Be safe
3. Offer control
4. Respond
5. Avoid re-traumatisation
THEME 3: SKILLS AND OUTCOMES

1. The client decides
2. What needs to come up - comes up
3. New expression
4. Something to show
5. Sustainable processing
1. Reduces impact of Trauma
2. Positive and sustainable
3. Relationship building
4. Ready engagement

THEME 4: PRACTITIONER FRIENDLY
DISCUSSION (1 OF 2)

• The participants, without exception, found the process enjoyable and therapeutic.
• Art Therapy is a proven and effective method of addressing trauma in a community settings.
• A safe space to explore deep seated trauma and negative childhood experience.
• Dealing with client issues in a different, more creative way.
DISCUSSION (2 OF 2)

• Importance of trust and relationship both between the participants (peer) and facilitator.

• Facilitator competence in managing trauma in a therapeutic setting

• Effect on facilitator – how trauma is processed

• Consider the removal of barriers, if they exist, to accessing art as therapy.
RECOMMENDATIONS

1. Art therapy
   - Importance and valued treatment approach
   - It requires specialist Art Therapy expertise

2. Outcomes
   - Measurable client outcomes.
   - Can specifically address trauma

3. Impact on practitioners
   - Recognise impact
   - Appropriate responses via supervision, support, variation in therapy work.

4. Future research
   - More in-depth study required
   - Comparison studies for treating trauma
DISCUSSION QUESTIONS

1. **Defining trauma:** How would you define trauma informed in your service?

2. **The importance of relationship:** The relationship between practitioners and service users was found to be important in this research - how does this reflect in your own experience of delivering services?

3. **Skills and outcomes:** This research found a range of skills related to the positive outcomes for both for clients and practitioners. Are there echoes of this in your own practice?

4. **Effect of Trauma:** Trauma work can have specific impacts on practitioners. How can you identify this and ensure it responded to appropriately?
Questions and Answers?
REFERENCES


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Thank you