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Chile Healing Arts Program

Guidelines for earthquake relief workers and local teachers

These Guidelines can be useful for any person currently working with children in Chile or planning to do so. Originally prepared and freely disseminated in February 2005 as part of the Tsunami Healing Arts Program of the International Child Art Foundation (ICAF), the Guidelines have been modified and tailored as a component of ICAF's Chile Healing Arts Program. Although the circumstances and implications of every natural disaster are different, the knowledge gained from one tragedy can be useful to aid children's recovery after a mass trauma event.

1. Introduction

In response to the Asian tsunami of December 2004, ICAF developed an innovative healing arts program. ICAF's objective was to transfer the knowledge and experience gained from the treatment of the child survivors of the 9/11 tragedy and other recent disasters to help the tsunami child survivors. Scientific studies on the psychological effect of the 9/11 attack on the World Trade Center found that directly affected children were at risk for a variety of mental health problems including anxiety disorders, posttraumatic stress disorder (PTSD), and childhood traumatic grief (CTG), a condition affecting those who experience a death under traumatic circumstances.

Preventing and treating the distress experienced by children as soon as possible is crucial for optimal long-term health and recovery. Parents, caregivers and teachers of these children were found to minimize, ignore, deny and criticize, or be overly sensitive to the plight of the children, depending upon their own recovery and progress.

In 2005, ICAF organized its Tsunami Healing Arts program in Sri Lanka and India. In August 2005, Hurricane Katrina devastated the U.S. Gulf Coast and the city of New Orleans. ICAF launched the Katrina Healing Arts Program shortly thereafter. In December 2005, the World Bank partnered with ICAF to launch its "*Destruction, Reconstruction and Prevention*" program which broadened the understanding within the bank and the international development community of the tolls that natural disasters take and how to effectively respond to them.

Research shows that earthquakes increase the rates of mental health problems in the communities they strike. A series of studies conducted 1 to 4 years after the August 1999 earthquake in Turkey showed that about 40 percent of survivors suffered from post-traumatic stress disorder and 20 percent from depression. In Sri Lanka, one study found that 42% of tsunami survivors were suffering from PTSD as well as depression, when compared with a control group. In addition there was found to be a significant lack of mental health resources in the tsunami affected countries.

2. The Role of Art

The ICAF's healing arts program experience reveals that creative expression is an important part of the recovery process for children who have experienced traumatic events and catastrophic disasters. The experience of creative expression is universal and all cultures across the globe have ways of expressing themselves creatively. Art making – drawing, painting, and modeling – is one form of creative expression that has been found to be helpful in trauma interventions with children. Current literature maintains that techniques involving the use of images are among the most effective in decreasing the symptoms of PTSD. Art offers a channel for children to express their feelings, perceptions, thoughts, and memories in ways that words cannot. Research has also shown that traumatic memories are stored in the brain as images. Often, words are simply not accessible as this part of the brain has been affected by trauma. Through art, children can express their pain, first visually and then verbally. With guidance and support, the arts can help traumatized children to make sense of their experiences, regain control, communicate grief and loss, and become active participants in their own process of healing, by seeing themselves as “survivors” rather than as “victims” to begin with.

3. Understanding Trauma Reactions in Children

Children who experience catastrophic disasters and events show a wide range of trauma reactions. Some children have worries and bad memories that gradually disappear over time with the emotional support of caregivers and communities. Other children may experience more long-term problems, stress reactions, and PTSD. Emotional reactions – fear depression, withdrawal, anger, and physical complaints or symptoms with no medical basis – can occur immediately or weeks and months after the traumatic event. Worries and concern can interfere with a child's ability to pay attention and concentrate, and thus cause difficulty in school. Loss of trust in others and fears of the tragedy happening again are common responses in many children and adolescents who have experienced a traumatic event.

Some children are more vulnerable to the effects of traumatic experiences for reasons that we still do not completely understand. For example, children who have experienced previous traumas or who already have a mental health disorder may be more susceptible than others to problems following traumatic events. Also, children who witnessed or directly experienced the disaster are believed to be more at risk than others who are less directly affected. But even second-hand exposure to a disaster can be traumatic for some children. A child whose caregiver is having a hard time coping with the disaster will also likely face more challenges. In all cases, children need support from others to avoid long-term emotional problems.

4. Trauma and Grief

When the trauma has resulted in death, a child or teen is at risk for childhood traumatic grief. When this occurs, terrible images and thoughts about the way people died make it difficult to have positive memories about the person. Children may avoid reminders of the event in order to avoid distressing feelings. In addition, most if not all of these children faced a situation in which their own life was in danger. Hence children may be experiencing feelings of guilt related to their own survival, in addition to helplessness, fear, and sadness related to grief over the people who died and the many ways in which their life has changed following the earthquake.

5. How to Support Trauma Recovery in Children

You can do a great deal to help the children you work with recover from the earthquake. Below is a ten-step approach:

- 1) Begin by building a positive relationship with the child. This is one of the critical aspects of trauma recovery. Be supportive and compassionate in talking with children to help them feel safe. Reinforce that while no one can predict the future, it is not likely that another earthquake will happen again. These reassurances are important on a regular basis. Help children share in maintaining their feelings of safety by asking them about their specific needs for comfort and self-care. Help them develop a personal “safety plan” – information about where to go and who to contact to feel more secure.
- 2) Encourage children to express their feelings - cry, be sad, or be angry. Do not force expression of the traumatic event, but let children know that it is normal to feel upset, angry, or afraid when something bad happens.
- 3) Provide structure and routine whenever possible while being flexible to children’s needs. Encourage children to feel in control of their surroundings by allowing them to make some decisions about routines and other aspects of daily life to the extent possible.
- 4) Realize that children who have lost a parent, sibling, relative, teacher, friend, will need additional support, and will need it for a long period of time. Memories and feelings about these losses are recurrent and can be triggered anytime by everyday images and reminders of the person or the earthquake, holidays, birthdays, or anniversaries.
- 5) Come to know local and family bereavement rituals. Help children to understand these events and make choices about their level of involvement within the context of death in the local culture.
- 6) Offer meaningful creative activities to encourage children to express their feelings and become active participants in their own process of recovery.
- 7) Be open to ongoing discussions. New questions and feelings develop over time. Look for opportunities to bring up issues and create an open environment that encourages children to talk about their concerns at any time.
- 8) Be sure to manage your own feelings about the disaster or traumatic event. Take time to understand your own feelings and prepare yourself emotionally before you attempt to reassure or work with children.
- 9) Be sensitive to cultural differences among children who have experienced traumatic events or losses. For some children, expression of emotion or specific image making may not be acceptable or comfortable.
- 10) Help children and families feel connected to peers and adults who can provide support and decrease isolation. Investigate local resources to help children and families obtain additional help if it is needed.

6. Art and Trauma Recovery in Children

The experience of interacting with children who have experienced traumatic events may be entirely new for you. If you have not used art activities with children, the following observations may be helpful in beginning your use of creative expression:

- a) First, encourage children to express whatever they would like to express in their art. Some children also like to express themselves in other ways, such as in songs, stories, play, drama, or writing. Following a trauma it is important for children to be given choices. Be open to all forms of expression in addition to art-making. Because cultural backgrounds influence self-expression, some children may feel more comfortable with one way of expressing over another.
- b) Keep in mind that your goal is to help children have an experience of making art, rather than to make “good” or skilled art, or to make art on a certain subject. The focus should be on the experience and process rather than the product.
- c) Provide a safe and structured environment for creative expression to take place. Be empathetic, listen, encourage storytelling about art produced, and accept whatever is communicated. Refrain from trying to interpret art and simply accept and encourage participation and self-expression. Engaging in a dialogue by simply asking a child to describe the elements in a picture can be helpful and supportive. Use open-ended, non-threatening questions such as ‘tell me about your picture’ or ‘what’s happening here?’ Avoid using ‘why’ questions.
- d) Use art activities to promote self-reliance and problem solving in children. For example, provide them opportunities for experimentation with art materials, learning new art skills, and making decisions about what to draw, paint, or make during an art session.
- e) Be aware that children may use art expression in a variety of ways after experiencing a traumatic event. Some children will repeat images of the event in their drawings, paintings, or play activities; others may resist memories of the actual event, preferring to use art activities to soothe and reduce stress. If trauma stories are expressed, remain calm, listen, and respond without judgment or interpretation. It is particularly important for you to normalize any feelings expressed by letting children know that what they are experiencing is being experienced by many other children too.
- f) Significant and personal feelings may be shared in the art making. Expressing these feelings can make a child feel vulnerable and unsure. Thus it is important that children feel calm and in control at the end of an activity. Making time to clean up or having a closing activity can be reassuring for them.

7. Suggestions for Activities

If you have not used art activities with children who have experienced trauma, you may wonder where to start. Using art in trauma recovery with children involves both non-structured and structured activities. *Non-structured activities* are those that encourage children to create from their imaginations—in other words, to draw, paint, model, or build anything they would like. Many children already have ideas about what they would like to make in art and if they do, allow them to

experiment freely with materials in a safe and structured environment and enjoy the soothing and rewarding experience of creative expression. Try not to be tempted to draw or paint for them, but be attentive and supportive and provide help if the child does not know how to use a material or tool.

Other children, especially those who may be shy or withdrawn, may need a *structured activity* or theme to stimulate their participation and imagination. For example, you might ask the child to draw a picture of a “worry.” Many children who have been traumatized have worries and fears since the tragedy happened. Making a picture of the worry or showing how big, what color, or what shape a worry is helps children to begin to identify fears and gives us a tangible image of what worries children find difficult to tell about with words. Use this as an opportunity to help the child find ways to express feelings through art—ask the child to show you through color, lines, shapes, or figures “what your worry looks like”.

Another variation is a “safe box,” a simple paper envelope or paper box that can be painted and decorated with images of the child’s choice; drawings, pictures, or objects that the child enjoys or finds comforting can be placed in the box. In the case of grieving children, creating a container for positive mementos of loved ones lost can be an important and healing experience.

Mapmaking positions the child in his or her new location physically after the earthquake and the new location in relation to the familiar environment. On the map the child notes the places and venues important to him or her, and helps navigate the changed topography. This exercise also bolsters the child’s safety, making her aware of where she is, what is near, how far things are, and which direction to run from a real or perceived threat of another disaster.

A helpful drawing or painting art therapy technique that has been used with traumatized children is called “The Day I Will Never Forget”. Ask the children to draw “A day you will never forget. It can be any day in your life. What happened on that day? How did you feel?” This task leaves it open for the children to choose either a painful traumatic day, or a special happy day. It allows them to share their trauma, but only if they are ready to do so.

8. A Note on Art Materials

Wherever possible, it is helpful to have the following materials for creative expression:

Materials for drawing such as pencils, pens, pastels, colored pencils, and paper

Drawing materials help children to express and tell stories, experiences, and memories because they allow for control and fine detail. For children who are not familiar with drawing materials, be sure to show them what each material can do by drawing simple lines and shapes, coloring, and blending.

Materials for painting such as watercolor sets or tempera paints and paper

Painting also helps children to express stories and experiences, but paint also encourages expression of feelings through color and brush stroke. If you have access to painting supplies, be sure to create a structured environment for creative expression and teach children basic skills about how to hold a brush, how to mix paint, and how to apply it to a surface. If at all possible various weights and sizes of paper should be used. The use of colored construction paper, news print and discarded magazines for paper maché and collage would also be beneficial. Cardboard sheets and or small boxes, Styrofoam plates, aluminum paper, and found objects can be interesting as well.

Materials for modeling such as clay and paper maché

Working in paper maché helps children to express themselves 3-dimensionally and gives them an experience of building, destroying, and rebuilding because it is malleable and flexible to shape in the process. This medium can also encourage narrative because small cars, trees, houses, figures can be used in play-acting and storytelling.

Appropriate art supplies may sometimes be difficult to obtain. Even when there is limited access to art materials, children can be encouraged to be creative in whatever ways possible. Imaginative play, free association painting, and building with found objects are all sensory experiences that support the inner resources, coping skills, and resilience of all children. When possible, try to use locally available art supplies as this fosters empowerment and encourages the continuation of art therapy after you have left the country.

9. Cultural Elements

Be cognizant of the fact that activities appropriate for children in the U.S. or Europe may not necessarily be good for any child. It is important to maintain flexibility in initiating and providing art activities. Painting, drawing, constructing, and sculpting provide a means for non-verbal communication. However, this does not mean that all art activities are automatically culturally appropriate with any child in Chile. Some children may be taught to contain or conceal their feelings because sharing emotions is believed to be a sign of immaturity or weakness. For them, a directive approach (such as ‘draw a worry’), or even some non-directive approaches may be threatening or intrusive. They may actually prefer copying images at first, learning dance steps, singing a familiar song, or hearing a story. Singing, drumming, storytelling, and movement may be important activities to begin art sessions; starting with familiar arts that soothe and naturally help children relax and enjoy artistic expression and enhance their abilities to learn new art skills and materials.

It is important to be sensitive to the preferences, values, and world views of parents and caregivers, and family members. Parents or caretakers may question the use of art or toys or may misunderstand the use of art as a way to help their children overcome trauma. For example, ICAF’s experience from the Tsunami Healing Arts Program revealed the need to refer to art therapists as “art teachers” because parents in India and Sri Lanka were hesitant to work with “therapists”. The importance of cross-cultural sensitivity cannot be stressed enough. Parents, teachers, and translators may be traumatized themselves. Take time to talk with them before and after art groups. Listen to their concerns and cross-cultural recommendations. In brief, all children and families want to be treated with respect, to know that their concerns and preferences are heard, and feel that their opinions are important and accepted. The goal is to help everyone feel comfortable with the creative approaches so that children are not only safe, but have a culturally supportive experience with healing art forms.

The Guidelines are property of the International Child Art Foundation. All rights reserved. Dr. Cathy Malchiodi, founder, International Art Therapy Organization, was lead author of the original Guidelines. Rebekah Chilcote edited, and Chantal Antoine contributed to, the revised Guidelines. For additional information or to make a donation, please visit www.icaf.org.