

STUDY

ART THERAPY INTERVENTION ADDRESSING MIGRATORY GRIEF AND RESILIENCE FOR TEENAGE ASYLUM SEEKERS IN THE CONTEXT OF COVID SANITARY CRISIS

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Summary & Acknowledgements

This research study is the product of a collaboration between two institutions; The Red Pencil and The Spanish Red Cross in Malaga. It was developed with the support of the Alta Mane Foundation and the van Well van der Snoek Foundation to deliver a quality creative intervention based on an specific art therapy model developed for teenagers in a forced migration process, accompanied by their families. The project started a few months before the COVID-19 pandemic and suffered a 5-month interruption during the first wave. Adaptations then had to be made to the project to respect the sanitary measures. Unfortunately, during the pandemic, the focus of preventing the spread of COVID-19 left the families and teenagers with few spaces to cover their psychological needs. Art therapy has been a crucial intervention for the teenagers in this context.

We would like to express our sincere gratitude to the Alta Mane foundation and the van Well van der Snoek Foundation for their support.

We would also like to extend our thanks to all the participants who generously shared their experiences with us during this study.

For more information on the project, please visit;
<https://redpencil.org/where-we-work/our-mission/spain-2/>

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1. Introduction



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1. INTRODUCTION

Forced migration to Europe spurred by persecution, conflict, humanitarian crises, and human rights violations is not a new phenomenon. People often risk their lives undertaking dangerous and unsafe journeys. Due to the port closing policies of other European countries and the obstacles to rescue ships from the central Mediterranean, many migrants enter Europe through the Spanish border. However, a significant percentage of arrivals, particularly migrants from Central and South America, and from some Eastern European, happen across land borders (Comisión Española de Ayuda al Refugiado, 2020). These migrants often present severe psychological and psychosocial effects due to events and conditions in their place of origin, to the migratory journey itself, and to having to quickly adapt to new circumstances under extreme stress levels.

There is a greater impact on children and minors due to having to cope with a situation that is not appropriate to their stage of development and because they are in a determining evolutionary period for the development of their identity and personality (Rico-Caballo & Izquierdo-Jaen, 2010; Tibbetts & Stone, 1990). The COVID-19 pandemic has exacerbated the challenges faced by migrant children and adolescents, adding another layer of stress and difficulty to the already fraught circumstance.

This article discusses our experience implementing Art Therapy with *teenage asylum seekers* in the south of Spain, as a space that encourages *resilience* and kickstarts the elaboration of *migratory grief*, in the face of increasing stress and difficulty because of the *COVID-19 pandemic*. A resilience framework was designed for the purpose of the project, comprising four dimensions that interrelate one with the other, offering a care context for teenagers to self-strengthen their own coping capacity.

1.1. Migratory grief

Psychological distress in migrants and refugees is more related to their “outer reality” rather than internal factors (SAPPIR, 2003). Migratory grief and reactive symptomatology, related to exposure to rootless stress, is a common feature in most migrants independently of their subjective experience (Zanolla et al., 2018). In the case of asylum seekers or forced migration situations, the impacts that these situations have on an individual's sense of security may put them at a higher risk of developing mental health symptoms if the conditions in the host country become adverse (Achotegui, 2015). The migratory approach focuses on mental health rather than on psychopathology because it acknowledges the relationship between extreme levels of stress, which characterize the process of contemporary migration, and the development of mental health symptoms. According to Achotegui (2010), migratory grief can be divided into seven areas: family, language, culture (customs, religion, values), homeland (landscapes, luminosity, colors, smells, temperature, and other affective dimensions), social status (work, housing, documentation), physical security, and the sense of belonging to a group. Migratory grief can be experienced by any person who leaves their home country, even under favorable conditions. However, the balance between losses and potential gains, the degrees of vulnerability, the stressors encountered, and individual's coping strategies, all are factors that shape migratory grief. For instance, grieving a sense of “physical security” acquires a special significance in the case of forced migration situations because migrants often lack a social, physical, and political support system.

In her work in school contexts in Barcelona, art therapist Marxen (2007) explains that conceptualizations of migratory grief could also apply to adolescents. Migratory grief intersects with the mourning taking place at the adolescent developmental stage, which is marked by changes occurring at the level of biology and of social identity. On occasions, both griefs overlap and arise in the context of art therapy sessions. For example, images of the country of origin can evoke a sense of

longing for a missing childhood. In addition, the language grief for adolescents may manifest in the changes brought about by adapting to a new educational context, while the culture grief refers to changes arising from different peer groups' codes. The challenge at this stage, being migrant and adolescent, is sometimes to feel dealing with all these losses alone (Landínez-González, 2020) because migrant families are often so distracted with covering their basic needs that there is no energy to accompany the adolescence stage or either will not know how to guide the teenager in the new cultural context. In this situation, adolescents must carry out extra work that consists of reconciling the expectations and notions of the adolescence stage of their home and host countries (Lemzoudi, 2007).

1.2. Psychosocial support for teenagers in the face of increasing stress levels due to COVID -19

In the context of the COVID-19 pandemic, the conditions became more extreme for people on the move. The global pandemic greatly affected the availability and access to resources for migrants and asylum seekers who already face psychological and adaptation challenges. Some NGOs describe this pandemic as "the virus of inequality" because of its differential effects on refugees and asylum seekers (OXFAM International, 2021).

The teenagers that enroll in the art therapy session are part of a program that covers their basic needs, for a limited period. The program has a set finish date regardless of whether the teenager's family finds employment or any other source of support to cover their basic needs. The anticipation of these difficulties and barriers, which have increased since the pandemic, also constitutes a source of stress for migrant families. To be sure, even before the pandemic feelings of social isolation were already common for most migrants.

Social engagement is considered a predictor of recovery and a basic resource for building resilience (Malchiodi, 2011; Van der Kolk, 2015; Wachter, et al. 2020). But the restrictions imposed for preventing the spread of COVID-19 severely affected the availability of spaces for cultivating social interaction and exchange (Chowdhry, 2020). To enable social engagement, migrants need spaces and opportunities for exchange and contact with others and with locals (SAPPIR, 2003). During the lockdown and the long restrictions periods, the only way to have social contact was through online social media. But this activity requires access to mobile phone, computer, or internet connection not often available to most migrant families.

Because of their lack of social network in the host country, most of the communication of the participants and their families was with the social network in their country of origin. In some cases, this situation adds to the emotional support from the primary group but in others adds high levels of stress because of the difficult situations family and friends are facing back home, during the pandemic without sanitary, social, and political support, adding more pressure for the migration project to be successful.

The period to connect with aspects of the host country and build an associative fabric have been delayed, job opportunities decrease, generating feelings of more vulnerability and feelings that the barriers surpass, and you have no practical resources to face what is coming (Achotegui, 2020). In the case of teenagers, the lockdown periods hinder some of the little places, like school, they must engage with the host country and create a new social network.

Usiskin & Lloyd (2020) highlight the importance of promoting-maintaining social engagement support during the restrictions and limitations of the pandemic. Their organization focuses on offering

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psychological first aid through art therapy for people on the move in the north of France. During the pandemic, most of the population were confined in improvised shelters forcing the adaptation of the art therapy interventions to the circumstances. They mix face to face with online art marking groups and share the artworks and reflections on the social media-specific project pages. They claim how important it is for people to create rituals of engagement and to unify the narrative of their situation allowing participants to reduce anxiety, build empathy and connect with coping resources besides the critical situation they are facing. It also comes from a social justice approach where people in a really deteriorated situation feel they have a voice, offering a counter-narrative to the stereotypes mainstream media offers (Loyd & Usiskin, 2020).

1.3. Resilience

Currently, there are different conceptions and constructs to understand resilience, some of them focus on the qualities or traits of the individual to overcome adverse experiences or to bounce back, others add the co-influence and interactions of different factors as environmental (Peral-Jiménez, 2017), political and social. Hart et al. (2016) approach resilience for children and young people living in contexts and communities with multiple stressors and disadvantage positions as a process of interactions between different factors. They encourage creating a framework within a social justice approach that not only promotes resilience in face of adversity but also understands and acts on how to interact-transform aspects of the adversity as a co-identifying and co-delivering self-advocacy process. In terms of promoting resilience, they call for “resilience moves” as events, relationships, activities, resources in order to empower individuals to “navigate and negotiate their psychological, social, cultural and physical resources to improve their wellbeing and alter adversity.” (CRSJ, 2017). The Boingboing community is an example of this multilayer approach, creating a Resilience Framework to work with communities involved with children and young people based on the Resilience Therapy model from Angie Hart and Derek Blinchow (2007). This model is practical and accessible for all kinds of public establishing ideas to encourage resilience in communities. There are five broad areas of approach (conceptual arena) with specific approaches on each broad area: Basics (basic needs), Belonging, Learning, Coping, and Core self.

Boris Cyrulnik, the great exponent of the subject, considers resilience a dynamic process that could be built-deconstructed through the life of a person. He put the emphasis on how the family-social context “signifies” high emotional impact situations. Also, bring the reflections on how the society can offer “resilience guides” through the activities, affects, words, art, and culture (pp.27, 2013).

The art therapist Debra Kalmanowitz (2016) also brings a few authors of resilience work from more ecological approaches, encouraging to strengthen the internal resources of a person but also their external resources. It reminds us that individuals get their coping mechanisms from a variety of sources and that it is the work of the communities and societies to allow them to develop and to believe in migrants' capacity to grow.

The specific resilience framework created for the purpose of this project is divided into four dimensions that interact in the context of the groups and the creative process: 1) identifying, expressing, and managing emotions, 2) building social connections, 3) connecting to internal resources, and 4) developing self-care skills.

1.4. Art Therapy intervention as a way to foster resilience for teenage forced migrants

Art therapy, from a broad, ecological conceptualization of resilience, allows people to connect with their internal and external resources in face of repeated adversity situations (Kalmanowitz, 2016). It's also a resource-related process; allowing a temporary sense of safety and control, plus connecting

with aspects of your identity through the aesthetic experience of the arts and the exploration of images associated with good memories from the home country ([Dieterich-Hartwel](#) & Koch, 2017): *“Aesthetic pleasure can be experienced like a protective cloak, shielding oneself from the aversive environmental conditions, bringing back a feeling of wholeness. Active creation of such aesthetic pleasure can be the means of experiencing resources, self-efficacy, and resilience”* (pp. 71).

For promoting connection with your internal resources people need to re-connect back with a sense of control and self-agency. This process can be promoted through art therapy because of the emotion regulation quality that allows working with art (Kalmanowitz, 2016). Art therapy is an active intervention, to work with art you need action, imagination, and all your body and within the appropriate approach, you can find a way to calm down your body's overstimulation because of high-stress levels.

The art therapists Bonz, Casas and Arslanbek (2020) highlight that creativity has the inherent quality to offer protection and a sense of normalcy allowing to feel secure and connected to explore the lived experiences of chaos and uncertainty plus the losses associated with the migration process that in another context would be difficult to address: *“Resilience may also mean acknowledging loss and finding ways in which to express components of loss”*. (pp.352).

Art therapy allows “giving a voice” to the subjective experiences of the teenagers on stressful events (Steele & Malchiodi, 2012), associated with involuntarily leaving their country of origin, migrating, and experiencing injustice. Teenagers not only need the recognition of their own subjectivity in terms of their heritage (St Thomas & Johnson, 2007) but also in terms of experiences of the vulnerability of basic human rights. The path to connect within their internal resources is to allow them to express how they feel and react in face of migratory grief but also to high-impact situations (Akthar & Lovell, 2020). Because their families are living their own migratory grief plus all the stressors, most teenagers do not have a context that embraces their needs for emotional support in the face of restoration of a sense of security. It is essential to provide the space to explore the whole range of possible identifications that can emerge to counteract potential feelings of loneliness, lack of support as well as to develop a coherent sense of identity (Lemzoudi, 2007).

Cultivating resilience in art therapy requires a dynamic and ecological approach that considers the universal needs for social connection that could be compromised by the migration process (see section 1.2), to provide teenagers with tools to approach not only adversities but also daily life challenges. After establishing the baseline of the intervention where basic needs and psychological needs are covered (security, self-agency, giving a place for normalcy, giving a voice), self-care could come up as a way to recharge psychological energies and to find a tool for the future, to face what is coming up; identify own needs and communicate them, find a space to share, to be distracted, relax or to enjoy (ReachOut, 2021).

“Resilience does not come from rare and special qualities, but from the everyday magic of ordinary, normative human resources in the minds, brains, and bodies of children, in their families and relationships, and in their communities” (Masten, 2001)



2. Methods



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2. METHODS

2.1. Participants

The eligible participants were teenagers (aged 10–16) who were residing in a Reception Centre or in an Independent Living House of The Spanish Red Cross located in Malaga, Spain, and whose parents gave permission to attend through consent forms. In total, 20 teenagers participated in the group art therapy sessions, out of which 12 participated in the evaluation study detailed here after and 10 took part in the recorded interviews. The average age of the asylum seeker teenagers of the study was 12.83 years old. There were 4 girls (33.66%) and 8 boys (66.66%).

2.2. Procedure

Organisation

The project is the result of a collaboration between the humanitarian organisation *The Red Pencil*, whose expertise is in arts therapy, and the provincial committee of *The Spanish Red Cross* which manages some of the reception centres for asylum seekers and migrants in the province of Malaga, Spain. The project was developed within the psychosocial, transcultural, and mental health approach of the psychological team at The Red Cross and aligned with their research on migratory grief in asylum seekers.

Group Composition

Three teenage groups in total were formed. Each group received 10 sessions of Art Therapy. The groups were recruited by the Psychosocial and Educational team of The Spanish Red Cross. A list of potential candidates was prepared by the team composed of psychologists based on the following criteria: i) interest in using art as expression, ii) a real possibility of engaging in all the sessions, and iii) psychological and social capacity to attend a group intervention. Each prospective candidate was then interviewed by one member of the team to communicate on the objectives of the Art Therapy Intervention and to assess the interest of the candidate for the project. Group 1 was a mixed group of participants living at the centre and at the Independent Living House. Participants of Group 2 & 3 were all residing at the reception centres.

Conduction of the Intervention & adaptations due to quarantine & social distancing restrictions

Group 1 received one session per week, as originally planned. After the 4th session, the group was interrupted due to confinement measures and able to resume after five months. Only four out of 12 participants were able to restart, all of them residing in an Independent Living House. For Group 2 and 3, to reduce the risk of a possible interruption of the programme following an incidence of COVID cases and the resulting quarantine, it was decided to shorten the length of the intervention by giving 2 sessions per week. The number of participants was also reduced to 5-6 to respect the imposed social distance guidelines. Each participant also received a personal set of art materials.

The Art Therapy sessions were conducted by the same art therapist for the 3 groups. The same programme was given to the 3 groups and art therapy directives were used for all the sessions. The art therapy programme was built to allow participants to strengthen resilience skills, in particular their ability to identify, express and regulate emotions, to create healthy social bonding, to identify internal resources and to develop self-care habits.

Assessment Procedure

Both qualitative and quantitative assessment approaches were conducted. For quantitative analysis purposes, participants were asked to complete a PRE-questionnaire at the beginning of the first day of the intervention and a POST-questionnaire at the end of the last session. To carry out a qualitative data analysis, participants were asked to participate in a voice recorded self-evaluation creative process during the last session. Teenagers' parents signed a special consent form to allow usage of results.

The art therapist also produced a case study describing the journey of one participant throughout the intervention.

2.3. Measures

Quantitative

Although there is a vast and extensive research field on resilience measures, we were unable to find an existing self-evaluative measure of resilience that is in a format that might be accessible to young people from different cultures and languages. Therefore, we constructed our own measure of resilience, considering the language barrier and the fact that most standardised tests are not culture sensitive, to be filled out by participants in the form of a pre and post questionnaire deliberately reduced to only a few questions that were in some cases also translated into their own languages.

We made our own resilience measure easier to understand by studying and developing criteria from existing valid measures (Connor & Davidson, 2003), *The Red Pencil's* existing measurement tools, and combined this with ideas based on the Basics, Belonging, Learning, Coping, and Core Self objectives found in the Resilience Framework (Hart & Blincow, 2007). We found these sources a helpful starting point to formulate our own measuring criteria, and to develop our own questionnaire, because of their simplicity, accessibility, and also because they reflected well the objectives, we set out to achieve through the sessions.

From this we distilled 4 criteria that we used to assess resilience in the participants:

- i. Express and manage emotions.
- ii. Build social connectedness.
- iii. Connect to internal resources.
- iv. Develop self-care skills.

From these criteria the questionnaire listed the following 5 statements, one for each criterion above and a 5th one, which is a more general statement on resilience, and proposed a 5-scale response.

- a. I can express my feelings and emotions.
- b. I feel isolated.
- c. I trust my ability to do things well.
- d. When I feel stressed, I do things to relax (eg.: draw, write, sing, exercise, pray, walk).
- e. I feel able to face my problems.

The same questionnaire was used to perform pre & post assessments. The analysis consisted of comparing before / after the mean obtained for the whole of a group for a given statement (a, b, c,

d,e).

Qualitative

The recorded evaluation process is inspired by the Reflect Interview using Audio-Image Recording (AIR interview) (Springham & Brooker, 2013) and consists of a group interview on the last session, asking participants a series of general questions about their encounter with art therapy, starting with a question about one or more of the artworks they created during the sessions, as well as their feelings and their experience of that moment.

The questions were:

1. Choose a significant work for you and tell me about it. What was it like to do this work in Art Therapy?
2. How has Art Therapy helped you?
3. How did you feel in the Art Therapy workshops?
4. What have you learned about yourself?
5. How are Art Therapy workshops different from Art classes or craft workshops?
6. What was it like to work with Art in a group?
7. What would you like to convey to other people about the benefits of Art Therapy?

The interviews were transcribed and analysed using a qualitative content analysis method (Population Health, 2021) that allowed the exploration, measurement and learning about the art therapy sessions' impact on the adolescents' resilience. This was done by mapping and coding their statements on to a table containing the 5 criteria established to measure resilience. During the data analysis, aside from mapping the interview transcription content to the initial 5 criteria, we also wanted to look at themes around the elaboration of migratory grief and this gave rise to the addition of an extra 4 criteria elements on the table such as past, present, future and family and friends.

In some instances, it was possible to map one testimonial to more than one criterion. *E.g., "It has helped me to express myself, show my feelings a bit, it's been good company too, it made me happy" corresponded to both Express and manage emotions and build social connectedness.*



3. Results



Photo: Liliana Montoya / The Red Pencil (Europe)

3. RESULTS

3.1. Resilience

Dimension 1 - Expressing and managing emotions

The quantitative data shows, after comparison of the 12 PRE and POST questionnaires, an increase in the mean score for the question "I can express my feeling and emotions" from 3,75 to 4,38 (on a scale of 5), i.e. there is a progress of 0.63 (17%).

Participants were all prepared to respond to questions regarding their feelings about their experience with art therapy, during the interviews. In some instances, there was difficulty in describing how they felt in detail and responses from some tended to contain mostly simple (if powerful) expressions such as "happy", "sad", "angry", "shy". This was in some cases due to limitations of language, as for some, Spanish was not their first language, and this may have hampered their ability to express more complex emotional nuances. However, they were able to explain in most instances the reasons why they felt a particular way.

"I am like this. There are times when I am sad or shy."



"I decided to show what I'm like, what my heart is like inside. It's sad, happy, angry and surprising."

There were generally noticeably clear emotional responses from participants, some stating feelings of happiness at the opportunity to be able to express themselves:

"Happiness, more than I can feel. And it has made me happy, cheerful, expressive. It has made me cheerful sometimes, when I've felt scared sometimes and we've had art therapy I feel better, or sometimes when I'm bored and we have art therapy I feel happy."

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There was an overall sense of satisfaction with the process, despite some initial hesitancy in a few respondents such as feelings of embarrassment at exposing their state of mind and at using drawing skills they initially felt they lacked.

"...in the beginning I was embarrassed and after I could express myself a bit more"

"I used to think that I couldn't express myself through drawing...but when I came here I learnt that I do know how to draw and I like to do it..."

"I didn't like drawing but when I tried it time after time, I could express myself better through drawing."

There were some mentions of fear of confronting difficult sentiments and memories, but the overall sense was of using art therapy to open an internal 'door' or barrier, and subsequently the freedom to be able to express.

"Good. I've felt like I could express everything freely. Express everything like that, without hiding."

"The difference is that in a normal art class I can't express my feelings like that, so directly. Here I can do it however I want... It's like nothing comes out of these walls, like what is said here stays here."

"To tell the truth, everyone has their problems. When we come here we talk about it. You can express yourself however you like"

The overarching theme in this section is of art therapy enabling freedom of expression, through working creatively in a safe and non-judgemental environment.

Dimension 2 - Building social connectedness

The quantitative data shows, after comparison of the 12 PRE and POST questionnaires, an increase in the mean score for the question *"I feel isolated"* from 4,00 to 4,25 (on a scale of 5), i.e. there is a progress of 0.25 (6,7%).

Participants talked about communicating with others in a generally positive way; being invited to talk, to share their work, to share their experiences and explain their perspective.

"Here I have communicated with my friends... I have had to explain my artworks."

"Here we talk about our work and share with our friends in a group."

This process was two-way in the sense that the participants are not just talking, but actively listening too, implying a great deal of engagement with others in their group, and with the process they are working on together.

"We see each other's work."

"When others speak, I like to listen."

"We can see our feelings together... We can speak and do everything together and draw together."

Study: Art Therapy Intervention addressing Migratory Grief

Responses largely expressed a growth in social confidence within a secure environment.

"I wanted to show that I felt confident with myself."

"I feel good because more people can know a bit more about me and I can know a bit more about them."

There was satisfaction with working alongside others, and getting to know others, without the fear of criticism.

"Expressing what I've done here and how it helps, well it has helped me to express myself, show my feelings, a bit, it's been good company and everything, it made me happy."

"I think it's good because they are people from my environment. It turned out fine because it was between friends so I could make jokes while I was drawing... And not people from the street who might criticise you for the way you draw. So I really liked it."

Some mentioned working collaboratively in small groups was enjoyable and productive. Many also mentioned simply enjoying the sessions, having fun.



"We did it in a group, we expressed ourselves. We did graffiti, well, an imitation of graffiti. And it's good, I liked it because we did something to pass time. And it was also relaxing."

"School is super boring! And I have friends there, a lot of them. But it's fun here, we don't have to be doing the things that we have to do at school. And apart from that, I don't know, I feel more at home here."

The art therapy sessions fostered a safe and fun space that helped teenagers to connect, and develop a sense of belonging, of home.

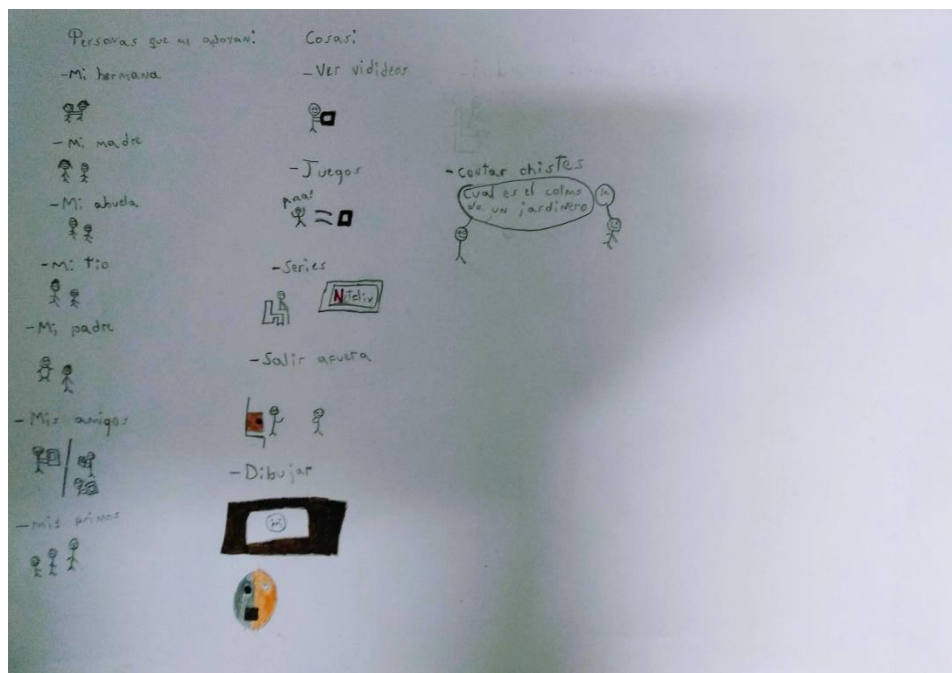
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Dimension 3 - Connecting to internal resources

The quantitative data shows, after comparison of the 12 PRE and POST questionnaires, an increase in the mean score for the question "I trust my ability to do things well" from 4,17 to 4,63 (on a scale of 5), i.e. there is a progress of 0.46 (12,4%).

Participants seemed very capable of understanding how they were able to connect 'with themselves' through the creative process, expressing themselves in varied and individual ways.

"I am like this... That's me a girl who likes to dance and sing and draw"



"This is me...It describes me... I am reading about myself... I feel like I am looking at myself"

"This is my heart... I decided to show what I am like, what my heart is like inside"

They also talked about discovering unknown artistic ability, which was a delightful and empowering surprise for some.

"Before I would say that I didn't know how to draw anything and now I draw here... I discovered I do know how to draw."

"I learned I can draw then I see my feelings."

"I feel confident because I discovered I can draw."

"...but when I came here I learnt that I do know how to draw and I like to do it, and it doesn't matter anymore if the drawing is ugly, I understand it."

There were also a wide range of responses where the underlying sense was one of safety and security in the environment and process. Some participants talked of gaining confidence about being able to be honest about their feelings and experiences.

"Well, for me this piece was more honest...it's more honest than everything else. It doesn't hide anything and tells the truth completely... It reminds me of what I'm like on the inside and I loved doing this piece because it describes me completely. It reminds me that this is me in this painting."

Expressing their inner life in an artistic way gave them pleasure, satisfaction and for some a definite sense of pride in their work.

"I can see that I can do great things, I can do whatever I want. It has inspired me, yes."

"The graffiti. I put it there because I liked it and what we thought was going to look bad looked good in the end. I liked it a lot and felt very proud of it."

"I say that art therapy is good, it teaches you things, you learn, you take something positive from here. Something learnt. I don't know, it makes me want to express my feelings, talk to someone, meet friends. Everything is good here."

There was also a perception of a change that participants experienced through the process of gaining in confidence and understanding and developing greater self-reliance whether in dealing with difficult memories, or the world outside. For many this enabled them to access a sense of calmness.

"I feel as though there is a before and after, it's like a change... It has helped me to stop being so shy and let the energy inside me flow through the drawing. It has helped me to get over my fears, for example my shyness and other things."

"They should come, because I don't know, it's like going to a therapist but they don't treat your problems, they don't treat you, instead we simply do what comes to us and we think and we're not under the pressure of someone who wants to see you progress and all that."

"I feel very comfortable with all this, I can think calmly and everything, and I can think in detail, stop to think about a situation and not do things without thinking. Irrationally as they say."

Art therapy plays an active role in developing young people's ability to self-reflect and in so doing gain self-awareness and confidence in themselves.

Dimension 4 - Developing Self-care skills

The quantitative data shows, after comparison of the 12 PRE and POST questionnaires, an increase in the mean score for the question "When I feel stressed, I do things to relax (draw, write, sing, exercise, pray, walk)" from 3,58 to 4,13 (on a scale of 5), i.e. there is a progress of 0.54 (14,6%).

The responses in this section seemed to centre a great deal around communication; not just sharing with others but using the act of sharing and communicating as a way of exploring their feelings about what they have been through or how they are feeling in the present, and to ask for help.

"It would help them to clear their minds of stuff because some people like me, have things on their minds but we can't transmit them to other people. I also sometimes have things on my mind but I can't talk about it with people. This has helped me."

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"...(I learned) to ask questions a lot when you don't know and not to stay shy."

"Communication is a very good thing... If you can't communicate with people you can't know some things... Sometimes people know things you don't know and if you don't communicate with them, you won't know these things either."

Essentially responses are linked to the development of skills which allow participants to place value in their ability to acknowledge and express their emotions.

"I would tell them that they should come (to art therapy) because if they feel like me then they should express themselves more here. And it would be better because they can do it through colours, paints and papers."

"It (art therapy) has helped me to stop being so shy and let the energy inside me flow through the drawing. It has helped me to get over my fears, for example my shyness and other things."

Also the ability to reach a point of tranquility, to relax and feel shielded from day to day difficulties.

"You're going to separate yourself from everything that is outside and you're going to relax a lot, to be honest. And it might be twice a week but it's two times a week when you're nice and calm. And time flies when you are there."

"(Art therapy has helped me)to relax, to see the world in a different way."

"...but here it's calmer, there are no grades...here we do what we want..."



"Whenever we do a drawing I always think about the mountains, about nature."

Participants became aware of the benefits of Art therapy for themselves and were able to articulate why it may be useful for others like them.

3.2 Migratory Grief

Past

This seemed to be one of the easiest areas for the participants to talk about, with a greater breadth of responses than for other areas of questioning. It seems the creative process has encouraged interaction with memories and past experiences.

"It reminds me of things from the past."

"It's helped me to think about the past... I drew things about the past and I thought about it so much and I couldn't stop thinking about it until I got home."

They refer to their home country, families and others they have left behind, or the more recent experiences of their journey. This wasn't always an easy or pleasurable process, but there is a sense of 'opening up' or unblocking in the responses.

"It reminds me of when I lived in my country, Colombia. The towns, the mountains, the landscape, everything."

"It reminds me of my country... The green eyes remind me of nature when I used to always go to the forest... It's really good, the memories."



"This reminds me of my arrival in Malta...this brings me lots of memories of when I was in Malta. When I arrived in Malta I was on my own, was crying all the time...I was happy not to be in the sea anymore, alone in the middle of the sea."

"Before, when I saw that I couldn't do something I would give up... I couldn't speak to people before... That's what it was like before."

Teenagers talked warmly, nostalgically, and sometimes sadly about the memories brought up in the sessions.

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"I did a little drawing of the country I was born in because that's where I come from, and It makes me feel good and brings me memories. A bit emotional, satisfying and it made me feel lots of emotions. Lots of memories."

"This piece reminds me of some objects I used to wear...it brought me memories of when I was in Venezuela. Like nostalgic...yes nostalgic, it makes me happy because it brings me memories."

Art therapy enables participants to access memories, sometimes painful ones, safely and with some distance.

Present

Although this seemed at times a difficult area for some participants to articulate, most responses centred around feeling enabled, whether to express themselves or to attempt new things. For some this was supported by the non-judgemental environment in the sessions.

"Now I know how to have a conversation with a lot of people...Here I have been able to speak to many people at the same time."

"I'm capable of doing more things than I can imagine."

"I can do things for myself...I can achieve things without anyone's help, just me."

'I can do what I want.'

'It's like nothing comes out of these walls, like what is said here stays here.'



Involvement in the creative process in Art therapy can develop young people's confidence, their ability to focus, and their specific creative skill set.

Future

This is the area with the fewest responses. Given the situation of the participants, this is likely to reflect the uncertainty of the future increased after covid-19. A further interpretation could be that they are unwilling to expect or even hope, or possibly simply expressing opinions for the future is too difficult currently.



"...I like Egypt and I want in future to go there."

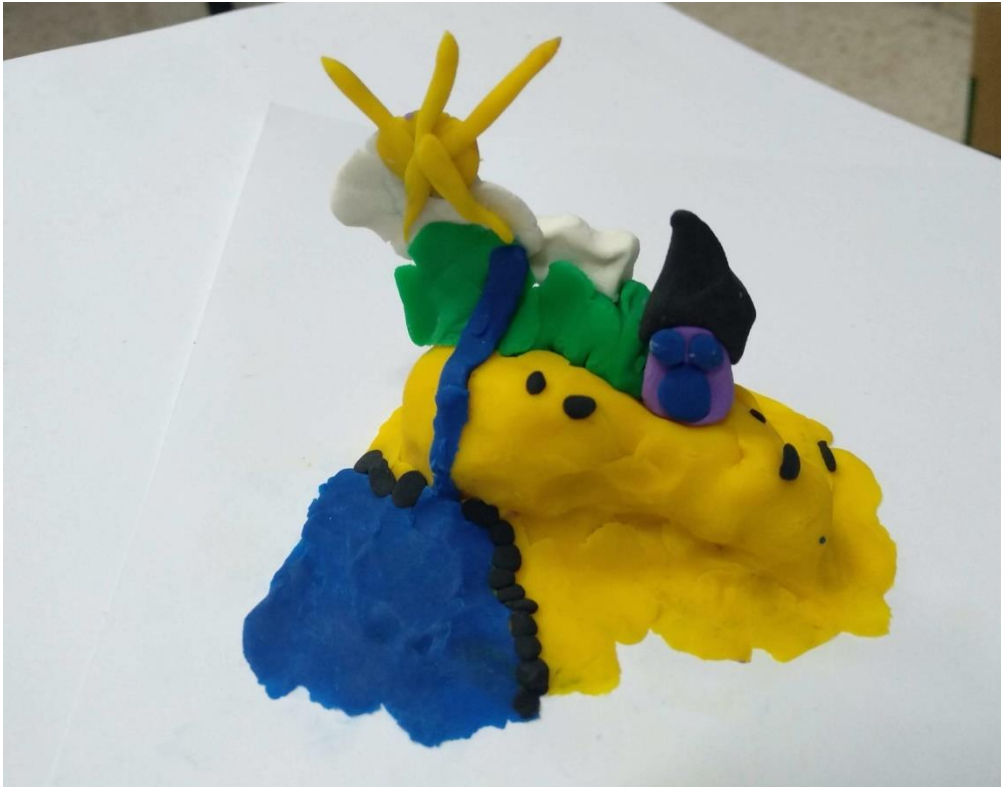
Family and friends

Most mentions were of memories based around parents and grandparents, and the comfort derived from this. These recollections seem to be very tied up with images of home landscapes.

"Well, someone around you, like my dad, who is always with me. He is a big source of support for me, he has never left me to the side, he's been supporting me and everything. It's a very big thing for me."

"To tell the truth, everyone has had their problems. When we come here we talk about it. You can express yourself however you like, for example with my grandfather's farm and everything that happened with my grandfather. I didn't really think about it, I was simply doing my thing but I was lost. I felt strong but at the same time I wasn't strong, so since I've been doing art therapy I think more about my grandfather, I think about the positive things about him, I remember him in the best way, and in spite of all of that's happened with him, when I come here, I have been getting over things a little bit."

The Red Pencil (Europe)



"A farm my grandparents had, I don't know. It reminds me of them because of the farm and all that, the landscape and everything. Calm, I spent a lot of time. Time went by really fast, and I feel cheered up here."

"And the last one, the one we did, I don't know, I liked it. Whenever we do a drawing I always think about the mountains, about nature. I always think about my grandad's farm and things like that. And I liked it. It reminds me of that."

The Art therapy sessions provided a safe space for participants to express and transform memories and feelings for their loved ones.



4. Discussion and Recommendations

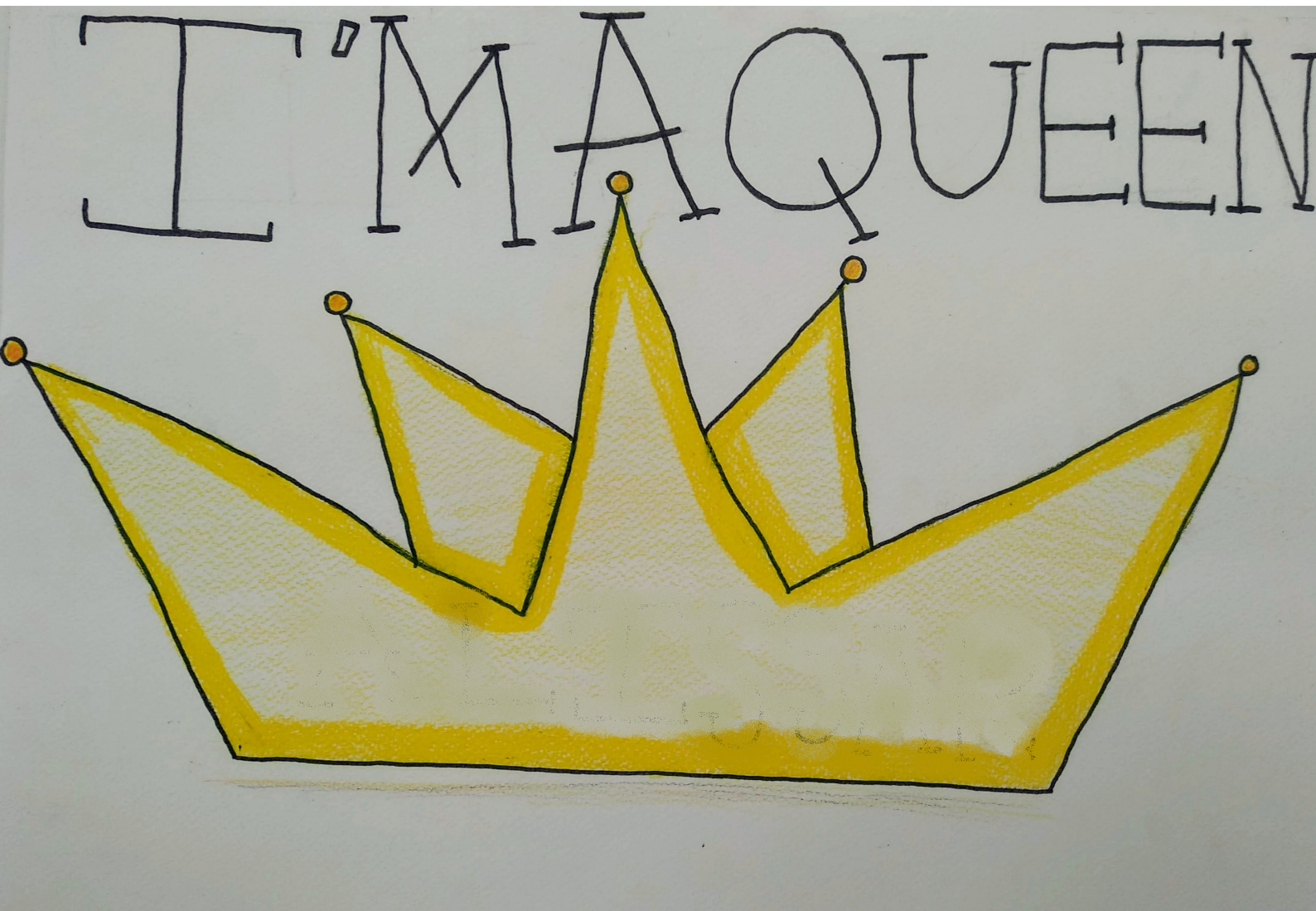


Photo: Liliana Montoya / The Red Pencil (Europe)

4. Discussion & Recommendations

4.1. Discussion

Understanding the challenges of measuring the impact of art therapy

Many factors impact mental health on a day to day, even on an hour-to-hour basis - depending on what a person is experiencing at that time. Answers to surveys about how our beneficiaries are feeling can be affected by multiple variables, including reactions to other life events happening at the same time, other health and security concerns, weather conditions and a wide range of cultural and environmental factors.

In the field of art therapy and mental health, achieving robust statistical analysis to demonstrate improved mood or emotional well-being can only be achieved with substantial psychological assessments, carried out by fully qualified psychologists and trained researchers. The perception of improvement in anxiety levels or depression, for example, is very subjective and has to be interpreted through the cultural lens of the patient, as well as that of the practitioner completing the assessment. Improvements in mental health are therefore not easily empirically recorded, even in laboratory-controlled settings.

In humanitarian relief or fragile settings, monitoring the outcomes of psycho-social support interventions becomes even more difficult due to safety and logistical concerns, data protection and consent issues, cultural and linguistic complexity, etc. In many cultures, the concept of self-esteem, for example, is unheard of and not easily translated. An individualistic understanding of “self” does not compute in countries where the sense of family identity or community is deemed far more important than “individuality” or the “human rights” of an individual.

Those who have just been in a disaster or crisis event, or who are undergoing dis-eases, do not readily feel able to participate in detailed M & E interventions - they need humanitarian assistance and therapeutic support as the priority. Refugees and asylum seekers, or anyone who has experienced abuse, violence and shame can be triggered by intrusive questionnaires and may not wish to be counted for yet another survey. These procedures may specifically be at odds with winning a client’s trust in a confidential therapeutic art/drawing space.

We respectfully request that donors recognise these challenges when interpreting our data and the attendance records of displaced and migratory populations. We aim to gather meaningful quantitative and qualitative data and present our work transparently, but mental health outcomes are not the easiest thing to measure, which is perhaps the key reason why psycho-social support is historically so overlooked and under-funded in the humanitarian world.

Resilience

One of the key aspects of our art therapy intervention with teenage migrants is that it provided participants with a safe space for expression and regulation of emotions through art-based activities that generated an atmosphere of joy and relaxation. According to Lee (2015) one of the main goals in the art making process is the opportunity to experience pleasure and enjoyment, pointing to the creative process as a catalyst for “flow, a state of enjoyment, involvement, and intrinsic interest that is focused, energized, and motivated” (Csikszentmihalyi, 1975). Our results show that teenagers exposed to these experiences gained a sense of satisfaction and fulfilment that boosted their perception of control and self-agency so necessary for connecting with internal resources to find their own voice.

Engaging teenagers in a creative activity in group form was a powerful reciprocal experience for them as can be evidenced by their statements. Simply “being together”, “sharing together”, “listening to each other”, “looking at each other's work” whilst involved in the creative process deepened their sense of connectedness, of belonging and of home. Dieterich-Hartwell's and Sabine C. Koch's literature review suggests that art therapy “can offer a safe place or temporary home that assists in restoration and integration”. Furthermore, this collective experience of togetherness in the process, in a non-judgmental environment promoted not only individual self-expression but also facilitated meaningful social engagement and interchange, evidenced by their statements about having the confidence to “show themselves” and the curiosity to learn about others.

Cultivating a sense of capability has been crucial to the migrant teenagers who, because of their circumstances, have faced uncertainty when everything in their current environment is new, from language to social codes, places, and spaces. This situation can exacerbate a perception of incapability, hence the significance of the creative process as a conduit to rediscovering who they are: “I am like this”, “this describes me”, “this is my heart” and what they can do and how confident this makes them feel: “I can see that I can do great things”, “I feel confident because I discovered I can draw”. Hence art therapy aided adolescents in reconnecting with internal resources, developing their sense of identity, as well as enhancing their feelings of autonomy, mastery and control.

The self-care definition for teenagers is “anything you enjoy doing that helps make you happy and maintains your physical, mental or emotional health” (ReachOut, 2021). It also refers to intentionally engaging in practices and activities that reduce stress and being able to identify and express needs and find ways to meet them. In this context through their own personal experiences with the art therapeutic process, teenagers were able to verbalize not just how art therapy was beneficial for them but also formulated arguments to let others, like themselves, know why it would help them: “you are going to separate yourself from everything that is outside, and you are going to relax a lot...” On an equal measure they were able to identify their needs such as: “... (I learned) to ask questions when you don't know and not to stay shy”. Self-care skills are an important part of the COPING noble truth in the Resilience Framework as they are “those things we do to help get by in everyday ways”.

Migratory Grief

Adolescence and migration are both major life changes; they are both about loss and potential growth. These feelings of loss can be intensified by the overlapping of both experiences happening at the same time. A period when “internally, the adolescent has to release the ties with the objects of dependency and at the same time build an independent representation of an autonomous self.” (Sharabany, R & Israeli, E, 2008).

At a time when restrictions during the pandemic made it exceedingly difficult for adolescents in the refugee centre to meet anywhere else, the group art therapy sessions played a crucial role in offering a safe and neutral space for processing the old and the new, when issues of identity and belonging emerge. The group became a safe container, carefully holding and witnessing this experience: “It's like nothing comes out of these walls, like what is said here stays here...” enabling self-exploration and the forming of those especially important social connections for healthy development.

This is evidenced by statements referring to being able to communicate with others: “Now I know how to have a conversation with a lot of people...Here I have been able to speak to many people at the same time”. Rendering participants with a sense of empowerment: “I'm capable of doing more things than I can imagine.”

The Red Pencil (Europe)

During this delicate transitional stage in the life of a teenager, both in terms of development and life experience, the art therapeutic space with its focus on the creative process, allowed participants to access memories, express and connect to their sometimes-ambivalent feelings towards them in a non-threatening way, and with some distance away from their families (who are also going through their own migratory grieving process). “When individuals create art, memories are released. The physical act of the art process, which includes hand and body motions, further offers moments of regained power and aesthetic experience. As individuals depict their old houses, homes, loved ones, aspects of themselves, and their stories through visual media, their identities can be strengthened and they can experience a sense of momentary home, stability, and remembrance” (Dieterich-Hartwel & Koch, 2017).

The art therapy intervention served as a catalyst to ignite participants' connection with their internal resource toolboxes, they discovered a renewed sense of strength and confidence needed to deep dive into their past recollections. Thus, finding a meaning and structure that made sense to them, so they could begin their healing process: “To tell the truth, everyone has had their problems. When we come here, we talk about it. You can express yourself however you like, for example with my grandfather's farm and everything that happened with my grandfather. I did not really think about it, I was simply doing my thing, but I was lost. I felt strong but at the same time I wasn't strong, so since I've been doing art therapy I think more about my grandfather, I think about the positive things about him, I remember him in the best way, and despite all of that's happened with him, when I come here, I have been getting over things a little bit.”

4.2. Recommendations

The art therapy program as it is worked extremely well for the conditions and the context in which the asylum seekers find themselves in the centres, awaiting confirmation or denial of their status. In some instances, however, it may be beneficial to think about providing longer cycles or offering specific individual sessions where appropriate. However, the priority should remain to give the opportunity to as many participants as possible to receive the sessions.

Allowing a continuous adaptation of the program could be beneficial for certain groups to better follow the dynamic and what is emerging.

There was also particularly good reception of the program by the centre's staff, a lot of which attended the Train-The-Trainer (TTT) sessions and experienced first-hand the benefits of art therapy. This had an impact on the good communication between the psychologists and the art therapist through informal exchanges that seemed to enhance their mutual knowledge of the participants and in some cases aided both their practice. It may be useful for the future to include more regular communication between the art therapist and the psychosocial team regarding participants, for example as part of the TTT sessions by working on some specific cases and situations.

It was very valuable and of course necessary to obtain both quantitative and qualitative results immediately after the end of the cycles, which gave a clear picture of the success and positive impact of the interventions. It could be especially useful to carry out a further study some time down the line,, e.g. one year after the intervention, in the form of individual interviews with former participants, to understand the longer-term effects and ramifications of the program on participants' lives, once they have left the centres. Interviewing the Red Cross staff about their perception of the evolution of the participants would be an interesting complementary approach.

Future interventions could also include the possibility to work with families.



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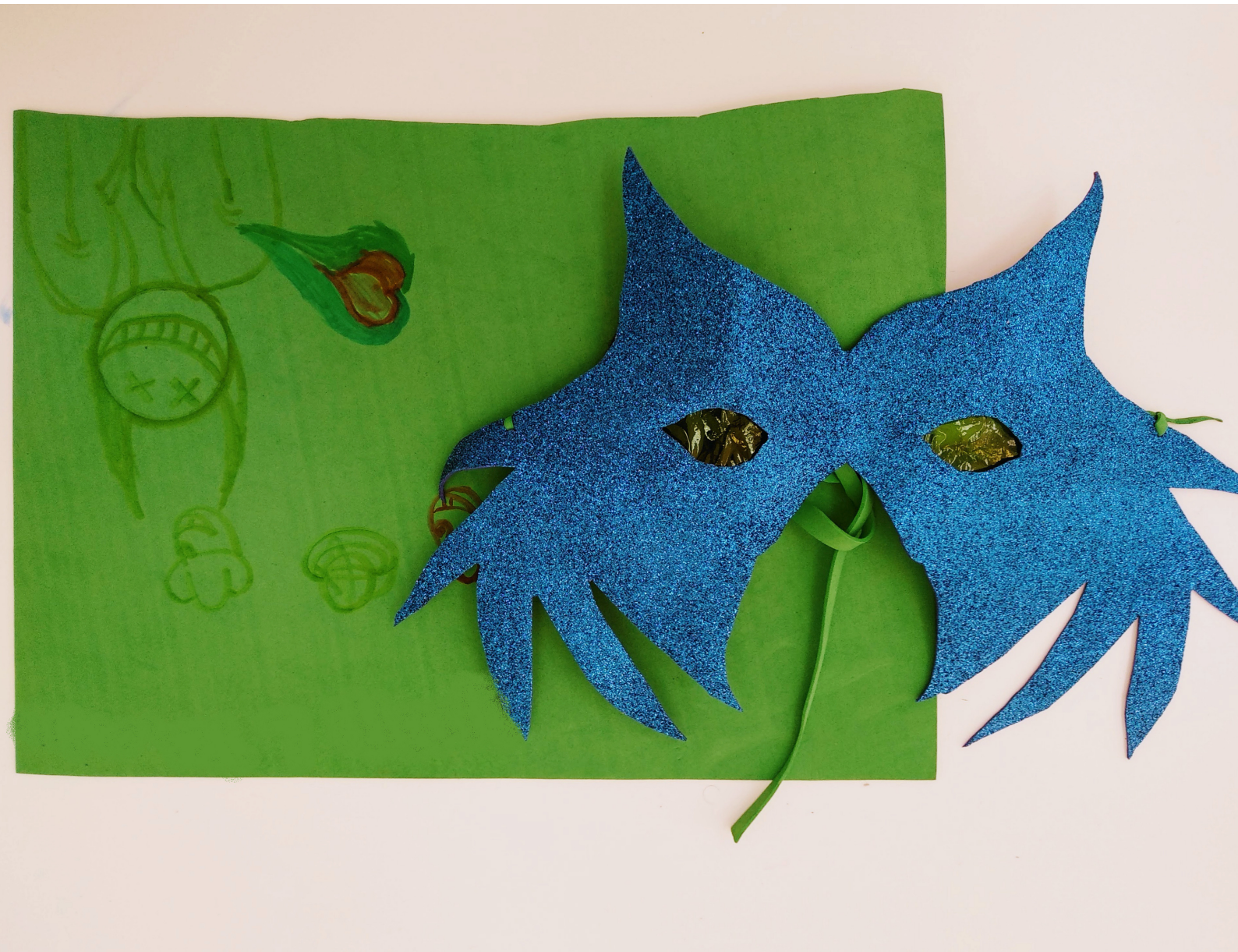


Photo: Liliana Montoya / The Red Pencil (Europe)

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