



Title	Art therapy and mindfulness with survivors of political violence: A qualitative study
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Art Therapy and Mindfulness with Survivors of Political Violence: A Qualitative Study

Abstract

Objective: This study's objective was to understand how art therapy and mindfulness meditation could be integrated together in the context of different cultures and political violence and in work with asylum seekers suffering from trauma.

Method: We conducted a qualitative phenomenological study based on the social construction paradigm. Twelve participants took part in four intensive full-day art therapy and mindfulness workshops. The study's setting was an art therapy and mindfulness studio (*Inhabited Studio*) in Hong Kong where participants engaged in art making and in mindfulness-meditation practice.

Results: Different aspects of the *Inhabited Studio* appealed to participants based on each individual's worldview, culture, religion, and coping style. Responses to the *Inhabited Studio* were organized into seven thematic clusters. Five themes were categorized into two broad categories composed of personal elements (memory, identity) and mediating aspects (emotional/self-regulation, communication, imagination). The final two, resilience and worldview, spanned both areas.

Conclusions: Participants found the *Inhabited Studio* culturally compatible and some of the skills they learned helpful in times of stress. This points to how this combination can contribute to building resilience.

Keywords:

Art therapy, Mindfulness, Trauma, Refugees, Resilience

Art Therapy and Mindfulness with Survivors of Political Violence: A Qualitative Study

The psychosocial needs of refugees and asylum seekers are complex. Refugees suffer from the psychological burden of violence (Falicov, 2002), and the consequences of losses (Papadopoulos, 2002) on a personal and collective scale. Research on trauma has mostly focused on a single event; thus, accessing and processing traumatic memories are emphasized in therapy (Collie, 2006). Work in the context of political violence however, usually involves multiple traumatic events (complex trauma) (Herman, 1992). Professionals focus on different aspects of trauma, depending on their work context. The term trauma in this study's context occurs against the backdrop of social and political upheaval. Use of the term, 'trauma' depoliticizes suffering and removes attention from the social factors underlying the political violence (Gibson, 2001; Kalmanowitz & Lloyd, 2005). Therefore, work with this group requires attention to their internal experiences and the external context in which trauma occurred.

Remembering and Forgetting

Common to all survivors is the struggle between remembering and forgetting (Auerhahn & Laub 1984; 1993; Herman, 1992; van der Kolk, 1987). Trauma studies address the various ways that trauma events are remembered. Some memories (declarative/explicit memories) are verbally recalled and others (implicit memories) are stored non-verbally through the senses (van der Kolk, 1994; Collie, 2006). Implicit and explicit memories can become disconnected, making them difficult to access through words and integrate with a broader life story (Collie, 2006). Individuals frequently attempt to banish trauma memories when they surface, in order to cope. This conflict can lead to rigidity of thought and action. "The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological

trauma” (Herman, 1992, p. 1). Auerhaun and Laub (1984) describe this as a polarizing struggle between loss, dread, and a void, and the hope for a return of the lost world. Individuals often fail to remember both good and bad; therefore, they might not have a “positive representation to believe in” and “cannot historicize (their) experience” (p. 327).

Somatic Expression of Trauma

There has been an increased interest in neuroscience and brain functioning related to trauma (Frewen & Lanius, 2006; Siegel, 1999; Solomon & Siegel, 2003; van der Kolk, McFarlane & Weisaeth, 1996). Symptoms are not only psychological, but frequently somatic (Ogden, Pain & Fischer, 2006; van der Kolk, 1994) and words alone can fail to take into account the felt bodily sensations (Solomon & Siegel 2003). The inability to identify verbally the meaning of the physical sensations (*alexithymia*) can lead to a disconnection between the individual and the traumatic experience, including their needs and their ability to understand others’ needs (Ogden et al., 2006). When physical sensations are overwhelming, the tendency is to want to flee (Fao, Keane, Friedman & Cohen, 2000; Follette, Palm, & Pearson, 2006), thereby losing a connection to physical reality (van der Kolk et al., 1996).

Ogden et al. (2006) emphasize helping individuals to connect with the present moment through the somatic. Noticing nuances in one’s physical responses and sensations heightens one’s awareness of the present. Attending to physical sensations, helping individuals become aware of them, and naming them, are important tasks.

Self-Regulation and Resilience

Therapists emphasize creating a sense of psychological safety, regulating emotions, working on coping, and enhancing resilience (Collie, 2006; van der Kolk, 1987). Numerous studies have examined factors that increase vulnerability to traumatic events (Brewin, Andrew &

Valentine, 2000; Shalev 1996; Udwin, Boyle, Yule, Bolton & O’Ryan, 2000), and protective factors that promote resilience (Weisaeth, 1998; Masten & Tellegen, 2012). Current research on resilience (Luthar, 1991; Luthar, Cicchetti, & Becker, 2000; Wright, Masten, & Narayan, 2012; Olsson, Bond, Burns, Vella Brodtkrick, & Sawyer, 2003) suggests viewing it as a process rather than a list of personal traits.

Worldview

Each person holds a different worldview, a collective thought process and set of assumptions impacted by different cultures, philosophies and traditions (Koltko-Rivera 2004). Such beliefs and assumptions help define how individuals find meaning in their world, behave, and live (Good, 1994; Koltko-Rivera, 2004). In the trauma context, worldview affects one’s interpretations of traumatic events, the type of assistance sought, and the perception of the help received.

Art therapy and Mindfulness in the Context of Political Refugees

The attention to mindfulness in the field of trauma follows its popularity in psychology where it has been incorporated into cognitive behavioral therapy (CBT) (Hayes, Strosahl, & Wilson, 1999; Kabat-Zinn, 1982; 1990; Linehan, 1993; Teasdale, et al., 2002). Most mindfulness studies have focused on cancer, anxiety disorders, depression and medical conditions (Davidson, et al., 2003; Kabat-Zinn & Chapman-Waldrop, 1998; Segal, Williams & Teasdale, 2002). There are a few empirical, qualitative studies using mindfulness to treat Post Traumatic Stress Disorder (PTSD) with military veterans (Vujanovic, Niles, Pietrefesa, Schmertz, & Potter, 2013), and in combination with Dialectical Behavioral Therapy (DBT) (Follette et al, 2006), but there are few quantitative studies.

There is a growing literature about combining the practice of art therapy and mindfulness meditation (Rappaport, 2014) and the use of art therapy for trauma survivors. This points to its usefulness for non-verbal ways of knowing (Gantt & Tinnin, 2007), for recreating personal narratives (Chapman, 2001), engaging the body (Hass-Cohen, 2003), and working with trauma from a neurological perspective (McNamee, 2004). Three studies explored this combination with trauma (Coholic, 2011; Garland, Carlson, Cook, Lansdell & Speca, 2007; Monti, Peterson, Shakin Kunkel, Hauck & Pequignot, 2006), but none of them examined it in the political violence context, specifically, with a focus on resilience.

The combination of art therapy and mindfulness meditation has served as a practice model, aligned mostly with CBT (Chapman, 2001; Gantt & Tinnin, 2007; Hass-Cohen, 2003; Hayes et al., 1999; Kabat-Zinn, 1982; 1990). These models work primarily with single traumas and emphasize processing the traumatic event. Complex trauma implies multiple traumas and emphasizes an initial focus on establishing safety, emotional and physiological regulation, and enhancing coping and resilience. The processing of traumatic events comes at a later stage. Work with refugees requires attention to the broader social and political context despite their suffering, as most trauma survivors do not develop PTSD (van der Kolk, 1987; Herman, 1992). Such thinking shifts the focus from the medicalization of suffering to a holistic approach.

In this study art therapy and mindfulness were used in equal measure drawing on characteristics, both common and unique, and allowing for the flexible and multimodal approach necessary in work with refugees from different cultures and worldviews.

Objectives of the study

This study examined the use of combined art therapy and mindfulness meditation with asylum seekers in Hong Kong. The objectives were as follows: (1) understand ways in which art

therapy and mindfulness meditation were perceived by asylum seekers suffering from trauma and bereavement; (2) explore the cultural relevance of art therapy and mindfulness meditation, and (3) consider whether the combined practices contributed to enhancing resilience.

Methods

Study Design

This phenomenological study adopted a social constructivist approach with the view that individuals build knowledge from interactions and collaborations with one another.

Ethical Approval

Participants all signed informed consent forms both to take part in the study and for their images and video footage to be used. Ethical approval was obtained from the Human Research Ethics Committee for Non-Clinical Faculties of the University of Hong Kong (HREC) (Ref # EA220412).

Participants

Hong Kong is a signatory to the UN Convention Against Torture, but not the UN Refugee Convention. As of April 2014, Hong Kong had 47,000 asylum seekers registered in the city (Kao, 2014).

Purposive sampling was used to identify refugees and asylum seekers associated with a non-governmental organization (NGO) in Hong Kong. Twelve participants took part in the Inhabited Studio and all reported one or more symptoms associated with trauma, but were not required to have a formal diagnosis of PTSD. No compensation was provided for participation in the Inhabited Studio although participants were provided with lunch and given money for travel.

Procedures

Participants attended an art therapy and mindfulness studio, later called the *Inhabited Studio* that was developed by the primary researcher. The *Inhabited Studio* is a short-term model for asylum seekers who have survived political violence and trauma. Although work with trauma can frequently demand long term support, because of the insecure and frequently erratic reality of the lives of the refugees, there is also a need to explore a short term approach. This is not necessarily a full trauma treatment but an approach which can potentially provide a healing and supportive experience which can later be translated into tools for coping and can be reverberated after participation in the Studio. The Studio combined the use of art, art therapy, and mindfulness meditation with the study's participants. To inhabit means to live or dwell and implies presence. The *Inhabited Studio* was named for this common principle of art therapy and mindfulness (i.e., the practice of being in the present moment in an accepting and non-judgmental manner). Participants engaged in four full-days at the *Inhabited Studio* over a period of nine days with workshops on the first and the last two.

Participants made art, learned mindfulness meditation, and were assigned homework during the five days between the two workshops, which concluded with a focus group to identify cultural and religious factors that helped them cope with adversity. Individual interviews were used to gather further information, discuss findings and clarify the Studio's principles that participants were able to use in their daily lives. All the participants spoke English, but a French interpreter was present for the one who was less confident in the language.

Data Collection

Data were collected through the art, recordings of nonverbal behavior, semi-structured questionnaire, discussion groups, reflective writing, written evaluations, focus groups and individual interviews. Workshops, discussion groups, individual interviews and focus groups

were audio and/or video recorded and transcribed. Participants answered similar questions in the various forms to provide multiple opportunities to share their experiences and give feedback (see Supplementary Table S1 for the questions being asked).

Data Analysis

Transcripts and written data were subjected to Interpretative Phenomenological analysis (Smith, Flowers, & Larkin, 2009). The researcher maintained an open mind for themes to emerge from the data while using a theoretical framework. The primary researcher read the transcripts several times, recorded observations of art work, non-verbal behavior, and written and transcribed data. Using line-by-line coding, as well as looking at art work and the video recordings, she identified themes and arranged them into clusters, which were theory and data driven. Emergent clusters expressed participants' commonalities while preserving participant variations. Microsoft Word's macro functions were used to manage coding and create hierarchies of code categories and clusters (La Pelle, 2004; Ryan, 2004). To enhance the reliability of data analysis, a research assistant who has experiences in qualitative research independently coded approximately 20% of the data. A statistical analysis to indicate the level of reliability was not carried out rather the overlaps and differences were discussed in depth and adjustment was made accordingly.

Results

Participants came from seven different countries (see Supplementary Table S2 for the demographics of participants) including nine females and three males with age ranged from 18-45. All of them had feared for their lives and reported having multiple traumatic events which included for example; being beaten, attacked and seeing people being killed or dead bodies. The overlaps and patterns in participants' experiences formed 7 cluster themes (see Supplementary

Table S3 for the listing of themes and categories obtained from the data). Five were categorized as personal (memory and identity) and mediating aspects (self-regulation, communication, and imagination). The sixth and seventh themes, resilience and worldview, spanned both categories and each theme contained characteristics ranging from adaptive to non-adaptive. Participants' quotes and experiences referred to in the text can be cross referenced with the demographic table (see Supplementary Table S2) for further detail on each participant.

Personal Elements

Two clusters, memory and identity, are characterized by the individual's past that dominates their present experience. (Note: All participant quotes are verbatim with no correction to English or tense).

Memory. This cluster includes traumatic and autobiographical memory. The experience of living with horrific events and memories was common to all study participants. Participants' shared response to these memories was to keep busy and try to forget; P4 expressed feelings about how making art threatened her already tenuous equilibrium, "I was not happy when I was drawing because it reminded me of the past and how I suffer. I am not happy." P9 also spoke of a desire to avoid remembering, but was able to regulate her actions more easily than P4, "I know it helps but I don't want to talk about it. I must forget and keep busy. I don't want to open it up." P7 kept her positive memories alive, despite the traumatic events, "My sister used to do these patterns for me on my hand." P12 remembered life before, "This is a house, this is my husband, this is me, this is my children, and we are back home, all of us, like before, I wish..."

Identity. The theme of identity refers to that which defines an individual. Some participants maintained their identity despite the trauma's disruption while others spoke of living with a lost or fragmented identity, which led to feeling disempowered with a loss of agency and

self-worth. The Inhabited Studio helped some participants imagine a new identity to adapt to a new reality. The identity themes were explicit or implicit in participants' autobiographical stories.

P3 discussed the loss of what made her a functioning and efficient person by drawing a picture (Figure 1) depicting herself as feeling small, lost, and out of place.

Insert Figure 1 about here.

P6, who was working and played an active role in his community before he fled, said:

... In a situation where you can be devastated – no matter how spiritually strong you are... and no matter the perception you have... no matter the good qualities you have inside you and you find the situation you are in... There can be a big gap between the person you expect to be and who you find yourself to be today... it is very hard... And ninety percent you can manage in a bad way.

Mediating Aspects

The Inhabited Studio served as a mediator and helped participants regulate their emotions; it provided a communication forum and stimulated imagination.

Self-regulation. This theme refers to emotion and physiological self-regulation. The details of participants' responses varied; the most common were their search for relief from pain (physical and emotional) and the physiological responses that accompanied their emotional pain. Overwhelmed by physical sensations of anxiety, stress, fear, and depression, participants sought relief from them.

All participants reported feeling afraid and sad, which caused difficulty concentrating, irritability, anger, agitation, and living in a constant state of physical dis-ease and emotional discomfort. They felt overwhelmed and frequently in a hyper-aroused state and some felt numb

and disconnected from themselves. The sensation of a rapid heartbeat for a large portion of their day and physical weakness were common.

The Inhabited Studio addressed these concerns directly through art and mindfulness and recorded instances in which art making or mindfulness contributed to calming, emotion regulation, catharsis, gaining emotional distance, and clarity of thought.

Communication. Some participants needed to tell their story and be heard. Others kept their emotions and experiences to themselves. Some communication was unconscious or implicit, and occurred non-verbally through art, physical sensations, or behavior. Participants used art for symbolizing, writing narratives, cathartic expression, emotion regulation, imagination, communication, and giving material form to internal thoughts and emotions. An example of giving form is seen in P9's description of her art making process, "...it was fine...something comes in your mind and you just draw it..."

P6 expressed that it was important for him to be seen, heard, and witnessed, "The drawing was good for me. It was good to draw what happened to me...to tell you and to remember..." P2 described, "...sitting down and sharing stories ...I love this, the way he tells stories; it connects with me. The pictures, show me the way I feel at the moment and the way I feel about the present and the future, and brings the story." P4 showed her pain through her art (Figure2): "This is me...I am sitting on the chair...in my head there are a lot of problems, my stomach is burning with pain... and the colors around me are pain..."

Figure 2: Showing Pain

Imagination. The ability to form new images and new connections in the mind is defined in this context, as imagination. Although fundamental to healing through the arts, it can be challenging to traumatized individuals due to the inflexibility of trauma response. All

participants except P4, engaged in imaginative thinking and art making, which required participants' presence, engagement, and ability to allow their mind to wander. P9 described the process, "Just imagining was really very good...what I can get out of this, and then you start shaping. Suddenly I saw something I did not know. Out of the scribble. Just imagining starts forming something that looks like something" (Figure 3).

Insert Figure 3 about here.

P11 described discovering beauty, "Poison for others is not for me...Beauty was a surprise for me. Although we have problems, there is beauty...Everyone has problems. If you can't change your problems, be satisfied (Figure 4)."

Insert Figure 4 about here

Resilience

Adaptation, despite adversity, can be viewed as resilience. Participants shared their coping difficulties and ways in which the Inhabited Studio helped. Participants functioned in some areas and struggled in others. This study identified where participants might have become "stuck" and where they were able to use the studio to enhance the process of resilience.

Empowerment and increased self-worth resulted from participation in the Studio:

I think if we practice. From what I have seen...we are all able to do something. We have the ability to paint and be creative, to feel better about ourselves...The capability to do something with our lives. To do something to feel good about ourselves and our lives, to be creative. I feel like this (P9).

Worldview

The theme of worldview refers to the way in which culture, religion, politics, family, community and personality affected participants' perceptions and coping methods. Culture and

religion emerged in participants' art (Figure 5) and verbal feedback. P5 revealed, "My mum told me to always pray...don't think too much, just pray and ask God. That is what she told me..."

The intersection of worldview and health strategies was explained by P11:

...it depends what kind of sickness... when I am sad and depressed... I just keep going. I prefer to pray first of all. Bring God to myself in this situation. After this I can go on. Some sickness I try to take medicine... some not good, go the hospital... or I visit friends and family...

Insert Figure 5 about here.

The Inhabited Studio was responsive to different worldviews and belief systems. For example, P1 reported that she could not connect with mindfulness meditation. When explored, she revealed that she could however, pay attention to the Koran. Therefore, it was suggested that she find a word or phrase and focus on it. When asked how she felt with this she said, "...All my mind is with the Koran."

Discussion

Art therapy combined with mindfulness provided a process-oriented approach, engaging participants in the present. The processes in the Inhabited Studio echoed the nature of traumatic memory working on both an implicit and explicit level, accessing both known and unknown, and worked towards the participants' expression of themselves as whole individuals. Multiple findings emerged from this research and include implications for the Inhabited Studio approach, implications of worldview and culture on work with refugees and asylum seekers, implications of the Inhabited Studio on resilience and coping, and implications on building theory, which emerges out of practice (the role of imagination in work with trauma and how art therapy and mindfulness in combination can contribute to this work). These topics are addressed in depth in

separate publications as they are too numerous for one. Some overall findings are however summarized below.

Asylum Seekers' Perceptions of the Inhabited Studio

Participants were concerned with self-regulation and daily coping. The combined art-therapy and mindfulness-meditation model provided diverse perspectives fostering expressions of multiple rather than only the trauma aspects of the participants, whose responses were consistent with the trauma literature. Participants sought ways to relieve their emotional pain (represented by the communication, worldview, and affective regulation clusters), forget their past (represented by the memory theme) (Follette, et al., 2006, Herman, 1992), and cope with day-to-day life (represented by clusters of resilience, affect regulation, worldview, identity and imagination) (Luthar et al., 2000, Masten & Tellegen, 2012, Olsson et al., 2003, Rutter, 1999). All participants revealed using busy daily activities to block out bad memories and cope with fear and anxiety. They perceived the Studio as helping them directly with these concerns.

Cultural Relevance of the Inhabited Studio

Culture generally was not explicit but present in each individual's response. Most participants described a connection with a church or mosque, while all described a personal relationship with god and prayer, which brought them solace. Religion, faith, and belief systems appeared in artwork, were passed on through stories, or incorporated into verbal sharing.

Personal and cultural metaphors defined individuals' experiences and actions, how they expressed themselves through art or words, what they did and did not talk about, and how they internalized the Inhabited Studio's model. These expressions were more tacit than explicit but no matter the form they took, participants found the mindfulness and art-making compatible with their needs.

Enhancement of Resilience of the Inhabited Studio

Participants reported using their new mindfulness skills to regulate emotions outside of the studio when stressed or overwhelmed, and that they gained a sense of internal safety. This feedback supports the notion that resilience is as much a set of individual traits as a process (Masten & Tellegen, 2012; Wright et. al, 2012; Rutter, 1999). The Inhabited Studio's contribution to this process can be likened to throwing a pebble into a pond, creating a ripple effect outside of the Studio. Participants reported a small increase in their capacity to respond to their new challenge of being refugees.

During the Studio workshops, some participants struggled with mindfulness meditation, explaining that it activated memories they were trying to suppress. A minority made the same claim when engaged in art, but most of the participants reported feeling relief from art making. During the interim week however, some participants reported drawing in their sketchbooks but most of them did not, while many reported using the mindfulness at times of stress. This difference indicated that making art was more helpful for some, when supported by the art therapist; mindfulness-meditation skills did not seem to require this relational element.

Limitations

The strength of this research lies in the design of this study but these very aspects could also be considered a limitation. The small sample size allowed for intimate workshops and rich descriptions to emerge, but limited the generalizability of the findings. The short time of the study was deliberately established because of the participants' unstable living situations, but as a result long-term follow-up was not possible. The primary researcher was also the Studio's facilitator, and while the development of trust was essential to facilitate the expression of authentic opinions this led to periodic tension between roles. The exclusion of a standardized

mental health evaluation can be seen as a limitation, but taking into account not only their physical and psychological symptoms, but also the individual subjective interpretation of these as well as giving attention to the external circumstance and the use of imagination in this context, ensured that the study took into account the broader political environment which saw trauma as part of the context rather than removed from it.

Future studies might include large-scale designs to examine the practice model's efficacy in this population. An adapted version of this model could yield valuable data using a longitudinal design.

Conclusion

Participants reported that the Inhabited Studio helped them to see what they had previously not seen, regulate their emotions, express themselves in a safe way, gain emotional distance, became aware of their sensory responses and the events or emotions that triggered them, and achieve clarity of thought. Participants' feedback indicated that their experiences and the skills learned could be adapted to and compatible to their worldview and applied to stressful moments in their daily lives.

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