California State University, Monterey Bay

Digital Commons @ CSUMB

Capstone Projects and Master's Theses

5-2017

(Re)painting Self: Art Therapy and Ontological Security in Refugee Children

Domonique Jimerson
California State University, Monterey Bay

Follow this and additional works at: https://digitalcommons.csumb.edu/caps_thes_all

Part of the Child Psychology Commons, Counseling Commons, International Relations Commons, Migration Studies Commons, and the Other International and Area Studies Commons

Recommended Citation

(Re)painting Self: Art Therapy and Ontological Security in Refugee Children

Domonique Jimerson
Global Studies 400: Capstone Seminar
May 9, 2017

Introduction

To be a refugee is to know loss intimately. The refugee experience can be characterized by the multidimensional loss the loss of loved ones, support networks, economic security, culture, safety, and home.[1] [2] The compounding of traumatic experience can have a profound effect on belief systems and identity. This paper will explore the relationship between trauma and ontological state in resettled refugee children. The philosophical concept of ontological security considers the ability create consistent expectations about the way the world operates to a stable mental state.[3] The three states of ontology security and shock will be useful in exploring the impact of trauma on both social and psychological states. Art therapy can be an effective method in aiding refugee children in overcoming trauma because it addresses their ontological security. Lastly, this paper reports on two art therapy programs the Creative Workshops and the Devon Behavioral Support Team.

Trauma

Refugees experience migration trauma in three phases the initiating event(s), the migration journey, and the resettlement period. The initiating events may include torture, military combat, [violence from] terrorist attacks, incarceration, severe resource loss, and hostile attitudes faced in their homeland.[4] The migration journey can be harrowing as refugees face 'prolonged and dangerous journeys', severe accidents (i.e. capsizing boat), being smuggled or

---

[1] Canefe, Nicholas. 2010. "To Feel at Home Abroad or No Place Like Home: Meanings of Displacement in Refugee Studies." Refuge 27 (2): 147.

[2] McLellan, Janet. 2015. "Religious Responses to Bereavement, Grief, and Loss Among." Journal of Loss and Trauma 20 (2): 133.

[3] Jackson, R.L. 2010. "Ontological Insecurity." Vol. 2. Thousand Oaks: SAGE Publications, Inc. 511-512.

[4] Kienzler, Hanna. 2008. "Debating War-trauma and Post-Traumatic Stress Disorder (PTSD) in an Interdisciplinary Arena." *Social Science & Medicine* 67 (2): 219.

trafficked, are among potential risk. The resettlement process can be traumatizing refugees confront uncertain futures awaiting their asylum status, loss of family and community, persecution, cultural isolation, and unwelcoming reception within their host nations.[5] [6]

Robert Hart argues that trauma impacts children differently than adults, due to differences in exposure (due to parents sheltering children from worst of traumatic exposure) and the pace in which they must integrate into society.[7] While children may experience some of the aforementioned reactions to trauma many fall short of meeting the diagnostic criteria necessary to be diagnosed with Post-traumatic Stress Disorder (PTSD). As a result, Hart found children are said to be subject to 'high rates of misdiagnosis' including conditions such as Attention Deficit Hyperactivity Disorder (ADHD), oppositional defiant disorder, separation anxiety, and major depressive disorder.[8] Additionally, children's' adaption is often tied closely to their families (for those with a family) ability to adapt to their new surroundings.[9] The "past experiences and expectations of their ecosystems", Hart states, children, carry with them, can be understood as an ontological framework.[10] Refugee children must be able to cope and deal with the daily challenges through as they manage integration into a new school, as trauma can negatively impact educational performance.[11] Hart argues that not all children will experience prolonged adverse reactions to trauma, "the majority of young refugees will cope well with the terrible events."[12] Children at decreased risk are those whose trauma was 'a single event', family was

---

[5]Kienzler. "Debating War-trauma and Post-Traumatic Stress Disorder (PTSD) in an Interdisciplinary
        Arena." 218.
[6] Hart, Robert. 2009. "Child Refugees, Trauma and Education: Interactionist Considerations on Social and
        Emotional Needs and Development." *Educational Psychology in Practice* 25 (4): 355.
[7] Hart. "Child Refugees, Trauma and Education." 355.
[8] Ibid., 358.
[9] Ibid., 360.
[10] Ibid., 360.
[11] Hart, 355.
[12] Ibid., 355.

present during the trauma, experienced little change to 'family/community structure' self-esteem, able to discuss event, "has strong ties to cultural or religious belief system". Adaptive qualities such as optimism, good coping skills, 'making friends', enjoying school, understanding of 'abstract concepts', are also linked to decrease risk. [13] Multiple or extended exposures, physical harm, the death of a loved one, and loss caused by an unanswered disappearance are all associated with increased risk.[14] Hart list a number of potential 'child characteristics' for those with increased risk are low self-esteem, social isolation, 'academic problems' (particularly in math, physics, and grammar), withdrawal, anger, and not being able to discuss events.[15] In children, trauma can lead to 'poor memory', 'depressive tendencies', 'disruptive behaviors', feeling overwhelmed, 'difficulty concentrating and 'problems with attainment'.[16] Trauma is often experienced as speechless terror that undermines verbal processing is characterized by 'amorphous' or vague sensations, images, 'traumatic memory intrusion', and a non-linear perception of events. Harris attributes this to a decrease in activity in the areas of the brain associated with "language and declarative memory."[17] Children who fall between pre-school and early adolescent ages are said to be the most vulnerable.[18]

Regardless of age trauma leaves wounds, wounds that to be understood in their entirety must be considered from a psychosocial perspective. That is to say that trauma has both psychological and sociological capacity. Trauma impacts a person's conceptualization of their identity, who they think they are or were. It can challenge, undermine, or cripple the identity of a

---

[13] Ibid., 356.
[14] Ibid.
[15] Ibid.
[16] Ibid.
[17] Harris, David Alan. 2009. "The Paradox of Expressing Speechless Terror: Ritual Liminality in the Creative Arts Therapies' Treatment of Posttraumatic Distress." *The Arts in Psychotherapy* 36 (2): 94.
[18] Hart. "Child Refugees, Trauma and Education." 356.

traumatized individual. As it distorts her sense of who she is, it also begins to challenge where she sees herself fitting into the world, and where her current reality fits in with her past narrative/history/memories. While it may be hard to think of your life and worldview existing as part of an ongoing narrative there is a way that people we tell ourselves the world operates, about we are, and who the "other" is, things that we expect and can predict to happen (take for granted). These are all part of an ongoing narrative, which impacts the way we interact with the world around us and also plays a role in the [continuous] shaping of identity.[19] This includes things such as religious and political views, and even career choices, the friends we make, and the risk we take.[20] How is an individual affected when their personal narrative is damaged as a result of a traumatic experience such as war or catastrophic loss? How does the destruction of this narrative alter a person's identity and worldview? The concepts of ontological shock and ontological security provide a useful framework for considering these questions.

Ontological Insecurity

In order to maintain ontological security, one must feel a sense of safety about the world. R.L. Jackson defines ontological security as the sense of stability in the world around oneself and one's ability to respond to and manages fluctuations in their social world.[21] Additionally, they must be able to adjust to potential challenges and threats to those expectations.[22] [23] Ontological security can be ruptured in cases of severe trauma, this trauma can violate "premorbid beliefs and

---

[19] Thompson, Neil, and Mary Walsh. 2010. "The Existential Basis of Trauma." *Journal of Social Work Practice* 24 (4): 380-383.

[20] Thompson. "The Existential Basis of Trauma." Journal of Social Work Practice 24 (4): 379.

[21] Jackson. "Ontological Insecurity." 511-512.

[22] Kinnvall, Catarina. 2004. "Globalization and Religious Nationalism: Self, Identity, and the Search for Ontological Security." *Political Psychology* 746.

[23] Jackson. "Ontological Insecurity." 511-512.

basic assumptions about the world".[24] That is to say, it violates their sense of social and moral order, their sense of continuity about the way the world works. McLellan frames ontological security as protective layers consisting of our physical and spiritual layers. These layers she argues can be destroyed through violent traumatic experiences which can result in ontological insecurity.[25]

Ontological shock involves the destabilization of the personal identity and belief structures as a result of a life changing event(s) that weaken or destroy existing feelings of security. It damages what an individual knows to be true about how the world operates.[26] To leave one's homeland is not just to leave a physical space, it is to risk the loss of goals (personal and religious), of loved ones, and of status and dignity. The loss of native languages, culture, familiar social structure, and of psychological resources.[27] As well as other forms of social capital which are valuable resources in maintaining ontological security and identity development. Failure to adjust can lead to ontological insecurity. A result of damage to the "social and moral order" of refugees.[28] Jackson argues this breach of ontological security can impact many aspects of one's life; including their physical health, mental health, housing stability, and their ability to "develop and maintain a stable sense of self-identity".[29] [30]

Access to education, the ability to work and/or work in one's professional field. Many factors play into the ability of children to access the mental health services they need for post-traumatic growth. Cultural factors, which may be reflected in different ways of understanding

---

[24] Bentley, Jacob, Zeba Ahmad, and John Thoburn. 2014. "Religiosity and Posttraumatic Stress in a sample of East African Refugees." *Mental Health, Religion & Culture* 17 (2): 192.
[25] McLellan. "Religious Responses to Bereavement, Grief, and Loss Among." 133.
[26] Ibid., 132.
[27] Ibid., 131-138.
[28] Ibid.
[29] Jackson. "Ontological Insecurity." 512.
[30] McLellan. "Religious Responses to Bereavement, Grief, and Loss Among." 133.

and addressing mental health.[31] [32] Coupled with displacement is the compounding of multiple

issues impacting identity including the ability to communicate to understand and be understood

by the people one comes into contact with.[33]

Language can be a potential barrier in verbal therapy.[34] Refugees who are not fluent in or

do not speak the language of their host nation, particularly those who are older may have a

difficult time learning the new language. This leads to the necessity of their child(ren) to take on

the new responsibility of translator. The death of a spouse may also create the necessity for new

roles/responsibilities, as the parent is now responsible for managing two roles. Identity may be

further challenged when refugees are forced to change their name to suit their host nation's

alphabet.[35] A sense of belonging can be critical to the ways in which we view ourselves.[36] Nira

Yuval-Davis uses social location as one of three classifiers of belonging.[37] It is described less as

a physical location, but an intersectional axis comprised of the different categories that form

one's identity. The complete picture represents the culture, values, and norms from which we

facilitate communication and relate to others.[38]

---

[31] Quilan, Rosalind, Robert Schweitzer, Nigar Khawaja, and Jane Griffin. 2016. "Evaluation of a School-based Creative Arts Therapy Program for Adolescents from Refugee Backgrounds." *The Arts in Psychotherapy* 47: 72.

[32] St. Thomas, Bruce, and Paul Gordon Johnson. 2001. "Migration and Health: The Child as Healer." *Migration World Magazine* 29 (5): 37.

[33] Brunick, Lisa Lefler. 1999. "Listen to My Picture: Art as a Survival Tool for Immigrant and Refugee Students." *Art Education* 52 (4): 14.

[34] Quilan, Schweitzer, Khawaja, and Griffin. "Evaluation of a School-based Creative Arts Therapy Program for Adolescents from Refugee Backgrounds." 72-73.

[35] Bentley, Ahmad, and Thoburn. "Religiosity and Posttraumatic Stress in a sample of East African Refugees." 185-195.

[36] Brunick. 1999. "Listen to My Picture: Art as a Survival Tool for Immigrant and Refugee Students." 14.

[37] Krause, Kristine, and Katharina Schramm. 2011. "Thinking through Political Subjectivity." African Diaspora 4: 119.

[38] Krause, and Schramm. "Thinking through Political Subjectivity." 119-121.

Art Therapy

There are two approaches utilized in art therapy programs for children, the laissez-faire approach, and the guided approach. The laissez-faire approach is a more hands-off process focused on promoting (group and individual) creative expression, emphasizing 'children's natural development', and not the method.[39] The guided approach is more hands-on, their method calls on using the development of technique skills and mediums (modeling, scaffolding, graphite sketching) to build a relationship between the child and teacher. [40] For the purposes of this paper, we will focus on programs that utilize the laissez-faire approach.

Art therapy can address verbal limitation providing a means of processing feelings at a higher level while relying on a lower level of cognitive development.[41] Art therapy allows participants to express themselves outside of language barriers, providing a variety of means of symbolic expressions. Art provides children with a safe space in which they can express themselves with fewer restraints to their free expression.[42]Symbolization through creative expression use of words, paintings, sculpture, dance, music, and other forms of creative expression as a means of representing experience.[43] Through symbolization and reflection of experience, the psychological and social self. However, inability to process the events and create meaningful symbolization can compound existing psychological frailties.[44]

---

[39] McArdle, Felicity, and Nerida Spina. 2007. "Children of Refugee Families as Artists: Bridging the Past, Present and Future." *Australian Journal of Early Childhood* 32 (4): 52.

[40] Ibid.

[41] Quilan, Schweitzer, Khawaja, and Griffin. "Evaluation of a School-based Creative Arts Therapy Program for Adolescents from Refugee Backgrounds." 72-73.

[42] Rowe, Cassandra, Rose Watson-Ormond, Lacey English, Hillary Rubesin, Ashley Marshall, Kristin Linton, Andrew Amolegbe, Christine Agnew-Brune, and Eugenia Eng. 2017. "Evaluating Art Therapy to Heal the Effects of Trauma Among Refugee Youth." *Health Promotion Practice* 18 (1): 27.

[43] Stepakoff, Shanee. 2007. "The Healing Power of Symbolization in the Aftermath of Massive War Atrocities: Examples from Liberian and Sierra Leonean Survivors." *The Journal of Humanistic Psychology* 412.

[44] Stepakoff. "The Healing Power of Symbolization in the Aftermath of Massive War Atrocities." 412.

Narratives are described as a 'powerful symbolic tool' which allows children to explore their inner world in constructive and imaginative ways that contribute to identity (re)construction.[45] [46] Discursive activities fairytales, myths, folklore, and a variety of storytelling methods are utilized in art therapy in conjunction with or independently from visual methods.[47] Ahn attributes the use of narratives to the development of distinctive self-concept and world-construction due to the ways in which the self (both past and current) are able to be explored in ways that produce "different layers of meaning, understanding, and reconstruction of identity."[48]

By relying on both verbal and nonverbal means of expression, symbolization allows survivors of traumatic experiences to process these experiences in meaningful ways. In a group setting, the process can lead to the reduction in feelings of isolation as personal and previously unspoken narratives are shared.[49] Studies using 'therapy methods based on creative expression' demonstrated Improved self-esteem, reduction in depressive and anxiety symptoms decrease in post-traumatic stress symptoms; self-reported mental health symptoms; decrease in emotional problems and improvement, in emotional expression.[50][51]

The Creative Expression Workshops

The Creative Expression Workshops worked with 138 participants aged seven to thirteen years old selected from two elementary schools in Montreal, Canada. The study, conducted by

[45] Ahn, Jiryung. 2011. "Review of Children's Identity Via Narratives." *Creative Education* 416.
[46] Daiute, Colette, and Luka Lucić. 2010. "Situated Cultural Development Among Youth Separated by War." *International Journal of Intercultural Relations* 34 (6): 618.
[47] Ahn, Jiryung. 2011. "Review of Children's Identity Via Narratives." Creative Education 417.
[48] Ahn. "Review of Children's Identity Via Narratives." 417.
[49] Stepakoff. "The Healing Power of Symbolization in the Aftermath of Massive War Atrocities." 400-401.
[50] Quilan, Schweitzer, Khawaja, and Griffin. "Evaluation of a School-based Creative Arts Therapy Program for Adolescents from Refugee Backgrounds." 74.
[51] Rousseau, Cécile, Abha Singh, Louise Lacroix, Toby Measham, and Michael S Jellinek. 2004. "Creative Expression Workshops for Immigrant and Refugee Children." *Journal of the American Academy of Child & Adolescent Psychiatry* 43 (2): 180-181

the Transcultural Psychiatry Unit at Montreal Children's Hospital consist of a twelve-week creative expression workshop.[52] Three methods of data collection were used to assess students, 'emotional and behavioral symptoms'. Students self-reported using Dominic, an interactive character that allows children to report feelings and behaviors ranging from anxiety and depression to hyperactivity and oppositional disorders. This is done by asking children how often they feel or act like the character Dominic, in a series of ninety photos, which are then used to calculate internalizing and externalizing scores.[53] Teachers assisted in the study by completing the Achenbach's Teacher's Report Form on students' symptoms. Lastly, interviews were conducted to assess self-esteem using the Piers-Harris Self-Concept scale.[54] The program consisted of two pilot projects consisting of three activities "The Trip", "Working with Myths", and "Memory Patchwork" and a workshop.[55]

The Trip is a joint narrative and drawing exercise focused on the four stages of the migration process. Children imagine a character of their choosing throughout the migration expression. Beginning with experiencing life in the homeland (pre-migration), their journey (migration), their arrival (post-migration), and the future (resettlement) and then ending by drawing a picture to go with their story.[56] The second pilot consists of two myth-focused activities in "Working with Myths" children explore myths in non-dominant cultures, in the last activity they exchange myths and stories from their own communities.[57] In the final program, participants partake in group and individual activities utilizing both verbal and non-verbal means

---

[52] Rousseau, Singh, Lacroix, Measham, and Jellinek. " 180.
[53] Ibid., 181.
[54] Ibid.
[55] Ibid., 182.
[56] Ibid., 181.
[57] Ibid.

of expression (drawing, painting, storytelling, and writing).[58] More positive benefits of the effects on self-esteem were reported in younger participants and that decreases in these effects were seen with increasing age. Boys were seen to display more positive effects in the areas of popularity and satisfaction levels, in particular, the experimental group. No significant effects were seen in the girls' experimental or control groups.[59]

The Devon Behavioral Support Team

The Devon Behavioral Support Team (BST) offers art workshops to schools in England as part of The Special Education Needs and Disabilities Act (SEDNA). The Act requires local authorities to meet the needs of all children including those requiring additional attention in the "area of social, emotional and behavioral difficulties" as may be the case with refugee children.[60] The study consisted of six workshops over a four-month period in a school in South West England. The six participants (three girls and three boys) were all refugee children originating from Yemen, Afghanistan, and Kosovo.[61] The sense of self, sense of belonging and sense of personal power were all assessed in two of the children using the Elizabeth Morris' Self-Esteem Indicator. The teacher completed these questionnaires for each child upon school enrollment before and after two workshops.[62] Children were also observed throughout the course of the workshop and reports were made based on a schedule that allows the results to be compared over the six sessions. The analysis focused on eight social skills: social interaction, smiling, talking, sharing pictures, group work, willingness to participate, displaying confidence, and initiating

---

[58] Ibid.
[59] Ibid., 183.
[60] Cumming, Stevi, and John Visser. 2009. "Using Art with Vulnerable Children." Support for Learning 24
    (4): 151.
[61] Cumming, and Visser. 2009. "Using Art with Vulnerable Children." 152.
[62] Ibid., 153.

conversation.[63] These behaviors are not recorded not by tally but rather, "the observations show an overview of each of the social skills listed below and perceptions of each child's response." The study concluded that students demonstrated an improvement over the six weeks and during the twelve-week period following participation in the areas measured.[64] Of the two students randomly selected for additional self-esteem questionnaire one, Nura progressed from 'very low' to 'near confident', the other Metin showed significant improvement but remained within the range considered 'vulnerable'.[65]

Conclusion

Art therapy shows promise in benefitting post-traumatic recovery in refugee children. Benefits to ontological security are measured with reports by programs on trauma symptomology, resilience, self-esteem, and sociability. When applied in conjunction with in-school program children showed progress in the reduction of the aforementioned factors. These programs showed potential as both an indirect approach to therapy for trauma and also addressed concerns with language gaps. The literature also reported a positive relationship between participation in art therapy programs and improvement in trauma symptomology. It should be noted that there is no universal application for successfully addressing trauma, those affected by trauma have different ways of coping and healing. Refugees can greatly benefit during their transition into a host society from access to methods that best suit their internal process.

---

[63] Ibid., 154.
[64] Ibid., 154-157.
[65] Ibid., 155-156.

References

Ahn, Jiryung. 2011. "Review of Children's Identity Via Narratives." *Creative Education* 415-417.

Bentley, Jacob, Zeba Ahmad, and John Thoburn. 2014. "Religiosity and Posttraumatic Stress in a sample of East African Refugees." *Mental Health, Religion & Culture* 17 (2): 185-195. Accessed December 12, 2016.

Brunick, Lisa Lefler. 1999. "Listen to My Picture: Art as a Survival Tool for Immigrant and Refugee Students." *Art Education* 52 (4): 12-17.

Canefe, Nicholas. 2010. "To Feel at Home Abroad or No Place Like Home: Meanings of Displacement in Refugee Studies." *Refuge* 27 (2).

Cumming, Stevi, and John Visser. 2009. "Using Art with Vulnerable Children." *Support for Learning* 24 (4): 151-158.

Daiute, Colette, and Luka Lucić. 2010. "Situated Cultural Development Among Youth Separated by War." *International Journal of Intercultural Relations* 34 (6): 615-628.

Harris, David Alan. 2009. "The Paradox of Expressing Speechless Terror: Ritual Liminality in the Creative Arts Therapies' Treatment of Posttraumatic Distress." *The Arts in Psychotherapy* 36 (2): 94-104.

Hart, Robert. 2009. "Child Refugees, Trauma and Education: Interactionist Considerations on Social and Emotional Needs and Development." *Educational Psychology in Practice* 25 (4): 351-368.

Jackson, R.L. 2010. "Ontological Insecurity." Vol. 2. Thousand Oaks: SAGE Publications, Inc. 511-512.

Kienzler, Hanna. 2008. "Debating War-trauma and Post-traumatic Stress Disorder (PTSD) in an Interdisciplinary Arena." *Social Science & Medicine* 67 (2): 218.

Kinnvall, Catarina. 2004. "Globalization and Religious Nationalism: Self, Identity, and the Search for Ontological Security." *Political Psychology* 741-767.

Krause, Kristine, and Katharina Schramm. 2011. "Thinking through Political Subjectivity." *African Diaspora* 4: 115-134.

McArdle, Felicity, and Nerida Spina. 2007. "Children of Refugee Families as Artists: Bridging the Past, Present and Future." *Australian Journal of Early Childhood* 32 (4): 50-53.

McLellan, Janet. 2015. "Religious Responses to Bereavement, Grief, and Loss Among." *Journal of Loss and Trauma* 20 (2): 131-138.

Quilan, Rosalind, Robert Schweitzer, Nigar Khawaja, and Jane Griffin. 2016. "Evaluation of a School-based Creative Arts Therapy Program for Adolescents from Refugee Backgrounds." *The Arts in Psychotherapy* 47: 72-78.

Rousseau, Cécile, Abha Singh, Louise Lacroix, Toby Measham, and Michael S Jellinek. 2004. "Creative Expression Workshops for Immigrant and Refugee Children." *Journal of the American Academy of Child & Adolescent Psychiatry* 43 (2): 180-185.

Rowe, Cassandra, Rose Watson-Ormond, Lacey English, Hillary Rubesin, Ashley Marshall, Kristin Linton, Andrew Amolegbe, Christine Agnew-Brune, and Eugenia Eng. 2017. "Evaluating Art Therapy to Heal the Effects of Trauma Among Refugee Youth." *Health Promotion Practice* 18 (1): 26-33.

St. Thomas, Bruce, and Paul Gordon Johnson. 2001. "Migration and Health: The Child as Healer." *Migration World Magazine* 29 (5): 33-39.

Stepakoff, Shanee. 2007. "The Healing Power of Symbolization in the Aftermath of Massive War Atrocities: Examples from Liberian and Sierra Leonean Survivors." *The Journal of Humanistic Psychology* 400-412.

Thompson, Neil, and Mary Walsh. 2010. "The Existential Basis of Trauma." *Journal of Social Work Practice* 24 (4): 377-389.