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## Literature Review on the Effectiveness of Expressive Therapies with Spirituality to Hong Kong Traumatized Protesters

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Literature Review on the Effectiveness of Expressive Therapies with Spirituality to

Hong Kong Traumatized Protesters

Capstone Thesis

Lesley University

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Expressive Arts Therapy

Donna C. Owens, Ph.D.

### **Abstract**

Expressive therapies and spirituality treatments have often been applied to people with trauma experiences. Previous research has found positive outcomes in these clinical practices. However, little research has been done to evaluate their effectiveness in helping traumatized participants in social movements. In 2019, there was a series of large-scale protests in Hong Kong resulting in many local political activists and protesters experiencing police violence and developing symptoms of posttraumatic stress disorder. This critical literature review aims to explore, evaluate, and discuss the effectiveness of using expressive therapies with spirituality intervention to enhance the wellbeing of Hong Kong traumatized protesters. It begins by giving a historical context of the Hong Kong protests in 2019, then identifying the definitions of trauma to link with the experience of political activists, such as automatic psychological coping mechanisms of intrusion of dreams, flashback, nightmares, and numbing. Different expressive interventions, such as art, music, dance movement, psychodrama, drama, storytelling, internal family systems, mindfulness, and spirituality, which address human's self-exploration and creative intelligence will be elaborated upon. The literature review suggests such interventions for traumatized people are promising. This paper finally discusses and proposes how to combine expressive therapies and spirituality interventions to strengthen the wellbeing of Hong Kong traumatized protesters.

*Keywords:* expressive arts therapy, trauma, political protesters or activists, spirituality, Hong Kong, PTSD, psychodrama, mindfulness, internal family systems, storytelling

Literature Review on the Effectiveness of Expressive Therapies with Spirituality to  
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**Introduction**

It doesn't matter where I am, or what passport I hold. [Chinese authorities] will terrorize me anywhere, and I have no way to fight that.

—Uyghur Muslim with European Citizenship, Washington, September 2019

We self-police ourselves.....Everybody [who participates in the student salon] is scared. Just this fear, I think creating the fear, it actually works.

—University student, Vancouver, June 2018

People throughout the world have encountered traumatic experiences in contentious politics or anti-government demonstrations (Al Jazeera English, 2019; Cheung, 2019; Hong Kong Free Press, 2019; Zhou, 2019; Rubin, 2020). Ni et al. (2020a) conducted a population-based survey in Hong Kong and found a surprisingly high prevalence of symptoms of post-traumatic stress disorder (PTSD) after the social unrest in 2019, which was estimated as 12.8% (p. 273). The Human Rights Report (Roth, 2020) documents, as shown above, the experiences of a Uyghur Muslim with European citizenship and a university student in Vancouver who both worried and were scared and terrorized by the authorities. Ripple effects generated in the Hong Kong anti-government demonstrations since June 2019 have spread out around the globe. There have been large-scale anti-government protests from Chile, South America, Asia, Egypt, Spain, France, London to Amsterdam (Hu, Griffiths, & Berlinger, 2019; Metro Boston, 2019). The more social movement happens, the more traumatized protestors or activists may need help.

A considerable amount of research has found that art has healing power to comfort and connect people. The expressive therapies promote psychological, physical, mental health, and spiritual wellbeing (Malchiodi, 2005; McNiff, 2004; Zuch, 2015). McNiff (2004)

believed “healing belonged to the ‘soft’ realm of spirituality” (p. 3). Despite the use of expressive arts in trauma intervention to protestors or activists, few researchers have thoroughly studied this area. Scholars have identified the effectiveness of community art interventions (Zuch, 2015), such as films, art, music, photography, and storytelling.

This literature review aims to explore the effectiveness of expressive arts therapy combined with spirituality to enhance the wellbeing of Hong Kong traumatized protestors or activists. Spirituality is known as a “the quality of being concerned with the human spirit or soul as opposed to material or physical things” (Oxford, 2020) and trauma is understood as “a deeply distressing or disturbing experience” (Oxford, 2020). This thesis gives an overview of the issue and reviews relevant literature via searching keywords “spirituality” and “trauma.” The key question is, How can expressive arts therapy and spirituality be combined in an intervention to enhance the wellbeing of traumatized protestors and activists?

This review will briefly explore the historical context of Hong Kong’s 2019 protest and identify key areas of trauma suffered by political activists with posttraumatic stress disorder (PTSD) symptoms from other countries traumatized activists. The critical review will evaluate the effectiveness of expressive therapies and interventions used with the clients with traumatized experience, including art therapy, music therapy, dance/movement, psychodrama, drama therapy, community art, storytelling, intern family system, mindfulness, and spirituality. Until recently, limited research had been done to investigate the suffering of protestors with PTSD, and there is no study to deploy expressive therapies and spirituality interventions to help Hong Kong traumatized protestors. Against this backdrop, this paper aims to discuss the linkage by connecting the research outcomes with the political activists of other countries. In the discussion, this paper will suggest combining or interweaving different expressive interventions with spirituality treatment to help Hong Kong traumatized protestors. The conclusion will summarize the limitations and the study implications.

## **Literature Review**

### **Historical Context**

This thesis was motivated by my concern with the situation in Hong Kong, my roots, the city where I grew up. The 2019 Hong Kong protests, namely the Anti-Extradition Law Amendment Bill movement, are months-long and ongoing series of demonstrations in Hong Kong which were triggered by an introduction of the Fugitive Offenders Amendment Bill by the Hong Kong government (Lam, 2019). There was widespread fear in the Hong Kong society that, if the bill is materialized, Hong Kong residents and visitors could be extradited to Mainland China, which is an authoritarian country and has a completely different jurisdiction and legal system. The introduction of the Bill undermines the region's autonomy and Hong Kong people's civil liberties. There were over one million Hong Kong citizens rallying to demand the Chief Executive to withdraw the Bill on June 9, 2019 (Lam, 2019) and almost two million people hit the street in peaceful and non-violence demonstration on June 16, 2019 (Hong Kong Free Press, 2019). Despite the scale of mass demonstrations, the government persisted with the Bill. Even worse, many Hong Kong people were indiscriminately attacked inside train stations by organized “white T-shirts” gangers and the police on July 21, 2020 and August 31, 2020 respectively (Hu, Griffiths & Berlinger, 2019). This has aroused the civil unrest movement over 6 months. In the six months period, police fired over 10,000 tear gas bombs (Zhou, 2019), 4800 smoke bombs, 6200 rubber bullets, and 19 bullets (Cheung, 2019). The police arrested nearly 7000 people, including a 12 year old participant (Reuters, 2020). Protesters and police had battles on different university campuses (Chan, 2019; Quackenbush, Kam, Shih & Liang, 2019); many were injured, including an 18 year old boy and a 14 year old boy who were shot by real lethal bullets (Hong Kong Free Press, 2019; Ives, 2019). Some people died (Berger, 2019; Lum, 2019) within six months from suicide and other unclear reasons.

As early as January 2013, The University of Hong Kong Law scholar Benny Tai published an article proposing “A Large Scale Non-Violent Civil Disobedience Movement” to set against a debate of the electoral reform of the selection of Hong Kong Chief Executive. A group called “Occupy Central with Love and Peace” was formed in March 2013. The State Council of the People’s Republic of China then issued a white paper called “The Practice of the ‘One Country, Two Systems’” in June 2014, which claimed that the China government has full administrative control over Hong Kong. The “Occupy Central with Love and Peace” conducted a *Civic Referendum* on its own electoral reform proposal and over 792,808 Hong Kong residents participated. The group appealed to the public joining of the large scale non-violent civil disobedience movement to block the central Hong Kong and the government main office. The movement which lasted 79 days from September 26 to December 15, 2014 became the well-known *Umbrella Movement* denoting that the protesters successfully protected themselves against tear gas with their umbrellas, and there were no reported deaths and gunshot injuries. Finally, the movement did not achieve its primary aim and the electoral system remained unchanged. Afterwards, the movement leaders and student leaders were charged and jailed. Yuen (2015) commented that the movement had widespread supporters, but “no compromise was offered by Beijing and the Hong Kong government, [which] will likely deepen social cleavages and send the city toward an uncertain future” (p. 49).

### **Defining Trauma**

Trauma is understood as “a deeply distressing or disturbing experience” (Oxford, 2020). Greene (2002) defined trauma as an event that had defeated one's coping skills. Terr (1991) described trauma as “an (external) blow or series of blows rendering the person temporarily helpless and breaking past ordinary coping and defensive operations” (p. 12). The American Psychiatric Association’s (APA) *Diagnostic and Statistical Manual of Mental Disorders* ([DSM-5]; 2013) defines psychological trauma as the occurrence of suffering an

events or series of events that are overwhelming a person's feeling of helplessness and ability to cope with traumatic experiences, including natural disasters, war memories, physical attack, robbery, mugging, physical abuse, memories of rape, torture, and human-made disasters (p. 274). In consideration of the diagnostic criteria of posttraumatic stress disorder (PTSD), trauma is to experience, witness, or confront actual or threatened death, serious injury, or sexual violence, either directly or indirectly through self, relatives, friends, or others (p. 271). The symptoms linked with PTSD include recurrent and involuntary traumatic memories or dreams; "dissociative reactions" (p. 271); hyper-vigilance; overreaction to stimuli; negative moods and thoughts (including fear, horror, anger, depression, guilt, anxiety and shame); distorted cognitions; and, avoidance of thoughts and places related to the trauma (p. 272). The clinical expression of the symptoms of PTSD, such as numbing symptoms, distressing dreams, and somatic symptoms with dizziness, shortness of breath, heat sensations, or panic attack, may vary culturally (APA, p. 278).

### **Protestors and Political Activists with Traumatized Experience**

Political trauma is a possible outcome of extremely suffering events caused by politically driven behaviors or experienced political violence (Vertzberger, 1997). Montiel (2000) noticed that "the effects of political trauma cross space and time boundaries, negatively affecting other individuals who identify with the political positions of the victims, and remaining for some time in the collective historical memories of the victimized group" (p. 94).

Civil unrest, social unrest, or public protests happen all over the world and have different consequences. Bhargava and Gupta (2020) analyzed a number of Indian cases and suggested three kinds of public violence in "public protests" (p. 2): the violence of remonstrance, the violence of confrontation, and the violence of frustration.



“The violence of remonstrance refers to public clashes arising due to agitation against governmental authority in some forms, for example, student agitation against higher fees; The violence of confrontation denotes the riots arising among private groups, for example, communal riots; The violence of frustration refers to the riots in large cities, for example, agitation when trams are delayed” (p. 2).

The Hong Kong protesters are exposed to traumatic experiences, including physical attack by Hong Kong Police, physical abuse and torture by tear gas bombs and smoke bombs, and serious injuries by rubber bullets and live bullets. Referring to the diagnostic criteria of PTSD in DSM-5 (APA, 2013), the Hong Kong protesters experience, witness, and confront actual and threatened death, serious injury, or sexual violence (p. 271).

Ni et al. (2020b) identified 52 studies from 20 countries and found the PTSD rate commonly ranged from 4% to 41% in riot-affected areas. But these identified studies were observational and only focused on riots. They might not be culturally relevant to inform our inquiry into the Hong Kong case directly. Ni et al. (2020a) surveyed a random sample of 1213 to 1736 Hong Kong adult participants who completed the 14-items PTSD Checklist—Civilian Version (PCL-C), additional criteria included direct exposure to traumatic events related to the social unrest in 2019. The survey estimated the suspected PTSD prevalence rate to be 12.8%, which corresponded to 810,000 adults among the overall 6.3 million adult populations.

There still remains a lack of reviewed research about the impact of unrest on their experience of PTSD. Therefore, the studies of political activists in other countries who experienced trauma and symptoms of PTSD are referenced.

Matthies-Boon (2017) conducted an analysis of the emotional and personal impact of “Egypt’s post-revolutionary political developments on 40 activists, consisting of 25 males and 15 females between the age of 18 and 35 years from Cairo” (p. 620). These activists

participated in political movements through demonstrations or local committees, and informal online engagement. Matthies-Boon (2017) interviewed with the activists from October 2013 to February 2014 when the army dismissed the Muslim Brotherhood-affiliated president Mohammed Morsi, and “the Muslim Brotherhood sit-ins of Rabaa and Ennahda had been violently dispersed and Abdel Fattah el-Sisi rose the power” (p. 621). “Between 2011 to 2014, 12 interviewees were teargassed, 11 were directly injured, 7 were detained (and beaten), 4 were tortured, 4 were sexually abused, and 3 experienced near death” (p. 621). The study recorded 12 of them witnessed death and injuries, nine had friends who were detained, seven had friends who were tortured, seven experienced family members injured, three had detained family members, two faced family members deaths, two had family members being tortured, and one’s family member almost died (p. 621). The study explained, “activists experienced automatic psychological coping mechanisms of intrusion (e.g. dreams and nightmares) and numbing” (p. 620), and experienced non-automatic “coping mechanisms of reintegration and reinterpretation” (p. 620). The research stated “the violence experienced by these activists was grave, leading 26 out of 40 to comment on the pervasiveness of death in their lives” (p. 621). Nineteen experienced intrusions with nightmares, which included betraying friends, witnessing sexual torture, hearing gunshots in their sleep, or dreaming of losing body parts; 18 interviewees “experienced severe anxiety due to political violence and uncertainty in Egypt” (p. 629); 15 experienced a numbing effect during violent clashes; and, one interviewee experienced numbing (dissociation) when he watched bullets flying over his head and “people bleeding” (p. 630).

### **Creative Arts Therapies and Trauma**

Expressive therapy or creative arts therapy is “the use of art, music, dance/movement, drama, poetry/creative writing, play, and sand tray within the context of psychotherapy, counseling, rehabilitative or health care” (Malchiodi, 2005, p. 2). Research has demonstrated

a range of expressive therapies interventional outcomes in reducing PTSD symptoms (Lusebrink & Hinz, 2016; Smyth & Nobel, 2011). For example, Smyth and Nobel (2011) deployed therapeutic approaches including expressive writing and expressive group therapy, as well as a range of creative arts therapies such as art, music, body-oriented and mindfulness training. Rhoads (2012, as cited in Kalaf & Plante, 2019) highlighted expressive therapies that help individuals tackle hardship by encouraging positive emotions and fostering resilient character. Even though research has yet to be published on how to reduce PTSD for Hong Kong protesters, there are some studies showing expressive arts workshops for political activists or political victims with positive outcomes (Bolton et al, 2007; Kalmanowitz, 2016; Peltonen & Punamaki, 2010; Silva et al, 2003). This suggests a possible area of linkage between Hong Kong traumatized protesters, political activists, political victims, or different traumatized populations.

Montiel (2000) indicated using expressive therapeutic strategies can help in the understanding and recovery of the inner conflict of individuals traumatized by viewing or undergoing political violence. Before 1986, the Philippine government did not hold any free elections. In 1972, President Marcos declared martial law which was supported by the government's military forces and the state controlled the citizenry "tightened with increasing ruthlessness" (p. 102). According to Montiel, most Filipino citizens kept silent to political opposition, except Montiel's "youth movement declared an organizational policy of secrecy" (p. 103). She was told not to speak about anything to anyone, even if she felt confused, frightened, and lonely. She said she sometimes wrote notes or poems to release her emotional pressure, but she tore the writing into pieces to avoid the soldiers getting it as evidence. Montiel observed expressive arts activities may heal traumatized political detainees. Montiel described seeing children from military detention camps playing among themselves to playback the real life with a better ending, saying "they would loosely tie the hands of a

playmate with a piece of cloth and pretend to torture the victim, then one other playmate would come rushing in to save the captured friend” (p. 105). Montiel (2000) explained political detainees wished to show their hope for a better ending and their hardships through different expressive activities, such as artwork, dance and play. However, the study included only a few cases of therapeutic activities in which little details and outcomes were provided. Nevertheless, Montiel (2000) is one of the few reviews related to the exploration of healing and recovery via interventions with the purposes of contextual transformation and self-expression for traumatized people.

Adibah and Zakaria (2015) did expressive arts therapy with collage, drawing map of life, butterfly story writing, wave painting, and diary writing in the creation of catharsis for seven delinquent girls. Adibah and Zakaria conducted three in-depth interviews and observations and found the interventions resulted in reducing stress with relief for all seven girls, among which five admitted stabilization of emotion after eight sessions of expressive arts therapy. The study showed that the juvenile delinquency participants might gain new meaning towards interpreting the pain and experienced a catharsis through the implementation of expressive arts therapy (Adibah & Zakaria, 2015).

Rogers (1993) often provided client-centered creative arts training approaches to groups and individuals all over the world and found, no matter what ethnic backgrounds, the creative arts can reflect people’s inner world experience. The therapeutic journey can build a world network “of people with humanistic and democratic values” and “share our concerns and hopes, interpersonal bonding occurs” (p. 205). Rogers (1993) reminded expressive therapy facilitators that it is vital to respect personal expression between cultural differences and customs, such as taboos and social habits.

Rogers (1993) ran expressive arts groups with political trauma participants in Estonia in between 1989 and 1991. She recalled one of the participants who “gained insight into his

personal and political trauma in Estonia” (p. 214) when creating his collage. Rogers states “using imagery is a quick road to stripping away denial. The unconscious brings forth hidden truths, allowing the images to speak to himself” (p. 214). In the future, psychologists and expressive arts therapists may use art activities to heal the Hong Kong traumatized protesters.

Rogers (1993) implemented expressive arts therapies to help a Moscow group whose members were divided in pairs to spend 10 minutes interviewing each other about “something that is exciting in your life, and something that is disturbing” (p. 214), then were requested to make use of art resources to draw two pictures that represent the feeling about those two life situations. One of the participants demonstrated his picture with Rogers and the group. That participant described one of the two pictures as

a series of concentric circles in blazing yellow - as the part of himself that is radiant, pushing forth, sunny. Then he gazed at the other half of the picture: jagged rocks, black birds on the horizon, an ocean, and at the bottom of the ocean a large fish with an open mouth and menacing teeth. He described the ocean as tumultuous and the fish as all-consuming; a danger that was always lurking, that could grab him any time. He spoke of his childhood pain, his ever-present fears, and the potential danger, as represented in this fish. His tone was genuine and thoughtful. A heaviness was in the air. (p. 215)

He felt afraid of the thing which “is paralyzing and inhibits him from taking action” (p. 218).

Furthermore, he

used the bright colors to express his awakening sense of light. The image speaks back to him as a message and a reminder. Therapy that stays verbal does not offer as much opportunity to experience hope, joy, and vision. Imagery through movement and art evokes a sense of what is possible. (p. 218)

Even if the group member had traumatized memories, he affirmed also having hope, joy, and vision after his counseling.

**Art therapy.** “Art Therapy is used to improve cognitive and sensory-motor functions, foster self-esteem and self-awareness, cultivate emotional resilience, promote insight, enhance social skills, reduce and resolve conflicts and distress, and advance societal and ecological change” (AATA, 2020).

Huss, Kaufman, Avgar, and Shuker (2016) deployed art for community resilience building by making collages, presentations, and interviews in Batticaloa, Sri Lanka which was affected by war and disasters. Huss et al. (2016) stated, “the arts enable the retrieval and reprocessing of traumatic memories” and “concrete envisioning of a better future” (p. 284) after restructuring people who have undergone disastrous experiences. Huss et al. mentioned the advantage of doing arts within “cultural contexts, the benefits are accepted by all without the stigma of being designed for weaker populations” (p. 297).

The researchers (Huss et al., 2016) provided the villagers of Batticaloa art-based workshops “an external professional community artists, an art therapist trainer” (p. 289), and local and international NGOs as the organizers. The study used “collage and drawing” (p. 289). The villagers used natural materials to create collages with explanations and presentations (p. 291) and the community workers used oil pastels to draw with the support of explanations and semi-structured interviews. Huss et al. showed that “the villagers’ understanding of how the arts could rehabilitate their village and provide a source of resilience and community organization” (p. 296). They emphasized “the arts are embedded within spiritual and community life as a whole” (p. 296). The study indicated “the use of arts as a decolonizing or indigenous research method” (p. 298) which gave a channel where “victims of wars and disasters can define their own rehabilitation” (p. 298). Although the

study “aims to be phenomenological” (p. 299), more can be done to evaluate the exploration of different arts modalities and different arts with diverse cultures.

Linder (2015) examined the impact of childhood sexual abuse through art. Linder interviewed 12 women who narrated their trauma about childhood sexual abuse and drew a mandala with “the emotional resonance of personal narrative” (p. 145), while Linda did a mandala “from her perspective” (p. 145). Then Linder conducted post-interviews to examine the participants’ “wellbeing” (p. 145) and “explored the meaning, discussing similarities and differences” (p. 145) from the drawings. Linder mentioned five out of the 12 participants “identified soul murder as the most accurate descriptor of their psychospiritual injury” (p. 147). The researcher reflected that her study on “mandala-making and imaginal resonance may be fruitful transpersonal methods for future researchers” (p. 144), stating “participants reported numerous positive insights gained as a result of the study” (p. 150). However, the study had limitations, there were non-randomized chosen participants, and the researcher experienced transference, “overwhelmed and deeply afraid” (p. 150) through the process. I also wonder about the effectiveness of this intervention on other diverse populations with different art forms.

Both Huss et al. (2016) and Linder (2015) show some evidence that the arts enable “reprocessing of traumatic memories” (Huss et al., 2016, p. 284).

**Drama therapy and psychodrama.** According to the North American Drama Therapy Association (NADTA, 2020), “drama therapy is an active, experiential approach to facilitating change. Through storytelling, projective play, purposeful improvisation, and performance, participants are invited to rehearse desired behaviors, practice being in relationship, expand and find flexibility between life roles, and perform the change they wish to be and see in the world” (para. 5).

Psychodrama was developed by Jacob L. Moreno, MD (1889-1974) and uses guiding

dramatic action to assess problems or issues raised by an individual or a group. According to the American Society of Group Psychotherapy and Psychodrama (ASGPP, 2020), psychodrama is “using experiential methods, sociometry, role theory, and group dynamics, psychodrama facilitates insight, personal growth, and integration on cognitive, affective, and behavioral levels. It clarifies issues, increases physical and emotional well being, enhances learning and develops new skills” (para. 3).

Peleg et al. (2014) conducted a qualitative study for Holocaust Child Survivors (HCSs) who shared their survival stories by performing on stage through the “Testimony Theater” project. The study recruited 17 HCSs (eight women and nine men) who were born between 1930 to 1939 in Nazi-occupied Europe and immigrated to Israel between 2001 and 2010. The project gathered those 17 Holocaust survivors with a group of youths from the same community who were taking a 1 year course between 2010 and 2011. Survivors shared their survival stories with the group and transformed them into a play which they performed on stage. Both survivors and youths were audience and performers. This research used two measurement tools: an open interview about life stories with a story name and a semi-structured interview followed. The results showed that the survivors’ identity is a vital Holocaust trauma. The findings indicated this drama project helped the survivors “reorganize and reconstruct their self-identity, so it will have positive meaning in the collective memory of the Holocaust” (p. 416). “The testimony provided the survivor with an opportunity for self-expression and empowerment [which] heals the survivor’s hurt inner self (Greenwald, Ben-Ari, Strous, & Laub, 2008; Krell, 1993)” (p. 412). The testimonial process was facilitated by building relations with the youths and the audience fully listened to survivors’ traumatic memories. “The audience played the important role “in rehabilitating the relationships between the traumatized survivors and others” (p. 417). This study emphasized the power of witnessing and listening.



As Herman wrote, “Trauma isolates; the group recreates a sense of belonging. Trauma shames and stigmatizes; the group bears witness and affirms. Trauma degrades the victim; the group exalts her. Trauma dehumanizes the victim; the group restores her humanity (p. 214)” (Peleg et al., 2014, p. 417).

### **Creative Arts Therapies and Spirituality**

**Defining spirituality.** Spirituality refers to the belief in a unique power, a personal, subjective experience of God and is related to connection with a universal force transcending life experience. It defines a desire to seek the meaning of life, “which ideas of transcendence and immanence form an integral part (Decker, 1993; King, Speck, & Thomas, 1999)” (Connor et al., 2003, p. 487). Spirituality is a growing power “in relationship to coping after trauma and acute illness (e.g., Andrykowski, 1992; Khouzan & Kissmeyer, 1997; King et al., 1999; King, Speck, & Thomas, 1994; Park, Cohen, & Murch, 1996)” (Connor et al., 2003, p. 487).

Farley (2007) identified three functions in Canda and Furman’s Operational Model of Spirituality (as cited in Farley, 2007),

The first function is perceiving the world, which creates a screen for experiences and perceptions related to possible spiritual events. The second function is interpreting and explaining the world, which creates beliefs, values and ethics. The last function is relating to the world and spirituality can provide resources to help transform life experiences. (pp. 3-4)

The research found out using expressive therapies with spirituality, such as using dance and movement therapy, music therapy, storytelling, testimonial therapy, and mindfulness-based art can enhance the wellbeing of the traumatized patients with spirituality.

**Dance/movement therapy.** Dance is one of ancient rituals and healing ways. It acts as a spiritual experience as well. According to the American Dance Therapy Association

(ADTA, 2014), dance movement therapy is defined “as the psychotherapeutic use of movement to promote emotional, social, cognitive, and physical integration of the individual, for the purpose of improving health and well-being” (para. 2). The European Association of Dance Movement Therapy (EADMT, 2010) adds spirituality, defining dance movement therapy “as the therapeutic use of movement to further the emotional, cognitive, physical, spiritual and social integration of the individual” (para. 3).

Koch et al. (2014) evaluated the effectiveness of 23 primary dance movement therapy trials for treatments of health-related problems. The results show that dance movement therapy is effective for improving quality of life and decreasing clinical symptoms of depression and anxiety. Dance movement therapy can have positive effects on well-being, positive mood, affect, and body image. The study supports the effectiveness of dance and movement as therapeutic approaches in clinical and prevention contexts and suggests future research needs to investigate evidence-based research in dance and movement.

Ho (2005a) did a pilot pre-and post-study to explore the effectiveness of the implementation of dance movement therapy with Chinese cancer patients in Hong Kong. The study recruited 22 cancer patients, aged 39 to 69 with an average age of 50.18 years old. The patients finished a 6-weeks dance movement program with a total of 9 hours contact time. Each session had a specific theme and process, which included a warm up exercise, dance with variety types, thematic movement, and relaxation exercise. Sixteen out of 22 participants completed 10-item Pre-Perceived Stress Scale (PSS) and 10-item Post-Rosenberg Self-Esteem Scale (SES). With the high participation rate and positive feedback from the participants, results showed “a significant reduction in perceived stress and a positive change in self-esteem” (p. 342). The study suggested the patients can benefit at physical, psychological, and spiritual levels. It quoted the participants saying that “dancing can bring health to the body and comfort to the soul,” “it enriches my soul,” “I can release myself and

get in touch with my inner child,” “it makes me feel less stressed,” and “I can be relaxed and less depressed” (p. 341).

The idea of Yin Yang is a Chinese traditional principle of balance in emphasizing living in harmony with unity of man and universe. Ho (2005b) suggested a mixture of Eastern and Western movement intervention to Chinese cancer patients in Hong Kong. Dosamantes-Beaudry (1999) observed Chinese participants were not easy expressing their feelings verbally and non-verbally in a DMT group in Taiwan. Ho (2005a) reported Hong Kong cancer participants were not used to moving or even moving improvisationally in front of others at the beginning of the dance movement program. Finally, the participants had benefits on physical, psychological, and spiritual well-being. Ho (2005b) emphasized “the change of focus from the body to mind and spirit implied an ongoing healing process moving towards holistic well-being and a restoration of balance within the individual” (p. 89). Ho (2005b) suggested the DMT program for Chinese cancer patients should consider cultural factors - holistic wellness combined with the sense of balance in body, mind, and spirit, blending meditation, tai-chi, qi-gong, and yoga with western approach dances. Ho (2005b) lastly concluded “the Chinese clients’ inner strength, rich emotions and sense of interconnectedness can then be awakened” (p. 97).

**Music therapy and mindfulness.** According to the American Music Therapy Association (AMTA, 2005), music therapy is “the clinical and evidence-based use of music interventions to accomplish individualized goals with a therapeutic relationship” (para. 1). The therapeutic relationship is aimed to address the emotional, cognitive, physical and social integration of the individual.

Natalie Wlodarczyk (2007) did a quantitative study and showed using music therapy can enhance the wellbeing of the patients with spirituality intervention in an in-patient hospice unit. Garland, Carlson, Cook, Lansdell, and Speca (2007) found mindfulness-based

art can reduce post-traumatic symptoms and increase spirituality for cancer outpatients. Linder (2015) and Mountain (2007) used mandalas drawing interventions with women who experienced childhood sexual abuse and middle school students respectively; both showed the sense of connectedness in spirituality. Based on the above findings, expressive arts therapy with spirituality can enhance the wellbeing of different traumatized populations. I believe it could also work for the traumatized protesters.

Garland, Carlson, Cook, Lansdell, and Specia's (2007) study compared the effectiveness of mindfulness-based stress reduction (MBSR) and healing art (HA) programs on post-traumatic growth and spirituality in cancer outpatients. Forty-four participants finished 6-weeks HA program with total 12 hours contact time and 60 participants finished 8-weeks MBSR program with total 15 hours contact time. Both groups completed the 21-item Post-traumatic Growth Inventory-Revised (PTGI-R) self-report and a 12 question Functional Assessment of Chronic Illness Therapy-Spiritual Well-Being (FACIT-Sp) as pre-and post-test measures. The result showed both HA and MBSR groups improved on the PTGI-R. The increase in MBSR group was higher than the HA group in enhancing spirituality. But the reader should be cautious to interpret the findings. There were non-randomized chosen participants. The absence of a control group with no treatment was a major problem that the study cannot compare the difference between with and without expressive therapies intervention. Also, the study had a low completion rate of questionnaire and the sample sizes were small (i.e. 44 out of 99 people finished the HA program and 60 out of 172 people finished the MBSR program). Moreover, MBSR participants did have more contact time and formal homework daily which may lead to a more positive outcome.

Based on the above, I understand more about the existing evidence showing expressive arts therapy seems to be more helpful in medical settings. I also agree with the two major concerns raised in the literature: "should the research represent a broader range of

religious beliefs other than Christian about spirituality?” (Wlodarczyk, 2007); and, how can we “compare the active intervention group to no-treatment controls to assess changes?” (Garland et al., 2007).

**Mindfulness meditation.** Mindfulness is considered an Eastern approach.

Mindfulness is maintaining present awareness of one’s experience without judgment. Kabat-Zinn (2003) defines mindfulness meditation as “an operational working definition of mindfulness is: the awareness that emerges through paying attention on purpose, in the present moment and nonjudgmentally to the unfolding of experience moment by moment” (p. 145). Briere (2012, as cited in Kalmanowitz and Ho, 2016) indicated a connection between mindfulness and trauma, saying that “mindfulness increases the ability of the individual to handle the emotions” (p. 58). Kalmanowitz and Ho (2017) conducted a qualitative phenomenological study in which they organized a 4-day intensive mindfulness and art therapy workshop for 12 refugees or asylum seekers aged 18 to 45. The participants suffered from political violence and trauma, including “being beaten, attacked and seeing people being killed or dead bodies” (p. 109). “The participants were concerned with self-regulation and daily coping” (p. 111). The study’s setting was Inhabited Studio in Hong Kong where 12 participants engaged in art making and in mindfulness-meditation practice. It concluded in a focus group to “identify cultural and religious factors” that helped the participants “cope with adversity” (p. 109). Data was collected by means of “art, recordings of nonverbal behavior, semi structured questionnaire, discussion groups, reflective writing, written evaluations, focus groups, and individual interviews” (p. 109). The result showed the Studio could help the participants directly. “All participants revealed using busy daily activities to block out bad memories and cope with fear and anxiety” (p. 112).

**Storytelling and testimonial.** Block and Leseho (2005) studied the effectiveness of storytelling and social action in healing and spiritual functions for political victims. On

December 11, 2003, there were two to three thousand protesters marching in the Plaza de Mayo and 30 to 40 mothers joined the protest for their disappeared children taken by Argentina and Chile's military regime. Block and Leseho (2005) conducted qualitative interviews with protesters, psychotherapists, mothers, librarians, filmmakers, and physicians. One 90-year interviewee said her children were taken by the military government in her house. Block and Leseho recorded the healing outcomes of those mothers who commented on their stories retelling. "Through giving testimony, survivors are better able to cope with their present situation...because the emotional and cognitive work of remembering and the chronological reconstruction of events supports an initial mental integration by the survivors of their traumatic experiences (Weine cited in Luebben, 2003, p. 394)" (Block & Leseho, 2005, p. 179). Another interviewee, who was a physician of the Medical Foundation for the Care of Victims of Torture, mentioned that most of his Chileans patients had been tortured and did not want to talk about their story. He described the patients "continued to be plagued with nightmares, depression and "imaginary" illness" (p. 179). Block and Leseho (2005) did not only mention storytelling can heal the traumatized demonstrators, but also that listening to traumatized patients' stories can serve as a therapeutic way and a healing to relieve the pain of their traumas and sufferings. Block and Leseho (2005) referred to another staff of the Medical Foundation for the Care of Victims of Torture who understood the power of listening to the survivors of torture, stating "testimony, the open and public recognition of the truth of what was done, is part of any achievable measure of healing, small though that may be (Belton, 1998, p. 315)" (p. 179). Block and Leseho (2005) cited Gabriella, a clinical psychologist, who emphasized how important being a good listener is to the client's story,

Let that suffering go into words. . . talking about suffering and about the trauma itself, it helps. Because through talking you can go through it over again a few times. It's

like you can handle it a little bit better than when it's just a pain, without words

(Winnipeg, Canada, 20th January, 2004). (p. 180)

Leseho and Block outlined that some protesters felt fear and violence, and also lost their voice (p. 181). Another interviewee, a university librarian and film producer, who was one of the political victims in the protests stated that “you struggle and then you know, except for friends, in the words of friends who listen to us and give us courage with their words and value (Chile, 28th December, 2003)” (p. 182). The Pewenche, People of the Pine, who were one of the tribes living high in the Andes Mountains of Southern Chile, used the traditional sacred customs to tell their stories to deal with the pain of loss and hardships (p. 183) and used spiritual customs to bring them a sense of hope (p. 183). Block and Leseho further emphasized the use of storytelling and listening “toward integration--social, personal and spiritual” (p. 183) can heal these societies and their citizens.

Silva et al. (2003) used the Skills Training in Affect and Interpersonal Regulation with Narrative Storytelling program (STAIR/NST) with the traumatized people and children following the 911 event. The training had benefits with making meaning of trauma history in the process of storytelling, labelling, and mastery of emotions, evaluating the impact on the sense of self and the world, self-esteem and efficacy building, sense of competence, coping resources and training emotion regulations and interpersonal skills.

Agger et al. (2012) explored using testimonial therapy integrating spiritual ceremonies as healing and therapeutic intervention for Asian torture survivors. Testimonial therapy is defined as “an individual psychotherapy method for survivors of human rights violations” (p. 569). Testimony is a narrative event, which is “a trauma story told by a witness who suffered an injustice or something painful or terrible” (p. 570). The trauma story can be used in many kinds of creative ways, such as narrated in words, performance in music, or art. “The testimony may have objective functions: as evidence, attestation, proof, or

advocacy” (p. 570); and “a subjective expression of disapproval, condemnation, or protest” (p. 570). “Testimony giving can become an occasion for cultural expression and affirmation. It may also express individual creativity in mediating memories of violent experiences” (p. 570). The study organized and held in total eight testimonial therapy workshops for 245 torture survivors, with participants in 43 ceremonies in India, Sri Lanka, Cambodia, and the Philippines from May 2008 through April 2010. Each workshop included four sessions in which community workers helped the survivors in writing their testimonial in the first two sessions, survivors participated in an honour ceremony in the third session, and the community workers met the survivors for assessing the survivor well-being one to two months after the ceremony. The honor ceremonies took into account Asian cultural and spiritual considerations at each site: “human rights (India), religious/Catholic (Sri Lanka), religious/Buddhist (Cambodia), and religious/Moslem (Philippines)” (p. 568). The ceremonies used embodied spirituality in different forms, interweaving singing, dancing, and religious rituals in a collective gathering. These spiritual ceremonies may “facilitate an individual’s capacity to contain and integrate traumatic memories, promote restorative self-awareness, and engage community support” (p. 569).

**Internal Family Systems.** Based on the above studies, using expressive therapies and spirituality appear to be efficacious in helping traumatized people. However, are there any common factors in the healing process? Asay and Lambert (as cited in Mones & Schwartz, 2007) proposed four major factors that can lead to successful outcome of counseling process, including client (accounting for 40% of improvement in successful outcomes), therapeutic relationship (30%), hope and expectancy (15%), and model/technique factors (15%) (p. #). The implication of the common factors model showed “client” is the major component that contributes to improvement in successful outcomes. Mones and Schwartz (2007) stated “clients possess their own healing capacity,” brought on by “a therapeutic process that



emphasizes listening, empathy, and a drive toward the experience of self-efficacy and acceptance” (p. 315). Block and Leseho (2005) suggested spirituality can bring the client a sense of hope. Holmes (1994) proposed the Internal Family Systems model as “a bridge between spirituality and psychotherapy” (p. 26).

Schwartz developed Internal Family System (IFS) Therapy as a trauma model by paying close attention to the client's inner experience. The IFS was grounded by an individual's internal workings and often functions much like a larger family system operation (Schwartz, 1995). IFS is described as “a synthesis of two paradigms: the plural mind, or the idea that we all contain many different parts, and systems thinking” (Schwartz and Sweezy, 2020, p. 4). In IFS, Self has two main parts: exiles and protectors. Exiles absorb and hold the emotional pain and beliefs associated with developmental injuries and traumas. Protectors work to prevent the exile's overwhelming feelings from being activated or by shutting down. Protectors fall into two categories: managers and firefighters. Managers maintain normal functionality and firefighters respond to threats. At the center is the self that holds good qualities: compassion, courage, curiosity, clarity, confidence, creativity, calm, and ability to connect to others (Lucero et al., 2018; Mojta, Falconier, and Huebner, 2014; Mones and Schwartz, 2007; Rosenberg, 2020; Schwartz, 1995, Twornbly and Schwartz 2008). The good qualities of self can focus on self-efficacy and self-acceptance woven from common factors (Mones and Schwartz, 2007, p. 322). Rosenberg (2020) stated the model is client-centered and phenomenological, drawing on psychodynamic, systemic, humanistic, and trauma.

Lavergne (2004) combined art therapy and IFS to work with two traumatized and adjudicated teenage girls with 10 treatment sessions. The results reveal IFS helps teenagers develop self-awareness, autonomy, self-esteem, and identity formation. Art therapy creates a safe space and welcome environment. Two approaches are also effective interventions for processing suffering and traumatized life experience. Drawing and sculpting helps clients

externalize their trauma. The artistic expression “helps to unblend parts” from the authentic Self and “provides the confidence and safety to express and transform past hurts” (p. 22).

***IFS and psychodrama.*** Dayton (2003) said “Psychodrama offers a unique modality for the resolution of emotional, psychological, spiritual, behavioral problems related to trauma” and “psychodrama allows the protagonist to view the contents of her inner world before she is asked to reflect on it in the abstract. The concretization promotes the ability to self-reflect, which can be difficult for trauma survivors who are removed from their internal experiences through psychological and emotional defenses or who are glued to model scenes in their past that never resolve themselves because thinking, feeling, and behavior became seared together in the white heat of fear and pain” (p. 183). Holmes (1994) explained “the power of the spiritual connections that emerge in the IFS work is undeniable in its ability to transform the internal systems of clients” (p. 35). Psychodrama serves a similar function to IFS for the healing power to the client. Dayton (2003) has applied psychodrama intervention with a traumatized woman.

“It is an action method that gives it a significant advantage in changing behavior both through exploratory, healing role play and through role training or practicing more functional behaviors. It offers a living laboratory in which a woman can view and experience her own life, compare and contrast different sets of behaviors, separate the past from the present, and make conscious choices about what may work best for her as she moves into her recovery” (p. 179).

When the client can share with the group and tell their trauma through action and word, the group members can use the IFS model to play the client's parts to revisit those fears in clinical safety and with therapeutic relationships. Dayton (2003) stated “clients experience both a catharsis of abreaction (expulsion of strong feeling) followed by a catharsis of integration that brings new awareness and insight” (p. 183). Van der Kolk (1987) explained

“the client can begin to let the walls of defense down and take in support from others” (cited in Dayton, 2003, p. 184) when telling the story.

### **Cultural Considerations**

It is important to consider individual and cultural differences when adapting creative arts interventions and spirituality treatment in the therapeutic process for the traumatized protesters. As noted by (Rogers, 1993), “Before offering movement or sound exercises, it is wise to talk to your host in that country to understand the prevailing customs” and “the facilitator needs to be aware of the taboos and social habits as she offers expressive arts” (p. 206).

Rogers (1993, p. 206) further reminds us that all expressive arts therapists have to pay attention to various issues “cross-culturally” and said “our sensitivities and listening skills need to be acute. I am particularly careful not to interpret or analyze the art, movement, sounding, or writing when in a foreign country. I am there as a learner to soak up knowledge about our similarities and differences, as well as the social and political conditions of that culture”.

Agger et al. (2012) emphasized “the inclusion of culturally adapted spirituality in the therapeutic process therefore appears to be an approach that may relate to the inner world of many Asian survivors of torture” (p. 571). The authors took Philippine indigenous tribes’ healing tradition as an example and stated, “*babaylan* (female indigenous healer) may give blessings and pray for an individual who is affected by physical or mental illness” (p. 571). Rev. Buenafe (2012) introduced *babaylan* “from various ethno-linguistic groups across the country who were and who still are the ritualist-oralist-healers of our traditional and indigenous communities today. They had been willing to share their songs of healing and God-experience” (cited in Nono, 2013, p. 9). Agger et al. (2012) concluded the healing approaches have to include religious, cultural, and political aspects globally. A therapist,

when organizing interventions and healing approaches, should include religious, cultural, and political aspects for the individual, group and the needs of the community.

### **Discussion**

To my knowledge, this thesis is the first ever literature review aiming to explore, evaluate, and discuss the effectiveness of using expressive therapies together with spirituality treatment to support the wellbeing of traumatized participants in the social movement. It began with a description about the contextual background phenomenon of the social unrest in Hong Kong, which was a snowball effect of the widespread democratic demonstrations held around the world since June 2019. But the Hong Kong protests are not alone. People throughout the world have encountered similar types of traumatic experiences in contentious politics or anti-government demonstrations. Referring to the trauma amongst Egypt political activists, Matthies-Boon (2017) showed activists experienced nightmares and numbing. Hong Kong protesters who suffered from police violence developed symptoms of PTSD. I spoke with two acquaintances who had participated in the 2019 Hong Kong protests more than 3 times since June, 2019. One stated, “I often have flashbacks and nightmares about being attacked by teargas and pepper spray” (Informant A, personal communication, February 15, 2020). The other told me, “I felt anxious and always cried uncontrollably about police violence to the citizens” (Informant B, personal communication, February 15, 2020). They each exhibited certain PTSD symptoms such as flashback, nightmares, anxiety, and numbing. Based on a population-based survey, the prevalence rate of suspected PTSD was found to around 12.8% after the social unrest in Hong Kong (Ni et al., 2020a).

With regard to the positive outcomes obtained from the previous research, this review indicated creative arts therapies and spirituality treatments can work together to help traumatized populations in the clinical practices, such as cancer populations, victims of sexual abuse, survivors of political violence, wars and disasters. However, there is no

published information about the intervention for Hong Kong traumatized protesters. Despite the cultural difference, the use of the same types of interventions might work in the Hong Kong context, while the review suggests the combined use of creative arts therapies and spirituality seem helpful to people with PTSD symptoms.

This review supports evidence for the usefulness of creative arts therapies. Montiel (2000) indicated deploying expressive therapeutic strategies can help understand the recovery of the inner conflict of those individuals traumatized by viewing or undergoing political violence. Additionally, Rogers (1993) offers concrete examples to support using similar expressive arts interventions as a pilot for the Hong Kong traumatized protesters to rebuild their hope, joy, and vision in their future.

There are some types of interventions on the community level that can heal traumatized people. Music performances and art exhibits have always linked the public to the nations because these expressions come from the heart and soul and speak directly to others. Tolstoy (1996) emphasized the social value of the art which has the ability to connect the public together and encourage a sense of unity. The protesters composed songs or rewrote the lyrics and sang in the public together. One of the Hong Kong composers composed a Cantonese March “Glory to Hong Kong” and published the song in streaming media on August 31, 2019. The song has been widely adopted as a protest song. Since the protests were widespread in Hong Kong starting from June 2019, various songs that symbolize democracy such as “Do you hear the people sing?” from *Les Misérables*, were rewritten with different lyrics. People often sang these songs in public. Music helps boost the protester’s morale and unite people. Music does not need translation and works in both individual and group settings. Rogers (1993) emphasized the expressive arts can connect heart and soul to personal level. The expressive arts interventions offer “to get acquainted or use art to share a personal experience, and the barrier dissolves” (p. 206).

Spens (2013) stated Anita Glesta and George Gittoes used their films to capture “performative violence” in Guernica and Afghanistan as art means for “rehabilitating and healing” (p. 32) communities affected by political violence. Al Jazeera English produced a video about the Iraqi protest on November 5, 2019. Ferrer (2009), Harris (2007) and Moletsane et al. (2007) implemented art and photos to represent their experiences of political violence to promote empowerment and stress management (Denov et al., 2012, p. 117). Recalling the study, Huss et al. (2016) deployed art for community resilience building for people with political violence or disaster survivors in Batticaloa, Sri Lanka. With all these valuable experiences, therapists can design similar creative arts interventions at the community level to support those Hong Kong protesters who are suffering from traumatized conditions.

Combining expressive arts interventions and spirituality treatment would “offer effective ways to process painful and/or traumatic life events” (Lavergne, 2004, p. 22). They appear to be effective in helping traumatized people. Agger et al. (2012) identified creative arts “interventions embodied with spiritual significance are performed” and “emotional release is facilitated through expressions of love, kindness, and compassion” (p. 575).

Bowman (2001) mentioned trusting intuitive learning and discovering the ways and “metaphors of art that configure spirit and touch your own heart” (as cited in Farrelly-Hansen, 2001, p. 9). Leseho and Block (2005) indicated spirituality can heal and bring a sense of hope to traumatized people. One of my Christian acquaintances said, “I often pray and read the Bible to soothe my fear. When I sing the hymns on the street, I feel united” (Informant A, personal communication, February 15, 2020). A Buddhist acquaintance told me, “I attend Buddhist dharma to release my anxiety. I walk in nature and mountains to soothe my anger” (Informant B, personal communication, February 15, 2020). Bowman commented on Jung and said he

saw the religious experience as essential to healing. He described this experience as intensely personal and beyond a collective or societal construction. Jung demonstrated how art channels and contains the powerful images portrayed in the transpersonal encounter. The transpersonal art therapist willingly follows and amplifies these elements in pursuit of the hidden gift in the shadow. (as cited in Farrelly-Hansen, 2009, p. 8)

Social unrest has become a global concern. The Sudan protest photo "Straight Voice" and the Hong Kong protest video "Battleground PolyU" are the respective winners of the 2020 photo of the year and the photo interactive of the year in the World Press Photo Contests (World Press Photo, 2020). However, very few people pay attention to political participant's mental wellbeing. This literature review found protesters or activists around the world have developed PTSD symptoms and Hong Kong protesters were particularly exposed to traumatic experience. Since the social unrest appears never ending, the more social movements happen, the more traumatized protestors or activists might need help. It might have created a huge mental health burden for society (Lau, et. al. 2017). As a therapist, I would like to contribute my knowledge to find ways to help and heal those traumatized protesters and mitigate the future mental health burden in the society.

This review of the literature demonstrates the potential of using expressive interventions along with spirituality to help traumatized populations. However, there is very limited information and research about the interventions for the Hong Kong traumatized protesters. I believe using interventions similar to those for people with PTSD symptoms could work well with the Hong Kong traumatized protesters. I also strongly recommend to do further studies into the ways of integrating creative arts interventions with spirituality treatments to foster healing and enhance the well-beings of the Hong Kong traumatized protesters. The strategies include but are not limited to art therapy, dance/movement therapy,

music therapy or expressive arts therapy with mindfulness interventions, psychodrama with IFS therapy, performance and testimonial, photos or collective stories in the community wide, or different combinations of these strategies. Moreover, effectiveness study should be conducted to evaluate the effectiveness of these interventions as well as to develop pre-and-post quantitative measures in randomized controlled trial settings, which aim to gain evidence and keep track of the question of whether these interventions work or not and how to heal people in need. Social factors should be considered to associate with age, sex, educational background, household incomes, protest participation, political attitude, cultural differences, cultural preferences, religions, and so on. This review addresses a critical research gap in the literature about the use of a combination of expressive interventions and spirituality treatment for political trauma.

Based on the evidence I collected in this review, storytelling and witnessing are found to be powerful tools to touch the inner self of the people who need help and heal their soul. I thus recommend exploring the use of expressive arts therapy, psychodrama, and IFS as spiritual interventions, to support Hong Kong traumatized protesters on top of the current paradigm of drug or cognitive behavioral therapy-based interventions. As Paul Newham (1998) writes,

Although the expressive arts therapist, like the psychotherapist, is offering a therapy for the psyche, those who use the arts therapeutically provide an opportunity for the psyche to express itself not only through speech but also through artistic expression.  
(p. 89)

In considering the prolonged social unrest in Hong Kong, a novel approach of intervention to help Hong Kong activists, like expressive and spiritual based therapy, is particularly warranted.



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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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