Where I’m From: Internal Manifestations Among Cambodian Women Using The Expressive Arts A Literature Review

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Where I’m From: Internal Manifestations

Among Cambodian Women Using The Expressive Arts

A Literature Review

Capstone Thesis

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Expressive Arts Therapy

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Abstract

Chronic mental illness has affected many Cambodian people, but, culturally, Cambodians aren’t accustomed to opening up and discussing their feelings, rather defining mental illness to craziness and seeking help is presumed taboo. Thus, Cambodians are often reluctant to talk about their experiences and/or their related illnesses. Though Cambodians have experienced inconceivable suffering and violence during the Khmer Rouge era, for the purpose of this thesis, I will be discussing the role of Cambodian women and investigate the extent of what they’ve witnessed and experienced. Cambodian women have suffered through many years of trauma and grief, during and after the Khmer Rouge regime, but have yet to fully explore the root of their mental health issues. All trauma involves loss, whether it be loss of safety or security, world-view, or the loss of a person by death or other types of separation. Characteristics of grief tend to overlap with those of trauma experience. It is important to remember that the way people grieve and process that grief varies from one person to the next. One of the questions I am asking in this capstone thesis exploration is: Could it be that sometimes the brain’s way of protecting us is to block out painful memories to teach us how to survive. This literature review will be examined and organized into four parts: writings about Cambodian women, trauma, grief, expressive arts therapy and how it relates to this population. Existing research supports the benefits of using Expressive Arts Therapy with Cambodian women who are finding their way to not only cope, but to discover everlasting tools to bring about healing into their everyday lives.

Keywords: literature review, trauma, grief, loss, Cambodian women, Expressive Arts Therapy, post traumatic growth, and healing
Where I’m From
By Noeun Chhim

I am miles and decades away
From my ancestors,
Who experienced trauma in a way,
That continues to haunt them
Broken with unspoken emotions
I am from a land that was once rich
Full of wonder, full of glory
Exquisite art, music, and soulful poetry
I am passed down carrying the abuse
A burden where language barriers are blocked from sorrow
Khmer story-telling in broken English of all the lives lost
Family, cousins, aunts, and uncles
And even siblings I know nothing about
I am born from my mother’s womb
With warm, beautiful, brown skin
And silky, dark, long black hair
I am an addition to my father’s wide nose
With his crooked smiles
And hollow, almond-shaped eyes
First to be born and raised in the land of the free
I am coming from the words “I was lucky”
With traumatized perspectives and high expectations
A child of immigrants fleeing from genocide
Uprooted on American soil
Growing up with these two identities
I am Cambodian-American
I am from a childhood silenced from ever speaking
Shame on me to express the injustice, harsh upbringing
Suppressed emotions, irrational beatings
Domestically disciplined and taught to please
I am from a life of held breaths for fear of torture
Sheltered, abandonment, and missed opportunities
But still full of hope and continuously believing in possibilities
I am from a moment in time where I’ve learn to dig deep
To mourn and grieve, to forgive as I weep
I am at a transition, looking for peace within
Filling up voids by breaking through these generational curses
Where I can practice being who I was meant to be
Just learning, unlearning, growing, and living wholeheartedly
Where I’m From: Internal Manifestations Among Cambodian Women Using The Expressive Arts

**Introduction**

It is my belief that owning your past experiences, rather than suppressing them is an act of love and forgiveness towards yourself. As reflected in my original poem at the beginning of this capstone thesis, I use expressive arts as a way to explore my own Cambodian roots and attune myself to the topic through engagement with the creative processes for grounding, self-preservation, and internalizing manifestations that will guide my existence and purpose. As a trauma survivor, not only this is my lived personal experiences of my painful process throughout my life’s healing journey, I am re-telling the story of who I was then and who I am becoming.

As a child, my earliest curiosity began with an exploration with trauma and grief- from not knowing how to process trauma nor having the ability to cope through grief and/or thrive in order to successfully move forward in life. It came to my realization that this wasn’t taught in my culture, that survival was just the only basic need to get through life and nothing else matters. This unfulfilling concept was just a way of life which affected their overall quality of life, therefore it possessed very little meaning. Developmentally, I struggled with many areas in my life which evidently pushes me harder to go beyond and strive for a better outcome in life. These experiences and influences come from my parents, who are of Cambodian descents and are immigrants seeking refuge far from their own native land.

Through their historical experiences, Cambodian people, both men and women, old and young have suffered traumatically with many, long lasting mental illnesses. It is my belief that today, for the purpose of this capstone thesis, the impact weighs more specifically, in my history, from my mother. As a traditional Cambodian woman, my mother carries such resilience, like
Many other Cambodian women, from one generation to the next, passing down, onto, and within me the strength to uphold and honor. Now as an adult and a mother myself, as I bear witness, to many other Cambodian women around my age and community, what’s still consistent is the idea of just living life in survival mode and not fully experiencing a life fulfilled. This encourages my strong urge to internalize and challenge that worldview and seek the need to manifest more meaning into the lives of Cambodian women using expressive arts with a sense of purpose.

Growing up as the “American child” in a Khmer household was both a blessing and a challenging burden. It’s hard balancing both identities; a blessing because I am a natural born citizen, a burden because I was an “American”. As a daughter of refugee parents, I truly believe my role is to keep our culture and stories alive, but how when you’re taught to suppress the identity instead of flourishing in it. Looking back during my childhood, I have suffered through multiple traumas which correlates with remembering the feeling of not having a strong relationship with my Khmer identity, thus truthfully, most of the memories I have are bad ones. Little did I know, it was in the unknowing of my family’s past, a life that haunts them into their everyday.

**Capstone Thesis Option**

In order to further understand my upbringing as to why Cambodian women struggle to put their mental health needs first, I will pursue a literature review option for my capstone thesis as well as an arts based inquiry, gathering from my own creative expression. This will be conducted by researching through databases with scholarly peer reviewed articles, books, non-print materials, such as videos, films, artworks and performances that relate to exploration of my topic. I will be using the Lesley Library Database as well as external sources like Google Scholar while researching and reviewing the literature.
Literature Review

To begin, this literature review will be examined and organized into four parts: writings about Cambodian women, trauma, grief, expressive arts therapy and how it relates to this population. One of the questions I am asking in this capstone thesis exploration is: Could it be that sometimes the brain’s way of protecting us is to block out painful memories to teach us how to survive. The DSM-5 identifies traumatic events as experiencing or exposure to “actual or threatened death, serious injury, or sexual violence” (APA, 2013, p. 271). Experiencing or witnessing a traumatic event can have a lasting impact on an individual which may not be easily accessible for talk therapy due to the nature of how trauma affects the brain and resides in the body.

Cambodian Women

Cambodian Women once held a high status in pre-modern Southeast Asia especially in relation to discussions on the status of Cambodian women today in the region. Why is it that the position of women there today is far from the contrary? There are very few studies that examined how, when, or even why this change came about. Jacobsen’s (2008) book addresses the place of women in Cambodian history and examines the relationship between women and power and analyzes the extent of female political and economic participation as revealed in historical sources, including the ways in which women were represented in art and literature.

According to Jacobsen (2008), it appears that in the classical age between the ninth and fifteenth century, was the origin of the decline in power for Cambodian women. “The Khmer origin myth dating back from this time depicts the female protagonist as passive and dependent upon her male relatives” (Jacobsen, p. 42). “Yet women of the classical period continued to enjoy similar social rights and roles to those they had in preceding period, including property
ownership, important positions at court, education, participation in economic and religious life, and a relaxed attitude towards female sexuality at the non-elite level” (Jacobsen, p.42). Jacobsen included that “the capacity to arouse desire, and thus exert control over men, can be interpreted as an aspect of female power” and “fidelity, chastity, and the observance of duty were the desired qualities in women” (p. 45).

Jacobsen’s research “conflicts with sociological and anthropological studies that assert that ‘traditionally’ Cambodian women are powerless and inferior” (Jacobsen, p. 1). In the present day, Cambodian women are perceived as passive, shy, patient, resourceful, and superstitious. Jacobsen mentions a “Cambodian proverb where ‘men are like gold, women are like white cloth’ implicating that the gold can be washed clean of dirt, whereas the white cloth will always bear a stain, which are ingrained in the collective consciousness of Cambodians today and further perpetuate the stereotype of Cambodian women as passive and Cambodian society as unequal” (Jacobsen, pp. 1-2). Jacobsen brings up a direct quote from another writer by the name of David Chandler in his A history of Cambodia work, who states that, “while the female voice is for the most part absent in accepted versions of Cambodian history, this is not necessarily a reflection of the importance or passivity of women” (Jacobsen, p. 2).

Cultural Cambodian norms also have traditionally discouraged aggressiveness, anger and conflict. Though, the war of the 1970s waged by the Khmer Rouge against its own people was the most detrimental tragedy ever experienced by the Cambodians. The destruction caused by the last dictator, Pol Pot, who ruled from 1975–1979 has had devastating effects on education, where the majority of the country’s intellectuals were wrongfully executed. Evidently, the traumatic effects of the Khmer Rouge years have changed Cambodians and left them to varying degrees shell shocked, suspicious, and with a twisted sense of right and wrong. There was a shift in
survival mentality where the Cambodian people were taught to think only about the revolution and as a result, learned to think only about themselves in order to survive. Cambodian women who lived through the Khmer Rouge and after, seek refuge in Thailand refugee camps, only to still suffer in silence and do not wish to talk about what happened to them or even feel their experiences are similar to what other Cambodians endured, may not be significant enough to mention. Most of them prefer just to try, forget and move on. Thus, Cambodian women have suffered through many years of trauma and grief, but have yet to fully explore the root of their mental health issues. Perhaps also, might the role of Cambodian women play a part of not being able to rise from their adversity?

**Trauma**

All trauma involves loss, whether it be loss of safety or security, world-view, or the loss of a person by death or other separation. Characteristics of grief tend to overlap with those of trauma experience. As an Expressive Arts Therapist in training, assumptions can never be made about what is or is not traumatic to someone. The American Psychological Association defines trauma as an emotional response to a terrible event like an accident, rape or natural disaster. Immediately after the event, shock and denial are typical. Longer term reactions include unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea. While these feelings are normal, some people have difficulty moving on with their lives (APA, 2021).

One can survive from the trauma, but it is rather difficult to move beyond the trauma, because one’s brain can reactivate those moments at any given time by being triggered from anything or anyone, producing massive stress hormones, and the effects of that releases unpleasant emotions that are intense, physical sensations, impulsive, and aggressive actions to
follow. Van der Kolk (2014) said that these posttraumatic reactions are overwhelming and unbearable to survivors of trauma because that feeling of control is out of place and they often fear that they are damaged beings far from redemption.

It is the fact that trauma compromises our brains and traumatized individuals become hypervigilant to the threat while trying to endure it in their day to day lives. The brain changing effects of a triggering moment also helps us understand why traumatized people often keep repeating the same problems and have trouble learning from those experiences. The damages inflicted by trauma left an impression by that experience on the mind, brain, and body. Specifically, the human body embodies, or holds a memory of the trauma, and expresses it in body language, posture, and physical symptoms. Further, these trauma memories often disconnect from the brain’s speech center and limit the individual’s ability to express the trauma verbally (van der Kolk, 2014). The body holds painful memories and that movement can assist in releasing some of the body’s tensions. With further knowledge and research about the basic process on how our brain functions, the damage can be reversed and improve the lives of the trauma survivors (van der Kolk, 2014). Due to the complexity of trauma, there are a number of diagnoses that exist under the umbrella term trauma, however for this capstone, the main focus is going to be on Cambodian women’s trauma and grief.

**Trauma and Cambodian Women**

The work by Marshall et al. (2016), states that “of an estimated population of 7.1 million in 1975, as many as 2 million Cambodians were killed during the 4-year Khmer Rouge reign. Approximately 1 million more were killed in the civil wars before and after this period. The period from 1978 to 1991 also produced more than half a million refugees in Thailand refugee camps” (p. 572). Cambodian refugee women tend to experience challenges given their gender
and status as refugees. Chung’s (2001) article discusses that Cambodian women specifically have been found to be at a greater risk for developing serious mental health problems due to their experiences during the Pol Pot Khmer Rouge government. With the collapse of the Pol Pot Khmer Rouge regime, in 1979-1980 hundreds of thousands of Cambodians sought asylum in refugee camps in the surrounding country, Thailand. These refugee camps were deemed inadequate to house Cambodian refugees with reports of “unsanitary conditions, malnutrition, diseases, lack of physical safety, lawlessness, violence, the lack of effective law enforcement and internal security, overcrowding, poverty, and shortage of water and firewood” (p. 117). The trauma Cambodians suffered has been widespread and especially affected Cambodian women where 95% of them reported that they have been sexually abused or raped, those who are widowed, and those who have lost their children. “These women were victims of physical violence, often of a sexual nature, perpetrated by their fellow citizens. They were exposed to multiple forms of emotional abuse, torture, and forced labor” (Nicholson & Kay, 1999, p. 470). Chung’s article continues on to state that “as a response to the severity of the premigration traumatic experiences, some older Cambodian women have displayed nonorganic or psychosomatic blindness where the degree of subjective visual impairment has been found to be significantly related to the number of years the women were stationed in the camps and also the degree and level of traumatic events they witnessed” (Chung, p. 117).

In the United States, it has been found that Cambodian refugees display a dummy personality called Tiing Moong, a technique used by the Cambodians to survive during the Pol Pot regime, “where individuals acted as if they were deaf, dumb, foolish, confused, or stupid and learned to obey orders obediently without asking questions or complaining” (p. 117). The reason being is that if one were to act or seen to behave in a way, whereas any appearance of
intelligences or emotions could quickly lead to torture or execution, so continuing to act like a Tieng Moong and being afraid to speak up or show feelings is a survival technique to avoid death or punishment and remains with many Cambodians even while in the United States” (p. 117).

More traumatic experience includes the resettlement in a foreign country with the concept of acculturative stress involving the ability to adjust to a foreign culture, changing their identity, values, behaviors, cognitions, attitudes, affect, and most importantly the loss of community support with no extended family, community and spiritual leaders. Due to the high rates of spousal death, Cambodian women must cope with being the primary caretaker of their families and sole provider for the household, while working demanding hours with little pay or part time jobs that make it difficult to support a family. “Given the lack of education and English language proficiency, a high percentage of Cambodian women are fully dependent on welfare and at any point of their lives, psychological distress would likely occur if their welfare dependency ends” (Chung, 2001, p. 118). Chung states that “family losses and economic responsibilities- coupled with community rejection, cultural isolation, and alienation- may place Cambodian women in an extremely difficult emotional situation with little or no social support” (p. 119).

During resettlement, many Cambodian refugee women may also experience survivor’s guilt, where many may be haunted by the guilt of successfully escaping from their home country, while leaving family, relatives, and friends being in a potentially dangerous situation. Compounding survivor’s guilt was the decision to leave their country and even subjecting their families in the United States to financial hardship. In addition to that, the lack of information about those who have been left behind adds to the already existing guilt which resulted in some refugee women experiencing nostalgia, depression, anxiety, and frustration that may inference with a successful adjustment (Chung, 2001, p. 119).
Grief

Death is an experience that happens to everyone and with death comes grief. It is my opinion that grief is a normal reaction to a death or loss, where there may be many feelings, physical sensations, and behaviors that come up for individuals when a death occurs. Grief comes in many different forms and is complex. It can describe the deep sorrow that occurs when someone important dies or the loss someone experiences, such as in a crisis. Grieving is very personal with each individual's experience being a unique one. Grief appears in many different ways, from person to person and death to death.

Theories of Grief

There are a wide range of theoretical models relating to grieving individuals that assist mental health professionals in helping them cope. The grief theories presented apply to individuals, both children and adults. These theories discuss different views on how people grieve or mourn the death loss of someone, usually someone that was important to them. The information regarding the theories listed below include the theorist’s thoughts from initially being told of the death onwards.

Kübler-Ross’ Stages of Grief

A seminal publication on grief is Elisabeth Kübler-Ross’ (1969) On Death and Dying which includes five stages of grief: denial, anger, bargaining, depression and acceptance (pp. 51-146). Kubler-Ross wrote about these stages in relation to patients who received terminal diagnoses (p. 147), but they have become a foundation of grief therapy. Kubler-Ross offers some excellent advice in helping bereaved persons, when she admonishes helpers to “Let them share and ventilate, but be available” (1969, p. 186). She goes on to say that the best thing that can be done to help mourners is to allow them to “share” and “work through” (1969, p. 186) their
feelings. According to her theory, therapeutic presence is the most important aspect of working with the bereaved.

Elisabeth Kübler-Ross’ work on discussing stages of grief features a common thread across the majority of people who are dying or who have experienced the death of someone. These five stages of grief are denial and isolation, anger, bargaining, depression, and acceptance. The first stage is denial and isolation where a temporary defense is used by almost all patients, not only during the first stages of illness or following confrontation, but also later on from time to time, which will soon be replaced by partial acceptance (Kübler-Ross, 2011). The second stage is when the first stage of denial cannot be maintained any longer, it is replaced by feelings of anger, rage, envy, and resentment. The stage of anger is very difficult to cope with from the point of view of family and staff, the reason for this is the fact that this anger is displaced in all directions and projected onto the environment at times almost at random (Kübler-Ross, 2011). The third stage is bargaining whereas in those moments of intense emotions, it’s not uncommon to look for ways to regain control or to want to feel like you can affect the outcome of an event and maybe succeed in entering into some sort of agreement for religious individuals to try to make a deal or promise with God, which may postponed the inevitable happening (Kübler-Ross, 2011). The fourth stage is depression whereas anger and bargaining can feel very “active,” depression may feel like a “quiet” stage of grief. There are two types of depression; reactive and preparatory grief (Kübler-Ross, 2011). The final stage is acceptance whereas it is not necessarily at a place where you’ve moved past the grief or loss, but it does mean that you’ve accepted it and have come into terms with what it means in your life now (Kübler-Ross, 2011).

Worden’s Four Tasks of Mourning

William Worden (2009) created the “four tasks of mourning”. He used the term mourning
meaning the individual must adapt to the loss (Worden, 2009). Worden (2009) based his ideas off of other theories and the process of child development. He suggests that a child needs to complete all four tasks in order to adapt to the loss. If children do not complete the tasks, they may not be able to handle the emotional impact of the death or may not adjust to the external world. The mourning tasks require effort; the amount of effort used or needed varies with each person and each death loss (Worden, 2009).

The first task is to accept the reality of the loss (Worden, 2009; Rogers, 2007). At first, it is hard to accept that a death has occurred and may be accompanied by magical thinking, the belief that one's own thoughts, wishes, or desires can influence the external world. The second task is to work through and process the pain of grief (Worden, 2009; Rogers, 2007). Without acknowledging and working through the grief, it can manifest as physical symptoms or atypical behavior (Worden, 2009). The third task is to adjust to the world without the deceased (Worden, 2009; Rogers, 2007). This includes an internal, external and spiritual adjustment (Worden, 2009). Internal adjustments may include adjusting their sense of self, self-esteem, and self definition. External adjustments include adjustment to the physical world; individuals may notice more actions that the deceased did now that they are gone. Spiritual adjustments refer to an individual's sense of the world, their direction in life. The final task in Worden’s four tasks of mourning is to find an enduring connection and move on with life (Worden, 2009; Rogers, 2007). Memorializing, thinking about, or speaking to the deceased are all ways someone may continue their connection with the deceased (Worden, 2009). Both models can be useful to expressive therapists as they offer a framework of grief to operate within.

Grief and Cambodian Women

Cambodian women are taught to endure pain and suffering with dignity and to rely on
their own resources to overcome any psychological difficulties encountered. When problems arise, Cambodians attempt to maintain control over both their feelings and their behaviors and believe that willpower will help them recover if their emotions become too overwhelming. Consequently Cambodian women developed serious psychosocial and psychological problems that often come up in physical complaints. However, these symptoms didn’t appear until after resettlement tasks were accomplished. Only then did the awareness of the depth of losses became more apparent and grief and sadness settle in. Because there are no comparable human services systems in Cambodia, most Cambodians view requesting human services as an inappropriate and shameful solution to problem solving (Nicholson & Kay, 1999).

**Expressive arts therapy**

In this section, I define what Expressive art therapy is and discuss why it is used in addition to or instead of more traditional forms of therapy. According to IEATA (2017), “The expressive arts combine the visual arts, movement, drama, music, writing and other creative processes to foster deep personal growth and community development. IEATA encourages an evolving multimodal approach within psychology, organizational development, community arts and education. By integrating the arts processes and allowing one to flow into another, we gain access to our inner resources for healing, clarity, illumination and creativity” (IEATA, 2017, "What are the Expressive Arts?" section).

**Expressive art Therapy and Cambodian Women**

In this section I discuss how expressive art therapy can be used in trauma/grief work. I focus on using expressive art therapy with Cambodian women. Hamera (2002) writes: “In genocide's aftermath, memory does not always equal information retrieval or expressive force, much less solace. It is, rather, a wound and, moreover, one whose unique etiology was
inextricable from deeply personal limits and frailties” (Hamra, 2002, p. 69). Hamra (2002) conducted several interviews with a Khmer family of survivors whom were dancers, seeking to understand the relationship behind their history, trauma, and the truth regarding one’s survival after experiencing first hand what the genocide took from them. According to Hamra, one of the focal points was that the family had told themselves that dance was the reason for their survival (Hamra, 2002).

In connection to Hamra’s article, Walker (2011) explores multidimensional trauma through interwoven stories of physical, psychological, societal, and mythical blindness, focusing on a blind Cambodian woman named Sophea and how she lost her sight. Sophea was forced to witness the execution of her husband at the hands of the Khmer Rouge. Sophea's blindness points to the tragic fact that certain wounds may never be healed, however it was Sophea’s internal view of herself, as more of a healer than a victim that increased her chances of surviving. Walker’s essay traces back to the multidimensionality of Sophea's blindness and transcendence of it through Dharma songs in order to illuminate her path of inner healing for justice and peace (Walker, 2011).

The work by Uy and Okubo (2018), explored concepts of posttraumatic growth (PTG) and transformation among 12 Cambodian community leaders who are survivors of the Khmer Rouge genocide. This study used conceptual models of PTG to explore coping, meaning making, and positive growth as both a process and an outcome. Four core themes emerged for the PTG process: (a) separation, loss, enslavement, and other dehumanizing experiences, (b) distress and psychological responses to trauma, (c) methods of coping used to manage debilitating distress, and (d) process of healing and meaning making. On the other hand, five core themes emerged for the PTG outcome: (a) gratitude and greater appreciation of life, (b) new priorities and goals, (c)
importance of family and interpersonal relationships, (d) increased personal strength, and (e) effective leadership. Further findings from this article highlights the importance of trauma disclosure and trauma narratives as the foundation of recovery and growth.

As if surviving extreme forms of violence, torture and other traumas during the Khmer Rouge genocide and forced migration wasn’t enough, Cambodian Americans continued to suffer devastating health inequities and barriers to health access in the United States. The work by Lu et al. (2018), explores a community-based participatory research where perspectives from Cambodian American community health workers aides in three conceptualizing themes: Cambodian Americans’ understanding of their health, identifying community health work strategies, and action steps that'll best respect the needs for Cambodian Americans and the challenges they face.

The work by Lee et al. (2016), discusses a similar community-based participatory research as above, but specifically with a Community Work group (CWG) which consists of 10 Cambodian grassroots community women of varying ages and backgrounds. According to the authors, this approach aims to leverage the lived experiences of these women and their understanding of health and wellness in identifying behavioral health issues and disparities, as well as developing interventions addressing those issues, using methods for collective analysis that includes theater, body mapping, and other expressive arts. The study resulted in novel analyses and strategies where the group identified trauma, along with poor access to education, unemployment and underemployment, social isolation, and generation gap, in combination with community violence, as the root causes of key behavioral health issues.

In the film, *Angkor’s Children*, Shaw (2015) introduces three young women to resurrect their Cambodian art and culture as a means to heal their nation after genocide: Phunam, a circus
artist; Sreypov, singing smot, a Buddhist funerary chant; and Saem, a garment worker who sings in Messenger Band, with songs emphasizing on women's and political issues for social change and justice. They are members of the generation after the Khmer Rouge regime that tragically killed 90% of artists and intellectuals. Phunam was a child of forced marriage between her parents that devolved quickly into domestic abuse, yet she still comes across as dedicated and taking great joy in her gift and already acting as a mentor to younger children, even if her mother seems to have a difficult time with how tactile her art form is. Phunam says “the stories are about their experiences, so when they perform that can show their emotions. The foreigns audiences who see us understand our performances” (Shaw, 2015. 42:32). Sreypov faces similar issues, especially when she recounts being without money after coming to Phnom Penh to study, but her relationship with her teacher gives some insight into the attempts to connect the aging pre-Khmer Rouge masters with youth, as well as show how confident she is. Sreypov says “I am carrying on the family’s heritage” (Shaw, 2015. 50:20). Sreypov, Phunam, and Saem from the Messenger Band have stepped out of their parent’s dark past by expressing the resiliency of Cambodia through their art and advocacy.

**Personal Artistic Response**

Sometimes, we are not only carrying our own trauma and/or our own grief- we are actually carrying the load of our past lives and our ancestors, too. Therefore, giving ourselves the permission, the space, and time to heal, means we are not only healing ourselves but also the generation before us. Throughout the Capstone Thesis Project, I worked on my own healing with the intention of processing both what came up for me during my own healing process and expressive arts therapy has helped other Cambodian women work through theirs.
As a child, aside from experiencing trauma and grief at a young age and not knowing how to navigate nor process those events with anyone, I sought out other alternative ways to immerse myself in having a safe space away from those that hurt me. I found privilege while integrating and learning the English language at school where I discovered my love for reading books. Storytelling and many genres of books encouraged my imagination where I can envision myself being the actual characters from the books and getting lost in the story. As time goes on, I have always found myself drawn to using words to express my unspoken emotions whether it was through free writing short stories, writing poetry, listening to songs with lyrics, and even being inspired by quotes that provides a powerful enough imagery to convey what I was feeling. To add, as a visual learner, I have developed a passion for photography and capturing real-life moments in great, little details and scenery, which still reflects the idea of story-telling to what more than meets the eye. Over time, my curiosity and exploration with other modes of expressive arts came to be an addition to what has been serving me in healing ways throughout my life’s journey. Below are images of what I’ve created using expressive arts to heal.

Figure 1
For the first image (Fig. 1), I drew a faceless, pregnant Apsara which was a result of having an identity crisis back when I was pregnant with my daughter. It was at a time in my life where I was finally able to live life a bit more unsheltered only to become pregnant at the start of young adulthood. However during those months, I endured through moments of hardships where I was forced into getting married and certain aspects of the traditional Cambodian culture came in that disrupted my way of thinking. I turned towards focusing on my education which gave me the willpower and freedom to do what it took to overcome and embrace what was coming. These words below have helped me push through:

ambivalence

i'm giving birth to you
a piece of me
that was long forgotten
the birth of salvation
with the root sprouts still attached
withholding the abundance of pain
in reverence to your growth
transition yourself to become
what you need

Figure 2
For the second image (Fig. 2), I created a Shadow Self using a frame that I painted black as a frame to include inside, a black shadow overcasting another faceless woman with a crown, using white paper. I believe it was the discussion of Carl Jung’s archetype of the Shadow Self and persona that brought up this image. As the shadow emerged, I was conflicted with going in deeper to acknowledge and face the dark side of myself, where trauma, shame, guilt, hopelessness, and other mental health illnesses live. Though the white part of the figure wants to truly be honest about growing, changing, and living life to the fullest, I had to learn how to accept what the Shadow self is displaying. These words below reunite my Shadow self with my Whole self:

embodied

embodied embodied
what lies underneath?
embodied embodied
the outer facade
embodied embodied
what do you see?
embodied embodied
a hidden soul
embodied embodied
a voice that squeaks
embodied embodied
bound to be free
embodied embodied
breaking through
embodied embodied
reclaim yourself
embodied embodied
mind and body
embodied embodied
to listen or not?
embodied embodied
another me, emerges
In the third image (Fig. 3), Using an “I am” poem, I made modifications to add in “Despite what happen,” in the beginning as an Affirmations/Manifestations to work through my trauma and grief by giving myself a voice to be vulnerable, but to have courage in expressing the emotions that come up and used supportive words of self-assurance.
In the fourth image (Fig. 4), I took a photograph of a bloomed lotus flower at a botanical garden. In the Cambodian culture and Buddhist religion, the symbolism of lotus flowers plays a significant role for the Cambodian people. Lotus flowers grow in deep muddy water, far away from the sun, then rises and blooms above the murk, where the light reaches the Lotus. Lotus flowers symbolizes enlightenment, purity, self-regeneration, and rebirth. It is also my belief that every person has the potential to bloom with enlightenment. To include, there were many sightings of the lotus flowers as I began this journey of healing and more so during my time studying to become an Expressive Arts Therapist. This image is a more recent one taken just after my first internship while working with the Hospice population.
In the fifth image (Fig. 5), I have a Video Recording of Khmer music using a Kalimba instrument. Throughout my childhood, I’ve witnessed my parents occasionally turn on the stereo and/or the T.V. on with karaoke music playing in Khmer. I knew what sadness and happiness looked like through their facial expressions and through their own rendition of singing the lyrics to the songs playing. Music was found to be healing to them then as it still does today. One particular, classic Khmer song, *Champa Battambang*, that I often hear was by an influential
singer/songwriter by the name of Sinn Sisamouth. He was deemed “Elvis” of the Cambodian people and his lyrics speak soundly to my ears as it does for the Cambodian community. After going back to get a better listen to the lyrics of *Champa Battabang* and my understanding of the Khmer language, the song is about a man longing to be with his loved ones. To stop and reminisce and recall those moments when my parents were listening to this song, made me realize how meaningful those lyrics are because I can feel the way the music moved them and it moved me. I practiced playing the sound after researching what the Kalimba instrument can produce and was able to attune myself to slower tunes of what grief sounded like, and resonated with how heartfelt the longing to be with a loved one may be. Mindfully playing the tunes slower and giving each note the space between almost gave it a reverent effect and the result was hauntingly beautiful and quietly, powerful and moving.
In the sixth image (Fig. 6), I created a Blackout Poetry amidst my thinking process of recent anti-Asian hate crimes during a global Covid-19 pandemic in combination with appreciating my own culture, and the significant use of my real given name. My name is Noeun given to me by Asian people of Cambodian descent who have endured and experienced horrific crimes done to them and their fellow people, my Cambodian people, who’ve come a long way from home as refugees and resettled in America to safety and forcibly abandoned their real identity. Growing up with a name, no one knew how to pronounce has made it bothersome and irritating to the point where it was more convenient to come up with an “Americanized” name Nina. Though, I learned now that a name signifies your identity, and that is a powerful thing to carry. An identity represents how we perceive ourselves and how we want other people to perceive us. I want to be able to say my name and put a face to it, and be proud of my Cambodian heritage and where I came from. The use of creating Blackout poetry and what almost always seemingly know the right words to express what is below the surface:

Looking Glass

You don't want to lose your name?
No, a little anxiously.
And yet I don't know,
How convenient it would be without it!
Because there wouldn't be any name to call,
She couldn't say anything more.
But only sighed deeply,
While two large tears came rolling down its cheeks.
Figure 7

In this last image (Fig. 7), This is a collage of my present day and current Self Portrait of my identity and healing journey. It ranges from many developmental stages of my childhood to adolescent into now young adulthood. I have experienced and carried through a lifetime of trauma and grief within me, but also have the resilience and strength to be brave enough to face
adversity and rise from it all despite what happened. As you can see, my memory has held space where it taught me coping defense mechanisms to not only survive, but encourages me to reflect deeply and be attuned to what having hope has been calling me to do. Using expressive arts has given me a voice to express what is not so easily spoken about. The process of creating this self-portrait was transformative and transcending as it has with my healing journey and I will continue to exist and thrive with a better quality of life.

Discussion

Limitations

My research focused on the personal histories, narratives and hopes of these Cambodian women in order to uncover possible ways in which they could transform and improve the quality of their lives. Though there were many successes during the Expressive Arts Therapy intervention, however there were a few limitations. After reviewing the literature pertaining to Cambodian women as a whole, (Cambodian women and Cambodian American women) it has become clearer that much more research is needed. Limitations include the struggles to find very specific information in regards to Cambodian women of particular ages, more complex trauma, grief and more ways on how they cope using many other Expressive Arts techniques that weren’t mentioned in this capstone thesis. Some Cambodian women’s deeply seated internal images of their world limit them to familiar ways of thinking and acting. While other Cambodian women may be ambivalent, or have conflicting attitudes and feelings restricted to participation in mental health programs because so many of these women's relatives were killed because they were “educated.” Today, many of the women may continue to suffer from past and present fears of being educated so they resort back to what’s safe. This type of mindset may interfere with the
Cambodian women’s advancement because change challenges the restructuring of long and deeply held experiences that were accumulated and packed into their memory forever. I believe there are some women who have overcome the horrors of the Khmer Rouge war, while others still experience the mental effects of the war and stay stagnant in sharing their story.

**Future Research Recommendations**

Things that I wanted to cover in this thesis include the specific roles about Cambodian women, traditionally, culturally, and in the present day in both countries, the United States and Cambodia. Other research recommendations in the future would be to explore more ways to incorporate other coping mechanisms since there are still many Cambodian women who are more reserved and still struggle to find safety and the ability to use their voice, here in the United States and back in the motherland country of Cambodia. As I reflected on the effects of war on these selected women, though there were researches that combined both the population of men and women, I questioned if men suffer differently or the same and curious for more research on men using Expressive Arts Therapy as a tool to cope with their mental health as well.

**Conclusion**

All of these research findings has taught me to dig a little deeper and appreciate what others have done before me, to push past and understand the many layers and perspectives trauma can withhold one from moving forward. Realizing how experiencing trauma affected their overall survival and reliving survivor's guilt made me empathetic to my parents, and to the community of Cambodians that may still be experiencing the aftermath of war. I also witnessed firsthand how death can affect the loved ones around you, and how they can carry that grief with them for years to come. I find myself resonating with Van der Kolk’s (2014) words: “being able
to feel safe with other people is probably the single most important aspect of mental health; safe connections are fundamental to meaningful and satisfying lives” (p. 81). This inspires my passion to seek healing ways to overcome their troubled past to not only live, but to thrive, in a journey by allowing yourself to tell the truth out loud.

Recalling May’s way of surviving has led me to believe that she has the capacity and ability to use her memory and to bring forth her art, authentic classical Khmer dance, back into her children’s upbringings to keep her culture alive. Although the hauntings of her teachers scared her, May’s bravery fulfilled that need and learned how to cope, alongside her husband. I feel that there was something there that allowed her to speak, to share her story with others outside of her family. Sharing your pain, your shame, your guilt, and your story is a daily practice, much like how May has practiced with her steps and movements to perfect the correct way of a lost art, to be witnessed and to be saved.

With Sophea’s multidimensional blindness, the fact that her vision doesn’t stop her from learning how to adjust to what she witnessed and experienced, allows her to deeply connect from within herself and share that purpose with others who’ve gone through similar horrific tragedies. Through her core belief, inner work, and performing songs portraying the story of ancient Buddhist teachings, her voice carries on deep reflective pain and healing to those around her. Together, they experienced connectedness and enlightenment that reduced their suffering.

All life events and interactions, including trauma and grief, shape our views of the world and consequently affect our abilities to function as healthy individuals in society. Death is inevitable and also remarkably inconvenient. Grief is exhausting and the energy it takes to simply get up, get dressed and show up every day is immense. The biggest take away is
understanding the importance of the body; the body holds our stories, houses our feelings and emotions, which carries us through life. Listening to, honoring, and respecting the body is crucial when working with Cambodian women experiencing trauma and grief as it can be a gateway to help these individuals understand what is happening on a physical level. Though I believe we all have the ability to heal ourselves and our thoughts are powerful enough to bring possibilities into existence. After reading about these women and their story of surviving the genocide, I can’t help but wonder if they know that what they did in order to survive the Khmer Rouge era, enduring through the Thailand refugee camps, and resettling in America is related to the use of expressive arts as a way to preserve and keep the Khmer history and culture alive.

Creation does help people make sense of the trauma, grief and loss: it creates and maintains presence out of the absence. An important theme in the literature was that people want to create or maintain connections with people they have lost. Worden (2009) seemed to get it right when he identified this as one of the tasks of mourning. Expressive arts therapy can help people with this task by creating a physical piece of art (a poem, a dance, a painting, a song, a picture, etc.). Resilience is rooted deep in my Cambodian culture and history, the art of storytelling, dance, singing, performing, and many other forms of art was evidently present in the past and presently. Being present with these individuals and simply witnessing their grief may be the best intervention. I hope to further discover more articles explaining the use of expressive arts in the Cambodian community where Cambodian women can outshine from their traditional, passive roles and rise up to be in tune with who they want to be.
Reference


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**THESIS APPROVAL FORM**

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**Student’s Name:** Noeun Chhim

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**Title:** Where I’m From: Internal Manifestations Among Cambodian Women Using The Expressive Arts A Literature Review

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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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