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I, You and We: Expressive Arts Therapy Interventions and Childhood Identity Development: Development of a Method

Nicole Stroumbos
nstroumb@lesley.edu

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Running head: I, YOU AND WE

I, You and We: Expressive Arts Therapy Interventions and Childhood Identity Development:

Development of a Method

Capstone Thesis

Lesley University

May 2022

Nicole Stroumbos

Specialization: Expressive Arts Therapy

Thesis Instructor: Carla Velazquez-Garcia

Abstract

This thesis examined the value and intersection of intermodal Expressive Arts therapy work and childhood identity development. Through a critical review of the literature on identity work, Expressive Arts therapy, and child-centered approaches the author extricated reoccurring themes in each approach. The author also identified gaps in field research pertaining specifically to the 7-9year old prepubescent population and the growing need for a holistic, arts-based approach to healthy identity exploration and development prior to the adolescent stage. To address this, the proposed method was used in a dyad with two 8-year-old cis-female children in a therapeutic school environment over the course of 6 consecutive weeks. The method was designed as a treatment plan to address 4 main points of personal identity, self-expression, self-awareness, self-esteem, and self-efficacy as well as social identity in order to address the multifaceted nature of our individual identities both internally and externally. Results and findings collected demonstrated the effectiveness of the child-centered, Expressive Arts therapy approach to identity work with this population while also calling attention to unsuccessful aspects of the proposed method, areas that require improvement and expansion to broaden its range of demographics. Literature and studies applicable to the value and intersection of intermodal Expressive Arts therapy, child-centered approaches to treatment and childhood identity development were examined identifying gaps in the current research and the growing need to address such disparities. The literature review conducted by the author to support their developing method looks at topics such as interventions that are school based or conducted in an educational setting, arts-based research methods and means of data collection and the various benefits of expressive art therapy group work with children.

Introduction

“The root of true confidence grows from our ability to be in unconditional friendship with ourselves” (Chödrön, 2010)

This capstone thesis project examined the intersection of intermodal Expressive Arts Therapy work and childhood identity exploration and development in order to fill a growing gap of research in the field and to add tangible arts-based interventions that combine both client-centered and holistic approaches to treatment with prepubescent populations. Identity work is inherent in self-expression and in turn the expressive arts therapies. However, there is a lack of peer reviewed published resources that emphasize the need for interventions that address all aspects of personal and social identity with children. The fields of Expressive Arts Therapy and Identity development in psychology were reviewed to extricate elements that overlap. These elements were recognized as self-expression, self-awareness, self-esteem, and self-efficacy. This thesis posits that utilizing holistic and client-centered approaches to expressive arts therapy work with pre-adolescent populations has the potential to address said elements recognized in order to gain earlier exposure to healthy identity exploration and development. By doing so in earlier stages of development prior to the more traditional field research that true identity work happens during adolescence, the author of this capstone thesis aims to add new methodology to give children tools and skills to succeed without resorting to self-detrimental thinking and behaviors or suppression of self.

For everyone, our understanding of who we are and of our place in the world – how we relate to those around us, as well as in the wider world – is critical to our emotional wellbeing. This sense of identity, this sense of self, shows in how we relate to others and

how we present ourselves in our day-to-day relationships, from the most intimate to the most casual. It determines not only who we *think* we are but also who we *say* we are. In developing our sense of self, we come to an understanding of who we are, what we are and why we are as we are. A sense of self is about individuality, our uniqueness as a person: I am who I am and no one else is like me. We attempt to find some kind of pattern or meaning in the experiences which have brought us to the point we have reached in our lives. We come to understand where we fit in, even if we are not comfortable with it. Acceptance of who we are is a sign of maturity (Rose & Philpot, 2005, p. 25).

There are several reasons why this work speaks to me at my core. From a professional standpoint, helping children develop and learn to express themselves healthily has been second nature to me for the last decade in my work as a dance instructor. I have watched countless children enter my classroom with their budding personalities and open minds. I learned over the years that the more I involved multiple modalities and creative interventions into the structure of class, the more confident they were in their self-expression. My teaching style, passion for self-expression and love for the arts was a far separation from my dance instructors growing up and how I was raised in general.

I used to think I had a very ‘normal’ upbringing until I realized later in life that ‘normal’ is a subjective concept. We lived comfortably; our basic needs were always met. My mother and father both worked their blue-collar jobs, my mother a bank teller and my father a sales manager at a local equipment company, never having gone to college but falling into careers that suited them well. My sister, who is six years my senior, and I had a fair amount of physical freedom but little to no room for emotion. My mother had a geriatric pregnancy being forty years old when

she had me, my parents having tried for nearly twenty years to conceive. They were eventually approved for adoption around 1983 and that is how my sister came into the picture prior to my birth which evidently, came quite easily when they stopped actively trying to have a baby. My whole extended family knew of my sister's adoption, it was the best thing to happen to my parents since they were married. Finally, a family. We lived simply and, on the surface, comfortable in our routine. My parents working, my sister and I going to school, then to dance lessons, eat, sleep and repeat. We were so "normal". Until we weren't. Everything came to a rather abrupt, screeching halt one day when I joined my mother and sister at the Doctors office. My sister needed a physical upon entering high school. I waited patiently for them. I was good at that, the waiting. The moments that followed are hazy. Trauma can have a profound effect on a person's memory. It affects the brain but also the nervous system and the physical body. This was the day my sister and I found out, by accident, that she was adopted. I have trouble, to this day, navigating my feelings pertaining to this experience. It was like everything we knew had somehow vanished. In the blink of an eye. Our trust in our parents and family system that we had built and grown accustomed to, gone.

I wish I could continue this story and talk about how we all sat down as a family to address what had happened. How my parents reached out to our countless cousins and aunts and dear friends who loved and supported my sister and I to help us understand how to move forward. But none of that happened. We just kept going about our lives. We had emotional outbursts that were ignored, trying so desperately to get a hold of something that felt like the stability we once knew. It was then that I realized, in my own internalized torment, that I had no emotional language. None of us did. No mode of expression of how we were all feeling. How to ask for help, seek advice or comfort...nothing.

The following years were and are a blur to me. Living one day at a time, doing well in school, dancing. I was seemingly a successful teenager. My sister moved to Texas to live with our aunt and go to college and she never truly came back home. Only in recent years did I realize how numb I was during that time. This was solidified when I moved to Maine and began studying at a small private Art college. I was out of the nest. Repeatedly forced into the realization that I had such little knowledge of myself, my views, opinions, and values. Now, I do understand this is not out of the ordinary for a freshman in college to have these epiphanies. However, being in a concentrated environment where you are learning and expected to create at all hours of the day puts things into a rather harsh perspective. All struggle aside, for the first time, in my life I was encouraged to express myself. All of myself. All the ugly, the beautiful, dark, light, angry, happy, sad...all of it. I was a trained dancer, studying painting. Movement always came so easy to me, I was taught what to do, I did it well and then moved on to the next piece I could master. What my professors were asking of me was so foreign. They wanted my opinion. My version of an assignment, MY vision of a painting I imagined while listening to the same Album Leaf song over and over again. I felt invincible. For the first time in my life, I felt like my feelings were important. When I was unsure of an idea, they encouraged me to dig deeper, survey other's feelings that had similar experiences. It was the ultimate catharsis. Unlike anything I had ever felt. I was validated.

This new experience of validation through personal expression was so new to me that not only did I have to unlearn all those years of suppression and self-doubt, but I had to radically accept my value in this world. I gave myself permission to accept my identity, not only as an artist but as an individual. The sheer width and breadth of this acceptance is something I continue to explore through my work as a teacher and studies in the field of Expressive Arts therapy. How

would my life have been different if I were allowed or encouraged to develop my identity through the arts at an earlier age instead of succumbing to the years of pressure and weight that impeded my ability to understand who I am, where I come from and how I'm valued? My personal experiences and professional work with children and adolescents coupled with my fierce belief in the healing power of the arts led to the development of a holistic, child-centered method of expressive arts therapy identity work and exploration in the hopes of adding to the research in the field.

Childhood & Adolescent Identity Development

Finding a concrete definition of 'Identity' is about as simple a concept as trying to nail JELL-O to a tree. The multiplicity of parts that makeup research literature pertaining to identity describe it as subjective, relational, emotional, narrative and everchanging. As Jackson et al. point out, it could be suggested that the notion of a strong sense of identity does not have a very strong sense of identity itself (Jackson et al., 2020). All that aside, there are two main parts to healthy identity, personal and social. The author of this thesis posits that in order to develop a practical, arts-based, and child-centered method of identity exploration and development with prepubescent populations, both personal and social parts must be utilized.

Rose & Philpot describe identity as the unique sense a person has about who they are, how they belong and how they are valued as a result of experiences that go to the core of what it is to be human, a root perhaps too enmeshed in our being to be adequately understood (Rose & Philpot, 2005). What is understood, in the fields of psychology, social science and sociology is the importance of recognizing the multifaceted nature of the human experience, the various factors that make up our individual identity, the cyclical nature of this process of discovery and the inherent challenges of this considerable development task.

Identity development is a stage in the adolescent life cycle. For most, the search for identity begins in the adolescent years. During these years, adolescents are more open to ‘trying on’ different behaviors and appearances to discover who they are. In an attempt to find their identity and discover who they are, adolescents are likely to cycle through several identities to find one that suits them best (Arduini-Van Hoose, 2020).

For children and adolescents, developing and maintaining identity is a difficult task due to multiple factors such as family life, environment, and social status (Arduini-Van Hoose, 2020). There is a major shift that occurs during the transition from childhood to adolescence. For the child, the definition of self is simple and concrete, characterized by physical traits. For the adolescent, their definition delves deeper into self-concept founded on their thoughts, opinions, and values. These cognitive developments result in greater awareness of self, other and their thoughts and judgments, the ability to consider abstract future concepts and the multiple possibilities at once (Arduini-Van Hoose, 2020). Another important shift that occurs around mid-adolescence is that self-exploration becomes a key focus whereas prior, individuals identified with and conformed rigidly to social expectations and beliefs: the need to be socially accepted and to belong (i.e., communion needs) took precedence over other psychological need (Granic et al., 2020).

For adolescents, who are negotiating the developmental growth from childhood to adulthood, it is especially important to gain a sense of self and direction in life. A strong foundation and belief in one’s identity, meaning, and purpose in life, as well as spiritual convictions may help turn negative experiences into opportunities for growth.

Adolescents who have a strong sense of self are less likely to become involved in

unwanted behaviors including substance abuse, vandalism, or self-harm (Ridley, 2005, p. 130).

When examining identity development, attachment, loss, and separation play a significant role in both healthy identity formation and the many potential challenges that can occur. The earliest formulation of attachment theory was developed by John Bowlby in the 1950s. He sought to explain why patterns of behavior either persist or change, over time and across relationships (Holmes, 2014). At its core, attachment theory posits the idea of a blueprint that is created for each of us in the early months of life. Where there is nurturing and loving relationships, the child will develop maturely. But if the relationship is one of violence, rejection, pain, abuse, lack of bonding, and disruption, then there is a possibility of developmental problems, such as criminal, violent, or abusive sexual behavior (Rose & Philpot, 2005).

The development of one's identity is a complex and delicate process. During this process, both the personal and social self is explored, and a life story is written, edited and revised. As previously mentioned, there is no concrete or simple definition of identity just as there is no concrete or simple way to define the human experience.

Expressive Arts Therapy

The expressive arts, as defined by the International Expressive Arts Therapy Association, combine the visual arts, movement, drama, music, writing and other creative processes to foster deep personal growth and community development (IEATA, 2017). Also, they are occasionally referred to as “integrative approaches” when purposively used in combination in treatment (Malchiodi, 2007, p. 2). By utilizing multiple modalities, and weaving the processes together intermodally, the potential for introspection, catharsis, creativity and healing greatly increases.

Expressive art refers to using the emotional, intuitive aspect of ourselves in various media. It is a process of discovering ourselves through any art form that comes from an emotional fullness. It is not about creating a beautiful picture, a perfect poem, or a choreographed dance. To use art expressively means to go into our inner realm to discover feelings for expression through visual art, movement, sound, writing or improvisational drama (Rogers et. al., 2012, p. 36)

There are numerous benefits to the utilization of multiple modalities or intermodal work with clients of all ages, diagnoses and in a variety of settings. “By moving from art form to art form, we release the layers of inhibition that have covered our originality, discovering our uniqueness and special beauty” (Rogers, 1993, p. 43).

One benefit of expressive arts therapy is that the art process provides alternative channels for communication that might have otherwise remained unknown, as the art allows for unconscious feelings or unknown stories to surface and be processed at the client’s pace (Perryman et al., 2015, p. 207)

Another benefit of expressive arts therapy is the potential access to memory that this work can have not only for the client but for the therapist as well. The creative arts have a way of opening doorways that can lead us down the path of memory that we or the client lack adequate verbalization for. Our thoughts and feelings, as people, are not exclusively verbal and are not limited to storage as verbal language in the brain, expressive modalities are useful in helping clients give language to aspects of memories and their personal narrative that may not be readily available through traditional talk therapy (Malchiodi, 2007). For example, the use of a particular color, visual art medium, instrument, way of moving can act as a trigger for past experiences that could be otherwise buried within. For example, when working with children and adolescents in

particular, they are more often than not more equipped to draw a picture of a particular feeling or experience or explore it through guided movement and play.

Different art materials and creation processes involving multiple senses, actions, feelings, emotions, concepts, imaginations, consolidations, materials, and artists' intrapersonal communication will enable participating adolescents to produce meaningful and creative products through combined group life experiences (Huang et al., 2021, p. 3).

Person-Centered Approach to Expressive Arts Therapy

Person-centered or client-centered approaches to therapy emphasize the role of the therapist in the therapeutic process as being “empathic, open, honest, congruent, and caring as she listens in depth and facilitates the growth of an individual or a group” (Rogers, 2012). Carl Rogers developed this approach based on his philosophy that every individual inherently has the capacity to heal, grow and reach their full potential. Carl Rogers speaks of three conditions that are innate in person-centered therapy:

- (1) congruence
- (2) unconditional positive regard
- (3) empathic understanding (Rogers, 1951)

Natalie Rogers, inspired by her father's philosophy and her fierce belief in the expressive arts as a tool for self-healing and self-discovery merged the two approaches and developed her theory and practice of Person/client-centered expressive arts therapy. “As I listen to a client's explanation of her imagery, I poignantly see the world as she views it. Or she may use movement and gesture to show how she feels. As I witness her movement, I can understand her world by empathizing kinesthetically” (Rogers, 2012).

She believed that person-centered expressive arts therapists maintain a positive and caring attitude toward clients, helping them to accept any negative feelings, including outrage, aggression, anger, and violence. She did this while also suggesting that any aggressive and violent behaviors are not acceptable either in the treatment sessions or outside. (Kim, 2010, p. 94)

Within this approach, there is no analysis nor is there emphasis on the art or the product itself (Gann, 2015). The emphasis, however, is on the process of making. A person has multiple worlds within them, "...congruence is bringing those worlds together. Unconditional positive regard refers to a non-judgmental stance and a degree of caring. Finally, empathic understanding refers to the therapist's goal to seek to understand rather than to explain" (Tudor & Worrall, 2006). Sommers-Flanagan illustrates that from the person-centered perspective, psychopathology is characterized by a failure to learn from experience (Sommers-Flanagan, 2007). Therefore, for the person-centered therapist, they work diligently to help clients become more open to the possibility of learning from experience and combatting cognitive rigidity as it directly impairs learning (Sommers-Flanagan, 2007).

Child-Centered Play Therapy

Play therapy is a form of counselling or psychotherapy in which play is used as a means of helping clients express or communicate their feelings. This approach is largely catered to children but also has many forms that can be utilized with a wide variety of populations and settings. Child-centered and Person-centered play therapy are rooted in the same philosophy that emphasize the use of play, not only to give voice to those who may otherwise not be able to communicate for several reasons other than age of development, but to use play as an outlet of expression.

The use of the PCPT (Person-centered play therapy) approach supplied one possible outlet for these individuals to feel in control, accepted, valued and worthwhile. While their needs may not be verbally expressed, this therapy allows them to experience fulfillment and expression of these inherent human needs. (Demanchick, 2003, p. 60)

Regardless of age, we all have the same inherent needs as individuals. As play precedes language in most cases, it is one of our first forms of communication during development. Because of this, clients may become free to explore all the possible ways of relating and communicating, especially working with adults with developmental disabilities. “Through the core conditions of empathy, genuineness, and unconditional positive regard, progress and emotional growth may be possible for persons previously underserved by counseling and psychotherapy” (Demanchick, 2003, p. 62).

Literature Review for Expressive Therapies and Identity Development

“The Efficacy of Expressive Arts Therapy in the Creation of Catharsis in Counselling” uses a phenomenological qualitative approach to examine potential patterns of catharsis using expressive arts therapy (Adibah & Zakaria, 2015). The authors looked at group work with female identified adolescents for this study, specifically a group of seven who were previously involved in delinquency (Adibah & Zakaria, 2015). Findings were evaluated using an array of sources including but not limited to in-depth interviews and observations. Results were favorable in that the element of catharsis was found to be present in the group through expressive arts therapy practices and healing for all participants for the duration of the study (Adibah & Zakaria, 2015). The majority of participants self-reported feelings of relief, a gradual reduction of stress and more stability pertaining to their emotional state (Adibah & Zakaria, 2015). The work in this

study and various findings illustrate the efficacy of expressive arts therapy work with female identified adolescents in creation of catharsis during the therapeutic relationship. Furthermore, this study also suggests the potential for work of this nature to aid in healthy identity exploration and development during adolescence.

Another article relevant to the proposed method is “Reaching the hard to reach: Quantitative and qualitative evaluation of school-based arts therapies with young people with social, emotional, and behavioural difficulties” (Cobbett, 2016). In this study, the author examines the use of arts-based therapies in educational settings. This examination of the use of arts therapy interventions for young people with social, emotional, and behavioral difficulties (SEBD) in an educational setting is an attempt to fill the gap where evidenced based research with this client group in the field is limited (Cobbett, 2016). The study took place at two SEBD schools in London, England and consisted of a sample group with 52 and a control sample of 29. Research findings showed a significant difference in the improvement of levels of SEBD comparatively across all measures and Interpretive Phenomenological Analysis (IPA) was used to analyze the data collected. “Themes emerging from this data suggested that young people felt that the arts brought various benefits to their therapy that augmented the verbal side and helped them to engage in therapy” (Cobbett, 2016). The findings from this study demonstrate the value of arts based therapeutic interventions with children in an educational setting.

The third article of relevance to the research and proposed method, Furman et al. take an in-depth dive into the use of poetry as both a modality and means of data representation in “Expressive, research and reflective poetry as qualitative inquiry: A study of adolescent” (Furman et al., 2007). “As a document of social phenomena, poetry can be viewed as a vehicle through which to communicate powerful and multiple ‘truths’ about the human experience”

(Furman et al., 2007, p. 302). The authors of this study investigate the nature of poetry as a therapeutic process utilizing autobiographical and responsive poems in a four-step process (Furman et al., 2007, p. 305). Japanese tonkas were also used to illustrate and record their findings. The use of poetry in this study as a means of data collection and analysis demonstrates the value of creative writing mediums as a qualitative research method. By doing so, the authors were able to conduct research that appeals to both cognitive and emotional levels of participants in this expressive arts process.

Fourthly, “The effects of group art therapy on adolescents’ self-concept and peer relationship: A mixed-method study” (Huang et al., 2021) studied the effects of arts-based group therapy work on adolescents. The authors looked specifically at the group’s influence on the self-concept and peer relationships of its members. There were 12 participants “from a high school in Northern Taiwan” (Huang et al., 2021, p.1) who attended a weekly 2-hour art-therapy group. Findings were analyzed using a mixed-method approach and “...To the best knowledge of the researchers, the present study is the first that employs a mixed-method approach offering both qualitative and quantitative evidence to the beneficial effects of group art therapy on adolescents’ psychosocial development” (Huang et al., 2021, p.13). Results include an increased positive self-concept, decreased negative self-concept, reduced loneliness, and an overall improvement of peer relationships among participants. This study demonstrates the value and effectiveness of group art-therapy and the potential positive impact on adolescent self-concept and peer relationships.

In “Integrating feminist therapy and expressive arts with adolescent clients demonstrates the efficacy of combining feminist theoretical orientation with expressive arts interventions” (Otting & Prosek, 2016), two feminist theory and models of identity development are defined

with the authors also describing corresponding expressive arts interventions that address various aspects of adolescent identity development. Activities listed that promote developmental tasks associated with this stage of development include but are not limited to exploration of multiple identities, advancement of creative self-efficacy, expansion of the client's world view, gender issues, societal context, self-esteem, and power differentials (Otting & Prosek, 2016). "The expressive interventions presented provide merely a starting point for the possibilities that exist to meet the complex needs of adolescent mental health clients" (Otting & Prosek, 2016, p. 86). By combining feminist theoretical orientation with expressive arts interventions, counselors can potentially address cognitive, physical, and emotional aspects of this developmental stage, particularly with the biological/identified female adolescent population.

Lastly, I explored a published in the *International Journal of Play Therapy* study, "Child-centered expressive arts and play therapy: School groups for at-risk adolescent girls" (Perryman et al., 2015). The authors describe a study using expressive arts and child centered play therapy techniques in group therapy. The authors implemented a phenomenological approach using grounded theory to convey the experiences of female identified adolescent participants (Perryman et al., 2015). This approach was used with the intention of deepening the understanding of each of the six participants in the study. Group members were selected by teacher referral for things such as behavioral issues, difficult home environments, low grades, peer relationship challenges and their ages ranged from thirteen to fourteen (Perryman et al., 2015). Each member had shared experience related to familial issues, poverty and divorce and the group met for five consecutive weeks. Findings from the study include but are not limited to exploration of self and family, increased expression of feelings, sense of accomplishment, increased self-awareness, and increased group cohesion (Perryman et al., 2015). To conclude,

this study shows us techniques that can be implemented in order to aid this particular population during an already and increasingly more difficult developmental stage.

Method

“Creative and expressive art techniques allow a safe way for adolescent girls to express themselves and relate to those around them.” (Somerville et. al. 2017, p, 6). My personal experiences and professional work with children and adolescents coupled with my fierce belief in the healing power of the arts led to the beginnings of a development of a holistic, child-centered method of expressive arts therapy identity work and exploration in the hopes of adding to the research in the field. Overlapping elements that were recognized within the Expressive Therapies, person/child-centered approaches as well as traditional identity work in counseling and psychotherapy were recognized as self-expression, self-awareness, self-esteem, and self-efficacy. The proposed method aims to address said elements through dyadic work and was designed as a six-week treatment model (table 1) that uses a curriculum-based design plan. Sessions include a consistent opening and closing ritual and visual art, dance/movement and play will be utilized intermodally.

The proposed method was designed to be used with two 8/9-year-old females a therapeutic school setting. They will be referred to as L and V for the purpose of this study. Both girls are actively enrolled in said therapeutic school where I am an intern for my second-year placement under the supervision of an LMHC. L and V also receive outside services and participate in daily group psychotherapy and weekly group expressive arts therapy. This dyad was designed specifically to support both girls as they navigate their individual development of self, their peer relationships and overall identity.

Participants

V is 8 years, 10 months old, cis-gendered, and self-identified female and uses she/her pronouns. V is an engaging, playful, and empathic child. Her strengths are in using her voice, advocating for others and her fiercely inquisitive nature. She is inherently kind, caring, eager to help her peers when in need and is often seen utilizing her playfulness and sense of humor to cheer others up or engage with her peers. Her difficulties lie in past challenges with building and maintaining positive peer relationships, self-confidence and expressing big feelings appropriately at her former school(s) without resorting to physical aggression. Because she is socially and creatively driven, she is able to express herself freely through multiple modalities. V is receptive, motivated, and eager for help as she continues to make progress within the therapeutic milieu. The anticipated outcome of the services to be provided are increased behavioral and emotional regulation, increased self-esteem, increased self-awareness and building trust in peer relationships. V carries the diagnoses of Generalized Anxiety Disorder, ADHD, and a Specific Learning Disorder in Reading and Written Expression.

L is a 9-year-old cis-female/identifies as female. L's strengths are in her creativity, compassion, kindness, maturity, and inherent sensitive nature as evidenced by my observations of her in the classroom with Teachers, peers and one on one during our time together. Her weaknesses lie within cognitive rigidity when presented with certain academic demands that require maintained focus and at home situationally when plans change unexpectedly or when patience is required as reported by parents. L is most familiar with visual art mediums but has reported being enthusiastic about all art modalities to some extent, especially when explored one on one in session. The Client's current diagnoses are Autism Spectrum Disorder, Unspecified Mood Disorder, and Attention Deficit Hyperactivity Disorder, Predominantly Inattentive Type.

Treatment Goals

Goals for counseling include fostering and further developing trust in peer relationship, combatting cognitive rigidity, identity exploration, and promoting confidence and self-esteem. The primary focus is on the process of identity development through the expressive arts. Their mutual interests and past experiences aid in creating a space for each of them to help understand that they are not alone in their individual struggles and that they can use one another for help and support. L helps foster creativity in V and collaboratively with one another. V's strength in advocating for herself/others as well as using her voice helps L with verbalizing feelings and expressing herself in a healthy way. Utilizing visual art, music, and movement therapy techniques, I intend to build a therapeutic relationship based on routine with both clients. Both clients need an environment where it is safe to explore the many facets of their developing identities. This includes introduction to multiple forms of expression, being witness by a peer and trusted adult figure as well as building a relationship based on self-esteem with themselves and each other.

Specific Strengths drawn upon in method:

- creativity
- playfulness
- inherent relationship between the two peers
- mutual interests and shared experience

Specific difficulties targeted in method:

- past challenges building
- maintaining positive peer relationships

- self-advocacy
- self-confidence/esteem
- reciprocity
- healthy coping strategies/skills

Information from each session was collected and recorded in a DAP Note format after each session. Each counseling session summary note included data, assessment, and plan.

Artwork from each session is also collected from each girl, compiled, and kept in a binder which they will keep as symbol of our work together.

Table 1: Weekly Plan

Week	Objective	Materials	Directive	Processing
<p>Week 1 & 2</p> <p>1. “Snap Cup” (Opening ritual to be repeated each week)</p> <p>2. Establish closing ritual collaboratively (i.e. group hand shake or dance move to end each session)</p>	<p>-Establish opening ritual</p> <p>-Introduce clients to positive affirmations for self and other</p> <p>-Practice reciprocity</p>	<p>-Large jar or cup, small pieces of paper, scissors, writing utensils</p>	<p>-(Week1) session talking about positive affirmations.</p> <p>Each participant will write as many as they can on paper, cut them up, fold and place in jar</p> <p>-(Week 2-6)</p> <p>Each participant, including facilitator, takes turn picking a piece of paper out of the “Snap cup”</p>	<p>-Beginning each session with positive affirmations to foster the use of kind/self-affirming language as well as witnessing others do so and affirming their statements.</p> <p>-leave time to draw or write what they pulled out of the jar if compelled</p>

			<p>-Read positive affirmation out loud (ex. "I can do hard things")</p> <p>-Group repeats back using their name (ex. "AV can do hard things!")- All participants give snaps or applaud with snaps</p>	
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Week 3 & 4				
1. "Snap Cup"	-Practice simple and creative	-Blank child/size body coloring	-Participants find comfortable	-Processing happens during
2. "Rainbow Body"	exercise in mindfulness/ MBSR	sheet, colored pencils, markers, pastels	seat/space and are directed to close their eyes if they feel comfortable or keep open with a soft gaze	the visual art portion and participants are encouraged to share and discuss while they color
3. Closing ritual	-use color and the body as a gauge -encourage sharing experiences with each other and recognizing similarities and differences		-Body scan guided meditation utilizes the visualization of the rainbow, its many colors and where the child/client may see or feel those colors in/on their own body	-Facilitator asks questions like "what was that like for you today?", "did you see all the colors?", "where are they in/on the body?", "why does blue go there?"

			<p>-Spend time after scan coloring what they visualized or how they felt onto the blank body scan form provided</p>	
<p>Week 5 & 6</p> <p>1. “Snap Cup”</p> <p>2. “Rose & Thorn”</p>	<p>-Cont. opening ritual</p> <p>-Introduce “Rose and Thorn”</p> <p>Exercise to lead into closing session</p> <p>-Encourage self-reflection and empathy via shared</p>	<p>-Paper, drawing utensils, coloring media</p>	<p>-Cont. Snap cup</p> <p>-Facilitate conversation regarding something that they are good at or that they’ve improved (Rose) vs. something they need to work on (Thorn)</p>	<p>-Processing happens via dialogue and visual art or movement response</p> <p>-Facilitator asks, “What is your rose and what is your thorn?”</p>

	<p>experience and mutuality</p>		<p>-Using what they share/discover, ask each participant to draw, write or move to reflect and further understand</p>	
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Results/Limitations and Areas of Refinement

Results and findings were compiled over the course of six weeks, recorded using a DAP note counseling summary session format and summarized here. Results for both L and V included an increased awareness of themselves in relation to others and gained a sense of comfort that their stories were similar, improved self-confidence, mood stabilization, and improved relationships with both family and peers, stress reduction due to the creation of a supportive social network and increased reciprocity.

With the development of a method, assessment or study, there are always areas of refinement and limitations. With this method in particular, perhaps one of the most important considerations would be more diverse participants in order to gain a better understanding of the efficacy of this approach to identity work with pre-pubescent children. This includes but is not limited to more gender, race, diagnoses, and SES diversity.

Conclusion

Through my studies and research of Expressive Arts Therapy, I recognized a clear gap in field research pertaining specifically to the 7-9-year old prepubescent population and the growing need for a holistic, arts-based approach to healthy identity exploration and development prior to the adolescent stage. My intention with developing this method is to not only add to the literature in the field but to address disparities in the way identity work is traditionally done and with older adolescent populations. Reviewing relevant research of topics such as interventions that are school based or conducted in an educational setting, arts-based research methods and means of data collection and the various benefits of expressive art therapy group work with children, I synthesized my findings and developed my six-week plan. Within this plan are creative interventions that aim to help children gain earlier exposure to healthy identity exploration and development. By doing so in earlier stages of development prior to the more traditional field research that true identity work happens during adolescence, this method is designed to give children tools and skills to succeed without resorting to self-detrimental thinking and behaviors or suppression of self. Through further applications and refinement, I hope to utilize this method in a wider variety of settings with more diverse populations. Our youth are facing unprecedented times in the current climate of the world at large and it is crucial that we not lose sight of how important it is to give children the tools and skills they need to grow, live and express authentically.

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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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