

Children's Artwork

Its Value in Psychotherapy in Pediatric Palliative Care

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KEYWORDS

- Pediatric palliative care • Life-threatening illness • Bereavement • Psychological
- Psychotherapy • Art techniques • Children • Adolescents

KEY POINTS

- Psychological care is a critical component of comprehensive pediatric palliative care, both during the illness and into bereavement.
- Children living with life-threatening illness and their siblings, as well as children of ill parents, face extraordinary psychological challenges.
- Psychotherapy affords a safe structure within which children can explore and contain the intensity of the overwhelming threat, and thus attain a measure of control.
- Structured art techniques can be powerful for children who are dealing with life-and-death realities, ineffable experiences for which words are often inadequate, even for adults.
- Rationale, instructions and examples of 3 structured art techniques are presented.

INTRODUCTION

Pediatric Palliative Care

Pediatric palliative care, still a new and emerging field, includes treatment for children and adolescents living with complex chronic and life-threatening conditions. It is an

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In general, the term "children" is used to denote both children and adolescents unless a reference is specific to an adolescent.

The phrase "mental health professional" refers primarily to child/pediatric psychologists and psychiatrists, although other professions certainly may be included.

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active and total approach (physical, psychological, social, and spiritual) that focuses on the following:

- Quality of life for the child and support for the family, with a particular focus on the healthy siblings
- Decision-making/establishment of goals of care for the child
- Management of symptoms
- Provision for respite

Importantly, the care extends from the time of diagnosis through the occurrence of the child's death and into bereavement. This arc may extend over many years.¹

This definition provides the context for understanding the experience of children living with illness, both the patients and the healthy siblings. Children who have a parent who is ill typically fall into the world of adult palliative care; however, they are included in this discussion.

Psychotherapy

I felt much better because I knew that I had somebody to talk to all the time. Every boy needs a psychologist! To see his feelings!
(6-year-old-child, in isolation for stem cell transplantation)²

When we first went to the psychologist, my little brother thought she was a checkup doctor. But I explained to him: "You know how we lost our older sister? This doctor tries to get the sadness out of your heart." (7-year-old bereaved child)³

All these children, patients, siblings, children of ill parents, face inordinate psychic challenges that test their resilience to the utmost. Psychotherapy, the treatment modality unique to the mental health professional, reveals poignant and profound truths as children seek to integrate, or reintegrate, the shattered facets of their life. Through words, drawings, and play, children convey the experience of living with loss, either its lurking threat or the actuality, in an attempt to transform the essence of their reality into expression. Most children enter psychotherapy because of the stress engendered by the illness or the loss of a close loved one, rather than because of more general intrapsychic or interpersonal concerns.⁴ The framework of psychotherapy affords a safe structure within which children can explore and contain the intensity of the overwhelming threat, and thus attain a measure of control.

Children's Artwork in Psychotherapy

Art techniques can be powerful in facilitating children's expression and their working through of complex emotions. This is especially true for children who are dealing with life-and-death realities, ineffable experiences for which words are often inadequate, even for adults. Structured art techniques allow the mental health professional to ask highly focused questions, rather than the broad queries more typical of psychotherapeutic interchange. Furthermore, by using drawings as an intermediary, these questions can often be posed earlier in the therapeutic process. Importantly, by asking children to draw in response to a specific question, the possibility that they will then provide a verbal explanation is enhanced. In this way, the interpretation of a given image is based within the child's psychic reality, and provides a foundation from which the psychotherapy can build. Of course, valuable disclosures also emerge from children's spontaneous artwork.

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