



Expressive Arts Therapy with Hospitalized Children: A Pilot Study of Co-Creating Healing Sock Creatures[©]

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A novel form of expressive arts therapy was developed in a pediatric unit and received enthusiastic support from hospital staff and family members because of their impressions that the children were calmer following therapy, as well as throughout the remainder of the hospital stay. A pilot study was conducted to assess the feasibility of quantifying such impressions by measuring changes in the children's mood by self-report. Twenty-five children (mean age 8.34 years, SD 3.77) were recruited for the study, coming from diverse social-economic backgrounds, ethnicities, and an array of medical diagnoses. The results document improvements in mood for children following therapy sessions, compared to children in a wait-list control group. Additionally, a meta-analysis examining external influences and changes in salivary cortisol levels measured before and after therapy sessions illustrates the importance of considering aspects of the clinical setting when assessing the effectiveness of this and other expressive arts therapies for reducing stress during hospitalization.

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THE INSTITUTE FOR Health & Healing at California Pacific Medical Center in San Francisco implemented an innovative expressive arts therapy program for children with the goal of reducing stress during their time in the hospital. The program, termed Healing Sock Creatures, involves using hospital materials to co-create a transitional object (Figure 1) that helps to transform a child's experience of trauma, acute stress, and helplessness into one of empowerment. The use of hospital materials helps to form a deep connection to what the child is going through. As the children become connected with their creation, the Healing Sock Creatures become bearers of unconditional love for their creators. Through a therapeutic process that involves both creativity and human contact, the children gain a "one of a kind" ally for navigating their hospital stay.

The overwhelming acceptance of the program by hospital staff prompted a pilot study aimed at determining whether it is feasible to capture evidence of efficacy for this expressive arts therapy program within the hospital setting. Children admitted to the pediatric intensive care unit and general pediatric unit were recruited to the pilot study and randomized to a treatment group or a wait-list control group. This paper reports on the psychosocial measures collected from the pilot study and discusses the impact of the hospital setting on the conduct of the research through meta-analysis of our published data (Yount, Siegel, & Rachlin, 2013) documenting a trend of decreased salivary cortisol levels, following Healing Sock Creatures therapy.

Background Pediatric Hospitalization

A rapidly growing body of scientific research suggests that psychologically and developmentally, a child's

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Figure 1 Child with Healing Sock Creature in hospital bed.

hospitalization may be traumatic. The Traumatic Events Screening Inventory links childhood trauma to serious medical procedures, life threatening illnesses, and accidents resulting in hospitalization (Roberts, Huang, Crusto, & Kaufman, 2014).

Childhood trauma is highly prevalent and may lead to long-term consequences on physical and mental health (Agorastos et al., 2014; Edwards, Holden, Felitti, & Anda, 2003; Gilbert et al., 2009; Green et al., 2010). This can result in depersonalization, disorientation and loss of identity.

Many adults recall the terror of medical treatment received in childhood (Levine & Kline, 2007). Medical interventions can prompt fear, based upon inherent pain, and upon their health implications (Blount et al., 2009). Even a routine intravenous needle insertion may invoke trauma. The breaching of a child's skin, the body's last line of defense, a boundary, can be a painful violation (Levine & Kline, 2007).

Hospitalization can predispose one to evince a variety of reactions to health care challenges (Blount et al., 2009). These can include the feeling of not being in control of anything, the overwhelming size of equipment, unexplained discomfort, and pain. Confirming this, a recent study (Perry, 2009) found that children with several adverse experiences were more likely to suffer from a range of chronic diseases as adults, including heart and lung disease, as well as increased risk for depression, alcoholism, suicide attempts, and drug abuse. As well, Wolff and Shi (2012) showed that childhood

trauma increases the risk of social, neuropsychiatric, and other medical problems (Perry & Szalavitz, 2006).

Expressive Arts Therapy

Expressive arts therapy is uniquely designed to address issues such as stress reduction during hospitalization. It is a therapeutic approach that integrates a wide range of arts modalities in the service of human growth, development, and healing. Expressive arts therapy focuses on the creative process, exploring deeper meanings in a patient's experiences (Donohue, 2011). Integrating psychotherapy with multi-arts, the intermodal approach can help children access, process, and integrate traumatic feelings in a manner that allows for appropriate resolution, to reduce stress (Carey, 2006). This therapy uses imagination, rituals, and the creative process. It may use painting, drawing, sculpture, dance, movement, music, drama, poetry, or prose. Through expressive arts, a symbol can hold a paradox that the rational mind is not fully explained. Thus, choosing a special button or writing a wish mirrors and characterizes the child's psyche at this crucial moment. This, in turn, enables the child to visualize and let go of troubling and unanswerable questions, thus relieving suffering (Darley & Heath, 2008).

Understanding the psychology of trauma's effects may unveil approaches for healing them. Van Der Kolk (2006) discovered that traumatic experiences are stored in the somatic, sensory, imagistic memory, and only later are woven into narrative memory. Because children's frontal lobes are in developmental stages and their personalities are still being shaped, their experiences are formative. When a patient is physically creative, the somatic sensory functions improve. Expressive arts can be effective in supporting a process of healing by helping children access, process, and integrate traumatic material, to promote appropriate resolution (Carey, 2006). Visual art reduces symptoms associated with adverse medical diagnoses, thus facilitating reconnections of neural pathways (Archibald, Scott, & Hartling, 2014). The arts can provide coping methods that help pediatric patients not only focus their attention away from their painful or frightening medical procedures (Blount et al., 2009), but create an avenue to ultimately master traumatic events.

Methods

Patient Selection

At the time of admission, the research team was provided patient referrals through the qualitative assessments of doctors and nurses. Patients of both genders were recruited through the pediatric and pediatric intensive care units on a first-come first-serve basis, recruiting no more than two children per day. All English-speaking children ages 3–17 admitted to the two units were eligible for inclusion. Children younger than 3 years of age were not included to ensure the ability to self-report. Due to the small scale of the pilot study, there were no sufficient resources to enable multi-language translation. The institutional ethics board

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