Heart in Expression: An Art Therapy Program for Adolescents

and the Development of

Emotion Regulation Skill Building

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Abstract

The inability to appropriately regulate emotion appears to impact a majority of adolescents and is often what leads a teen to violence, self-harm and suicide. Art therapy techniques help adolescents understand their emotions. The purpose of this paper is to bridge the gap between the topics of emotion regulation and art therapy and illustrate their significance to adolescent mental health. Furthermore, this paper will review literature on emotion regulation, including its history and an Adlerian theoretical orientation for emotion regulation. This article will suggest art therapy as a significant treatment modality for work with adolescents in building skills for emotion regulation. There will be research discussing the use of art therapy with adolescents, illustrating declines in symptoms associated with anxiety and trauma related disorders. Following the literature review, this paper will include an outline for a therapeutic arts program supporting adolescents in developing emotion regulation skills. The resulting program can be used for future research in the field of art therapy and emotion regulation.
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The adolescent stage of development is a delicate time where teens develop their self-identity, build their self-esteem and grow in confidence (Manaster, 1989). Adolescence is a time in one’s development that not only is the physical body undergoing changes but one’s emotional capacity and understanding is growing and maturing. The many emotions discovered and experiences in this life stage presents as emotionally turbulent for some. Not only are teens being faced with biological development of the brain and body, but today’s teens are faced with so much more. For example, forms of communication between peers have transformed from face to face contact to the use of screens such as cell phones, social media, and internet communication. Digital and on-line communication has become commonplace, ultimately changing the social norms of this generation. According to the Pew Research Center, a study conducted in 2010 found that 95% of adolescents between the ages of 12-17 are online and 80% of them use social media sites (Lenhart, et al., 2011). Pew (2012) also noted that 88% of the social-media using teenagers were witness to mean or cruel actions done on a social networking site. Technological advances of the 21st century, while impressive, come with some negative implications for the developing adolescent such as easy access to negative media influences and cyber-bullying.

Events like cyber-bullying and suicide are also much more common today for our youth. For instance, “In a 2011 nationally representative sample of youth in grades 9-12, 20% reported being bullied on school property and 16% reported being bullied electronically during the 12 months before the survey” (U.S. Department of Health and Human Services, 2012, p. 1). “As part of the separation/individuation process, teens can find themselves in vulnerable online
situations and may be reluctant to engage parents or adults for help” (Gorrindo, Fishel, & Beresin, 2012, p. 289). According to the Centers for Disease Control and Prevention, unintentional injury and suicide are the leading causes of death in youth between the age of 10-24 years old (2013). While suicide is the first leading cause of death in America’s youth, it is second to that of homicide. In another study conducted by the Centers for Disease Control and Prevention, in 2010, 4,828 young people ages 10 to 24 were victims of homicide (U.S. Department of Health and Human Services, 2012). The change in social norms, and rise in internet use has influenced teens to rely on digital communication as a way of seeking friendship, support and help (Mikami, Szwedo, Allen, Evans, & Hare, 2010).

For adolescents that struggle with their mental health, these changes impact their ability to effectively manage their emotions often turning to violence, self-harm and suicide. Studies from the National Adolescent Health Information Center suggest that “20-25% of youth have symptoms of emotional distress, and about one in ten have moderate to severe symptomatology” (Knopf, Park, & Mulye, 2008, p. 10). The ability to regulate ones emotions is not an easy task, and for developing teenagers it is even more difficult. Teenagers need to learn and understand their emotions and the impact they can have on their actions. Emotion or affect regulation is a significant topic in psychology today because a majority of clinical diagnoses given to adolescents such as Depression, Anxiety and Attention Deficit Hyperactivity Disorder include characteristics of affect dysregulation (Knopf, Park, & Mulye, 2008). Emotional distress and mood dysregulation along with symptoms such as impulsivity, depression and irritability are what ultimately leads an adolescent into treatment (American Psychiatric Association, 2013).

Art therapy is a unique treatment modality that engages adolescents and empowers them to understand themselves. Not only does art therapy help teens practice healthy expression, but
through their creativity adolescents are able to build confidence, visualize problems and solve them (Riley, 1999). While there is a significant lack in research specifically related to art therapy and emotion regulation, the goal of this paper is to open a dialogue in regards to art therapy and emotion regulation for teens. This paper will review literature on emotional regulation, specifically as it relates to adolescence then suggest art therapy as a significant and effective treatment modality. Based on the supporting literature review, this author will outline a therapeutic arts program developed to support adolescents in identifying and applying emotion regulation skills.

**Emotion and Emotion Regulation**

It was not until the 1980s that the field of psychology became attracted to the study of emotion regulation (Plutchik, 2001). Charles Darwin, Walter Cannon and Sigmund Freud were some of the first scientists and psychologists to research emotion in-depth. While there is growth in research regarding emotion and emotion regulation in a psychological context, it remains a confusing concept. There are a number of theoretical discussions and empirical studies that are scattered across a number of disciples, ultimately making emotion regulation a complex topic to address (Gross & Thompson, 2007). Considered by a multitude of disciplines and fields, the study of emotion is rich with a large number of neurological studies, sociological perspectives as well as developmental approaches. For the purpose of this paper, an evolutionary perspective will be considered and links will be made to developmental approaches such as Erikson’s theory of development as well as Rasmussen’s Adlerian perspectives on emotion.

This paper will broadly define emotion and emotion regulation from a psychological perspective. Due to the complexity of the topic, this paper will look specifically into the origins of emotion research from Darwin’s evolutionary standpoint. While there are multiple theories
and discussions relevant to emotion regulation this paper will adopt an Adlerian theoretical orientation for emotion regulation, based on work by Rasmussen. His Adlerian perspective will also be discussed as it correlates to the adolescent population.

**Definitions**

**Emotion.** Every day of life is filled with situations and decisions that cause us to feel, think and then act. Emotions are internal physiological sensations that guide an individual’s decision making. Feelings arise in response to a stimulus. For example feeling fear in darkness or laughing at a joke. For the purpose of this paper, emotion is defined as the positive and negative affective responses that are generated from specific objects or situations which bring about behavioral responses (Gross & Thompson, 2007). Furthermore, emotions or affect can range in intensity and duration and often occur simultaneously with other emotions. It is not uncommon for an individual to experience multiple emotions in response to one specific stimulus. Emotions may involve whole body responses such as losing an appetite in a state of depression.

**Emotion regulation.** Emotional regulation is defined as a conscious or unconscious process by which a change in affect occurs (Gross & Thompson, 2007). The change in affect may be meant to reduce emotional intensity, amplify emotional intensity or eliminate an emotion completely. For example, in processing grief, a person may regulate their emotions by crying and turning to support networks in order to reduce the emotion of sadness. Depending on the purpose of the emotion, the regulation process serves to decrease, strengthen or preserve an affect ultimately returning the individual to a balanced state (Gross & Thompson, 2007). Emotional regulation also includes how one experiences an emotion and how they choose to express that emotion. Affect regulation process may be controlled. However, it can also be involuntary. Without knowledge of the influential regulation process, one’s emotions can become expressed
or experienced inappropriately (Gross, 1999). As stated earlier, a number of disciplines have added their perspectives to the study of emotion and emotion regulation. Emotions are the result of how we perceive the situations around us. They influence our thoughts and actions. Emotion regulation is an innate human ability that allows an individual to change affect and manage emotional responses.

**History of Emotion**

In the 1840s, Darwin’s research evolved the study of animal instinct to the study of human emotion. Charles Darwin and his theory of evolution set the foundation for the study of emotions in humans. Gross (1999) suggests that when psychologists became interested in the study of emotion they began from the basis of instinct theory. Developed by Darwin, instinct theory examined the reason behind bees building a honeycomb and birds building nests. This theory focused on the natural intrinsic decisions one will make for survival. Charles Darwin first considered instinct to be a great determinant of survival and adaptation. Gross (1999) suggests that from there researchers furthered the animal instinct theory and connected it to human emotion. Charles Darwin suggested that just as variation in an organism can impact adaptation and survival, so can psychological features in a human (Gross, 1999). This meant that from an evolutionary standpoint, our emotions became a key factor in adaptation and survival.

Branching from Darwin’s evolutionary perspective, Plutchik (2001) developed a psycho-evolutionary theory of emotion which suggested that, “emotion, cognition and action interact in feedback loops and that emotion can be viewed in a structural model tied to adaptation” (p. 345). Furthermore, Plutchik (2012) claims that emotions are triggered within an individual when experiencing a situation where their survival is threatened by fact or by insinuation. According to
this evolutionary theory, emotion regulation then becomes a defense process in which the behavior employed facilitates movement toward stability (Plutchik, 2001).

In summary, early emotion research was closely tied to the study of animal instinct and adaptation. Once adjusted to consider a human perspective, emotions were considered a key factor in the adaptation process. Furthermore, emotions were considered an intrinsic process that guided an individual towards stabilization and safety. Therefore, emotions continue to be an important factor in adaptation to everyday life circumstances.

Theories of Emotion Regulation

While there are multiple theories regarding emotion regulation, this paper will specifically embrace an Adlerian perspective to emotion regulation developed by Rasmussen. Later, this paper will examine Erikson’s developmental approaches along with neurological and Adlerian implications when discussing adolescent emotion regulation. Emotions are part of everyday life. One approach to emotion regulation states that “emotions are the energy compelling our movements” (Rasmussen, 2003, p. 390).

Rasmussen suggests that every emotion has a purpose and that our emotions are goal oriented. Rasmussen takes on the Adlerian idea of teleological striving for a goal. For example, Mosak and Maniacci (1999) state, “In order to understand a person’s goal, we need to understand his or her line of movement. People move towards goals in various ways; the most common goal is to belong” (p. 16). Therefore, emotions are what drive a person towards a goal. Rasmussen’s approach to emotion and emotional regulation is based on three assumptions: (1) life is defined largely by emotion, (2) how a person behaves is determined by emotion rather than cognition, and (3) emotions are more noticeable to the individual than their actions or thoughts (Rasmussen,
This means that an individual’s thoughts can be overruled, and that feelings ultimately dictate one’s decisions and movement in life.

Rasmussen’s (2003) Adlerian approach to understanding emotion regulation encompasses the ideas of social interest, superiority and inferiority striving as well as lifestyle. Rasmussen suggests that emotion expression and regulation are processes that guide the individual to *superiority* or a “perceived minus” to a “felt plus.” This idea ties closely to the evolutionary perspective which states that emotions are meant as a way of survival and safety.

**Emotion regulation and adolescence.** Generally speaking, adolescence is a time of physical, emotional and cognitive maturation. This paper will discuss adolescent emotion regulation from Erikson’s developmental standpoint which includes neurological development. Erikson’s perspective on development also ties closely to Rasmussen’s Adlerian approach to emotion regulation in working with the adolescent population.

Adolescence is a critical stage of development which conjures all kinds of emotions. Some experienced mildly, some more intense. Erikson considered adolescence to be a stage of “identity vs. role confusion” (Gorrindo, Fishel, & Beresin, 2012). While there is accelerated cognitive development, “…the relative immaturity of the adolescent’s brain leaves them at risk for emotionally driven, impulsive, risky behavior” (Gorrindo, Fishel, & Beresin, 2012, p. 289). When a young person experiences trauma, those emotional experiences become encoded in their limbic system and right brain, essentially impacting their brain development and changing networks within it (Malchiodi, 2014). This suggests that adolescents who experience trauma or mental illness may experience a change in their brain networking which impacts their ability to regulate. Adolescents who have difficulty with regulating effectively get stuck in a negative thought cycle or depressive state, which in turn complicates their mental illness.
Rasmussen’s assumptions about emotion regulation, corresponds to the maturity of an adolescent in their stage of development. Their decision making skills are in flux, their morals and values are being tested and their sense of self, questioned. Rasmussen’s theoretical approach is based upon the idea that emotions are what drive one’s thoughts. In a study by Silk et al. (2003), that examined the link between emotion regulation and adolescent adjustment, “adolescents who were able to recover from feeling sad, angry, or anxious were much less likely to report depressive symptoms and problem behavior than adolescents who were not able to modulate these negative emotions” (p. 1877). Adolescents in their stage of development are often more drawn to decisions based upon feeling rather than thought. Silk et al. (2003) also suggested from their findings that a key to prevention and intervention with adolescent mental health is to encourage coping strategies that do not focus on rumination, avoidance, escape and denial.

One of the benefits to Rasmussen’s approach is that it allows the client to give weight to their emotions in order to better understand themselves. This opportunity of free expression opens the adolescent to different ways of regulating their emotions. It can also be an opportunity for self-reliance. This learning about themselves and their emotions offers a new way to orient when times become difficult again (Rasmussen, 2003). From a clinician’s standpoint, understanding the teenager’s emotional patterns can also help to better understand their lifestyle and goals.

There is a need to teach adolescence about emotion, what it is and why we have them in order to help them adapt and survive in their worlds. “The quality of life is defined by how one feels. Life is good when it feels good, and compensatory efforts are required when it feels bad” (Rasmussen, 2003, p. 393). In a study by Slayton, D’Archer and Kaplan (2010) “art therapy as a
treatment modality has been isolated, measured, and shown to be statistically significant in improving a variety of symptoms for a variety of people with different ages” (p. 115). This study supports that one of the most effective ways for teenagers to practice expression, understand themselves and improve their quality of life is through Art Therapy. When the symptoms of anxiety and depression begin to overwhelm, adolescents can use art making as a way to reduce those overwhelming emotions.

**Art Therapy**

It is generally understood that resistance to mental health treatment is common, especially for adolescents. Each with their own set of complexities and difficulties, no teenager presents with the same struggles. “Teenagers are willing to draw and create art as freely as they resist talking to an adult” (Riley, 1999, p. 37). While there is no one successful treatment modality for assisting adolescents to identify emotion and learn emotion regulation skills, art therapy offers a unique perspective. Art therapy provides teenagers with an opportunity to make sense of the world from a new perspective. It is an opportunity to build independence and practice healthy self-expression of emotions, thoughts and behaviors. In the next section, the author will define art therapy according to the American Art Therapy Association (AATA) as well as review literature on the efficacy of art therapy in regard to adolescence and emotion regulation. This author will illustrate the importance of art therapy with the adolescent population and specifically discuss group art therapy. Finally there will be a review of the efficacy that art therapy has in treatment of emotion regulation skill building.
What is Art Therapy?

A hybrid between the fields of art and psychotherapy, art therapy is a unique treatment modality that engages the senses and focuses on creative expression. The American Art Therapy Association (2014) defines art therapy as:

A mental health profession in which clients, facilitated by the art therapist, use art media, the creative process, and the resulting artwork to explore their feelings, reconcile emotional conflicts, foster self-awareness, manage behavior and addictions, develop social skills, improve reality orientation, reduce anxiety, and increase self-esteem (p.1).

In addition to creating art, the therapeutic relationship between the art therapist and the client offers a unique opportunity for growth and insight because it evolves from non-verbal communication. The art-making and experiential processing becomes a method for examining the inner experiences, feelings, and perceptions of an individual (Malchiodi, 2007).

Art therapy uses a variety of materials in a variety of settings. For example, art therapy is used in hospitals, schools, rehabilitation clinics, private clinics and senior living communities. With the guidance of an art therapist, creating art and the subsequent experiential processing, the individual can express their inner thoughts and emotions. Therefore, the therapeutic relationship between art therapist and client creates a unique alliance for learning and exploration. The art therapist can create a non-confrontational environment for the client to open up and tap into their creativity. The art therapist “may serve as a supportive guide to a client’s exploration of art materials, help an individual examine the content and meaning of the images, or provide an empathetic response to the art maker’s creative expressions” (Malchiodi, 2007, p. 17).

The role of the art therapist is instrumental in formulating an alliance for the client to be comfortable in their artistic expression but it does not stop there. The art materials are also a
source of power within the therapeutic setting of art therapy. In a study exploring the impact that clay has on reducing negative mood, Kimport and Robbins (2012) found that “a 5-minute period spent manipulating clay produced more mood enhancement than the same amount of time spent manipulating a soft stress ball” (p.77). This study identified the use of clay as the ‘active ingredient’ in improving mood. In support of Kimport and Robbins, Sandmire et al. (2012), discovered that the activity of art making generated an anxiety-reducing effect within college students experiencing real states of anxiety.

Beyond anxiety, art therapy has been noted as an effective treatment modality for individuals struggling with trauma and PTSD. In fact, Pifalo (2006) developed an extended research study exploring treatment of sexually abused children and adolescence. He found that combining art therapy and cognitive behavioral therapy, significantly reduced symptomatology scores on nine of the ten clinical subscales. He concluded that, “…the inclusion of art therapy provides clinicians with additional tools for intervention and increases likelihood that the symptoms of PTSD will be reduced” (Pifalo, 2006, p. 185).

As demonstrated above, art therapy as a treatment modality is effective for use with adolescents experiencing symptoms of anxiety, PTSD, trauma and depression. To clients, art therapy may be as simple as playing with a specific medium. The goal of the art therapist is to engage the client in an alternative form of communication. Art therapy provides a simple alternative to reduce resistance to therapy. Through the art making and verbal processing individuals can discover, manage and let go of things that weigh them down emotionally. Art therapy utilizes visual expression and non-verbal communication to assist the client in self-exploration and healing.
Art Therapy and Adolescence

It is widely accepted that adolescence is a difficult stage of life development. Adolescents experience changes both physically and emotionally. Hence, puberty brings changes in appearance including sexual development. Moreover, adolescents change cognitively moving from concrete thinking to abstract thinking. As Erickson identifies in the adolescent stage of ‘Identity vs. Role Confusion,’ adolescents “…are forming an internal sense of their personal identity, there is tremendous self-consciousness and consideration of how they are perceived by others” (Gorrindo, Fishel, & Beresin, 2012, p. 289). Adolescents begin to relate differently to people in their lives. Teenagers often have a change in roles within the family as well as additions of friend groups and intimate partners (Riley, 1999). All of these changes and intricacies combined with mental illness make for a fragile and difficult population. Adolescents are often resistant to verbal therapies; communicate in alternate ways and resists adult authority; however, art therapy is a modality that can bridge those challenges (Moon, 2012). Art therapy provides a unique and enlightening experience for teenagers whether it is in a group, individual, or family therapy setting.

Adolescents are often resistant to therapy due to the fact that they are often forced to communicate their thoughts and feelings (Moon, 2012). Art therapy provides a way of communicating in which the teen is provided choices. In fact, “the pleasure of activity, the newness of the modality, the feeling that they are speaking in their own voice in their products, reduces their resistance” (Riley, 1999, p. 144). Art therapy provides a unique opportunity that may help the teen feel more respected and empowered, ultimately leading to a more successful treatment. Adolescents are encouraged to place meaning and words to their art but have the opportunity to choose what they disclose and recognize.
Moon (2012) suggests that teenagers communicate with metaphors which make this population much more challenging to engage in mental health treatment. Furthermore, non-verbal communication like body language and facial expressions often speak volumes when working with adolescents. Art therapy is a modality that employs the resistance and facilitates the use of metaphors to help the therapist understand the client. The adolescent client also gains personal insight. In addition, “these metaphoric communications will be transmitted through dramatic and subtle actions, images, words, movements, sounds and silences” (Moon, 2012, p. 23). Art therapy provides an opportunity for the clinician to pause and see what the teenager may be communicating through their images, their words and the movement within their art. It also allows the therapist work with the themes that emerge to facilitate movement in the therapeutic process. Finally, art therapy offers a unique opportunity to look at the client’s world and self-view in a manner that is comfortable to them. It is an encouraging treatment modality that is able to greet resistance and offer choices in order to continue the therapeutic process.

**Adolescent group art therapy.** Most teenagers are social beings that chose to learn from each other rather than adult authority (Riley, 1999). As such, group art therapy provides peer interaction in a therapeutic setting. This form of therapy has both benefits and disadvantages for the teenage population. Riley (1999) declares that often adolescents turn towards their peers for advice and support. Thus, it is important to create a safe therapeutic environment for adolescents to interact and discover.

The group therapy setting is unique for the socially oriented adolescent population. Group art therapy creates an opportunity in which the members of the group find belonging and significance. In a group setting, teenagers are more likely to speak openly, generate discussion and find support from their peers (Riley, 1999). As a result, through the art making and
experiential processes, they can discuss family problems, school difficulties, romantic struggles and everyday stressors. It is also an opportunity to celebrate breakthroughs, growth and healthy choices. In addition, “as adolescents engage in artistic work within the confines of the therapy group, they inevitably create a social microcosm that reflects their interpersonal sphere” (Moon, 2012, p. 219). Therefore, the group therapy experience provides adolescents with a chance to understand how they relate in a group. Furthermore, adolescents have a chance to understand their roles, responsibilities and ultimately find their voice.

Teenagers are naturally social beings therefore the group setting also has some disadvantages. It is important for the art therapist to establish boundaries since each group member may have a different diagnosis and may have a poor awareness of interpersonal boundaries. The art therapist has an important role of monitoring this and ensuring the support and guidance is effective and healthy for the members of the group. Some major considerations when working with teenage groups are establishing trust and maintaining confidentiality (Riley, 1999). Trust and confidentiality are two goals that greatly impact the success of group treatment. Members of the group need an established trust within the group in order to feel safe. They also need to have a great understanding of the rules of confidentiality for the purposes of structure and safety.

Properly administered, group art therapy can provide a rich environment for adolescents to learn about themselves and how they relate to the world around them. Thus, in a group setting teenagers can practice expression and utilize creativity as a way of discovering themselves. With structure and safety in mind, adolescents can find support and learn from one another through their art.
Art Therapy and Emotion Regulation

There is a large amount of research on the use of art therapy in treating depression, post-traumatic stress disorder and anxiety (Pifalo, 2006; Sandmire et al. 2012; Kimport & Robbins, 2012). However, there is very little on the use of art therapy as a treatment modality for emotion regulation skill building in a clinical setting. One possible reason is that emotion regulation or affect regulation is a common symptom of most clinical diagnoses such as anxiety and trauma disorders but is not the focus of the treatment. Emotion regulation is a component of a larger diagnosis and is rarely the focus of treatment. From an adolescent perspective, dysfunctional affect regulation is a big component that effects their mental health and development. It is often the symptom that leads to self-harm, violence, chemical-abuse and more frequently, suicide. The next section of the paper will illustrate the significance of art therapy and emotion regulation skill building for teens.

This paper has reinforced the importance of emotion regulation in teenagers, as well as, the use of art therapy with teenagers. Clearly illustrated, there is a need to connect the two topics. When considering adolescent treatment for mental health, there is a focus on short-term care and a lack of options for longer preventative care. In order to qualify for state funding or insurance, the individual needs to meet criteria for severe dysfunction or greatest risk (Riley, 1999). Therefore, teenagers who are in danger of harming themselves or others have a treatment outlook of two days to two weeks depending on the hospital or clinic. According to a report completed by the National Adolescent Health Information Center (2008), studies consistently show the amount of youth diagnosed with mental health disorders do not receive adequate services and that the youth who use mental health services underestimate the actual prevalence of problems (Kimport & Robbins, 2012). The success of therapies becomes tested with a reliance on crisis intervention
and short-term care. These treatment modalities are effective compared to no treatment at all, but when considering emotion regulation, time becomes an important factor for success.

Understanding and managing emotions does not happen overnight but rather it is a skill that takes time to develop. Art therapy requires time in order to develop the therapeutic relationship and the courage to self-express. Most teenagers naturally respond to art and this interest is what can help to engage the adolescent. Art therapy and emotion regulation skill building is a combination that can help the individual and provide them with better long-term treatment outcomes. This author is not suggesting that art therapy and emotion regulation skill building can stand alone in order to treat an individual but rather, it should be greatly considered in combination with family and individual psychotherapy. Addressing emotion regulation by using art therapy can help build resiliency and self-reliance in adolescents that struggle with managing their emotions. This type of treatment in combination with family and individual therapy can provide the adolescent with skills and tools in order to adapt and survive.

For the average teenager, expressing emotions can be an incredibly difficult task especially when forced to do so. Teens need to be given alternative opportunities to express and communicate. Art is common language for teenagers. It is a comfortable and well known activity. Art therapy provides teens with alternative ways to communicate and express difficult emotions and situations. It is through their art that they are able to find words, identify emotions, problem solve and gain insight. Through the art making and processing, teenagers can develop a safe therapeutic relationship with an authority figure like the art therapist along with their peers in a safe group setting. Art therapy allows teenagers to practice their communication, social skills, frustration tolerance, and self-expression (Riley, 1999). It is through art making that teens can learn these new skills to facilitate their emotion regulation.
For many years, emotions were considered too complex to study. Although they have been researched since the 1800s, they continue to be an ever-changing and multifaceted topic of discussion. Emotion regulation is growing in awareness and knowledge. However, there is still very little research on the impact it has on adolescent development. While art therapy continues to grow in recognition, it also needs support. There is research that supports art therapy in treating mental health disorders (Slayton et al., 2010; Kimport & Robbins, 2012; Vennet & Serice, 2012), there is a need for continued research to support art therapy and emotion regulation skill building. Professionals involved in the field such as Malchiodi, Riley and Moon, see the impact and importance of the modality. An art-based therapeutic program that addresses emotion regulation skill building by using group art therapy as a treatment approach will be outlined in the next section.

**Heart in Expression, Art Therapy Program**

Heart in Expression is an outpatient art therapy program that provides adolescents with skill building for emotion regulation. The mission of Heart in Expression is to provide a safe therapeutic group setting where teens can use art media to process and express emotions so that they gain insight and build life-long skills to manage emotions. Heart in Expression utilizes artistic expression in a safe environment so that adolescents may explore their self-identity, foster creativity and build their self-esteem. The vision for this program is to provide adolescents with the tools they need to understand and manage their emotions effectively in life. Next, the structure and assessment component of Heart in Expression program will be outlined to provide a theoretical orientation and address the strengths and limitations of the program.
Structure

Heart in Expression is a ten week group art therapy program for teenagers aged 13-16 years old. The participants require a past or current diagnosis with a mental health disorder such as: anxiety disorders, depressive disorders, trauma and stress related disorders or disruptive disorders. Each session has a topic and directive with specific objectives. Each session is 90 minutes and is broken down to 15 minutes for check-in, 40 minutes for art making and clean up, and 35 minutes for verbal processing and check-out. The members of the group are expected to offer full participation and engagement. Participants are encouraged to request breaks as needed in order to regulate emotions throughout the session. Following the break, group members will be asked to complete a break worksheet addressing the reason for the break and regulation skills practiced. Each group member will be expected to be respectful, and follow art therapy studio rules. The studio rules will be established by the group with the guidance of the art therapist. Each group session, the members will be reminded of the general group expectations and rules. The rules include respectful communication, taking breaks as needed with permission, as well as, cleaning and respecting materials.

Heart in Expression consists of directives that focus on specific objectives necessary to learn emotion regulation. Identified objectives are: Social interest, creativity, abstract thinking, distress tolerance, self-awareness and communication. The topics and directives chosen facilitate connection and establish trust within the group. The first session will be focused on setting goals and introducing one’s self to the group. As the program progresses, the directives are designed to address topics such as self-identity, environmental awareness, strength identification and problem solving. Depending on the session, the group will do a project together or independently. Participants will be given opportunities for relaxation and guided imagery. The
ninth session has a focus on sensory awareness in which the group is required to rely on their senses in order to make the art. The goal for this group would be to provide each participant with a safe environment for them to express, discover, create, and communicate their emotions.

Each session has a different directive. However, the group’s overall structure will be consistent. Participants can expect a check-in and check-out process that will be ritualized to provide consistency (see appendix H for lesson plan). Group members will be asked to check in by choosing a color that describes the feeling they are currently experiencing. They will then be asked to fill in that color(s) on a note card. These note cards will be collected and the participants will be asked to present a feeling word with the check-in and check-out. The process facilitates the development of the participant’s feeling and emotional vocabulary. Homework will be given each week. Each participant will be given a small drawing journal to utilize throughout the ten week group. This journal is a way of assessing how the participant is managing emotions and using the learned skills outside of group. Both written and art process are welcomed in the journal. During the art-making section of group, the art therapist will check in with each group member regarding their art therapy journal.

**Assessment**

The Heart in Expression program has an assessment component that will monitor changes in emotional development and responses to program directives. It is a three part assessment process involving the patient, their family as well as the lead art therapist. This assessment component can be used in future research regarding the impact of art therapy on emotion regulation skill building. The first assessment will be prior to the groups beginning and will be required of the patient and their family to complete. The initial assessment given to the patient asks them to consider their interests and hobbies, and what brought them to the group and what
they hope to get out of group. It also assesses their current ability to self-regulate (see Appendix A). The family assessment asks for a parental perspective on their child’s interests, self-regulation skills as well as environments that trigger the child (see Appendix B).

There will be an ongoing observational log by the lead clinician. This log will record the child’s emotion vocabulary and will note any mood and affect observations throughout each group session (see Appendix C). During the last session a final assessment will be completed by both group member and family (see Appendix D and E). It is similar to the initial assessment and it identifies what the child has learned and if there has been a change in behavior or improvement in emotional regulation skills. The parent/guardian has an opportunity to identify any changes observed, and offer feedback to the group leader. Each group member will be asked to fill out a confidentiality form including the limitations of confidentiality as well as a group contract (see Appendix F).

The three part assessment is designed to consider not just the individual but their family as well. It is intended to monitor changes and growth as well as note areas for improvement or development. The parent/guardian will be asked to sign an informed consent and a release of information (appendix G) to provide a comprehensive treatment for each participant.

**Theoretical Orientation**

Art therapy can be placed on a continuum from art-as-therapy to art psychotherapy. Due to the structure and short duration of group, the orientation focuses on art making as therapy. Malchiodi suggests, “art making is seen as an opportunity to express oneself imaginatively, authentically, and spontaneously, an experience that, over time, can lead to personal fulfillment, emotional reparation, and transformation” (Malchiodi, 2007, p. 6). The opportunity to express, imagine and create sets the foundation for the group. Along with art therapy, the Heart in
Expression program incorporates narrative, Adlerian, Cognitive Behavioral Therapy, and solution focused practices. The next section describes the significance of the theoretical approaches within the program.

**Narrative.** Resistance is common when teenagers are placed in a position where they are required to talk about their inner turmoil. The confrontation and up front verbal communication is often frightening to this population. Narrative techniques allow the teenager to speak about themselves through stories, offering a once removed sense of comfort. Narrative practices focuses on separating the person from the problem (Riley & Malchiodi, 2003). When art is incorporated into narrative practices the art becomes the externalization. It provides a way for the artists to “evoke a physical sense of how the problem feels and provides the opportunity to make meaning and rework images into new stories” (Riley & Malchiodi, 2003, p. 88). It is an opportunity for the teen to be once removed from the situation in order to reflect on it. Participants are still able to feel and discover but the narrative practices offer a chance to rework it through the imagery.

**Solution-focused.** Solution-focused therapy is incorporated into the structure of the program. This practice is important due to the limited amount of time for the group. Teenagers need to hear the strengths they possess (Riley, 1999). Many teenagers are teased and emotionally beaten down; this group is an opportunity to build their self-esteem and self-reliance. Solution focused practices helps the clinician to reframe situations and focus on the positive (Riley, 1999). This approach is helpful for teenagers because it incorporates looking at resources, solutions and strengths for the individual (Riley & Malchiodi, 2003). Teenagers often believe they can do it on their own and this practice encourages them to seek out coping strategies that help them.
Adlerian. The Heart in Expression is designed to be a group process. The Adlerian approach focuses on the social experience and learning that occurs in group process. The group process is an active, peer learning environment in which teenagers often learn from one another rather than relying upon an authority figure. In fact, “Adlerians believe that the balance between social interest and self-interest can best be served through involvement in the give-and-take of the group” (Carlson, Watts, & Maniacci, 2006, p. 207). Thus, individuals in the group can learn about themselves by learning how they interact with others. They are expected to manage frustrations, show respect and cooperate with others. The group becomes a microcosm that reflects other real life social situations (Carlson, Watts, & Maniacci, 2006). This theoretical orientation provides grounding for the teenagers find the courage to learn about themselves and how they regulate socially.

Cognitive behavioral therapy. Cognitive Behavioral Therapy (CBT) is based on the idea that one’s thoughts are central to mood alterations and behavioral distress (Yalom & Leszcz, 2005). This theoretical orientation believes that individuals get stuck in automatic negative thinking which then dictates their mood and behaviors (Yalom & Leszcz, 2005). CBT is influential when building emotion regulation skills because it requires the individual to engage in self-examination and self-monitoring. This practice is incorporated into the group by using check-ins and check-outs. This theoretical approach also influenced the homework of the art journal. It offers a measurable way for the art therapist to check in on the individual and document they are managing and using skills outside of group.

There are multiple theoretical orientations that all carry important messages and practices necessary for work with adolescents and emotion regulation. Heart in Expression is meant to help the individual understand themselves, but also practice what they learn in a safe
environment. It is an opportunity for them to practice expression and discover strengths. All the theories utilized in the program come together to support the teenager in finding and understanding themselves.

**Strengths and Limitations**

This therapeutic arts program is meant to provide an opportunity for adolescents to build lifelong skills in emotion regulation. There are numerous strengths to this group model along with some limitations. This program is developed to be a great opportunity for adolescents to freely express and engage in their creativity. It is a safe environment for them to feel support and offer it to their peers. Art making builds confidence and self-esteem. It is a chance for teens to find and demonstrate their strengths and believe in them. This group establishes a way of engaging adolescents so that they may feel safe and comfortable to share their inner struggles. Participants can learn new coping skills, adaptive strategies and build upon their self-reliance. Through the art process and product, the participating teenagers can connect, imagine, and inspire each other. This innovative approach to group art therapy and emotion regulation is a strong candidate for further research. The Heart in Expression program has the components necessary to facilitate healthy change in the participants and provide measurable outcomes.

There are limitations to the Heart in Expression group model. This group is not a substitute for individual or family therapy but can be used in tandem with other therapeutic services. The brief nature of the group limits the opportunity for individuals to heal deep emotional trauma but referrals for additional services can be made. This group may not be suitable to serve participants with serious behavioral problems. Due to the structure and goals of the group; individuals who are in a state of crisis would be referred to more appropriate treatment settings. Maintaining the safety of the group in the art room is essential. The group participants
need to be able to demonstrate safety with their peers, the materials and themselves in order to fully participate in sessions.

**Summary**

The teenagers today are faced with more technical advances that have altered communication and social interaction. Many teenagers are being asked to deal with difficult stressors but are ill equipped to cope effectively. There have been frequent media reports of school violence, bullying and alarming statistics on teenage suicides (U.S. Department of Health and Human Services, 2012). These factors suggest a decline in adolescent mental health (Knopf, Park, & Mulye, 2008). There is a need for awareness of emotion regulation and alternative treatment options for teens. Adolescents are increasingly diagnosed with a mental health disorder before they reach high school (Knopf, Park, & Mulye, 2008). A major component in each diagnosis is a symptom of emotion regulation such as irritability, anger outbursts, and behavioral problems (American Psychiatric Association, 2013). The inability to effectively manage and regulate emotions is a symptom that influences self-harm, violence and suicide. The decline of mental health in adolescent youth suggests a need for education about emotions and how to cope when life becomes difficult.

Art therapy is a treatment modality that focuses on expression. It offers an alternative form of communication that allows the artist to control what they want to say and how they want to say it. Art therapy works with the resistance and offers choices in expression (Moon, 2012). This treatment approach creates a unique therapeutic relationship between artist and therapist. Art therapy engages the adolescent and offers communication through visual language and metaphor. It offers a unique way to externalize problems and emotions so that they can be
reflected on and learned from. Art making engages all senses and allows the individual to consider themselves.

The Heart in Expression group will offer teenagers a chance to reflect and refocus. They will be encouraged to express in ways that feel comfortable to them. It is an opportunity for teenagers to use art materials, illustrate and communicate their emotions. It is a chance for discovery, learning and support. Through art making and processing, adolescents can learn skills in order to manage their emotions when the difficulties of life inevitably present themselves. This group addresses many goals in order to assist the teenager in becoming a self-reliant emotional being. In a safe environment, teenagers learn about their strengths and resources. The group encourages social interest and support for one another to interact and practice skills like distress tolerance, breathing, communication and abstract thinking. They are provided with tools and support to practice expressing difficult emotions. In the end, this group is an opportunity for teens to learn coping skills in order to adapt and survive in an ever changing world.
References


Moon, B. (2012). *The dynamics of art as therapy with adolescents.* Springfield, IL: Charles C Thomas Publisher, LTD.


Appendix A

Heart in Expression

Introductory Assessment

Group member’s name: ____________________
Date of Birth: ____________________________

List any interests or hobbies:

What brought you to this group?

Circle where you feel most triggered:

- School
- Home
- Friends

Other (list):

What steps do you take or things do you to calm down?

What do you hope to get out of Heart in Expression, Art Therapy Group?

Additional Comments:
Appendix B

Heart in Expression

*Family Introductory Assessment*

Family member’s name: __________________________________________

Relationship: _________________________________________________

Group member’s name: _________________________________________

Date of Birth: ________________________________________________

List any of the interests or hobbies for your child:

What brought your child to this group?

Circle where you feel they are most triggered:

- School
- Home
- Friends

Other (list):

Why?

Please list the coping skills your child has:

What do you hope your child to get out of Heart in Expression, Art Therapy Group?

Please list additional comments or considerations for your child:
Appendix C

Group Member: ____________________________________________

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<th>Session + Topic</th>
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<th>Additional Observations</th>
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Appendix D

Heart in Expression

Closing Assessment

Group member's name: ____________________
Date of Birth: _____________________________

List any skills learned:

What steps do you take or things do you do calm down?

Having had this group, what will be different for you?

What feedback do you have for the Heart in Expression, Art Therapy Group?

What was your favorite session?

Additional comments or concerns:
Appendix E

Heart in Expression

*Family Closing Assessment*

Family member’s name: _____________________________________
Relationship: ____________________________________________
Group member’s name: ____________________________________
Date of Birth: __________________________________________

List any changes you have seen in your child:

Please list what you have noticed to be helpful for your child:

What feedback do you have to improve the Heart in Expression, Art Therapy Group for your child?

Please list additional comments or concerns:
Confidentiality Form

Confidentiality
Each group member shares the responsibility of confidentiality. Each group member will be asked to sign the confidentiality form agreeing to the rules of confidentiality. Signing this means that each group member will not share personal information about others in the group. This means no sharing of names, addresses, taking photos or videos or any other group business. Confidentiality ensures group safety for each member and is critical to the development of a safe, respectful, and trusting atmosphere in which individuals share their feelings openly.

Each group member has the right to private and confidential communication with the therapist. Some of the issues discussed will stay between group member and therapist and will be disclosed to family members upon permission from group member.

Limits of Confidentiality
While privacy and confidentiality are incredibly important there are also limitations. All art pieces, verbal and written communication will be kept confidential and private with these exceptions:

- If a group member is in danger of hurting themselves or others, the therapist will take necessary steps in order to ensure the safety of the individual whether that requires family, police or hospital involvement
- If the therapist has reasonable grounds to suspect a group member is in need of protection due to danger of physical, sexual or emotional abuse or neglect

Consent to Photograph Art Work Created in Art Therapy Studio

Please check the box if you authorize Heart in Expression to photograph art work created in art therapy session for educational and promotional purposes. All art work will be kept confidential:

- All names removed or changed
- Geographical references changed or removed
- Personal information (email, phone numbers, security number, patient numbers etc.) will be changed or removed
- All photographic images of faces removed or disguised

Yes I authorize: [ ] No, I do not authorize: [ ]
Group Therapy Contract

What the group will experience:
This is a ten session art therapy process group. Each session will have a check-in, time for art making, time for process and a check-out. Each session will be 90 minutes. Over the course of the ten sessions, group members can expect specific art directives. They will be given freedom of choice in art materials in order to create based upon the given directive for the group session.

This is a group focusing on emotion regulation, thus breaks are welcomed. If the subject matter begins to overwhelm, please ask for a break. There will be a space dedicated to breaks and each member will be asked to fill out a break card at the end of their break. I encourage each member to use the bathroom prior to group start in order to allow more time for art making however please take bathroom breaks as necessary.

Safe Environment:
The art studio is a safe place for each member to explore art materials, share experiences and support one another. In order to maintain this safety, each member must abide by privacy, confidentiality, and respectful communication. If a situation arises where a member needs to be excused due to creating an unsafe environment, there is a warning system in place. Each member will be given three warnings. After the third warning, it is up to the group to decide if that individual should stay or be asked to leave the group.

Each group member will be asked to maintain appropriate and safe boundaries with their peers in group. This is to ensure the safety of the therapeutic environment. These boundaries include physical and verbal.

Attendance:
Attendance to each group is encouraged and required. If one needs to miss a group, please contact Therapist immediately. If a member misses more than 2 groups they will be asked to be excused and enroll in the next group start.

Art Therapy Studio Rules:
1. Full Participation
2. Clean up after yourself
3. Be respectful of the materials + returning them to storage
4. Listen and make comments with respect
   a. If you would like to make a comment about an art piece, speak directly to the artist and ask if they are open to feedback/comments
5. Be open to new ideas and experiences
6. Do not touch another person’s work or art project without asking
7. Be aware of time limits

Group Member (print name):_______________________________________________
Signature: _______________ Date: ________________
Heart in Expression

Consent for Treatment
Heart in Expression will provide your child mental health care by licensed professionals. This group will provide your child with a safe therapeutic group setting where teens can use art media to process and express emotions so that they gain insight and build life-long skills to manage emotions.

Signature of Parent/Guardian: __________________________________________________________

Release of Information
I authorize Heart in Expression program leader ________________, to request information from:

Provider/Organization:________________________________________________________________
Address:__________________________________________
Phone:_____________________________________________________________________________
Fax: ______________________________________________________________________________

Provider/Organization:________________________________________________________________
Address:__________________________________________
Phone:_____________________________________________________________________________
Fax: ______________________________________________________________________________

I authorize Heart in Expression program leader ________________, to release information to:

Provider/Organization:________________________________________________________________
Address:__________________________________________
Phone:_____________________________________________________________________________
Fax: ______________________________________________________________________________

Provider/Organization:________________________________________________________________
Address:__________________________________________
Phone:_____________________________________________________________________________
Fax: ______________________________________________________________________________

Information provided via (circle):  Email  Fax  Mail  Telephone

Signature of Participant: ____________________________ Date: ____________

Signature of Parent/Guardian: ____________________________ Date: ____________
## Session 1

**Topic:** Art Introduction and Goal Images  
**Directive:** Mandala Collage

### Directive:
As an introduction to the group each member will be asked to create a mandala about themselves. First, they will be asked to fold the circle in half. In the first half, they will be asked to fill it with lines, shapes, colors, images and phrases that describe them. Once finished, they will be asked to flip the circle and complete the other half with what they hope to get out of the group. Again using lines, shapes, colors, images and words. Following the art making there will be verbal process.

### Expectations of Group Members:
- Full participation and engagement  
- Request breaks as needed – fill out break sheet  
- Respect for other group members  
- Leave the art room as clean as you found it  
- Clean materials thoroughly  
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

### Objectives:
- Social interest  
- Creativity, expression  
- Abstract thinking  
- Practice communication and self-awareness  
- Practice distress tolerance

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<th>Time</th>
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<td>Verbal Process of Art Experience and Art Product Check Out</td>
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### Comments:
Session 2  
**Topic:** Self-Identity  
**Directive:** Power Animals

**Directive:** Use any materials and create your power animal. Group members will be asked to think of an animal they most identify with, considering characteristics, strengths of the animal, consider the animal’s habitat, etc.

**Expectations of Group Members:**
- Full participation and engagement  
- Request breaks as needed – fill out break sheet  
- Respect for other group members  
- Leave the art room as clean as you found it  
- Clean materials thoroughly  
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Self-identity  
- Creativity, expression  
- Abstract thinking  
- Practice communication and self-awareness  
- Practice distress tolerance

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**Comments:**
**Appendix H**

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<tr>
<td><strong>Topic:</strong> Environment Awareness</td>
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<tr>
<td><strong>Directive:</strong> Habitat</td>
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**Directive:** Using the animal created in the last group session, consider its habitat. As a group, work together to create a habitat that holds each animal. The group members will be given one large piece of cardboard to base the habitat.

**Expectations of Group Members:**
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Social interest, peer interaction
- Creativity, expression
- Practice cooperation and flexibility
- Abstract thinking
- Practice communication and self-awareness
- Practice distress tolerance – taking breaks as needed

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<tbody>
<tr>
<td><strong>Topic:</strong> Knowing Strengths and Drawing on Them</td>
<td><strong>Directive:</strong> Strength Cards</td>
</tr>
<tr>
<td><strong>Directive:</strong> Begin group discussion about the challenges that teenagers face. Write the challenges on the board for everyone to see. Then begin a discussion on the strengths that each of us draws on in order to face those challenges. Create a list of the strengths. Ask the group to choose some strengths that they identify with and create cards to represent them (consider trading card size or larger)</td>
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**Expectations of Group Members:**
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Creativity, expression
- Practice cooperation and flexibility
- Practice problem solving
- Abstract thinking, positive thinking
- Practice communication and self-awareness
- Practice distress tolerance – taking breaks as needed

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**Comments:**
### Session 5
**Topic:** Tolerate and Problem Solve  
**Directive:** Carousel Painting

**Directive:** Each group member starts at their own painting station. Each station comes equip with paints, brushes and paper (all stations are slightly different). Music will begin playing. The group will be asked to listen to the music for a few minutes practicing deep breathing. After a few minutes the group members will be asked to begin painting. After 5-7 minutes, group members will continue switching stations until back at their original painting.

**Expectations of Group Members:**
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Practicing emotion regulation
- Self-awareness, creativity, expression
- Practice problem solving
- Abstract thinking
- Practice communication
- Practice distress tolerance – taking breaks as needed

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**Comments:**
Appendix H

**Session 6**  
**Topic:** Put It Aside  
**Directive:** Externalizing Art Piece

**Directive:** Group members will be asked to create a piece of art that represents a target behavior, a problem they struggle with, a challenge keeping them from moving forward, a goal or something that they want to change. The idea is that the artist creates an image that pushes it out, externalizes it, projects it, separates it from themselves.

**Expectations of Group Members:**
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Self-awareness, creativity
- Expression, Self-Introspection, reflection – creating distance with the problem
- Practice problem solving, practice sitting with something uncomfortable and expressing it in a healthy way
- Abstract thinking
- Practice communication
- Practice distress tolerance – taking breaks as needed

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**Comments:**
Appendix H

Session 7
Topic: The Journey
Directive: Draw a Road

Directive: Group members will be guided through a relaxation and calming sequence. During the relaxation, they will be asked to image themselves on a road or path. They will be asked to consider their surroundings, considering the weather, time of day and direction of the road. Following the relaxation, they will be asked to create their road.

Expectations of Group Members:
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

Objectives:
- Self-awareness, creativity
- Expression, Self-Introspection
- Practice problem solving
- Abstract thinking
- Practice communication
- Practice distress tolerance – taking breaks as needed

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Comments:
### Session 8
**Topic:** Practice the Art of Expression
**Directive:** Express vs. Depress

**Directive:** Group members will engage in a discussion of the definition of expression vs. depression. Expression being the act of pressing out, or away. Depression being the act of pressing down. The group will be asked to consider this difference and practice the art of expression. They will be asked to create an art piece that presses out something you have with you today.

**Expectations of Group Members:**
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Self-awareness, creativity
- Expression, Self-Introspection
- Practice problem solving
- Abstract thinking
- Practice communication
- Practice distress tolerance – taking breaks as needed

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**Comments:**
### Session 9

**Topic:** Tune into the Senses  
**Directive:** Sensory Painting

**Directive:** The group will be lead through a relaxation exercise. The group will then be asked to focus on their senses for the next series of art experiences. They will be asked to allow their senses to guide their art making. Over the course of the group the members will finger paint with eyes closed, on different types of paper or materials and play with clay. They will be offered different sounds and aromas as they create. The idea is to let their senses guide their hands instead of their brain.

#### Expectations of Group Members:
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

#### Objectives:
- Self-awareness, self-introspection
- Expression, creativity
- Practice problem solving, Abstract thinking
- Practice communication
- Practice distress tolerance – taking breaks as needed
- Reflection on the freedom in creativity

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**Comments:**
## Session 10
**Topic:** Closing Group
**Directive:** Open

**Directive:** Group members will be encouraged to create/finish one last piece during group. This will be open studio format. Art making will be shorter due to longer time to say goodbye and reflect on the art pieces created. Art work will be hanging around room, to create an art show environment.

**Expectations of Group Members:**
- Full participation and engagement
- Request breaks as needed – fill out break sheet
- Respect for other group members
- Leave the art room as clean as you found it
- Clean materials thoroughly
- Ask the artist if they are open to comments prior to commenting on a peer’s artwork

**Objectives:**
- Self-awareness, creativity
- Expression, Self-Introspection
- Practice problem solving
- Abstract thinking
- Practice communication
- Practice distress tolerance – taking breaks as needed

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<td>15 Minutes</td>
<td>Check In - a color that describes the feeling they bring to the group</td>
</tr>
<tr>
<td>35 Minutes</td>
<td>Art Making + Clean Up</td>
</tr>
<tr>
<td>40 Minutes</td>
<td>Verbal Process of Art Experience and Art Product Check Out</td>
</tr>
</tbody>
</table>

**Comments:**