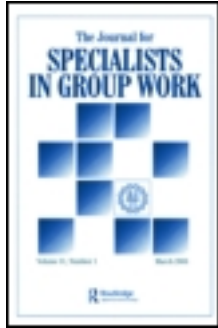


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## Helping Students Cope With Loss: Incorporating Art Into Group Counseling

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*Art has been considered to be a valuable therapeutic tool with children and adolescents who are experiencing grief. This article explores the use of art within the context of group bereavement counseling. The literatures concerning the effectiveness of grief groups and the use of art therapy with children are reviewed, and a case study of a school-based art group for bereaved youth is presented.*

**Keywords:** *counseling; group therapy; grief; bereavement; art therapy; school interventions*

Children and adolescents are not immune to loss. According to a recent survey of elementary school administrators in Britain, 71% reported having bereaved children in their schools (Holland, 1993). Findings from a study of youth in the southern United States reveal that by the time children reach the middle school years, 95% of students report at least one experience with loss (Glass, 1991). In the literature, three types of loss have been identified: apparent losses that follow from a major event such as death, losses associated with change such as divorce, and unnoticed losses such as marriage and remarriage (Johnson, 1998). Each of these forms of loss evokes a number of grief reactions that vary in scope and intensity. For example, principals in the Holland (1993) study reported that grieving children in their schools demonstrated a number of behaviors such as crying, withdrawal, concentration problems, aggression, and violence. In addition, preoccupation with loss, disruptions in sleep and eating patterns, and somatic complaints such as headaches are commonly reported among grieving children (Cook & Dworkin, 1992; Klicker, 2000).

Although loss is often discussed within the context of a specific event such as death or divorce, grief is best conceptualized as a process. A number of models have been developed to describe the grieving process. For example, Kubler-Ross (1969) discussed the grief process as a series of

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stages through which one passes, beginning first with feelings of denial and anger and moving through sadness and depression toward eventual acceptance. More recent models present the mourning process as a series of tasks to be accomplished. For example, in Worden's (1991, 1996) model, the first task involves learning to accept the loss. The second task is experiencing the pain of grief and the emotional reactions that such an acknowledgement can bring. The third task in this model requires adjusting to a new environment before moving to the final task of withdrawing energy from previous relationships and forming new relationships with others. Similarly, Baker, Sedney, and Gross (1992) have outlined a series of psychological tasks for children to accomplish as they move through the grief process. In their model, early tasks involve coming to an understanding that a loss has occurred and establishing feelings of basic safety and security. In the middle phase, children come to an acceptance of the reality and permanence of the loss. The last phase includes establishing a new sense of identity in relation to the loss, investing in new relationships, and returning to age-appropriate developmental tasks.

Models of the grief process serve as a useful framework for organizing therapeutic interventions. Interventions can focus on the individual, families, or peer groups as well as a combination of them. Compared to individual and family-based approaches, groups for children and adolescents have the advantage of drawing on important peer supports and normalizing feelings of grief (Baulkwill & Wood, 1995; Cook & Dworkin, 1992; Zambelli & DeRosa, 1992). In particular, school-based groups can help students adjust to separation and loss (Klicker, 2000). Therapists working in educational settings are especially well suited to developing group interventions that address issues of loss and grief. First, they have the requisite theoretical training in child and adolescent development and practical training in group therapy. Second, from an accessibility standpoint, they are in direct contact with large numbers of students, some of whom may be coping with loss and grief issues. Thus, school-based practitioners have the opportunity to design and implement bereavement groups with students.

Although the benefits of group interventions for bereaved children have long been acknowledged in the literature (e.g., Baulkwill & Wood, 1995; Cook & Dworkin, 1992; Zambelli & DeRosa, 1992), only in recent years have such groups been empirically researched. For example, Tonkins and Lambert (1996) were among the first to document the positive effects of a grief group for young children who had experienced the death of a family member. In this study, 16 children between the ages of 7 and 11 took part in an 8-week group led by a trained therapist. Compared to a wait-list control group, the grief program resulted in sig-

nificant decreases in emotional symptoms and behavioral problems as measured on various rating scales completed by parents, teachers, and children. Huss and Ritchie (1999) examined the outcome of a grief therapy group. In this study, children who had experienced the death of a parent participated in a 6-week school-based intervention. No significant changes in ratings of self-esteem, depression, problem behaviors, or perceived coping ability were reported. However, in anecdotal reports of the groups, members felt that the intervention was helpful in reducing feelings of isolation and normalizing the loss experience. These variables may be important ones to assess in future studies.

Group interventions such as those discussed by Tonkins and Lambert (1993) and Huss and Ritchie (1999) draw on a variety of methods to process grief. In addition to group discussions to probe emotional reactions, bibliotherapy can be used to help children explore themes related to separation, death, and loss (Cook & Dworkin, 1992; Tonkins & Lambert, 1996; Zambelli & DeRosa, 1992). Play-based rituals and activities such as games and storytelling are used therapeutically to help children express their emotions and reduce the social isolation associated with grief (Cook & Dworkin, 1992; Tait & Depta, 1993; Tonkins & Lambert, 1996; Zambelli & DeRosa, 1992). Nonverbal means can also be used to process loss, and art is one of the most commonly cited techniques used in grief work (e.g., Cook & Dworkin, 1992; Huss & Ritchie, 1999; Tait & Depta, 1993; Tonkins & Lambert, 1996; Zambelli & DeRosa, 1992).

This article discusses the efficacy of art as a therapeutic tool for children and adolescents coping with separation and loss. The underlying theoretical rationale for using art in groups is provided, followed by a review of the research concerning the efficacy of art therapy. The use of art in group grief work is then explored, and a case example of a school-based art group for children experiencing loss is presented.

In many ways, art is an ideal therapeutic medium through which to address loss issues with children (Coleman & Farris-Dufrene, 1996; Davis, 1995; Johnson, 1998). Symbolic acts and rituals are important components of grief work that help clients express beliefs and feelings associated with loss (Cook & Dworkin, 1992). According to Davis (1995), there are four main objectives of art therapy: awareness, expression of energy and emotion, working through a problem, and creativity and joy. These objectives parallel tasks outlined in current grief models that are based on the premise that grief can be resolved by helping the client develop an awareness of loss, express feelings of grief, and learn new ways of coping (Baker et al., 1992; Kubler-Ross, 1969; Worden, 1991).

There are a number of ways in which art serves as a valuable tool for accomplishing the goals of grief work. First, art therapy can help clients discover aspects of themselves not easily accessed through verbal

means (Dalley, 1990). This is particularly important for younger children because their ability to verbally express their emotions may be constrained by their level of cognitive and language development. Second, art can help clients recognize the range and depth of the emotions evoked by loss. For example, feelings of intense anger, sadness, and hopelessness are common grief reactions, and the need to process these emotions does not obviate the difficulty clients may have in trying to express them. Art provides a nonthreatening and often poignant means of exploring an affective response because a variety of emotions can be expressed through this medium (Dalley, 1990; Zambelli & DeRosa, 1992). Finally, art can also facilitate communication between individuals, such as between therapist and client as well as among group members (Dalley, 1990; Rubin, 1988). By focusing on a particular activity or drawing attention to a piece of art produced within a therapeutic context, it may be easier to recognize and articulate one's thoughts and feelings, thus allowing for a more open dialogue between group members.

Art has long been acknowledged as a useful treatment modality with children and adolescents (Coleman & Farris-Dufrene, 1996; Johnson, 1998). There are both qualitative and quantitative data to support the effectiveness of art therapy in addressing childhood trauma and loss. For example, numerous case studies document the positive effect of art therapy in the treatment of child behavior problems such as aggression and substance abuse as well as family dysfunction such as parental alcoholism and child sexual abuse (Kahn, 1999; Riley, 1987; Stanley & Miller, 1993). Outcome-based research has also documented the effectiveness of art therapy in reducing symptoms resulting from trauma and crisis. In one study, children and adolescents who were hospitalized for traumatic injuries and diagnosed with posttraumatic stress disorder showed a significant decrease in acute stress symptoms following the use of art therapy (Chapman, Morabito, Ladakakos, Schreier, & Knudson, 2001). In another study, art therapy was shown to be successfully used with 25 young children displaying emotional and behavioral problems following an earthquake (Roje, 1995). Roje reported that the use of drawings helped children express their fears and regain feelings of trust and security.

In an effort to empirically document the effectiveness of art therapy, Saunders and Saunders (2000) collected data on 94 children and adolescents receiving art therapy through a human service agency. Clients ranged in age from 2 to 16 years and presented with a variety of problems such as aggression, family violence, divorce, low self-esteem, and poor school performance. A number of pretest and posttest measures were used, including severity and frequency of problem behaviors as reported by the client and/or caregiver, engagement in the therapeutic

process as rated by the therapist, and goal attainment as rated by the therapist. Results revealed significant positive changes in the therapeutic relationship and significant decreases in the severity and frequency of reported problem behaviors. In 93% of cases, treatment goals were either partially or completely met.

There is also evidence to support the effectiveness of art therapy groups. In a comparative study, Rosal (1993) investigated the effect of group art therapy in changing locus of control scores and adaptive behavior ratings for 36 children with moderate to severe behavior problems. Children were assigned to one of three groups: a control group; a traditional art therapy group where topics such as self-awareness and problem solving were addressed through painting, drawing, and clay; or a cognitive-behavioral art therapy group where art activities were supplemented with such techniques as progressive muscle relaxation and imagery. Outcome measures such as behavior ratings and interview data revealed no differences between the two art therapy groups. However, there was a significant decrease in negative behaviors reported for children in both treatment conditions versus those in a control group. Thus, this study offers evidence that art therapy can be effectively used for group interventions with children.

### **ART WITHIN THE CONTEXT OF GRIEF WORK**

Art is often successfully incorporated into grief work with children and adolescents facing loss, and the use of art within group counseling can be a potent healing tool for children and adolescents (Davis, 1995; Kahn, 1999; Rubin, 1988; Tait & Depta, 1993; Zambelli & DeRosa, 1992). Integrating art techniques into a more traditional counseling program may pose a particular challenge for practitioners who feel they lack training in this area. However, Rubin (1988) and Kahn (1999) provided a number of assurances to therapists who may be uncomfortable using art within a therapeutic context. First, specific training in the use of art is unnecessary. Counselors can experiment with art materials ahead of time to become comfortable with the selected medium. Second, the use of art enhances all forms of communication between student and counselor, a critical component in any therapeutic intervention. The quality of the work produced is not as important as the reactions and dialogue about the process that may ensue. Finally, art is an experience of creativity and mastery that, in and of itself, has merit and value. Art represents a way for children to exert control in their lives and cope with the challenges of daily living. Children who wish to pound on clay in anger or draw tears of sadness are learning to come to terms with these feelings.

The type of art materials and activities therapists select for use with clients are limitless. Activities such as drawing require little advance preparation or specialized materials. However, Rubin (1988) advised practitioners to consider developmental issues when planning activities. Materials such as pastels, markers, clay, and watercolor paints are often of universal appeal to children and adolescents alike, whereas younger children respond positively to crayons and finger painting (Rubin, 1988). Wood working, papier-mâché, or activities that require a great deal of fine-motor dexterity are considered more suitable for older children and adolescents (Rubin, 1988), although it is important to consider the individual needs of all students. For example, adolescents with disabilities that limit their mobility or inhibit their emotional reactions may select media more often preferred by younger children such as finger painting (Kahn, 1999). Therapists electing to use art in their clinical work should have a variety of creative materials to present to group participants.

## A CASE EXAMPLE

### Structure

The following case study illustrates ways in which art can be incorporated into group work with children coping with loss. The group was made up of five students (four boys, one girl) attending an alternative middle school for children with behavior problems. Participants were between 11 and 13 years of age. Three of the students were Caucasian and two were African American. Participants were nominated for the group by the school guidance counselor, and all had experienced loss within the past few years. Three of the students were coping with the separation or divorce of parents, one student had experienced the accidental death of an extended family member, and one student was coping with placement in foster care and separation from her parents and siblings. All participants were demonstrating a variety of behavior problems at school such as social withdrawal, aggression, and defiance toward school staff.

Prior to the start of the intervention, the purpose and the goals of the group were explained to parents and students, and permission from all parties was obtained. The group was facilitated by two therapists whose background and training were in school psychology and art therapy, respectively. The group met during the school day for approximately 1 hour each week for 9 weeks. During each session, an art activity was used to help achieve the objective of the session. A variety of art tech-



niques were used, including drawings, painting, drama, music, and collages.

### **Content**

During the first session, participants and facilitators became acquainted and established the rules of the group. In an effort to begin the process of acknowledging the effect of their loss, an important step in grief work (Baker et al., 1992; Worden, 1996), participants were encouraged to share why they were asked to join the group. The art activity used to help initiate this process was a self-portrait. Students were asked to draw a picture of themselves and share it with the group. Several students drew pictures of themselves interacting with people figuring prominently in their loss experience, such as parents and siblings. Participants were asked to present their artwork to the group and say a few words about themselves.

The objective for Session 2 was to begin exploring feelings associated with loss. Students were provided with a Feeling Faces Chart (Smead, 1990), which included pictures of faces and labels for different emotions. In an effort to help participants identify feelings commonly associated with grief and loss (Kubler-Ross, 1969), they were assigned a particular emotion (e.g., anger, surprise, sadness, fear) and asked to act it out. Students were also asked to illustrate these emotions on paper using crayons, pastels, and colored pencils.

Session 3 began with a review of the emotions discussed during the previous week. Students were provided the opportunity to complete their drawings from the previous session and share their work with the group. This activity was designed to reduce the sense of isolation that often results from grief and normalize the feelings of anger, sadness, and fear that accompany loss (Kubler-Ross, 1969). A discussion was then initiated that focused on how people can be remembered by others through memories, pictures, art, and music.

Session 4 was a continuation from the previous week's discussion about remembering people who have died or moved away. Because all of the students had a loved one who was missing from their life, either through separation, divorce, or death, they were given the opportunity to think about the legacies people leave behind. To facilitate this goal, participants were given a drawing of a tombstone and asked to design an epitaph for the person or situation they had lost.

The fifth session focused on ways of coping with emotions and memories evoked by grief. Students listened to a song by a popular artist and a group discussion then ensued about the lyrics, which focused on learning from mistakes in life and choosing constructive ways of coping with



difficulty. Students were provided with square pieces of poster board and asked to design a CD cover reflecting the theme of coping with loss. Most of the participants produced monochromatic covers, often using tones of black and gray.

Session 6 was designed to help participants become knowledgeable about the grief process. Students presented their CD covers to the group and shared what their artwork represented about them. Therapists introduced the loss cycle and stages of grief as outlined by Kubler-Ross (1969). Students generated feelings associated with each phase of Kubler-Ross's model and the ways in which they coped with these emotions. To facilitate this task, large sheets of paper were posted around the room. On each sheet was a heading representing the phases outlined in the Kubler-Ross model (denial, bargaining, anger, depression, and acceptance). Participants were given a marker and asked to go around the room and write down their thoughts and feelings, as well as ways of coping with each phase.

The seventh session included a review of the stages of grief. Participants shared where they viewed themselves in the grief cycle and were asked to draw three pictures representing these emotions. A variety of drawing materials was available to students such as watercolors, crayons, markers, and pastels. Students listened to classical music during this activity, and therapists initiated a discussion around family issues while they worked. Sadness and anger were predominant themes reflected in their discussions and artwork.

Session 8 focused on the promotion of appropriate reactions to feelings of grief by connecting and communicating with others as a means of coping with grief. Therapists began the session with a discussion contrasting constructive ways of handling grief (e.g., talking to others, listening to music, and drawing) with more destructive coping methods (e.g., physical and verbal aggression toward others, substance abuse, and truancy). The art activity was a group painting on brown paper that covered the surface of a large table. Students were given the option of using paints and markers, and they began drawing while seated in their chairs. Every few minutes one of the therapists announced that it was time to switch seats, and students slowly rotated around the room in a clockwise fashion and continued working on the group painting. This activity was intended to foster the idea of group cooperation and collaboration while encouraging them to see their initial artwork from a different perspective. Students were free to continue the artwork started by a peer or to begin a new drawing.

The group ended with a final session of reflection and an emphasis on new beginnings. Emotions and ways of coping with feelings were reviewed. Students were provided with small boxes made out of paper

and were asked to decorate their boxes. In addition to crayons, colored pencils, and markers, a variety of decorative materials was provided such as feathers, glitter, stickers, fabric, and pipe cleaners, which they were encouraged to use. Participants were asked to write down one or two central ideas they were going to take with them from the group and put these messages into their box. Students were invited to share these thoughts with other group members.

### **Evaluation**

Comments made during the sessions as well as the end of the last session indicate that participants perceived the group to be beneficial to them. Four of the five students contributed regularly to the group discussions, although one member had to be invited and prompted to share feelings and comply with task instructions. Over the course of the sessions, participants became more comfortable expressing their feelings of sadness and anger related to their grief experiences. Following completion of the art activity during the last session, participants were asked to complete a written evaluation of the group by indicating how well they felt they had met the following five goals:

1. To better understand the different emotions I feel.
2. To realize we can learn from difficulties I face in life.
3. To understand the stages of grief and loss.
4. To understand the emotions I feel when I go through a loss.
5. To learn the difference between negative and positive ways of coping with loss.

Students were asked to rate each statement on a 4-point scale where higher scores indicated greater achievement of the objective. Participants rated each item with a 3 or a 4, indicating strong endorsement of the program's objectives. When asked what they liked most about the group, students cited "socializing," "talking and getting along," and "being able to express my feelings openly and even having people to talk to."

### **CONCLUSION**

Survey data indicate that loss and bereavement are common issues faced by children and youth today (Glass, 1991; Holland, 1993). Group interventions, such as the one discussed in the preceding section, are useful vehicles by which children and adolescents can process feelings of grief and loss. The purpose of this article was to review the literature on

the use of art therapy in grief work with children. Although there is little empirical research on the effectiveness of group art therapy focusing specifically on loss, there is evidence to support the use of grief groups as well as the positive effect of art therapy in the treatment of children and youth. Such studies are encouraging signs about the utility of group art therapy for bereaved children. The case example discussed in this article also provides support for this argument. By incorporating art techniques into group counseling programs, therapists have an added tool in their repertoire to help clients adjust to separation and loss and learn new coping skills.

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