

The background is an abstract watercolor painting. It features a mix of warm colors like orange, yellow, and red, and cool colors like green, blue, and teal. The colors are blended together in a soft, painterly style, creating a textured and vibrant effect. The overall composition is balanced, with the colors flowing across the page.

# **The Butterfly Art Project Method**

HOW CAN THE BAP METHOD BE WORKABLE FOR A TRAUMATIZED CHILD IN THE AGE OF TEN TO FOURTEEN, GROWING UP IN THE CONTEXT OF A SOUTH AFRICAN TOWNSHIP AND IS THE METHOD ALSO APPLICABLE IN A DIFFERENT CONTEXT?



## Colophon

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## FOREWORD

In front of you lies an overview of the research that was done during my internship in Cape Town, South Africa. During the months September 2013 till July 2014 I worked in the Butterfly Art Project, within the art therapy department. I gave art therapy to children from the Capricorn primary school in the township Vrygrond. It is hard to describe the experiences that I gained. After this incredible year, I can with conviction state that this adventure gave me a lifetime experience – the people around me, the warm atmosphere of the team and the children helped me to grow both as a person and a therapist. My special thanks goes to the children, who were my source of passion and dedication.

To understand the South African way of living, you have to be able to be part of it and let the people of South Africa carry you along in this colorful, enthusiastic, warm, but sometimes also contradictory lifestyle. To see how much impact culture, historic and religion have here and how people can find strength in the small and simple things in life. It surprised me every day how much joy there is in a rough environment like Vrygrond, where children do not find the support that is needed from their surroundings. I could experience, through the different stories within therapy, were children had to deal with – struggles you should not think about as a child; like crime, aggression, divorce, violence and abuse. It was special to see how they tried to cope with this traumatic events in Vrygrond, how they were able to create a safe and warm environment for themselves.

I tried to create this environment during art therapy. I experienced next to the difficult stories also a lot of surprising and happy stories and had often joyful moments with the children. These children had the ability to share hope and happiness and surprised me every day again. Seeing changes and development in their situation and behavior and gaining the feeling that I could make a change and difference gave me every day new motivation and energy. This research is hereby dedicated to the different art therapist and children who have the challenging task to cope with trauma healing in an environment as Vrygrond. My special admiration goes to them.



## SUMMARY

This bachelor thesis gives an overview of the research on the Butterfly Art Project Method, also described in this report as the BAP method, an art therapeutic method that is used in a South African township. Through previous research, discussion and a critical view on the different angles within the method, the conclusion is drawn that the method is not always feasible and appropriate for both client and therapist. This research focusses on the development of the method's substance, working with children in the age of ten to fourteen years old who live and grow up in the context of a South African township. To develop the method the focus is laid on the first four sessions, where stabilization is most important. Through observation is investigated which interventions are suitable and can provide goals which eventually contribute to an art therapeutic healing process. Results showed that the provided interventions, like structured artistic activities, grounded materials and a supportive and insight giving attitude of the therapist, were a positive condition for the therapy process. An artistic questionnaire helped to gain personal information of the inner and outer world of the child and to strengthen the therapeutic relationship. This eventually contributed to the following sessions. Through this knowledge of the different interventions within the first four sessions, a clear substance and structure of the method was created, which makes the method understandable and workable. Finally, within the last part of this report a study concludes that the BAP method, according to the therapeutic circumstances, might also be applicable in a Western European context.

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Dit afstudeeronderzoek geeft een overzicht van het onderzoek naar de Butterfly Art Project Methode, ook wel omschreven in dit rapport als de BAP methode, een creatief therapeutische methode die gebruikt wordt in een Zuid Afrikaanse Township. Door vorig onderzoek, discussie en een kritische kijk op de verschillende kanten van de methode, de conclusie is gemaakt dat de methode niet altijd begrijpelijk en passend is voor zowel cliënt als therapeut. Binnen dit onderzoek is de focus gelegd op de ontwikkeling van de inhoud van de methode, wanneer er gewerkt wordt met kinderen in de leeftijd van tien tot veertien die leven en opgroeien in de context van een Zuid Afrikaanse Township. Om de methode te ontwikkelen is de focus gelegd op de eerste vier sessies, waar stabilisatie centraal staat. Door observatie is onderzocht welke interventies passend zijn en voor doelen kunnen zorgen die er uiteindelijk toe bijdragen dat een creatief therapeutisch traumaverwerkingsproces kan worden bewerkstelligd. Resultaten gaven weer dat aangeboden interventies, zoals gestructureerde beeldende werkvormen, gegronde materialen en een steunende en inzicht gevende houding van de therapeut, een positieve conditie waren voor het therapeutisch proces. Een beeldende vragenlijst hielp om persoonlijke informatie over de binnen en buitenwereld van het kind te krijgen en om de therapeutische relatie te versterken. Dit droeg uiteindelijk bij aan de daaropvolgende sessies. Door deze kennis van de verschillende interventies in de eerste vier sessies, is een overzichtelijke inhoud en structuur van de methode ontwikkeld, wat de methode begrijpelijk en werkbaar maakt. Tot slot is in het laatste gedeelte van dit rapport onderzocht en geconcludeerd dat de BAP methode ook, wanneer er gekeken wordt naar de therapeutische omstandigheden, toepasbaar is in een West Europese context.

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# CHAPTER 1 INTRODUCTION

## 1.1 Context

### The Butterfly Art Project

The Butterfly Art Project (BAP) is an art therapeutic institution, focused on working with traumatized children in Vrygrond, a township of Cape Town, South Africa. BAP was founded in 2011 by Angela Katschke, an experienced art therapist from Germany. BAP is the first art therapeutic institution in South Africa and is situated on the premises of the largest primary school in Vrygrond; Capricorn Primary School.

*BAP is a non-profit organization that was created with the following objectives: providing therapeutic, educational and other support for children in disadvantaged communities (such as Vrygrond), by using art, art therapy, after-school care and other related activities and projects (BAP Annual Report 2012).*

Within the organization (art)therapists are working with students of the Primary School, in the age of five to fourteen years old. A large part of these children is traumatized in varying degrees, because of the unsafe environment they have to grow up in. This means that the children have experienced a single traumatic event or are (still) experiencing a recurring/daily traumatization. Examples of common traumatic events in Vrygrond are sexual abuse, traffic accidents, loss of a loved ones, illness (according to Where Rainbows Meet approximately 75 percent of the inhabitants of Vrygrond suffers of HIV/AIDS), or repetitive traumatic experiences, such as neglect, repeating physical/psychological abuse and domestic violence (Where Rainbows Meet, 2014).

### Vrygrond

Vrygrond is a multi-cultural community and the oldest informal Settlement (1900) in Western Cape and is also named as a township. According to the Oxford Dictionary (2013), a township '(in South Africa) is a suburb or city of predominantly black occupation, formerly officially designated for black occupation by apartheid legislation:’ Most of the population in Vrygrond and surroundings have been victims of crime. Not only are the streets unsafe – at home, children, youths and adults are also confronted with violence and are in contact with alcohol and/or drug abuse (Where Rainbows Meet Annual report, 2013).

## 1.2 Problem-/situation analysis and literature review

In the context of the butterfly art project, art therapists and art therapy students are working within art therapy with traumatized children in the age of four to fourteen years old. During therapy a specific method has been used, the butterfly art project method, also described as the BAP method.

### The BAP method

The BAP method is a method that Angela Katschke, has developed in 2011, based on her experiences in working with traumatized children in Vrygrond. In the BAP method, the metaphor of the transformation from caterpillar to butterfly is used as a symbolic guide of the therapeutic process, this is based on the children's book "The Very Hungry Caterpillar" by Eric Carle (1994), in which this process is described. The small caterpillar, who first sits securely in its egg, finds its way

out and gets to know the world, then withdraws into a cocoon to eventually transform in a butterfly. For the children in Vrygrond it is important to follow these same steps, as well during the therapy as outside therapy, to eventually fly out like a beautiful butterfly (See chapter 1: BAP method). A human should be given the chance to explore and develop himself as optimal as possible into an individual person. When a child does not get the safeness and security to be a caterpillar in its egg, a safe home and love of people around him, the child will never get the chance to feel strong enough to explore the world, to find his own way and to fly out like the person he has become (A. Katschke, personal communication, January 20, 2014).

### Problem situation

During the past years several art therapists and art therapy students noticed that the current BAP method had not been developed enough to be suitable in the setting of Vrygrond. The method was not always feasible and appropriate for the corresponding client. Through discussion, research and a critical view on the different angles within the method, the conclusion was drawn that further research was a good addition. This research consists of the substance of the method and thereby making the method practice based. But it is also a requirement for working with the BAP method. It is important to develop the method in a way that it is more useful in the future within the organization. In addition it is also valuable to adjust the exiting parts of the method, so it is more understandable and workable for both client and therapist during therapy.

### Literature review

To obtain the most complete snapshot of the state of the literature, the choice was made to give an overview of the most important and significant literature that is used during the research on the BAP method. Keywords selected within this study were “art and therapy,” “children,” “middle childhood,” “trauma,” “PTSD,” “anthroposophy” and “South African township. These search terms narrowed the list of articles and books to those of interest.

Malchiodi gives in her book “Creative interventions with traumatized children”, knowledge about childhood trauma in the art therapeutic field. (Malchiodi) “Expressing the trauma story with words is not always possible for developmental reasons, for severely traumatized clients, words may not be accessible when it comes to describing trauma memories”(2008, p. 15). She focuses hereby on the importance and strength of art therapy. To study the structure of the BAP method, information is gained by use of the research instruments. Working with the questionnaire asks for an insight-giving attitude. Also Schweizer mentions that a focal/insight-giving attitude is suitable to gain insight and healing (Schweizer, 2009). By offering the questionnaire both therapist and child can be able to gain insight in the situation around the child. The 3 – phase – model, as it is written by Herman (1992) and Van der Hart and Nijenhuis (2003, 2007), gives a reasonable order and structure for the treatment of trauma. The structure of the BAP method can be assigned to this model (Mooren & Stöfse, 2010). Focus within this research is laid on children in the age of ten to fourteen and their developmental phase. According to Beidas and Kendall, traumas that start early in life have more potential to cause negative effect on the development of the child, than chronic traumas that start during the adolescence (Beidas & Kendall, 2014). The Rubicon crisis suggests that the child is going through a major crisis in the age of nine years old (Dancy, 2012). In addition, an important fact that will be researched is the surrounding of a South African context within trauma healing. Stavrou states in the article “Psychological Effects of Criminal and Political Violence on Children”, that women and children are the most common victims of sexual crime (Stavrou, 2013).



## 1.3 Goals

### Substance of the research

For art therapists/-students who would like to work with the BAP method it is useful to develop a guideline. During therapy it is noticed that the method is too open and thereby not workable enough. The method has been used during the past years within the organization and a start has been made to make it practice based. Noticed while working with the method, there are ambiguities and a demand for information about the approach and structure of the BAP method during therapy. For instance, what goals can be achieved after each session? This guideline provides a framework for the therapist to work together with the client through the first four sessions. For both therapist and client it is, especially at the beginning of the therapy, soothing and insightful to have a clear structure. The strength of the BAP method is the metaphor of the various phases of the transformation into a butterfly. This metaphor gives both therapist and client a direction within the therapy, to identify in which stage they are working.

### Aim of the research

This is a continuation on the research of Maike Berentzen and Viola Werner (The Butterfly Effect, 2014). These two art therapy students studied the effect that the BAP method has on the behavior and emotional, physical and cognitive condition of traumatized children who grow up in the context of a South African township. This first research was focused on the overall characteristics of the method and the results of the behavior of the children. The following but renewed research that will be displayed in this report, distinguishes itself by focusing on the substance parts of the BAP method within a part of the target group of the Butterfly Art Project, children aged ten to fourteen. It is thereby more specific and aims to develop a framework which makes the BAP method understanding and workable for both therapist and client.

### Type of research

The research is a sub-research that is linked to a main-research on the BAP method. The main research is a study on the BAP method with the research question: How can the BAP Method be workable for a traumatized child in the age of four to fourteen, growing up in the context of a South African township and is the method also applicable in a different context? Because of this large extend in ages, it is decided to divide the method in two separate studies;

- *A research on how the method can be workable for a traumatized child aged four to nine*
- *A research on how the method can be workable for a traumatized child aged ten to fourteen*

By dividing the ages the aim of the research will be the same, but the substance of the research will make a distinct to a great extent. Therefore a traumatized child in the age of four to nine needs another approach then a child in the age of ten to fourteen. The substance of the method needs to be adjusted, with the focus on interventions, activities, the attitude of the therapist and the use of suitable research instruments.

The research is a practice based research. This means that the research is based on a question/problem-situation within the field and the context of a South African township. The central question of the research is based on a problem-situation during therapy. By questioning the BAP method therapists/students came to the conclusion that this method can be improved so that it becomes suitable to apply within therapy and thereby can be developed in a practice based way.

### Importance of the research for the organization and field of study

For the existence of the Butterfly Art Project it is important to do research on the current BAP method and to improve this method. The BAP is funded by external sponsors and donors. Convincing sponsors/donors is important for fund raising and essential for the potential existence and growth of the Butterfly Art Project, so that in future more children can be given the opportunity to develop themselves. In addition this research is of importance for the art therapeutic field. By developing a guideline based on the BAP method, this method will be more practice-based and accessible. This gives art therapists (and students) the chance to start using the BAP method. The therapy based on this method has a duration of eight weeks, which is easily applicable in settings with limited budgets. The metaphor of the various stages from egg to butterfly is also an anchor for both therapist and client.

## 1.4 Central question and sub-questions

### Central question

*"How can the BAP method be workable for a traumatized child in the age of ten to fourteen, growing up in the context of a South African township and is this method also applicable in a different context?"*

### Sub-questions

1. *What are the elements that form the BAP method now?*
2. *What is missing within the BAP method for creating an art therapeutic trauma healing process?*
3. *How can the BAP method be improved so that an art therapeutic trauma healing process can be created?*
4. *Is the BAP method also applicable in a Western European context?*

## 1.5 Preview of the parts of the report ('reading guide')

*Chapter 2:* Consist of subjects around the research method. An explanation of the substance and choice of qualitative research will be given. Research subjects as childhood trauma and the research population are described. The research instruments - the questionnaire and the observation form – will be appointed. Therefore the procedure of collecting data with these instruments and the method of analyzing the results will be given in the last two chapters.

*Chapter 3:* This chapter contains the four sub questions. Clear and structured answers on the questions will be given, results will be shown within each separate question.

*Chapter 4:* Contains the conclusion, discussion and recommendations of the research. Within the conclusion an answer will be given on the central/research question, with the use of the results as described in the sub questions. The discussion will focus on not appointed questions and points of criticism. In addition recommendations for further research will be given as closure of this report.

## CHAPTER 2 METHOD

### 2.1 Research profile

This research has a qualitative approach. Qualitative research is not about collecting numbers on a specific topic. The research has an open approach, in which the perception of the research population is of interest (Verhoeven, 2011). Important qualitative facts within this research are:

#### Flexible approach

Working with children with a traumatic background asks for a continuous awareness for the unexpected. Symptoms children show after experiencing a repetitive traumatic event are linked with the defense mechanisms of the child. Children that are in a traumatized state of hyper arousal, fear and anger are unable to effectively recognize and process environmental signals, and are not able to properly guide their behavior responses. Because of high physiological arousal, the child is strongly aware of changes in the atmosphere, combined with negative and strong emotions as anger and fear. The perception the child has of his outer world can be distorted (Brom, Pat-Horenczyk & Vogel, 2014). The child can get easily overwhelmed by his emotions and is highly sensible of the atmosphere in a room. The researcher therefore must have the ability to react and interfere quickly and in a suitable way at this kind of situations.

#### Perception of the research population

As mentioned above, the perception the child has of his outer world can be distorted and we can thereby state that this is not always realistic. However it is most important to focus during the research on the meaning that the child gives to his outer world. Qualitative research is in this context focused on the subjectivity and perception that the research population, the child, gives to a situation (Verhoeven, 2011). During therapy, when the emotional state and subjective perception of the child is most important, this is highly suitable. In this surrounding, therapist/researcher and child are in a personal situation, where the child is allowed to share and will be encouraged to open up. A dedicated and transparent attitude is a condition to create safety and will comfort the child (Schweizer, 2009).

#### Holistic research

Within the research the central focus lays on the perception of the child. Nevertheless, the environment of the child will be investigated as well. This means that not only the situation is of interest but that the researcher also questions the situations around the child. Background information about the situation at home and knowledge of child's behavior in class is of importance for a contribution to an art therapeutic process and developing the BAP method.

#### Research within the field

One of the main advantages of qualitative research is that the research will take place within the 'Field'. This means in this context that the research found place within the organization, during art therapy. This can be mentioned as a strength, because of the different features that belong to practice based research. A practice based research asks for attention and interest in the target group, the researcher needs to understand the research population, therefore he is in direct contact with the population. The researcher needs to understand, in this context, the behavior of the child and become a faithful and meaningful person for him, to come to a reliable research. In addition, the instruments that are used during the research are focused on the inner and outer world of the child, the perception of the child is most important.

## 2.2 Research subjects/-population

### 2.2.1 Research subjects

The word 'trauma' can be defined as an experience that has a lasting, substantial psychological impact on a person. 'Healing' is the natural process by which the body repairs itself. The description of 'process' is a series of actions that produce a change or development. A trauma healing process, within art therapy – also named as an art therapeutic trauma healing process – can hereby be defined as the steps through the various stages of healing a trauma within therapy, by the use of art therapeutic interventions.

According to Briere and Scott (2014), there are two forms of trauma: acute or type 1 trauma (single event) and chronic or type 2 trauma (multiple or cumulative events). Type 1 trauma can be, according to the DSM-5 criteria, classified as an Acute Stress Disorder. Type 2 trauma can be classified as a Post-Traumatic Stress Disorder. Also Terr (1991) makes a distinction between these two types of trauma. Within a type 1 trauma, a child will be overwhelmed by a sudden event. The event is so sudden that the cope and defense mechanisms of the child can not react and understand what happened. By giving the child support from his surroundings, it is possible that the child can recover within a few months/half a year. When a child suffers from a type 2 trauma/Post Traumatic Stress Disorder, it has to cope with repetitive threatening, mistreating or abuse. The child learns in this case to use its cope and defense mechanisms and tries to protect itself from this painful and traumatic events (Eland, Jeanette, Roos & Kleber, 2000).

According to Cohen, Mannarino & Deblinger (2012), symptoms that children can show after experiencing a traumatic event can be classified in three different clusters:

Reliving: intrusive distressing thoughts or dreams about the traumatic event, physical or psychological suffering after contact with situations which remind of the trauma. With young children, this example is highlighted in the re-staging of a traumatic event through play.

Avoidance and emotional numbing: avoiding people, places or situations that remind of the traumatic event, emotional detachment or flattening, the feeling of having a limited future.

Increased irritability and mood: exaggerated startle response, hypervigilance, sleep disturbances, irritability or tantrums.

### Childhood trauma

A child's response to a traumatic event is depending on his age and developmental level. If their direct surrounding is coping well, most younger children do not develop serious or long-lasting trauma symptoms. On the other hand, traumas that start early in life have more potential to have a negative effect on the development of the child, than chronic traumas that start during the adolescence (Beidas & Kendall, 2014). Stavrou states the following about children in the middle phase of childhood:

Children in the middle phase of childhood have a better understanding of what it means to be threatened, both for themselves and for others, but are still not able to really make sense of the situation around them. They are able to look beyond themselves and their family, into the broader society, but they are not yet independent enough to be able to change the things around them in order to make the situation safer and lessen their fears (Stavrou, 2013, §4.1).



### The effects of trauma in a South African township

The effects of trauma in a South African township can be related to the effects of political violence - such as riots and battles between township residents and outsiders. However, a great deal of violence that children are exposed to, is the violence of "ordinary" crime - such as sexual abuse and assaults. The most common violent crimes are sexual crimes - rape, sexual assault, incest. Women and children are the most common victims of sexual crime. A lot of these "ordinary" criminal violence can also be caused by political factors. Alcohol abuse, poverty, unemployment and dangerous living conditions for example, all contribute to the incidence of crime, and all these factors can be linked to the apartheid policies of education, employment and accommodation (Stavrou, 2013).

### 2.2.2 Research Population

#### Developmental phase

The research group are children in the age of ten to fourteen years old. This age group which is observed during therapy is based on an anthroposophic view. Within the anthroposophy one mentions the Rubicon crisis, when it comes to the development of a child. This crisis, during the ninth year, is the result of an important change in consciousness that marks the end of early childhood and the transition to a new developmental phase (see chapter 3.2). Rudolf Steiner, the founder of Waldorf education, states, "In the ninth year the child really experiences a complete transformation of its being, which indicates an important transformation of its soul-life and its bodily-physical experiences"(Dancy, 2012, §4). After the ninth year a child is experiencing his own identity to become a separate individual, able to confront the outer world (Dancy, 2012). Also Feldman, mentions the importance of the individual: "During primary school, children try to get answers around the question "Who am I?". During the phase of adolescence, which is the phase between childhood and adulthood, when cognitive, emotional and physical changes appear, this question is even more important"(Feldman, 2009, p. 125).

#### Participants within the research

The participants were observed during therapy. Before the start of the therapy, background information was been given by the social worker of the primary school and the head of the department of art therapy. The clients were divided, depending on their problematic and development phase, in suitable group settings or individual settings. Within Appendix (A2) shows an overview of extended information about the research population. Twelve clients participated within the art therapy program and followed the BAP method. All of these children are students of the Capricorn Primary School in Vrygrond and live in this township. According to the reason of referral, background information, abnormal behavior during situations at home, in class and therapy, it can be stated that these clients are more or less traumatized through different traumatic events in their lives. The clients were observed during the first four sessions on their behavior and response on the activities which were offered by the therapist and their response on the questionnaire during the third session.

## 2.3 Research instruments

Within the research a questionnaire is used, this can also be named as an unstructured interview or a depth interview. Further research on the BAP method is obtained throughout an unstructured observation form within therapy. The research instruments were used by the researcher, in this context the researcher can also be named as therapist.

### **2.3.1 Artistic questionnaire**

During the research on questionnaires different existing, practice based questionnaires in the field of trauma healing are used. In a large part of these questionnaires screening was done on the three clusters in which the basic symptoms of PTSD can be classified; intrusion, avoidance and hyper arousal (Beer, Verlinden & Lindauer, 2013). Notable is that these questionnaires are focused on one particular event. When working with traumatized children in a South African township in a therapeutic setting, it is difficult to focus on a specific event. A large part of the children that are referred to art therapy suffers from an accumulation of traumatic events caused by their unpredictable surroundings. The existing questionnaire that was used during therapy and that was created for the method, is partly used as a source for the artistic questionnaire.

#### **Aim of the questionnaire**

The questionnaire has been constructed with the aim to contribute to the development of the method and to create a trauma healing process within the therapy process of the child. The questionnaire is used as a tool to understand the inner and outer world of the child. As mentioned before, the behavior of the child during therapy will be observed, in addition it is important to involve the outer world of the child as well. We can also state that this intimate and personal one-on-one situation between therapist and child can provide for a meaningful relationship of trust. This is a positive consideration for the process within the following sessions.

#### **Substance of the questionnaire**

The questionnaire is compiled in an artistic way and adjusted to the age group. The questions from practice based PTSD questionnaires are used as a base for developing questions. The child is asked to imagine his personal situation by drawing the inside of the house he is living in. The therapist guides the child in this process by asking him questions related to the drawing, for instance; “with who do you live and what happens at home?” In addition the therapist will make a link to the situation outdoors. The questionnaire is completed by making a link to the situation at school and the child’s physical feelings. Subjects from existed PTSD questionnaires are in this context understandable for the child because they are linked to a certain situation. For instance subjects such as nightmares and bed-wetting can be related to the situation at home.

### **2.3.2 Unstructured observation form**

#### **Aim of the observation form**

The observation form is used as an instrument to observe the response of the research population during the first four sessions on different interventions which has been offered. Focus is laid on the response of the client on the attitude of the therapist, given creative interventions and materials. The aim of this observation is to research how and if the following elements can contribute to make the method workable and can help to create a trauma healing process within the therapy.

#### **Substance of the observation form**

The observation form is mainly unstructured. Observation points are set, for instance the response of the client on specific materials, the attitude of the therapist and offered creative interventions. Therefore no questions and elements were literally formulated within an observation sheet. The form shows a global structure, the researcher is able to formulate his own observations on the paper, and has the space to perceive what is happening within a session (Verhoeven, 2011).

## 2.4 Procedure for data collection

### 2.4.1 Procedure of the questionnaire

In February 2014, a renewed questionnaire was created to use within the BAP method. Through further research it is found out that the current questionnaire that has been used within the BAP method was not appropriate. The questionnaire was too long for the focus of the children and the questions were often incomprehensible.

#### The pilot

The pilot was used to test the renewed questionnaire. The group of participants within the pilot was different from the group that participated in the final questionnaire. This is due to the period of therapy and the change of therapy groups between February and May 2014. Results of the pilot showed that children were able to link the questions to the situations in their daily live. The artistic elements in the questionnaire provided for comfort and safety for the child. A disadvantage from this pilot was the timeframe and the number of questions. Noticed is that it is not realistic to give attention to 21 questions within the short timeframe of 20 minutes. The majority of the participants could not focus on the amount of information. The artistic element that is added, provided for a more intensive focus and interpretation of the questions but asked for a different time management as well. By studying the positive facts of the questionnaire and areas of improvement, the questionnaire has been adjusted and the final version was created.

#### Timeframe and duration of the questionnaire

The questionnaire was implemented during the third session. The intimate situation of a one-on-one setting, where personal themes will be discussed asks for a relationship of trust between therapist and child. This confidence and trust, based on the different stages within the BAP method, can be achieved in the third and fourth session. By making use of the questionnaire during the third session, the therapist had the chance to collect information of the situation around the child and could work on a therapeutic relationship of trust.

The questionnaire had a duration of 20 minutes. Through researching the previous questionnaire and through the use of a pilot questionnaire could be concluded that the majority of the children had difficulties to focus after a duration of 20-25 minutes. Which eventually resulted in questions and outcome which were not understandable or not of any interest towards the research.

#### Surrounding and setting

The surrounding was in this context the therapy room, where the child was already familiar with. The setting was as mentioned a one-on-one setting. For children who are following individual art therapy, the step to this one-on-one setting was not as big as for children who are in a group setting. In this case it was important that the therapist showed confidence and created a safe surrounding for the child, where the child could be encouraged to tell his story.

#### Attitude of the therapist

Important in the attitude of the therapist was a professional commitment and interest in the child. This commitment is a requirement to create a trauma healing process. In addition a supportive attitude of the therapist helped to create a comfort and safety. A focal/insight-giving attitude was suitable to gain insight and healing. By offering the questionnaire both therapist and child were able to gain insight in the situation around the child. The questionnaire needed to be offered in a structured way. The therapist was the person who monitored this process.

## **2.4.2 Procedure of the observation form**

### **Timeframe and duration of the observation form**

The observation form was used in the first four sessions in which the research population participated. Observation took place during the warming up, main artistic activity and the circle ending. Focus was laid on the main activity, therefore this is the most important part of the session. In addition the start and ending shouldn't be forgotten; the way a child starts and ends the therapy is significant for his behavior during the present session and the following sessions. The duration of a session is 50 minutes. The evaluation of the therapy took place directly after the session, within a timeframe of approximately 15 minutes.

### **Surrounding and setting**

The setting where the observation took place, was an art therapeutic setting. The children that were observed for this research participated in a group or an individual therapy. The observation form of a group and individual setting were equal. However the influences of the group has to be taken into consideration, because this can be an important factor for the child.

### **Attitude of the observer**

The therapist was in this context at the same time the person who was observing the population during the session. This can be a challenging factor when the observer is observing the different children in a group while having the role as therapist and leading the group through their therapeutic process. It was thereby a participated form of observation (Verhoeven, 2011). In a group session it often appeared that two therapists were present and could share afterwards meaningful observations with each other. In addition one therapist had a more leading attitude, the observer could hereby assist and had the chance to focus on observing the response of the clients on the activities, materials, interventions and the attitude of the therapist.

## **2.5 Analysis plan**

To analyze the research information that was gained during the use of the questionnaire and the unstructured observation form within a therapeutic setting, the data of the participants was spread out to get an overview. The first step was to understand the different forms and questionnaire as separate parts, to mark which facts were notable and outstanding. The next step was to compare the different results with each other and to structure this in little groups. These groups were example within the questionnaire focused on situations at home, school and outdoors. The observation form was focused on the response of the child on the different intervention given within the sessions. The aim of the research on the questionnaire was to study if this instrument was applicable and valuable within the method. The aim of the observation form was to research if interventions within therapy were suitable and contributed to the therapy process of the child. This has been done by research on different components:

1. Recurring components and connection; for instance research is made on behavior what was recurring and themes within the questionnaire that were difficult to answer.
2. Contradictions; research is done on contradictions between the answers and the observed behavior of the children. Is this recurring and remarkable for the result?
3. Unexpected or startling components; some of the results of the questionnaires showed remarkable answers, the choice was made if this was of importance to mention in the research or if a question did not have a large contribution to the result.



## CHAPTER 3 RESULTS

### 3.1 What are the elements that form the BAP method now?

#### The BAP method

As described in the introduction, the BAP method is an art therapeutic method for traumatized children. The BAP method was developed as an art therapeutic method that uses the metamorphosis of the caterpillar to the butterfly as a symbolic guide for the therapeutic process. According to the method, a traumatized child within therapy is going through a process that is comparable to the development from the egg to the butterfly. In his book *The very hungry caterpillar*, Eric Carle (1994) describes this process in a child-friendly way. The little caterpillar, that first lives in his safe egg, finds the way out, gets to know the world, eats a lot, starts to grow, withdraws into a cocoon to eventually transform into a butterfly. In the therapeutic process you can see this different steps as well; the therapist will create a safe environment for the child, so the child can start to feel comfortable and familiar with the setting, therefore the child builds trust and confidence, becomes stable, which helps him to be able to learn, to develop and to grow. Through this process, the child gets an insight into his own development. This eventually provides that the child leaves therapy with his new resources. Translated to the therapy, this means that there are five phases during the eight sessions. These five phases are providing for becoming a butterfly. The child is strong and stable enough to 'fly out' and to cope with his outer world.

#### Phases within the method

The BAP method includes eight sessions of 50 minutes, plus one extra session for filling out a questionnaire. The method is divided in phases. In various publications one finds that trauma treatment contains three phases. The stabilization phase, trauma confrontation and integration. In the case of the BAP Method, these three phases are also used, but the focus is more on the stabilization stage and integration than on trauma confrontation. In the ideal case a traumatized child can go through the whole process in the treatment of eight sessions, but in the context of the township environment and the chance of re-traumatization, it is not always stated that a child reaches the process of trauma healing.

The 3 – phase – model, as it is written by Herman (1992) and Van der Hart and Nijenhuis (2003, 2007), gives a reasonable order and structure for the treatment of trauma. The structure of the BAP method can be assigned to this model. The model contains three phases. According to this model, interventions in the treatment of trauma are sequent directed to stabilization of functioning, reduction of symptoms, treatment of traumatic memory, personal integration and future perspectives (Mooren & Stöfse, 2010).



Below a structure is displayed with the different phases within the method, as described in the previous research on the BAP method (The butterfly effect, 2014).

SESSION	PHASE	GUIDE AND THERAPY GOALS
1	The egg	The first session clearly distinguishes from the following sessions. Safety and introduction to the therapy room, the focus is on the therapist and possible group members. This new situation, new people and new impressions can be stressful for the child that is why it is important to be well prepared and to offer a clear structure. For this purpose, the therapy room is prepared in advance. The table is set, chairs are prepared, windows are opened and everything is cleaned up – ready for the art therapy session. During the first session, the children get a few minutes time to discover the therapy room.
2	The second egg	The traumatized child experiences a safe and protected therapy setting and starts to build trust and confidence. In the second session, the children already know what to expect, so they experience less stress. It is still the aim to create a shelter and safe place for the child by preparing a structured room and set everything up beforehand. Above all, in this stage it is of importance that the focus is on building trust between both child and therapist and the possible other members of the therapy group.
3	Hatching	The child feels safe and starts to open up to the therapist and (if present) to the group. The child is confronted with his personal issues. This session is about searching for, and finding the personal problems of the child. With help of the therapist, children fill out questionnaires by which the personal issues become clear. The child gets hereby the chance to tell his story. The therapist decides if the trust within the group is already big enough to fill out the questionnaires in the presence of the whole group or one-on-one with the therapist. Now, the child is confronted with its own feelings, behavior, physical and cognitive condition.
4 -5	Eating and growing	The child works on the goals, formulated during the third session. Depending on these goals, the therapist offers suitable medium- linked activities. The child learns, experiences, feels, grows, and develops his social skills.
6 -7	Cocoon	Session 6 and 7 are about reflecting back on to what is learned in session 4 and 5. The child will gain insight on his own process of development. A review takes place on how the child came into therapy and which development and changes the child has made in order to develop further process. The child gets an insight on his personal development, progress and growth. If a child feels safe enough, a trauma-exposition can take place at this stage of therapy.
8	Butterfly	The child has the farewell-session from therapy and celebrate advantages he has made during the process. There will be an evaluation on the development and changes the child has made, by looking back and the sessions and the artwork. Afterwards, it is time for a farewell `celebration` and the therapist can decide if the child needs further treatment in the next term.

### 3.2 What is missing within the BAP method for creating an art therapeutic trauma healing process?

Within the current BAP method the different phases of the method are described. During the research on the development of the BAP method, art therapists and students have noticed that it is not clear what actually happens in each session. One can state that an overview is made of the current method, but no specific structure. To study how a trauma healing process within therapy can be created, the following missing elements were researched and observed:

#### Elements within the substance

*The aim/goal of each session;* goals within each session can work as a guideline to determine where the client is within the process. An observation of the behavior of the client within the art work, his body language and his verbal interaction has to be considered (Schweizer, 2009).

*The attitude of the therapist;* Through an emphatic, committed attitude the therapist is able to see and foresee the emotional state of the client and can understand how he deals with his problems. In addition, a dedicated and transparent attitude is a condition to create safety (Schweizer, 2009). As mentioned in the overview of the different phases, it is of importance to create a safe and comfortable shelter for the client within the therapy setting. Also the structure of the therapy session and the setting is a request.

*Creative interventions;* the experiences gained during the medium process are an important contribution for the treatment. The artistic product can provide guidance during the process. At the end the client works to a valuable product where he can relate with (Schweizer, 2009). This happens for example during the butterfly session; the client will understand, by the use of suitable interventions, the process he made within the sessions.

*Suitable materials;* within art therapy it is stated that there is an analogy between experiences that can provide materials and the experience of the artist/client himself in daily life (Smeijsters, 2008). The client needs to be invited through the materials, so he is able to relate to it and can work with his personal experience. To encourage the client in finding his own way of working and experimenting, it is important to provide appropriate materials (Schweizer, 2009).

#### A distinction between the ages

The BAP method that has been researched before was based on the research population of children in the age of seven till twelve years old. Within the method is worked with children in the age of four to fourteen years old. This means that a part of the age group was excluded within the research. In addition it was noticed that no distinction is made between the younger and the older child in the previous BAP method. This is an important difference because both age groups have to deal at this stage of their life with another development task. Within the anthroposophy you can find a split between the younger child five to nine years old and the older child ten to fourteen years old. This division is based on the 'Rubicon crisis'. The Rubicon crisis suggests that the child is going through a major crisis in the age of nine years old. Also Selg (2011) mentions the Rubicon crisis: "In many of his lectures to teachers on education, Rudolf Steiner called attention to a significant but often overlooked change in the way children experience themselves and the world that occurs in the middle of childhood, in the ninth or tenth year. "There comes a time

when children show, not in what they say but in their whole behavior, that they are struggling with a question or a number of questions that indicates a crisis in their soul life. It is a very subtle experience for the child that requires an equally subtle response.”(Selg, 2011, p. 5).

When the child reaches this age there will be a transition in the cognitive area and a big step in the development. When the child has passed the Rubicon crisis, the phase of the younger child is finished and the child can be categorized into the stage of the older child. Because of this division, the role of the therapy and therapist would also make a difference to a large extent. This means that children in the age of five to nine years old, are in a completely different stage of development than children in the age of ten to fourteen years old. Knowledge of the development processes of children and the difference in age stages is important to understand the formation and the course of abnormal functioning (Verhulst, 2005). These two target groups are that different that it requires a different approach.

### A suitable questionnaire

With previous research on the current questionnaire, that is developed in the research on the BAP method (The Butterfly Effect, 2014) is emerged that this questionnaire is difficult to apply and incomprehensible for the target group. Questions are often written in a difficult language and not adjusted to a 'child language'. Questions like "Do you feel dull and sluggish?" are not giving leading results, because they are simply not understood. In addition there are questions as "Do you feel sad?" Where the child can answer in a choice of 'never, sometimes, often, always'. Results are showing that the child will, when he feels good during the therapy session, probably answer 'never'. An inadequacy is therefore that these questions are not related to a specific situation. The cognitive part in the brain of a child is not as developed as that from an adult. One can say that it's difficult for a child to see in general how often he gets angry or sad, when this is not related to a specific situation. Especially for a child that shows symptoms of PTSD, what tells that the child has difficulties to express and control his emotions. Trauma and PTSD symptoms may influence behavioral and emotional development, including the development of self-concept and interpersonal relating (Barkley & Mash, 2014).

In addition there are no artistic elements discussed which is an inadequacy, because within art therapy artistic elements are often used instead of verbal methods. The strength of art therapy in this context is that children will, by making use of an image, understand what happens in a specific situation. By visualizing their imaginations through art the children can see and show others what is happening in their mind. Besides, by using the image can also be explained which thoughts and feelings are coming up by asking a question. The child is not forced to, during these already immediate situation, answer the questions verbally but can withdraw himself in his art work. When the therapeutic relation is developed enough, the child can by using for example a drawing, tell his story. As Malchiodi states: “Expressing the trauma story with words is not always possible for developmental reasons, for severely traumatized clients, words may not be accessible when it comes to describing trauma memories”(Malchiodi, 2008, p. 15).



### 3.3 How can the BAP method be improved so that an art therapeutic trauma healing process can be created?

As mentioned before, a trauma healing process contains three phases, stabilization of functioning, reduction of symptoms, treatment of traumatic memory, personal integration and future perspectives (Mooren & Stöfösel). The method focuses its selves at the phase of stabilization and integration. Therefore the guideline that has been created for this research is focused on the first four sessions, where stabilization is most important. Without first establishing stabilization and safety, the work of phases two and three can become impossible or require much more time than necessary. A successful accomplishment within this stage is critical for the process of trauma healing (Rothschild, 2011). In the first four sessions, it is important for a traumatized child that a secure foundation is laid. This foundation can be laid by the therapist to provide methods in which the child is familiar and clarity in the attitude of the therapist. In addition the child needs to get the chance to explore and get familiar with the room, the therapist and any other clients in his own way and pace. This needs time, a traumatized child has no- or a little faith in his surroundings and fellow human being (Aarts & Visser, 2011). While working with the BAP method it is revealed that in the fifth session this secure foundation is laid in such way that during this stage the therapist can respond to the needs of the client and can focus on his request for help. Hereby the therapist is able to lead the client in his trauma healing process (A. Katschke, personal communication, January 20, 2014).

*The guideline which is created for the first four sessions exist of an description of the following elements in each separate session; the aim of each session, the attitude of the therapist, creative interventions, suitable materials and a questionnaire during the third session.*

#### 3.3.1 Observation of the first four sessions

Within the first four sessions an unstructured observation form is used as an instrument to develop the method. The attitude of the therapist, creative interventions and the use of suitable artistic materials are significant facts that show a distinction in each different session. The child can find himself within each session in a different stage of his therapy process, which asks for another approach and structure of these elements. The aim of the observation is to research: *How can the elements within the first four sessions contribute to an art therapeutic trauma healing process within the therapy for the child?*

##### First session – The egg

###### The aim of the session

Introduction with the therapy setting; creating a safe and comfortable surrounding

Developing control mechanisms in the new setting; what is allowed/where are my boundaries?

###### The attitude of the therapist

*Supportive and structured* - The children provided from a structured and supportive attitude from the therapist. Structure at the beginning is most important. Most of the children were unaware of the therapeutic setting, and needed to get understanding for the aim of the therapy - it is not just a creative hour as they know from class. On the other hand, they felt special to be chosen and were willing to have this special attention, what strengthened the therapeutic relationship. A supportive attitude helped the child to understand this new setting and what is expected.

#### Creative interventions & materials

*Structured and familiar* - The structure and clearness of the creative interventions was of great importance. If the child has no understanding for the activity he can easily get lost and will withdraw himself. It is in this sort of situations difficult to regain this contact. A positive impression of the first session was a requirement for motivation and participation in the following sessions. The use of materials which were familiar for the child, such as colored pencil, were providing for comfort and confidence.

#### **Second session – The second egg**

##### The aim of the session

Creating trust and comfort within the setting

Exploring (new) thoughts and feelings

##### The attitude of the therapist

*Supportive and structured* - Some of the children were already willing to open up during this session, but were often still overwhelmed of the new setting. Especially children within a group setting were trying to get extra attention from the therapist, by showing-off and asking for compliments. Contact with the new group members was in this stage difficult to accomplish. Children within an individual setting were showing often a shy character and were in need of a leading/structured attitude of the therapist.

#### Creative interventions & materials

*Structured and experimental* - Children were in this stage often motivated and keen to experiment with a different sort of material. It was thereby extra important to lead the client in this process of discovering the materials and to be clear and strict. Children should not have to space to work uncontrolled with the materials. Results showed that materials were used in a wrong way and that the client felt not satisfied with his process and art work. It was important to focus on the different technics and the use of the materials, before allowing the client to start working. This provided for clearness and structure during the session.

#### **Third session – Hatching**

##### The aim of the session

Improving social interaction and interpersonal skills (therapeutic relationship)

Improving self-awareness and awareness of surroundings

##### The attitude of the therapist

*Re-educative and insight giving* - The insight giving attitude of the therapist helped the client during filling in the questionnaire to understand his inner and outer world. The children could through therapeutic relate to the questions. The therapist had as important role that he needed to support the client during this process. It was for a majority of the clients challenging to focus on the questions, they needed extra support within this process.

#### Creative interventions & materials

*Insight giving and structured* - The questionnaire was filled in during this session. This was for the majority of the children an challenging session, what asked focus and concentration. In addition, this one-on-one situation was for most of the children a bit overwhelming. Safety and comfort could be given by making use of materials were the client were familiar with. The colored pencils and paper provided a feeling of comfort.

### 3.3.2 Research on the artistic questionnaire

The questionnaire was used as an instrument within therapy. During the questionnaire the child was asked to draw his personal situation which related to the question. The strength of this artistic part was in this context, that the child was hereby able to express what he could not tell in words. The use of colored pencils was suitable because this is familiar for the child, it was not repulsive and provided for safety.

One can state that the artistic questionnaire has as general aim; *To contribute to the development of the method and to create a trauma healing process within the therapy process of the child.* This aim is divided in sub-goals that makes understandable why the questionnaire is workable in the setting of the BAP method provides a healing process:

- **A tool to understand the inner and outer world of the client**

The behavior of the client during therapy will be observed, in addition it is important to involve the outer world of the client as well. When the therapist/researcher is aware of the complete situation around the client he is able to have a better understanding for the client with his emotions and behavior. It is hereby important to go along with the child's perception of the surroundings. For children, the environment where they develop themselves in and the extent to which they can rely on the protection of parents and family is crucial when processing one or repetitive traumatic events (Bakel, Groot & Ploeg, 2012).

### Results

The questionnaire is divided in different situations which are related to daily situations and can be thereby understandable for the child. Within this situations questions were asked related to symptoms what can come up after a repeated trauma. The situations which were observed; the situation at home, situation outdoors, situation at school and the physical situation of the child. Examples are showed of filled in questionnaires in (Appendix B3).

#### Situation at home

All of the twelve participants were able to understand and answer questions around this situation. The majority had no resistance in answering the questions. One participant showed resistant in telling about his family members. When the therapist continued in asking – negative feelings came up. This could be 'solved' by making use of the drawing. Short answers were understandable but did not give an important value to the questionnaire. A small part of the participants had some difficulties to be detailed. Six of the participants mentioned to have nightmares and restless behavior during the night.

#### Situation outdoors

The majority of the participants was able to answer the questions in a detailed way. They were keen to tell about their friends and other important persons in their surroundings. The question "Who do you trust?" was difficult to answer – the answer was in the first place related to a long list of people. When the therapist, continued asking on this topic, a majority could only mention one or two important persons. The participants were able to understand most the questions but had some difficulties to open up. Some of the participants mentioned that they showed aggressive behavior in specific situations. The majority only wanted to mention the 'happy memories'.

#### Situation at school

The participants were able to answer the questions and keen to tell about their friends, class and teacher. Friends are often related to the school situation. Answers were often short and not detailed. The majority was able to explain which classes/tasks at school were difficult and that committed that topics were often not understandable in class. The participants were keen to tell about their worries at school.

#### Physical situation

The majority was able to answer the questions and was able to name sickness and unhealthy behavior. Answers about abnormalities were often short and related to the last sickness they had. Participants were not able to relate physical abnormalities to a specific situation. In addition they were not able to tell how often this happened.

#### • **Intervention to strengthen the therapeutic relationship**

Children are usually very loyal to parents/guardians and can end up in a moral conflict when confronted with negative perceptions about their loved ones (Meijer-Degen, 2006). To motivate the child to tell his personal story, a safe climate and a trustful relationship between therapist and child is a requirement. We can state that this intimate and personal one-on-one situation between therapist and child can provide for a meaningful relationship of trust. This is a positive consideration for the process within the following sessions and a better chance to create a trauma healing process for the child. Therapists who encounter traumatized children must form a productive relationship with the client to enable them not only to revisit painful experiences, but also to overcome intrusive memories, make meaning, and find hope (Malchiodi, 2008). *Results of this sub-goal can be achieved and are thereby showed in the fourth session.*

#### **Fourth session – Eating and growing**

##### The aim of the session

Improving social interaction and interpersonal skills

Strengthen self-confidence and self-actualization

##### The attitude of the therapist

Re-educative and insight giving -The child finds himself in another place within therapy. A part of the children were more willing to share and open up, others are were in need of more time and a careful approach. A majority of the children was confident enough to contribute to the own therapy process, by assigning to theme's and materials they would like to work with. A part of the children are showing more trust in the therapist and are telling about their weekly activities and weekends. Feelings and personal issues can be told. Concluding on this, we can state that the questionnaire helped to contribute to a relation of trust between a majority of the clients and therapists.

##### Creative interventions & materials

*Grounded and experimental* - A majority of the children were still in need for a structured and step-by-step approach. Most of the children were keen to experiment with other materials and tried to find his/her boundaries in the artistic process. Through experimenting with different materials, the child surprises himself and gains confidence of his own possibilities. A process-focused approach was suitable, the child works on one artwork within more sessions. This helped to accomplish a satisfying result and could eventually contribute to the following sessions.

### **3.4 To what extent is the adjusted BAP method applicable in a West European context?**

#### **The difficulties of trauma therapy in a traumatic surrounding**

With art therapeutic trauma healing methods used in Europe, it is usual that the client has been removed during the therapy from the traumatizing environment. Then it can be assumed that the client is in a safe, social environment (Cohen, Mannarino & Deblinger, 2012). In the context of the South African townships, it is often impossible to remove these clients from their home situation. Children who are growing up in a township have no structured, safe and social environment and can be re-traumatized each day. In several articles, websites and books which are related to the treatment of trauma is appointed that a safe environment is a prerequisite for trauma healing. For instance, the website of Het Landelijk Kenniscentrum voor Kinder- en Jeugdpsychiatrie states: "Treatment of heavy traumatized children and young adults requires a safe environment" (Koelman, 2014, §2). Also Govaerts (2008) mentions "Trauma healing requires a secure environment which can emotionally bear and support the client." (p. 73).

#### **3.4.1 The strength of the BAP method in this context**

The township Vrygrond is a place which doesn't give children the chance to grow up in a safe environment and to be able to be a child. During therapy Angela Katschke is particularly focusing on the development of the child as an independent individual. Life in the Township requires a lot of self-discipline, a strong personality and self-esteem. A desire to grow is important. It is not always obvious that these children receive help from others. Stories told by children during therapy, are showing that parents and family around the child, can't give the child enough opportunities to grow and develop as an independent individual. Examples are unemployment, addiction, neglect or abuse around the child. Although there is a risk of re-traumatization, the BAP method helps children to develop, grow and to learn how to cope with their trauma. The BAP method helps the child in his quest to various questions in life like; who am I, what do I want and where do I want to go? Attention is given to the present, by making the child aware of his personal situation and by giving him strength to cope with the hectic life in Vrygrond. For children in Vrygrond it is not always a matter of course that they can continue studying after primary school. This is due to factors such as poverty, family circumstances and disease.

Art-therapists/students can, through the positive results that the children are showing in their behavior and development after going through a therapy process, conclude that the BAP method is applicable in a surrounding of a South African township, as Vrygrond. The BAP method prepares the child for the difficulties and forces in his daily life and offers support and motivation to gain strength. The question we can ask our self is;

**Is this method, which is used in the context of a South African township also applicable in a west-European context?**

Childhood trauma in a Western European context can arise because of diverse circumstances. For instance a single event as a traffic incident, a single crime or a nature disaster. It also can be caused by repeated abuse, emotional neglect, aggression or bullying (Cohen et al., 2012). Physical, sexual and emotional abuse or neglect within the direct surrounding of the child and bullying during a school-situation are common events.

### Therapeutic circumstances

The western society lives in a time of instincts and impulses. The century of media shows that everything has to be quick and logical. There is no time for thoughtfulness and tranquility. Which will be reflected in an emotional unstable society, where people are not able to cope with all the impulses from their surroundings (Anthoni, Swolfs & Vanderstraete, 2014).

The current cuts have as direct result that art therapy is under pressure. Insurers set requirements on the treatment program, with evidence-based and short-term treatments. The evidence-based practice movement has become an important feature of health care systems and health care policy. In the field of child mental health research, the term "evidence-based practice" refers to a scientific knowledge about the impact of clinical treatments or services on the mental health problems of children and adolescents (Burns, Hoagwood, Kiser, Ringeisen & Schoenwald, 2001). There is a larger amount of people that applies for therapy. On the other hand is the treatment capacity scarce (Arts & Reinders 2012). There is a small percentage of traumatized children being served by the mental health system. Those who can be served, receive often fragmented, ineffective and impersonal services, what is not helping children to effectively cope and heal (Malchiodi, 2008). It is of importance that art therapy is at the forefront of the current developments. The use of research instruments to improve the art therapy field is necessary. It is a way to be more transparent in what happens within therapy and to finally show what results can provide the art therapy field and thereby the method.

### The Western European individualism

The western culture today is focused on individualism. Expressive individualism (being yourself), means the development of a human being as a unique and individual person; through this development a person can understand himself and his self-interest (Eijk, 2002). Rand states the following about individualism:

A person has the choice to think, to question, to judge, to fully focus on reality or to coast mindlessly and then, by default, become a mere product of his or her genes and social influences. For example, a person can be raised by racist parents and come to personally adopt their irrational views. This person, however, especially by the time he reaches adulthood, can choose to think about and question the truthfulness of his bigoted views and reject these views, even if this process is difficult. If he does not question his views and remains a racist then this, too, is his choice. The individual is independent in the sense that what he believes and does—in other words, who he is—is ultimately a product of his own choice. As a result, the individual is self-responsible, the master of his own destiny and, in a word, sovereign. (Rand, 2007, §6.7).



## CHAPTER 4 CONCLUSION, DISCUSSION AND RECOMMENDATIONS

### 4.1 Conclusion

**How can the BAP Method be workable for a traumatized child in the age of ten to fourteen, growing up in the context of a South African township...**

The current method has been used during the past years within the organization, and a start has been made to make it practical based. During therapy, therapists (students) noticed that the BAP method is too open and thereby not workable enough. Noticed while working with the method, there are ambiguities and a demand for information about the approach and structure of the BAP method in therapy. The guideline which is created for this research provides a framework for the therapist to work together with the client through the first four sessions. The reason for creating a guideline for the first four sessions, is because during this stage of therapy structure and safety is most important. Without first establishing this stage of stabilization and safety, the following stages can become impossible or require much more time than is necessary. A successful accomplishment within this stage is critical for the process of trauma healing (Rothschild, 2011). As mentioned in chapter 3.1 - *In the ideal case a traumatized child can go through the whole process in the treatment of eight sessions, but in the context of the township environment and the chance of re-traumatization, it is not always stated that a child reaches the process of trauma healing.* The following facts are provided in making the method more workable and hereby insightful for both client and therapist and can eventually contribute to an art therapeutic trauma healing process within the therapy;

Knowledge of the development processes of children and the difference in age phases is important to understand the formation and the course of abnormal functioning (Verhulst, 2005). The Rubicon crisis suggests that the child is going through a major crisis in the age of nine years old. Because of this division, the role of the therapy and therapist would also make a difference to a large extent. It can be stated that the method focuses on a smaller age group and is thereby more specific and applicable for the therapist. It is based on the circumstances and the development tasks of a child in the age of ten to fourteen. These facts are also considered within therapy, hereby a session has more suitable interventions as goals, materials and activities for the child of ten to fourteen.

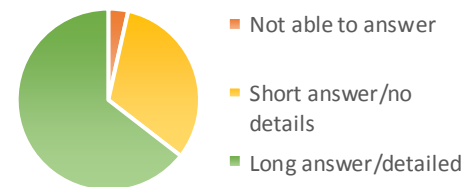
The importance of goals within each session is that they can work as a guideline to determine where the child is within his process. The experiences gained during the medium process, are an important contribution for the treatment. The artistic product can provide guidance during the process (Schweizer, 2009). To encourage the child in finding his own way of working and experimenting, it is important to provide appropriate materials (Schweizer, 2009). A structure is made of these interventions within each separate session. Suitable goals, an appropriate attitude and creative interventions and materials were beforehand researched and proposed during therapy. To study if these interventions were suitable, workable and valuable for the therapy session, an observation within the therapy is made. Results showed that the research population provided from a structured and supportive attitude of the therapist during the first two sessions. The structure and clearness in creative interventions helped to get understanding for the new setting of the therapy. Familiar materials were providing for safety and the confidence of 'being

able to make own art'. Some children were during the second session already willing to share and open up, but could still be a bit overwhelmed of the new setting. Children were in this stage often motivated and keen to experiment with a different materials, but could get easily overwhelmed.

During the third and fourth session, a re-educative and insight giving attitude of the therapist was suitable. An artistic questionnaire was offered in the third session. The insight giving attitude of the therapist helped the client to understand his inner and outer world. "Expressing the trauma story with words is not always possible for developmental reasons, for severely traumatized clients, words may not be accessible when it comes to describing trauma memories" (Malchiodi, 2008, p. 15). Children will, by making use of an image, understand what happens in a specific situation. The specific symptoms after experiencing a traumatic event are in this questionnaire linked to the situations around the child, which makes it understandable and useful in therapy.

Results of the questionnaire showed that the participants were willing to give answers related to their personal life. The majority did understand the questions and could answer them. The artistic part provided especially at the beginning for a comfortable situation for the child and helped him to relate with the questions which were asked. Remarkable was that short answers were in a larger amount given during the last two parts of the questionnaire. Through observation can be concluded that this was often due to a lack of concentration. The physical situation of the child was difficult to link to a specific situation, answers were often short and not valuable for the research. This part of the questionnaire difficult to integrate within the story.

### Response to the questions



The fourth session finds it selves in a new stage of therapy. The therapy was in this stage a comfortable and save setting. Sessions were having a more personal related theme. A majority of the children had an awareness of art therapy as a serious and valuable contribution to their situation. Children were keen to experiment but were still in need for a structured and step-by-step approach and grounded materials.

### ... and is the method also applicable in a different context?

Based on the problematic due to the circumstances in the western society and the focus on the importance of the individualist it can be state that the BAP method is also applicable in a Western European context. This conclusion is based on the following facts;

The therapeutic circumstances in Western Europe are today focused on a short-term and solution focused therapy. There is a larger amount of people who applies for therapy. On the other hand is the treatment capacity scarce (Arts & Reinders 2012). Treatment has to be researched and evidenced based. The BAP method is applicable in the Western European health system because it's based on a clear and short-time therapy of eight sessions. In addition the different phases of the butterfly metamorphosis can help both therapist and child to understand their process. Which makes therefore the method a short/solution focused therapy.

In addition is the western culture focused on the individualism, instead of the group where a person belongs to. The individual is independent in the sense that what he believes and does, who he is, is a product of his own choice. The individual is self-responsible (Rand, 2007). It can be stated that the BAP method is suitable in this western society because it is based on the child as a unique person, with his own choices and strengths. As mentioned before, the method is focused

on creating self-discipline and a strong self-esteem, what helps the child to survive and cope with the difficult surrounding of Vrygrond. Therefore it also can help a child to cope with the individual focus in a western society, where support of the surrounding is not always a matter of course.

## **4.2 Discussion**

### The difficulties of trauma healing in a South African township

The first step in trauma healing is, as mentioned, the stabilization phase. In the context of BAP is by definition no presence of a 'safe environment'. In the township Vrygrond, where the learners of the Capricorn Primary School grow up, prevails violence, poverty and disease (Where rainbows meet, 2014). Such a secure framework is easier to create in a European context where external organizations, such as Youth Care (Bureau Jeugdzorg), can interfere and can remove a child from an unsafe situation. In Vrygrond is this not or very difficult to achieve; most of these children go after school back to their unsafe environment, so there is daily chance of re-traumatization. It is not impossible to remove a child from a traumatic situation, but the number of success stories is often limited because of the lack of adequate professionals. Within the Capricorn Primary School is only one social worker employed who is responsible for the welfare of the approximately 700 students and their families. This is insufficient capacity to give each problem situation in the family's attention.

### The shortcoming of qualitative research

This research has a qualitative approach. This form of research has an open approach, in which the perception of the research population is of interest (Verhoeven, 2011). A limitation in this research could be that there is no focus on collecting numbers within this specific topic. The BAP is funded by external sponsors and donors, these external parties expect results in the form of evidence-based data. It could be thereby a shortcoming that this research has a qualitative approach because the BAP is currently trying through get more external financial support.

During the research-period of four months was an ability to do a pilot and a questionnaire and observation research on twelve children. It can be stated that this group is suitable within the qualitative approach, it is limited and small and therefore specific research on the responses of the children could been done. On the other hand can one stated that this group is too limited, there is a chance of subjective perceptions within the results. In addition there should be an awareness of the subjective perception of the person who is both researcher and therapist during the therapy sessions.

## **4.3 Recommendations**

This research was focused on parts within the substance of the method that could make the method more workable for a traumatized child of ten to fourteen who grows up in a South African township. There is also been questioned if this method is applicable in a west European context. In response to the results and outcomes the following recommendations can be made:

- Research on the structure of the following sessions – appropriate goals and interventions.
- Further research on the applicability of the method in a Western European organization.
- Research on an appropriate measuring method
- Psycho education for parents and teachers

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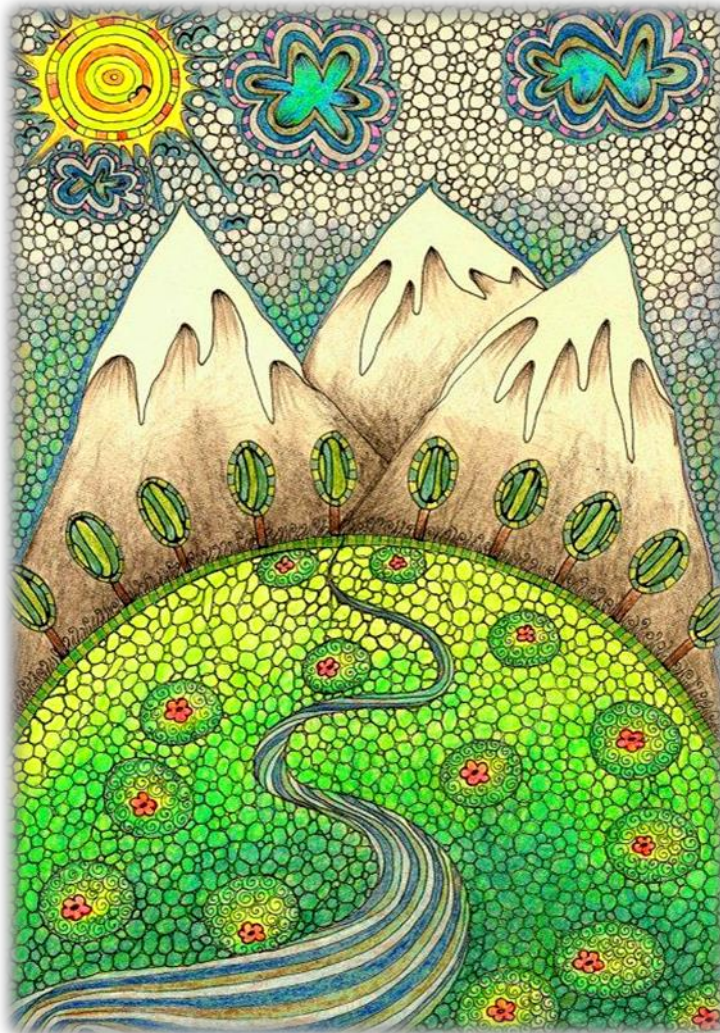


## APPENDICES

# The Butterfly Art Project Method

Compact guideline of the first four sessions

For a child in the age of ten too fourteen



### The BAP method

As described in the introduction, the BAP method is an art therapeutic method for traumatized children. The BAP method is developed as an art therapeutic method that uses the metamorphosis of the caterpillar to the butterfly as a symbolic guide for the therapeutic process. According to the method, a traumatized child within therapy is going through a process that is comparable to the development from the egg to the butterfly. In his book *The very hungry caterpillar*, Eric Carle (1994) describes this process in a child-friendly way. The little caterpillar, which first lives in his safe egg, finds the way out, gets to know the world, eats a lot, starts to grow, withdraws into a cocoon to eventually transform into a butterfly. In the therapeutic process you can see this different steps as well; the therapist will create a safe environment for the child, so the child can start to feel comfortable and familiar with the setting, the child builds therefore trust and confidence, becomes stable, which helps him to be able to learn, to develop and to grow. Through this process, the child gets an insight into his own development. Which eventually provides that the child leaves therapy with his new resources. Translated to the therapy, this means that there are five phases during the eight sessions, these five phases are providing for becoming a butterfly. The child is strong and stable enough to 'fly out' and to cope with his outer world.

### Phases within the method

The BAP method includes eight sessions of 50 minutes, plus one extra session for filling out a questionnaire. The method is divided in phases. In various publications one finds that trauma treatment contains three phases. The stabilization phase, trauma confrontation and integration. In the case of the BAP Method, these three phases are also used, but the focus is more on the stabilization stage and integration than on trauma confrontation. In the ideal case a traumatized child can go through the whole process in the treatment of eight sessions, but in the context of the township environment and the chance of re-traumatization, it is not always stated that a child reaches the process of trauma healing.

The 3 – phase – model, as it is written by Herman (1992) and Van der Hart and Nijenhuis (2003, 2007), gives a reasonable order and structure for the treatment of trauma. The structure of the BAP method can be assigned to this model. The model contains three phases. According to this model, interventions in the treatment of trauma are sequent directed to stabilization of functioning, reduction of symptoms, treatment of traumatic memory, personal integration and future perspectives.



Below a structure is displayed with the different phases within the method, as described in the previous research on the BAP method (The butterfly effect, 2014).

SESSION	PHASE	GUIDE AND THERAPY GOALS
1	The egg	The first session clearly distinguishes from the following sessions. Safety and introduction to the therapy room, the focus is on the therapist and possible group members. This new situation, new people and new impressions can be stressful for the child that is why it is important to be well prepared and to offer a clear structure. For this purpose, the therapy room is prepared in advance. The table is set, chairs are prepared, windows are opened and everything is cleaned up – ready for the art therapy session. During the first session, the children get a few minutes time to discover the therapy room.
2	The second egg	The traumatized child experiences a safe and protected therapy setting and starts to build trust and confidence. In the second session, the children already know what to expect, so they experience less stress. It is still the aim to create a shelter and safe place for the child by preparing a structured room and set everything up beforehand. Above all, in this stage it is of importance that the focus is on building trust between both child and therapist and the possible other members of the therapy group.
3	Hatching	The child feels safe and starts to open up to the therapist and (if present) to the group. The child is confronted with his personal issues. This session is about searching for, and finding the personal problems of the child. With help of the therapist, children fill out questionnaires by which the personal issues become clear. The child gets hereby the chance to tell his story. The therapist decides if the trust within the group is already big enough to fill out the questionnaires in the presence of the whole group or one-on-one with the therapist. Now, the child is confronted with its own feelings, behavior, physical and cognitive condition.
4-5	Eating and growing	The child works on the goals, formulated during the third session. Depending on these goals, the therapist offers suitable medium- linked activities. The child learns, experiences, feels, grows, and develops his social skills.
6-7	Cocoon	Session 6 and 7 are about reflecting back on to what is learned in session 4 and 5. The child will gain insight on his own process of development. A review takes place on how the child came into therapy and which development and changes the child has made in order to develop further process. The child gets an insight on his personal development, progress and growth. If a child feels safe enough, a trauma-exposition can take place at this stage of therapy.
8	Butterfly	The child has the farewell-session from therapy and celebrate advantages he has made during the process. There will be an evaluation on the development and changes the child has made, by looking back and the sessions and the artwork. Afterwards, it is time for a farewell `celebration` and the therapist can decide if the child needs further treatment in the next term.

## First session – The egg

The first session clearly distinguishes from the following sessions. Safety and introduction to the therapy room, the focus is on the therapist and possible group members. This new situation, new people and new impressions can be stressful for the child, that is why it is important to be well prepared and to offer a clear structure. For this purpose, the therapy room is prepared in advance. The table is set, chairs are prepared, windows are opened and everything is cleaned up – ready for the art therapy session. During the first session, the children get a few minutes time to discover the therapy room.

### The aim of the session

Introduction with the therapy setting; creating a safe and comfortable surrounding  
Developing control mechanisms in the new setting; what is allowed/where are my boundaries

### The attitude of the therapist

*Supportive and structured* - In this first stage of the therapy safety and introduction is most important. A supportive and structured attitude of the therapist is a requirement. Which means that there is in this stage no space for the child to feel lost and unsafe. The therapist is the person who the child can hold on to, he leads the child in this significant first process by offering suitable interventions.

### Creative interventions & materials

*Structured and familiar* - The setting is prepared and the activities will be offered in a structured and certain way. A circle at the beginning as warming up, a creative activity and circle ending will be offered. This is a clear and fixed structure what will be repeated during the following sessions. Too much impressions will provide an unsafe and unstable feeling by the child. The materials that will be offered are thereby familiar for the child. For instance, materials like graphite pencils and colored pencils are easy to control, create precise lines, and allow the artist to erase and start over. Other materials like collage and markers would also be considered structured and controlled.

---

## Introduction-drawing

### Materials

A4 paper, colored pencils

This activity can be offered during the first session, to provide an secure feeling for the child, the activity is not too challenging and the materials are familiar for the client. The therapist can hereby observe the behavior of the client during the session. The client will be asked to draw different basic elements on a a4 paper; sky, sun, tree, house, animal, person, plant, flower and ground.



*The drawings are showing a clear difference. The drawing above shows a big and important house, which can show that the situation at home an important subject in the clients live is. On the other hand, are showing the red door windows a negative perception of the child of what happens within the house. The drawing on the left side shows no stability and is everything except grounded, the different elements are float in the air, what also can tell the therapist something about the client.*



## Second session – The second egg

The traumatized child experiences a safe and protected therapy setting and starts to build trust and confidence. In the second session, the children already know what to expect, so they experience less stress. It is still the aim to create a shelter and safe place for the child by preparing a structured room and set everything up beforehand. Above all, in this stage it is of importance that the focus is on building trust between both child and therapist and the possible other members of the therapy group.

### The aim of the session

Creating trust and comfort within the setting  
Exploring (new) thoughts and feelings

### The attitude of the therapist

*Supportive and structured* - The following session of the egg, is called the second egg because the aims of this session are still in large extend comparable to the first session. It is still important comfort the child in this new setting. The attitude of the therapist should thereby be supportive and comforting, to create a save shelter for the client within the setting. A structured and transparent attitude provides for safeness and eventually development and changes in his emotional, social and physical behavior.

### Creative interventions & materials

*Structured and experimental* - Offered activities and materials can be a bit more challenging during this stage. Structured interventions are a requirement, through offering a step-by-step activity. The choice of oil pastel or aquarelle can be in this stage of therapy suitable. Important is that the activity, which is linked to this new material, offers structure and safety. It should not be too challenging. Therefore the focus can be laid on discovering the new materials.

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### **Artwork of oil pastel and watercolor in theme**

#### Materials:

A4 or A3 paper, oil pastel and watercolors

This activity is suitable during the second session of therapy. It is more experimental and challenging, but provides still safety and is easy to apply for the child. The clear colors of the oil pastel invite the child to start working and providing for a positive result. Through work on top of the oil pastel with watercolor, the drawing becomes more alive and gets an interesting result for the child. This child cannot fail. Activities within this session can be relate a theme. Working with a fantasy theme provides safety for the client, it is not too personal.





## Third session – Hatching

The child feels safe and starts to open up to the therapist and (if present) to the group. The child is confronted with his personal issues. This session is about searching for, and finding the personal problems of the child. With help of the therapist, children fill out questionnaires by which the personal issues become clear. The child gets hereby the chance to tell his story. The therapist decides if the trust within the group is already big enough to fill out the questionnaires in the presence of the whole group or one-on-one with the therapist. Now, the child is confronted with its own feelings, behavior, physical and cognitive condition.

### The aim of the session

Improving social interaction and interpersonal skills (therapeutic relationship)  
Improving self-awareness and awareness of surroundings

### The attitude of the therapist

*Re-educative and insight giving* - The foundation of safety and comfort is laid and the client feels comfortable and secure enough to share his personal issues. To support him within this process, the therapist needs to support the client and give him an insight in his own personal world. Suitable with a re-educative attitude is to influence and process personal issues, through structured activities.

### Creative interventions & materials

*Insight giving and structured* - A questionnaire is filled in during the third session. The reason for this stage is, that the client will find himself in his final phase of stabilization. The child feels familiar with the setting of therapy. Theme's from this session on, are having a more personal focus. The questionnaire is a turning point within the therapy. The child needs support and structure of the therapist during this new intervention. This structure can be given by making use of materials were the client is familiar with, this will give a feeling of comfort.

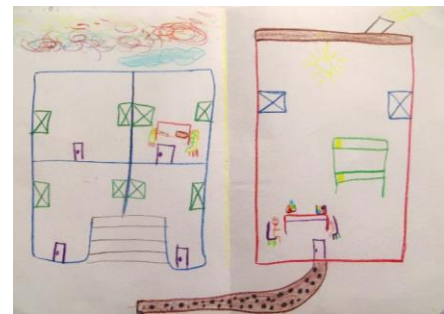
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### Artistic questionnaire

#### Materials

Questionnaire and form for the therapist, a4 paper, colored pencils.

This artistic questionnaire will be filled in during the third session in a one-on-one setting with the therapist. The questionnaire has as aim to contribute to the development of the method and to create a trauma healing process within the therapy process of the child. The questionnaire is used as a tool to understand the inner and outer world of the child. As mentioned before, the behavior of the child during therapy will be observed, in addition it is important to involve the outer world of the child as well. We can also state that this intimate and personal one-on-one situation between therapist and child can provide for a meaningful relationship of trust. This is a positive consideration for the process within the following sessions. Questions from practice based PTSD questionnaires are used as a base for developing questions. The child is asked to imagine his personal situation by drawing the inside of the house he is living in. The therapist guides the child in this process by asking him questions related to the drawing, for instance; "with who do you live and what happens at home?" In addition the therapist will make a link to the situation outdoors. The questionnaire is completed by making a link to the situation at school and the child's physical feelings. Subjects from existed PTSD questionnaires are in this context understandable for the child because they are linked to a certain situation. For instance subjects such as nightmares and bed-wetting can be related to the situation at home.



## Fourth session – Eating and growing

The child works on the goals, formulated during the third session. Depending on these goals, the therapist offers suitable medium-linked activities. The child learns, experiences, feels, grows, and develops his social skills. The child is strong in his own resources.

### The aim of the session

Improving social interaction and interpersonal skills  
Strengthen self-confidence and self-actualization

### The attitude of the therapist

*Re-educative and insight giving* - The fourth session finds it selves in a new stage of therapy. The therapy has become a comfortable and save setting. Sessions are having a more personal related theme, for example family, puberty, self-conception, bullying . The therapist must be aware of feelings that come up by working in this more deeper and personal level. Self-awareness, and experiencing in the present are of importance.

### Creative interventions & materials

*Grounded and experimental* - The foundation is laid, the child is familiar with the setting and can work with the use of structured artistic work on his own personal issues. Materials should still have a grounded effect on the child. The child is able to experiment with other and more challenging materials. Clay can be have a grounded effect, comes from the earth and triggers the use of tactile senses and 3-dimensional thinking. Therefore paint has a more fluid outcome and is less structured, but can be interesting for experiencing the effects of mixing colors. The choice of materials in combination of task complexity and structure also affect the outcome; an art process with many steps or complex instructions may involve more cognitive responses and processing than one that is less structured and has only one step.

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### Life-size tree

#### Materials

Paper-roll and acrylic paint (primary colors)

This activity is challenging and has as aim to create a personal life size try. During the activity the therapist will support the children in this process. By working with hands and papers on the paper the child gets in direct contact with the paper and hereby his artwork. This provides for focus and concentration within the process. An up warding movement with the whole body creates positive feelings as grow and development. In the first stage of the activity the trunk will be completed with both hands in an up-going movement, in one color. After this stage, the child can choose another color to create leaves and branches.

This activity is suitable within this stage of the therapy, therefore it is experimental and challenging and can be finished within several sessions, which makes it process focused and creates a deeper meaning for the child.



## *Questionnaire BAP Method During the 3th session*

### *Child GR4 - GR7 (Art assignment: Drawing inside of own house)*

Name of the child:

Sex:

Age/grade:

Group/individual:

Name of the therapist:

Date/term:

*Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:*

---

#### **When I am at home**

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

#### **When I am sleeping**

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ *Make a line to other important places for the client... (playground, school, other family members, friends)*

#### **Important places for me**

6. Where are you if you are not at home? (why important, what do you do there)

#### **With who I play together**

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happens when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

#### **When I am at school**

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

#### **How I am feeling in my body**

13. How do you feel in your body when you are not feeling well?  
(tired, problems to breath, little energy, fast heart beating, are you staying home)

Questionnaire BAP Method During the 3th session Child GR4 - GR7  
*Sheet for making notes (for the therapist)*

*When I am at home*

*When I am sleeping*

*Important places for me*

*With who I play together*

*When I am at school*

*How I am feeling in my body*



## Examples of activities



**African Sunset**



**Family portrait – sand-painting and mixed media**



**Life-size mermaid**



**Group mandala in clay & mandala with oil pastel (pasted on wall with wallpaper glue)**



## Appendix A2 - Extended information about the research population

SEX	AGE	BACKGROUND	Group	Individual
F	11	poor self-esteem emotional abuse by father physical abuse by mother mother is depressed		X
M	11	poor scholastic ability/low IQ poor self-esteem recently death of mother foster care		X
F	11	poor cognitive ability/low IQ acting out/asks for attention poor social skills	X	
F	12	poor cognitive ability/low IQ poor coping skills poor social skills Manipulative behavior	X	
F	12	poor cognitive ability/low IQ sexually assaulted during pre-school	X	
F	12	poor cognitive ability/low IQ poor self-esteem extremely shy	X	
F	12	poor cognitive ability/low IQ father murdered mum – alcoholic (little contact) foster care – aunt	X	
F	13	Unstructured family situation “Partent” siblings		X
M	13	disturbing behavior in class acting out	X	
M	13	disturbing behavior in class lack of social abilities older brother in jail	X	
M	13	disturbing behavior in class poor self-esteem	X	
M	13	disturbing behavior in class acting out aggressive	X	



## Appendix B1 - Example observation form BAP Method – The first four sessions

**Session: 1**

**Attitude therapist:** Supportive, structured

**Goal session:** Provide safety, introduction with the therapy room, therapist and potential group members.

**Activity:** Introduction drawing of the basic elements of a ground, sky, tree, plant, house, person, animal.

**Materials:** Materials which are familiar for the client, such as colored pencils

**Clients: 4**

---

**What does the client need from the therapist?**  
(Structure, freedom, support)

**How does the client respond to the activity?**  
(Disinterested, interested, enthusiastic, with resistance)

**What provokes the activity at the client?**

**How does the client respond to the materials?**  
(Disinterested, interested, enthusiastic, with resistance)

**What provokes the material at the client?**

## Appendix B1 - Example questionnaire BAP Method During the 3th session

### Child GR4 - GR7 (*Art assignment: Drawing inside of own house*)

Name of the child:

Sex:

Age/grade:

Group/individual:

Name of the therapist:

Date/term:

*Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:*

---

#### **When I am at home**

14. Who lives in your house? (family structure, who is important, history)

15. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

#### **When I am sleeping**

16. When do you go to bed? (late/early, do you feel tired)

17. Do you have problems to fall asleep? (why is that, worries, what do you do then)

18. Do you have nightmares? (what happens then, frightened, pee in bed)

→ *Make a line to other important places for the client... (playground, school, other family members, friends)*

#### **Important places for me**

19. Where are you if you are not at home? (why important, what do you do there)

#### **With who I play together**

20. Are you playing with others? (who are your friends, what do you play, do you feel lonely)

21. Do bad things happens when you play with others? (acting without thinking, fight, lose control)

22. Who is important for you and who do you trust? (care about, who do you trust and why)

#### **When I am at school**

23. How is school for you? (how is your class, the teacher, during the break)

24. Do you forget things? (when does this happen)

25. In class, what happens if you don't understand something? (ask or not, confused)

#### **How I am feeling in my body**

26. How do you feel in your body when you are not feeling well?

(tired, problems to breath, little energy, fast heart beating, are you staying home)

## Appendix B2 - Observation form BAP Method – The first four sessions – Client 1

### Session: 1

**Attitude therapist:** Supportive, structured

**Goal session:** Introduction with the therapy setting; creating a safe and comfortable surrounding  
Developing control mechanisms in the new setting; what is allowed/where are my boundaries

**Activity:** Introduction drawing of the basic elements of a ground, sky, tree, plant, house, person, animal.

**Materials:** Materials which are familiar for the client, such as colored pencils

**Client:** 1 girl in group of five

---

#### **What does the client need from the therapist?**

**(Structure, freedom, support)**

The client needs especially in this setting, safety and comfort. She shows anxious behavior at the beginning of the therapy and does not know how to cope with the new situation. The group creates comfort but is also something new for the client. The therapist needs to give her structure and needs to support her during the different parts of the session

#### **How does the client respond to the activity?**

**(Disinterested, interested, enthusiastic, with resistance)**

The activity seems easy to understand, but it takes a long time before she is able to start drawing. Observing the other clients seems important, after a while she starts copying the tree of another child in the group. After a while (10 minutes) the client seems to ground and feels comfortable to create her own drawing. The result is original. Outstanding is that only a small part of the paper has been used.

#### **What provokes the activity at the client?**

The activity seems challenging for the client. There are a lot of elements which need to be on the paper. The client needs a step for step approach to draw all the parts of the drawing and to complete it.

#### **How does the client respond to the materials?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client is familiar with the colored pencils. She mentions to draw at home also and can easily use different colors in one element (for example the tree or the person).

#### **What provokes the material at the client?**

I can hereby say that the material provokes safety and comfort.

## Appendix B2 - Observation form BAP Method – The first four sessions – Client 2

### Session: 1

**Attitude therapist:** Supportive, structured

**Goal session:** Introduction with the therapy setting; creating a safe and comfortable surrounding  
Developing control mechanisms in the new setting; what is allowed/where are my boundaries

**Activity:** Introduction drawing of the basic elements of a ground, sky, tree, plant, house, person, animal.

**Materials:** Materials which are familiar for the client, such as colored pencils

**Client:** 1 boy in group of 2

---

#### **What does the client need from the therapist?**

**(Structure, freedom, support)**

The client shows that he needs a lot of structure to cope with the new setting. He is motivated and interested in this new therapy setting. Because of previous therapy with another therapist, he shows of and tells that he can work with much challenging materials such as clay and acrylic. The client needs especially boundaries and an clearness in this surrounding.

#### **How does the client respond to the activity?**

**(Disinterested, interested, enthusiastic, with resistance)**

As mentioned before, the client wants to show of and is not really interested in working with the different materials. The colored pencils are not challenging enough and he shows resistance in drawing the landscape.

#### **What provokes the activity at the client?**

The activity seems hard to understand, the client is overwhelmed of the new setting and is not able to concentrate on the different elements within this activity. After calming him down, he can concentrate and finish his drawing.

#### **How does the client respond to the materials?**

**(Disinterested, interested, enthusiastic, with resistance)**

After an explanation from the therapist and a clear and strict setting of rules, the client calms down and is able to work with the colored pencils. It starts to feel more comfortable for him. The other client motivates him to continue.

#### **What provokes the material at the client?**

The material seems to provoke, resistance but later comfort.

## Appendix B2 - Observation form BAP Method – The first four sessions – Client 3

### Session: 2

**Attitude therapist:** Supportive, structured

**Goal session:** Creating trust and comfort within the setting  
Exploring (new) thoughts and feelings

**Activity:** Drawing in the theme fantasy and ocean, with oil pastel and background of watercolors.

**Materials:** Structured and experimental materials

**Client:** 1 girl in group of two

---

#### **What does the client need from the therapist?**

**(Structure, freedom, support)**

The client shows during this session already more trust and seems comfortable with the setting. She is happy with the little group of two girls. An leading and structured attitude of the therapist is still needed. The client needs support while making her drawing and is not confident enough if what she is doing is 'good enough'.

#### **How does the client respond to the activity?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client is interested and enthusiastic and relates to the fantasy theme of drawing a mermaid. The theme seems to comfort her, she tells during creating the art work different stories and is able to communicate with the therapist and the other girl.

#### **What provokes the activity at the client?**

The activity provokes comfort but is also a bit more open, not as structured, as the activity within the previous session. Therefore the client needs more support during the process and help of the therapist and the other child.

#### **How does the client respond to the materials?**

**(Disinterested, interested, enthusiastic, with resistance)**

She is happy to use other materials and motivated to experiment but needs a good explanation of techniques of the therapist.

#### **What provokes the material at the client?**

The material seems to provoke motivation and enthusiasm.

## Appendix B2 - Observation form BAP Method – The first four sessions – Client 4

### Session: 2

**Attitude therapist:** Supportive, structured

**Goal session:** Creating trust and comfort within the setting  
Exploring (new) thoughts and feelings

**Activity:** Drawing in the theme 'ocean' with oil pastel and background of watercolors.

**Materials:** Structured and experimental materials

**Client:** 1 boy, individual

---

#### **What does the client need from the therapist?**

**(Structure, freedom, support)**

The client is during the session shy and is not able to communicate a lot. He is willing to use the offered material but needs a leading and structure from the therapist to start working. The therapist has the important role to comfort the client during the session. So he is able to open up and communicate within this new one-on-one setting.

#### **How does the client respond to the activity?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client shows interest in the activity but is anxious to start and seems to not know what he can do. When he feels comfortable in the setting he is able to create his own 'fantasy fishes' on the paper and shows originality and lots of color in the drawing.

#### **What provokes the activity at the client?**

The activity is challenging for the client, it is too open and the client needs therefore extra support of the therapist. It seems to provoke an uncomfortable feeling. When the client feels comfortable in the setting, he shows more confidence in drawing his own creations.

#### **How does the client respond to the materials?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client is motivated to use different materials and seems to like working with the oil pastel on a big paper. This paper, is on the other maybe too big for the client, it is hard to start and asks for a lot of input.

#### **What provokes the material at the client?**

The material seems to provoke motivation and enthusiasm but is also challenging.



## Appendix B2 - Observation form BAP Method – The first four sessions – Client 5

### **Session: 4**

**Attitude therapist:** Re-educative and insight giving

**Goal session:** Improving social interaction and interpersonal skills  
Strengthen self-confidence and self-actualization

**Activity:** Family portrait within sand painting .

**Materials:** Grounded and experimental

**Client:** 1 boy, group of 2

---

#### **What does the client need from the therapist?**

**(Structure, freedom, support)**

The client is during this session comfortable and he shows interest in the activity. A structured explanation of the activity and a step for step approach is still needed to make the new materials and technics clear for the client.

#### **How does the client respond to the activity?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client likes the idea of the activity and is willing to share information about his situation at home and his family members. It is difficult to make a choice of family members and to put them in the portrait, because the uncles and aunties seems also important.

#### **What provokes the activity at the client?**

The activity provokes that the client is more open about his family and tells the therapist different stories about his situation at home. Also subjects as family members who past away and the separation between people is an important topic.

#### **How does the client respond to the materials?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client is enthusiastic and interested to learn about his new technic of mixing sand with 'glue' and making a background. It seems secure to start first by making a sketch of colored pencils, as warming up and then start with the sand-mixing.

#### **What provokes the material at the client?**

The material seems to provoke strength and enthusiasm. The client can concentrate and ground during the process.

## Appendix B2 - Observation form BAP Method – The first four sessions – Client 6

### Session: 4

**Attitude therapist:** Re-educative and insight giving

**Goal session:** Improving social interaction and interpersonal skills  
Strengthen self-confidence and self-actualization

**Activity:** Painting of life size tree with primary colors, with hands

**Materials:** Grounded and experimental

**Client:** Girl, in group of 5

---

#### **What does the client need from the therapist?**

**(Structure, freedom, support)**

The client is during this session motivated and enthusiastic. She is overwhelmed by the size of the big paper she can paint on, this seems a bit unsafe and creates an over-enthusiastic behavior “I do not know where to start”. Structure seems important to concentrate on the art work.

#### **How does the client respond to the activity?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client is motivated to start and is overwhelmed by the big life size paper she can paint on. She tries to fiend her boundaries during the activity, by asking for more and more paint. She shows that she is actually not as confidence as she shows, by asking for continuous attention and approval.

#### **What provokes the activity at the client?**

The activity provokes challenge and is at the start overwhelming. When the clients start to understand the meaning of the activity she is able to concentrate on her own art work and is not distracted by the others. The physical movements and working with hands and fingers helps the client to focus on her artwork.

#### **How does the client respond to the materials?**

**(Disinterested, interested, enthusiastic, with resistance)**

The client is enthusiastic to use paint and work on big paper. Working with her hands is a bit out of her comfort zone but helps to her during the process to make contact with the material and thereby her artwork. It is hard to let go and to work imprecisely, with fingers – the client asks at the start of the activity a few times for a brush to create detailed elements.

#### **What provokes the material at the client?**

The materials are provoking focus but also struggles within the way of working. It is new and provokes for direct contact with the art work, what is also sometimes a bit overwhelming.

## Appendix B3 – Completed questionnaire BAP Method – Child 1

H H S

Questionnaire BAP Method During the 3th session Child GR4 - GR7  
(Art assignment: Drawing inside of own house)

Name of the child: [REDACTED]  
Sex: Female  
Age/grade: 10  
Group/individual: group  
Name of the therapist: [REDACTED]  
Date/term: 8/5/14 / term 2.

Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:

---

When I am at home

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

When I am sleeping

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ Make a line to other important places for the client... (playground, school, other family members, friends)

Important places for me

6. Where are you if you are not at home? (why important, what do you do there)

With who I play together

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happen when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

When I am at school

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

How I am feeling in my body

13. How do you feel in your body when you are not feeling well?  
(tired, problems to breath, little energy, fast heart beating, are you staying home)

~~CONFIDENTIAL~~

Questionnaire BAP Method During the 3th session Child GR4 - GR7  
Sheet for making notes (for the therapist)

When I am at home Mum, dad, sister (2), brother (3)  
important mum & dad.

Sometimes mum is at home, otherwise she works, brother is  
always at home because he is the first one at home  
dad works in Plumstead as a parking guard.  
I help my mum at home. Hobby = karate

When I am sleeping

at 10 pm or 9 pm in between, after supper.  
I want to sleep earlier  
No, I read a book and pray then I fall asleep.  
Sometimes nightmares, afterwards I drink water.

Important places for me

at HELP in Mürzenberg every day for extra classes till  
4-5 o'clock.

With who I play together

On Fridays no HELP, when my mum is cleaning I play with  
other children

mum & dad I trust and my friend Bernadette.

→ Sometimes my friends fight, then I go home. Don't like  
fighting.

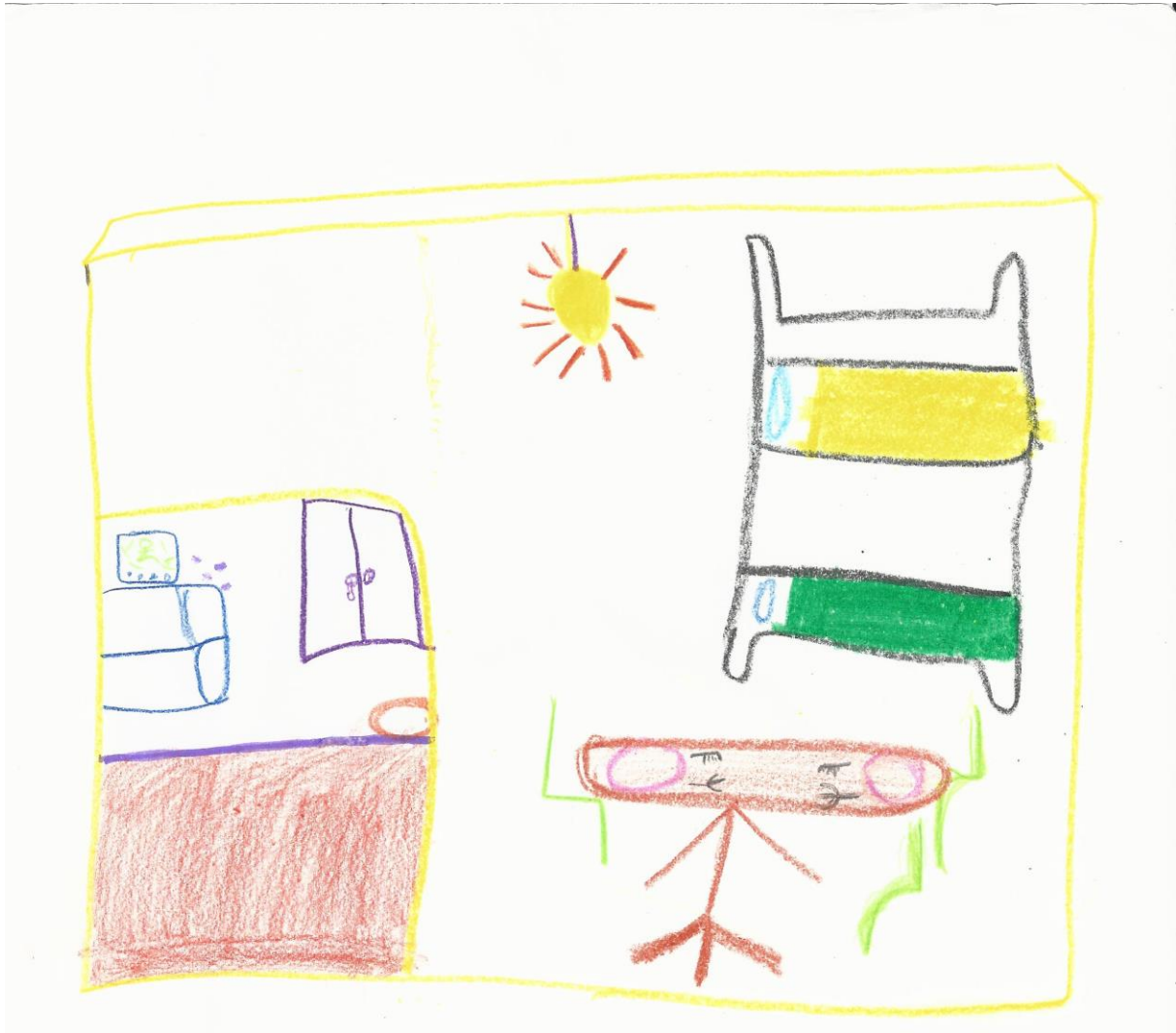
When I am at school

Good, I'm very happy at school, it feels like my home.

I like my teacher, some children make fun of me because I'm  
a foreigner. I was born in Mozambique. I was a baby when  
I came here.

If I don't understand something my teacher shouts at me when she is  
How I am feeling in my body in a bad mood, If she is in a good mood, she will  
explain.

→ exhausted, sore throat.





## Appendix B3 – Completed questionnaire BAP Method – Child 2

Questionnaire BAP Method During the 3th session Child GR4 - GR7

(Art assignment: Drawing inside of own house)

Name of the child: [REDACTED]

Sex: Female

Age/grade: 13 / 15

Group/individual: group

Name of the therapist: [REDACTED]

Date/term: 15 May 2014 / term 2

Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:

When I am at home

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

When I am sleeping

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ Make a line to other important places for the client... (playground, school, other family members, friends)

Important places for me

6. Where are you if you are not at home? (why important, what do you do there)

With who I play together

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happens when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

When I am at school

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

How I am feeling in my body

13. How do you feel in your body when you are not feeling well?  
(tired, problems to breath, little energy, fast heart beating, are you staying home)



Questionnaire BAP Method During the 3th session Child GR4 - GR7  
Sheet for making notes (for the therapist)

fixes car  
When I am at home mum, brother [redacted] baby sister. Stepdad is moving out end of the month. last month.  
my real father is back from Jo'burg and lives now in Seewinds.  
I have 3 sisters, 1 brother from my fathers side.  
mum is not working  
I have to wash my shirt, sweep the bedroom and making up my bed.  
When I am sleeping 8:30 PM go to bed → the lights and TV are going off  
no problems  
only <sup>when</sup> watch a scary movie I got a nightmare.

Important places for me

at my friends home, or at my mothers friends place → I play with their children. Playing

With who I play together

Slapping rope, netball, nickies  
Sometimes I fall. no fighting → when they are small I try to stop the fight, if they are older than me, I leave them.  
Important: [redacted] baby sister.  
trust: mother, Stepfather, father

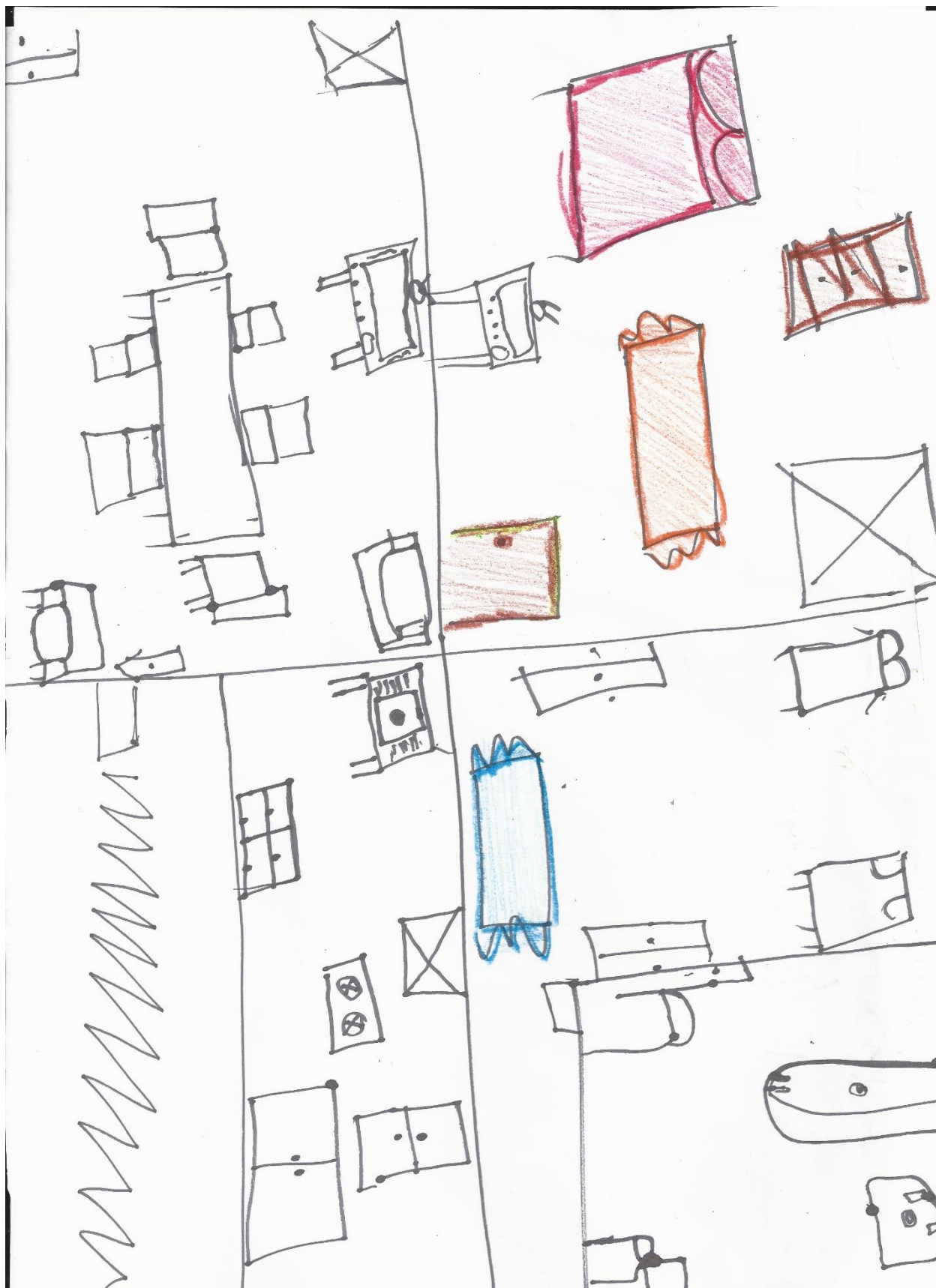
When I am at school

I feel save, protected, feel like learning, happy. Nice class, but the children like to talk. I like my teacher.  
I sing and chat with my friends from other classes (I know them from home) during break.  
Sometimes I forget things

It's not difficult to follow the lessons, only Afrikaans (at home we speak English)

How I am feeling in my body

I don't want to get out of bed.  
I can't do anything with my hands → getting stiff  
head is sore  
body is aching.  
When the weather is not nice, I get very quick a cold / ~~flu~~ flu.



## Appendix B3 – Completed questionnaire BAP Method – Child 3

### Questionnaire BAP Method During the 3th session Child GR4 - GR7

(Art assignment: Drawing inside of own house)

Name of the child: ~~\_\_\_\_\_~~

Sex: *male*

Age/grade: *13 / gr. 7*

Group/individual: *group*

Name of the therapist: ~~\_\_\_\_\_~~

Date/term: *28 May 2014 / term 2*

Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:

---

When I am at home

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

When I am sleeping

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ Make a line to other important places for the client... (playground, school, other family members, friends)

Important places for me

6. Where are you if you are not at home? (why important, what do you do there)

With who I play together

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happens when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

When I am at school

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

How I am feeling in my body

13. How do you feel in your body when you are not feeling well?  
(tired, problems to breath, little energy, fast heart beating, are you staying home)



age: 13 / 28 May 2014

Questionnaire BAP Method During the 3th session Child GR4 - GR7  
Sheet for making notes (for the therapist)

When I am at home

me, sister(7), uncle, mother <sup>traditional healer</sup> since  
father lives in Eastern Cape, saw him in Oct '13.  
mum at home, sister

Overcome  
(it's nice)

task: collect water, wash dishes, when mum is not at home I cook for my sister.

When I am sleeping at 10 pm, watch "Scandal, generation" tv.  
With the shooting I had problems to fall asleep. Usually not.  
nightmare, 'nagman' you can't talk or scream. → you must pray.  
2 times I had that, last time in January.

Important places for me

at my friends, playing soccer

With who I play together

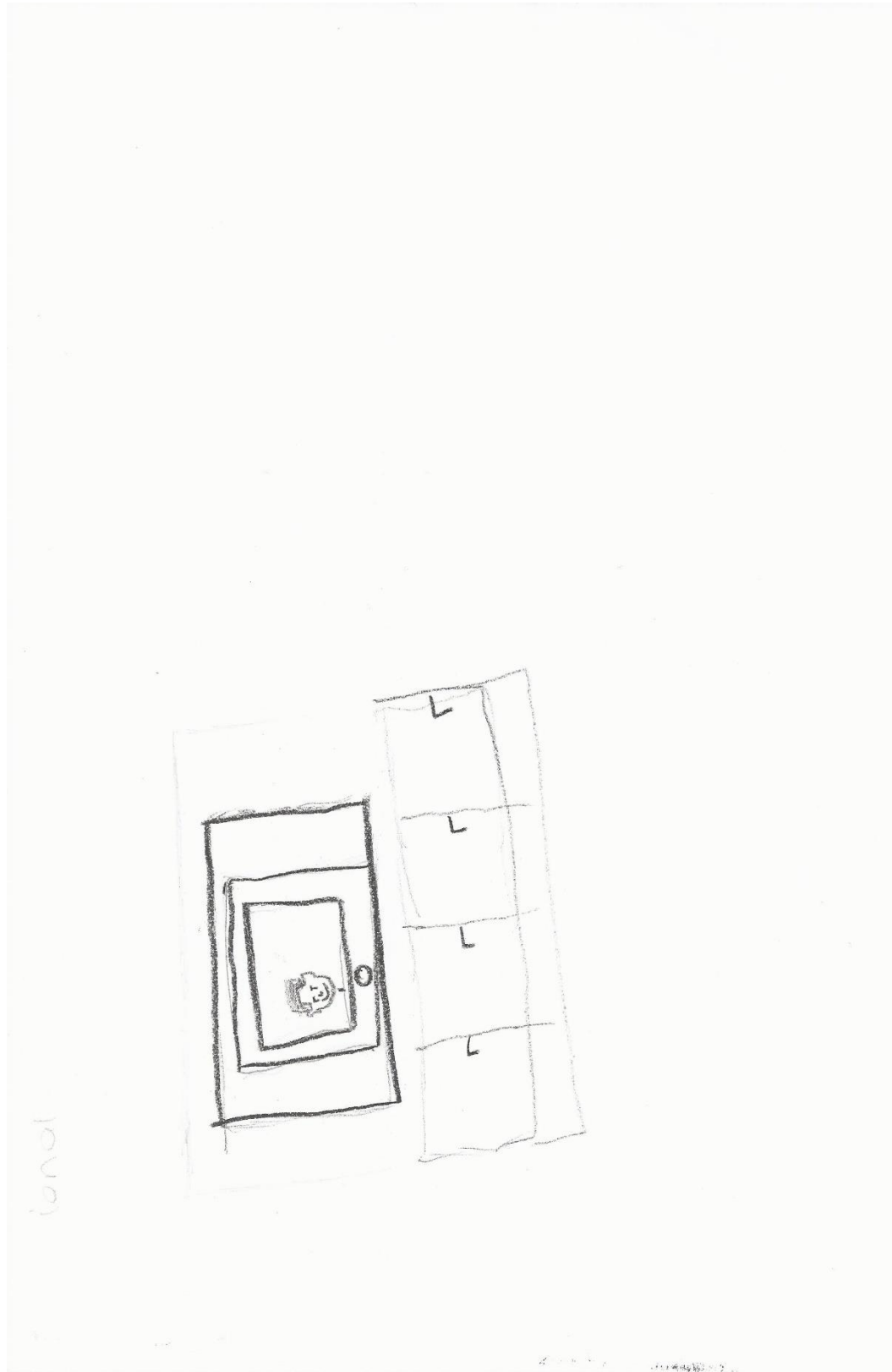
I have 20 friends, 2 soccer teams. → from my class:  
I have friends at school, Brendon, Ongi, Mzianga, Masegama.  
I don't feel lonely.  
I fight with sticks for fun, to practice.  
important: little sister, I trust a stone because that keeps  
Manditalei my secrets.

When I am at school

10. → Boring, ~~the~~ I don't like Afrikaans teacher I like my class as well
11. yes, often → it's irritating
12. Only English & Afrikaans are difficult

How I am feeling in my body

toothache.



## Appendix B3 – Completed questionnaire BAP Method – Child 4

### Questionnaire BAP Method During the 3th session Child GR4 - GR7

(Art assignment: Drawing inside of own house)

Name of the child: [REDACTED]

Sex: Female

Age/grade: 12 / 5

Group/individual: group

Name of the therapist: [REDACTED]

Date/term: 6 May 2014 / 2

Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:

#### When I am at home

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

#### When I am sleeping

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ Make a line to other important places for the client... (playground, school, other family members, friends)

#### Important places for me

6. Where are you if you are not at home? (why important, what do you do there)

#### With who I play together

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happens when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

#### When I am at school

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

#### How I am feeling in my body

13. How do you feel in your body when you are not feeling well?

(child's problems to breathe, little energy, fast heart, etc.)



Questionnaire BAP Method During the 3th session Child GR4 - GR7  
Sheet for making notes (for the therapist)

When I am at home Mum, dad, 3 sisters, 1 stepsister, 2 small brothers  
mum + dad at home, are not working. Dad get's money by renting out his  
taxi's. <sup>daddy's child.</sup> (~~the~~ creche)  
I do the dishes.  
play with friends, having fun with my family, after church we go to Spur.

When I am sleeping 22:00, share a room with 1 brother  
Sometimes my mum and sister hear me talking in my sleep. The  
next morning I can't remember the dream.

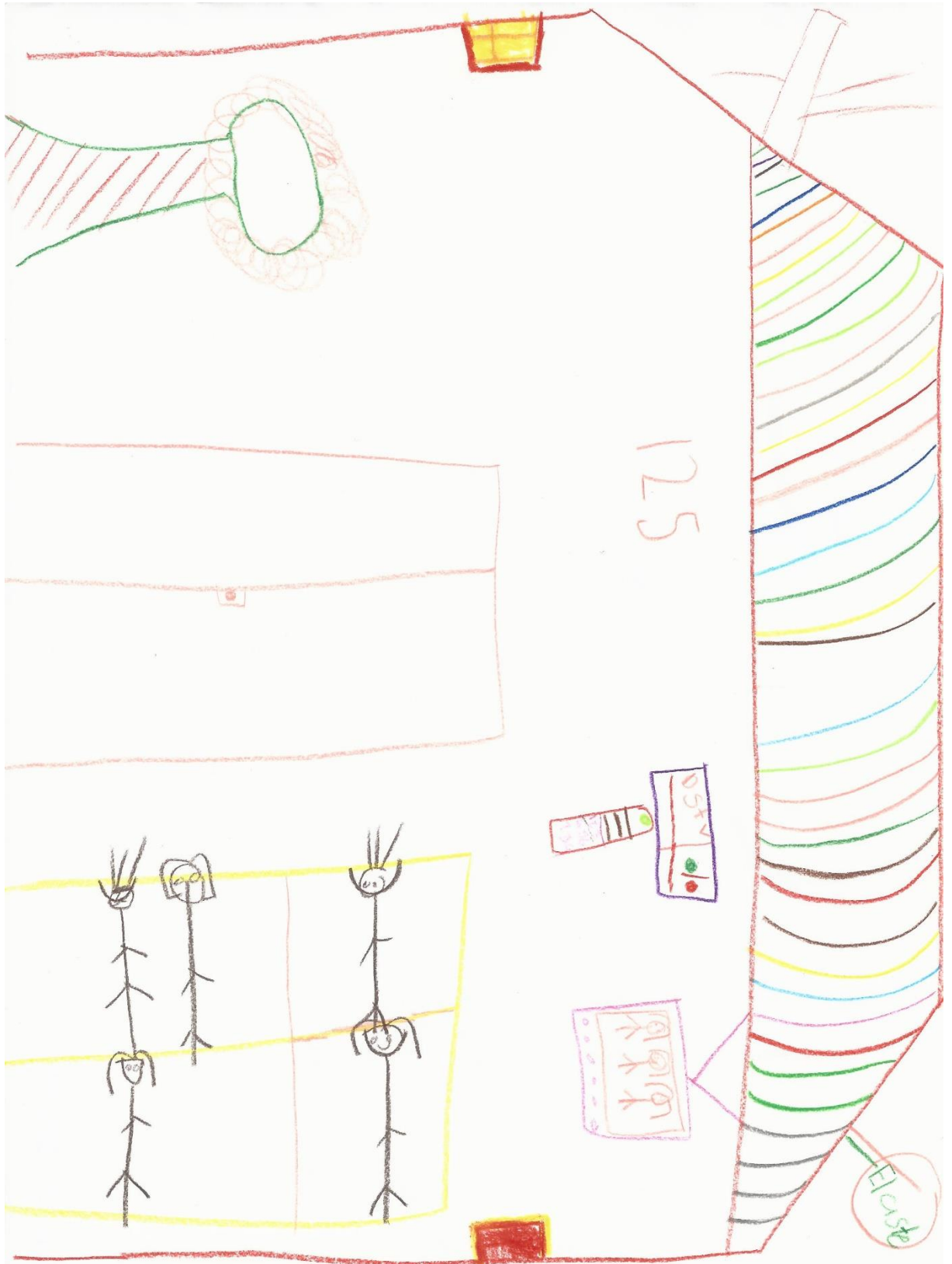
Important places for me I go to friends. We play at the house.  
We play hide and seek, "teacher teacher"

With who I play together

I feel lonely if my mum goes to her family in the Eastern  
Cape to care for her mother.

When I am at school

How I am feeling in my body



## Appendix B3 – Completed questionnaire BAP Method – Child 5

Questionnaire BAP Method during the session Child 5

(Art assignment: Drawing inside of own house)

Name of the child: [redacted]

Sex: Girl

Age/grade: 5b

Group/individual:

Name of the therapist: [redacted]

Date/term: 1

12 years old.

group therapy

Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:

When I am at home

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

When I am sleeping

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ Make a line to other important places for the client... (playground, school, other family members, friends)

Important places for me

6. Where are you if you are not at home? (why important, what do you do there)

With who I play together

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happens when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

When I am at school

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

How I am feeling in my body

13. How do you feel in your body when you are not feeling well? (tired, problems to breath, little energy, fast heart beating, are you staying home)

Questionnaire BAP Method During the 3th session Child GR4 - GR7  
Sheet for making notes (for the therapist)

When I am at home

Catching fishes.

→ Also uncle: works at the sea.  
Aunt, cousins - 3 cousins; 2 girls & one boy. Only one in grade 7. Aunt works; assistant teacher.  
(Doesn't like it when she sees her at school)

→ Eat something

When I am sleeping

Sleeps with aunt in big bed when, uncle is not there.

Scared to sleep alone (ghosts), no problems to fall asleep.

night thinks about the ghosts, no bad dreams.

Scary dreams about movies. Can go whenever you want.  
21:00 'o'clock, sometimes 20:00, or 22:00.

Important places for me

House or sometimes to mum (grassypark) <sup>lives</sup> with 3 sisters & husband. Liked it more in grassypark. Had a lot of friends, misses mum. Sometimes for a weekend.  
Has to ask aunt. Not at school → with friends play outside, walk around.

With who I play together

Play soccer with the boys. Cousins & sisters are best friends in grassy park. Trust sisters (5 sisters) 3 are older. Trust mum (the most). <sup>Aunts.</sup>

At home fights with other girl.

When I am at school

Don't like school. Boring at school. Understands everything. Comes every day. Forgets thing, everything.  
Not home work.

How I am feeling in my body

Tooth - Sometimes - get a tablet.





## Appendix B3 – Completed questionnaire BAP Method – Child 6

Questionnaire BAP Method During the 3rd session Child 6 (12/5)

Art assignment: Drawing inside of own house)

Name of the child: [redacted]

Sex: Female

Age/grade: 12 / 5

Group/individual: group

Name of the therapist: [redacted]

Date/term: 6 May 2014 / term 2

Assignment: The child draws the inside of his own house, during the art work the therapist asks the child the following questions based on the drawing:

When I am at home

1. Who lives in your house? (family structure, who is important, history)
2. What happens when you come home? (warm welcome, who is there, tasks at home, hobbies)

When I am sleeping

3. When do you go to bed? (late/early, do you feel tired)
4. Do you have problems to fall asleep? (why is that, worries, what do you do then)
5. Do you have nightmares? (what happens then, frightened, pee in bed)

→ Make a line to other important places for the client... (playground, school, other family members, friends)

Important places for me

5. Where are you if you are not at home? (why important, what do you do there)

With who I play together

7. Are you playing with others? (who are your friends, what do you play, do you feel lonely)
8. Do bad things happens when you play with others? (acting without thinking, fight, lose control)
9. Who is important for you and who do you trust? (care about, who do you trust and why)

When I am at school

10. How is school for you? (how is your class, the teacher, during the break)
11. Do you forget things? (when does this happen)
12. In class, what happens if you don't understand something? (ask or not, confused)

How I am feeling in my body

13. How do you feel in your body when you are not feeling well?  
(tired, problems to breath, little energy, fast heart beating, are you staying home)



Questionnaire BAP Method During the 3th session Child GR4 - GR7

Sheet for making notes (for the therapist)

When I am at home mum, dad, sister <sup>21</sup>, brother <sup>28</sup> <sup>has a baby</sup>, grandma, Melissa  
mum & dad are important.  
when I'm coming home my mum and sister are there. Dad is at  
work (=builder)  
Sweeping floor, making up the bed, dishes. I like to help.

When I am sleeping <sup>9 pm</sup> ~~8 pm~~, my parents send me to bed. I sleep at 9.  
no problems to fall a sleep  
Sometimes bad dream; I wake up and go wash my face.  
I dream about that my grandma will die. I have different  
dreams.

Important places for me Aunties house, in lavender hill, I go with my  
parents

With who I play together

After school, first I go home and play then in the park close  
to my house with my friends till 5 'o clock.  
we play at the play garden (park)

Sometimes other children at the park are rude and say we  
have to go play somewhere else.

g- Important → mum, dad. ~~I tell them~~

When I am at school

teacher is fine, class = fine, during break I play with classmates  
Sometimes I forget my jersey, pencil etc.

How I am feeling in my body Sometimes

stomach ache, I feel like to go home, but teacher doesn't let me  
go.

