司制意響が治療支流

邁進身心靈健康工作坊及研討會

Taiwan, Hong Kong and Singapore Creative Arts Therapy Exchange: Symposium and Workshops Towards Health on Body, Mind and Spirit



Workshops

1) 5 July 2015: Practitioner-based Reflections & Creative Engagement

The presenter provided forensic art therapy services at a large mental health facility in Northern California for 12 years and drew upon this extensive experience to discuss clinical case material and transferable skills. This hands-on interactive workshop explored professional art therapy in practice and it challenged participants to consider and articulate their own professional experiences.

Art therapy within forensic mental health is difficult at best given the inherent physical, psychological and emotional safety considerations wherein the reality of potential harm, vulnerability, trust and boundaries are at the forefront of the dynamic. Oftentimes, the tools of art therapy, the art supplies themselves, must be carefully monitored and tracked as these implements for creativity can be manipulated into implements of harm that jeopardize safety and compromise the therapeutic intent. The art therapist within this environment hones their sensitivity to the significance of establishing positive and respectful relationships and of refining their observation and interventions within the parameters of such a setting. Change in behaviour and attitude of the offender/client can and does happen through the therapeutic relationship and active engagement in arts activities.

This particular large-scale facility provides a range of rehabilitation to those adults mandated to treatment within such settings. The vast majority of the residents are involved in the legal system and all have a mental health diagnosis. Crimes range from murder to lewd and lascivious acts to theft to terrorist threats to name a few. I was assigned to the geriatric ward and worked as a member of a multidisciplinary team providing open art studio, individual and group art therapy, and treatment planning. A unique characteristic of this team, as considered within mental health practice, is their longstanding stamina and effective work together; staff turnover rates were extremely low and many worked as a team for 10+ years.

As the facility transitioned from a bio-psychosocial to a recovery model the treatment team embarked upon an ambitious project to continue to facilitate reality orientation and rehabilitation. The team targeted the development of community and to sustain this with the goal of transferring newly acquired skills into sustained social interaction and awareness.

Many of the treatment groups continued to aim at developing, enhancing and practicing communication, coping and problem solving skills and were offered through a blend of psycho-educational and experiential groups. Some of the groups had carry-over themes and discussion from one group to another and this seemed especially beneficial to the older population. Many of the art therapy groups and open art studio sessions began to address community and continued to build upon the awareness of self and how they, as an individual, impact others and their community. Staff creatively embedded music into the daily routine to indicate transitions, such as mealtimes, and to help stimulate physical movement from one area to another. Music was generational and familiar to the clients; many even sang along and seemed to enjoy themselves.

Technology was introduced into the therapeutic encounter to document contributions from group members, to connect those to the outside world through monitored website surfing exercises, and to create living legacy projects that were then shared with family and loved ones. A facility-wide courtyard garden competition served to augment the team's efforts and the ward won first place for three years in a row. This led to mural

and tile projects in the courtyard and then participation in international online research through the great honeybee/sunflower project. It was observed that honeybees were visiting our sunflowers and so we registered our garden, tracked the bees, and then entered the data online. Over the years, participation in scheduled treatment groups and projects significantly increased.

It was observed that individual clients became more in-tune and reality oriented, they learned and consistently applied coping skills and strategies, they developed interpersonal and social skills, and the amount of aggressive and assaultive behaviour was reduced. Many began to meaningfully relate to each other, and many became sensitive to, invested in and protective of their living environment. Those who tended to isolate became willing and active participants. This happened over a period of time with staff encouragement, motivation, patience and repetition. Routine, consistency, realistic expectations and timing are key to successful engagement and change.

Changes were also observed in staff in that there was improved morale and investment (this is significant considering the demanding and sometimes harsh realities of the setting and population), many had improved understanding and relations with clients, and many seemed to have improved job satisfaction from creatively contributing to the ward milieu.

Although challenging work, creative therapies can enhance the mental health and wellbeing of older adults within forensic settings. It is crucial that older adults be treated as human beings with dignity and respect. Older adults within a forensic mental health setting can develop sensitivity to others and become contributing members of the community through active engagement in their own individual treatment. The older adult can gain increased insight on how their behaviour impacts the lives of others.

Art therapy within forensic mental health is one clinical treatment modality that can be effectively implemented as part of one's overall rehabilitation. A sense of community can be developed within such a setting. In summary, art therapy can assist in the relief of symptoms through engagement in the arts. In forensic art therapy violent and socially disconnected criminals can become contributing members of the greater community regardless of mental health status, functioning, or diagnosis.

References

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