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Individuals with intellectual disabilities: Educators in expressive arts therapy

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Abstract

The purpose of this qualitative study was to describe students' experiences during their participation in Express Yourself, an expressive arts service-learning program that partners university students from several different programs with adults with intellectual disabilities. In reflective papers students reported that they were most challenged in meeting their partners, determining their partners' abilities and their own role, and assisting their partners in expressing themselves through art. We found that students need instruction in how to speak respectfully to individuals with intellectual disabilities and that students benefit from the time to reflect on their experiences. Our results support the conclusions of previous research on service learning that direct experience with individuals with disabilities can reduce stereotypes and facilitate understanding between individuals.

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Knowledge of social and cultural diversity is widely understood as fundamental to the preparation of mental health professionals. While numerous practitioners (for example, Baruth & Manning, 2007; Sue & Sue, 2003) advocate for and give guidance on incorporating multiculturalism into the coursework of mental health professionals, one type of diversity has received minimal attention—the needs of individuals and families of individuals with intellectual disabilities. An intellectual disability, also known as a developmental disability or mental retardation, involves significant impairment in intelligence and significant limitations in adaptive functioning which started before adulthood. Estimates of the prevalence of intellectual disabilities range from 1 to 3% (Sulkes, 2006) affecting about 1 in 10 families in the United States (United States Department of Health and Human Services, 2007). According to Special Olympics (2006), people with intellectual disabilities form the largest disability population on earth. Intellectual disabilities can occur in any family, cutting across racial, ethnic, educational, and economic boundaries.

Best practices for the treatment of individuals with intellectual disabilities usually include care by a multidisciplinary team as well as individual and family support services. Community inclusion, increased self-determination, and capacity for self-advocacy are usual goals for treatment. Middleton, Rollins, and Harley (1999) compare the historical and political context of the civil rights of persons with disabilities in the United States with the civil rights movement of African-Americans. They recommend that mental health educators explore alternative ways to develop training

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experiences so that professionals can be more responsive to clients with disabilities. Express Yourself is one such training program, and the purpose of this paper is to describe the experiences of students who are learning to work with individuals with intellectual disabilities through their participation in Express Yourself.

Program description

Express Yourself (EY) is a series of workshops for children and adults with intellectual disabilities sponsored through Appalachian State University's expressive arts therapy program, art department, and Center for the Visual Arts. Developed out of a passion to create art-based opportunities for their son with Down syndrome, parents Kate Brinko and Jon Kwiatkowski have coordinated this service-learning project for 3 years. The purpose of EY is to engage individuals with disabilities in the arts in one-on-one relationships to meet the following objectives: (a) help participants gain new perspectives, communicate thoughts and feelings, develop interpersonal skills, and enhance general well-being, (b) expose students to special populations, and (c) integrate individuals with disabilities into the community. Sessions are offered approximately once a month and average 10–20 university student participants and 10–20 community participants with intellectual disabilities per session.

Each of the sessions is led by one of the founders of the program, an expressive arts therapist or expressive arts therapist-in-training. Examples of session titles include: "Who are Yooouuu???" (creating a character, complete with a costume and/or a mask for Halloween); "Where is Your Heart?" (creating a multi-textured body silhouette), and "Creative Moooovement" (dance and creative movement).

A typical session begins with the university students arriving at the designated site. These students possess widely varying levels of training in facilitation and counseling skills. For 1 h the university students prepare the space, are introduced to the activity planned and their role in it, and are briefed on the range of possible behaviors they may encounter in working with individuals with intellectual disabilities. Then the community participants arrive with their caregivers, and all participants engage in informal introductions over refreshments. After approximately 15 min the leader convenes the session typically with a "go around" of introductions, and then states how the planned activity relates to daily life.

At this point, the university students and community participants pair themselves for the expressive arts activity which typically lasts 75 min and utilizes several arts modalities. At the end of the activity, the leader engages the whole group in processing the event. After the community participants leave, the university students stay an additional 30 min to debrief. Thus, the community members spend 2 h and the university students spend 3.5 h at each event.

Expressive arts therapy

Expressive arts therapy (EAT) is the practice of using multiple modalities of creative expression in an integrated fashion. Thus EAT uses imagery, storytelling, dance, music, drama, poetry, movement, dream work, and/or the visual arts in various combinations to improve mental health. As defined by the [Appalachian Expressive Arts Collective \(2003\)](#), expressive arts therapy:

... is about reclaiming our innate capacity as human beings for creative expression of our individual and collective human experience in artistic form. Expressive arts therapy is also about experiencing the natural capacity of creative expression and creative community for healing. (p. 3)

EAT is rooted in psychotherapy practice and thus is distinctly different from using arts and crafts to promote leisure wellness.

Numerous authors have advocated for creative/therapeutic outlets for individuals with disabilities (for example, see [Huang, 2002](#); [Lynch & Chosa, 1996](#); [Reynolds, 2002](#)). Different modalities of creative arts therapies are reported to be helpful for people with a variety of disabilities including music therapy ([Duffy & Fuller, 2000](#); [Hooper, 2002](#)), drama therapy ([Green & Reinhard, 1995](#); [McKenna & Haste, 1999](#)), art therapy ([Carrigan, 1993](#); [Dalke, 1984](#); [Marriott & White, 1991](#); [Osborne, 2003](#); [Saunders & Saunders, 2000](#); [Scanlon, 1993](#); [Tortoreto, 2004](#)), and intermodal therapies ([Barret & Clements, 1997](#); [Wikström, 2005](#)). [Reynolds \(2002\)](#) claims that various modalities can impact individuals with disabilities by facilitating communication, especially of emotions. Thus arts modalities "make use of non-verbal channels of expression, and therefore, may help to convey personal perspectives even where the client does not have effective use of speech (p. 64)". [Henderson and Gladding \(1998\)](#) advocate for including creative arts in counseling as a way to evoke clients' strengths and abilities and provide opportunities to connect diverse groups of people.

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