



## Arts therapies for young offenders in secure care—A practice-based research

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### ABSTRACT

This article describes the results of the first phase of a research project to develop, implement, evaluate, and improve arts therapies interventions for young offenders in secure care. By means of a naturalistic/constructivistic research methodology in combination with grounded therapy methodology, practice-based evidence has been generated. Core problems of young offenders that are connected to delinquency have been described and arts therapies interventions have been developed that can be used to change these core problems. Core problems are problems with self-image, with expressing and discharging emotions, the inability to resolve interpersonal problems and finally, negative cognitions. In co-creation with practitioners, interventions have been developed for drama therapy, music therapy, art therapy and dance-movement therapy. A treatment theory has been developed that explains the working of arts therapies by means of the first author's theory of analogy. This theory explains arts therapies by means of the equality between forms of expression in art and the core self consciousness as described by Damasio and the vitality affects within the core self as described by Stern.

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### Literature review

#### *Characteristics of young offenders in secure care*

In her dissertation, Boendermaker (1999) notes that the problems of young offenders in secure care are often multiple (oppositional defiant disorder, conduct disorder, antisocial personality disorder, and attention-deficit/hyperactivity disorder). Almost all youngsters have severe problems in their contact with parents at home, at school, and elsewhere. Boendermaker gives the following figures for youngsters in the Netherlands: behavior problems (99%), oppositional behavior (86%), delinquent behavior (83%), disturbed social and emotional bonding, combined with severe mood fluctuations (73%), addiction (68%), and hyperactivity (35%).

The young people concerned come from an unstable family situation and often have a long history of fragmented schooling and interventions by the social services. Research from different countries shows that in many cases traumatic events at home are the basis of delinquent behavior. In the United States, 90% of adult male delinquents have been the victim of incidental or continuing trauma (McMackin, Leisen, Sattler, Krinsley, & Riggs, 2002). Research with young offenders shows that they are often the vic-

tim of violence or sexual abuse (Wood, Foy, Layne, Pynoos, & James, 2002).

Arts therapies are used with young people who have been committed by a juvenile court to an institution. Arts therapies are also used with young people who have serious educational or maturation problems that impede their development into adulthood and who require a secure setting so as to prevent their absconding from care or being removed by others.

#### *Assessment*

The SAVRY (Structured Assessment of Violence Risk in Youth) has been developed to assess the chance of recidivism (Duits, van Casteren, van den Brink, & Dorelijers, 2005; Lodewijks, 2008; Lodewijks, Doreleijers, De Ruiter, & de Wit-Grouls, 2003). The SAVRY contains static risk factors that cannot be changed (such as previous number of crimes) and dynamic risk factors that can be changed. Dynamic factors can be contextual (such as the neighborhood of residence) or individual (personal characteristics). In the pilot research study (Smeijsters, van den Braak, Helmich, Reumers, & van der Wekken, 2009), arts therapists agreed that they should focus on several individual dynamic factors as described in the SAVRY, such as experience of stress and low coping capabilities, difficulty in regulating anger, impulsivity and risky behavior, disturbed contact with peers, lack of empathy, negative thoughts about self and others, and lack of attention.

Besides risk factors, the SAVRY also describes protective factors such as involvement (working together), exploring behavioral

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alternatives, emotional bonding, a positive relationship with intervention and authority, and, last but not least, a flexible personality (self-esteem, being able to adjust to the environment, finding good solutions, being able to respond to others, self-calming). The pilot research showed that arts therapies can be very helpful in strengthening these protective factors.

#### *Treatment goals*

Beginning in 2010, all institutions for young offenders in the Netherlands have used the YOUTURN method as a basic treatment. YOUTURN is a combination of the (social) competence model (Palmer & Hollin, 1999) and the cognitive-behavior method called EQUIP (Gibbs, Potter, & Goldstein, 1995). The (social) competence model seeks to improve the capability to fulfill developmental tasks by reinforcing adequate behavior. EQUIP focuses on the cognitive interpretation of information and the resulting choice of behavior.

There is criticism that focusing only on changing criminal behavior is not successful if self-esteem is not addressed. An improved self-esteem increases learning ability, empowerment, and the competence to change life (IPPR, 2003; OJJDP, 1998). The goal of YOUTURN is a mix of improving self-esteem, regulating anger, and developing social and responsible behavior.

#### *Treatment goals of arts therapies*

Research in forensic psychiatry (Smeijsters & Cleven, 2006) had shown that in their actual clinical treatment, arts therapists do not focus on the DSM-IV disturbances as such, but instead on so-called “problem areas.” Problem areas are problematic feelings, behaviors, and cognitions that are linked to disturbances on the one hand and offensive behaviors on the other. Examples of problem areas are the lack of emotional expression and empathy, high emotional tension, impulsivity, lack of interpersonal boundaries, and destructive aggression.

In the pilot research on young offenders (Smeijsters et al., 2009), it became clear that in their work, arts therapists focus on problematic feelings, behaviors, and cognitions. These were called “core problems” (which in essence are equal to “problem areas”). By means of qualitative research with the arts therapists, these problems/areas were explored until consensus was reached (to conform with grounded theory). Core problems are closely linked to the dynamic individual risk factors of young offenders.

Different from EQUIP, the arts therapies focus strongly not on cognitive interpretations but on noncognitive emotional and behavioral patterns that are embodied. This explains why during the past decade the arts therapies have become affiliated with the third generation of cognitive-behavior therapies, such as schema-focused therapy (Young, Klosko, & Weishaar, 2003), dialectical therapy (Linehan, 1993), and mentalization (Bateman & Fonagy, 2004). Psychiatrists, psychotherapists, and arts therapists working with these therapies agree that the arts therapies are needed as an important supplement to EQUIP and YOUTURN (Bernstein, Arntz, & de Vos, 2007; Smeijsters, 2007). However, research was needed to precisely describe this contribution.

#### *Effects of arts therapies*

The systematic review of research studies shows that effects of the arts therapies are often expressed in terms of reduced aggression, anger, tension, stress, and cognitive distortion and of improvements in impulse control, emotional expression, coping skills, compliance with rules, and social skills. A lot of the research involves qualitative studies of a restricted number of participants. Research designs and case studies focusing specifically on arts therapies for young offenders with disturbances are summarized here.

The findings are categorized along with the core problems that have been identified.

#### *Drama therapy*

For drama therapy, one meta-analysis and many case studies are available (Haen & Brannon, 2002; Hanna & Hunt, 1999; Kipper & Ritchie, 2003; Trower, 1978). These show that there are no research findings available on self-image, interaction, and cognition. Case studies show the importance of drama therapy in working with anger and violent impulses. The meta-analysis shows a large effect size for “Role reversal” (ES = 0.93) and “Doubling” (ES = 1.29).

#### *Music therapy*

Effects of music therapy have been analyzed by one meta-analysis (Gold, Voracek, & Wigram, 2004), two mixed designs (quantitative and qualitative; Gardstrom, 1999; Tyson, 2002), one pre-test–post-test design (DeCarlo & Hockman, 2003), and one qualitative study (Baker & Homan, 2007). In the qualitative research, youngsters report that rap music lessons increase their self-esteem and pride, friendships, and respect for others; organizing capabilities; reflection; and ability to work on a product. Questionnaires for self-evaluation show that youngsters use rap music as a tool to decrease emotional and physical outbursts of anger and hostility. Compared to psycho-education and group therapy, rap therapy leads to significant positive differences in relaxation, arousal, joy, regulation of anger, control of impulsivity, avoidance of delinquent behavior, and ethical thinking. Rap prevents offender behavior, increases social relations, and improves the relationship with daily life and the ability to take on decision-making.

The meta-analysis shows a small effect size on self-image (ES = 0.46), a small negative effect size for social capabilities (ES = -0.17), a large effect size for behavioral problems (ES = 0.96) and combined problems (ES = 0.82), and a medium effect size for developmental problems (ES = 0.76).

#### *Art therapy*

For art therapy, two research designs with case studies (Baillie, 1998; Bennink, Gussak, & Skowran, 2003) and one mixed design (quantitative and qualitative; Persons, 2009) are available. No research data were found for self-image. Case studies show results for emotions such as access, expression, catharsis, regulation, sublimation, and verbal access. Boys report that art therapy decreases their anger, depression, and anxiety. They report also that art therapy helps to build up positive relationships with others and that they learn to be tolerant and to accept others. Concerning cognition, they are convinced that art therapy structures their chaotic impressions and makes verbal and cognitive processing and the control of behavior possible. Also, self-injury and being in trouble seem to decrease.

#### *Dance-movement therapy*

Dance-movement therapy offers one meta-analysis that contains 14 studies with a control group (Ritter & Graff Low, 1996). There is a small effect size on self-image (ES = 0.27). There is a medium effect size on anxiety (ES = 0.70). There are no results available for interaction and cognition. The overall effect size for psychic disturbances (ES = 0.37) and developmental delay (ES = 0.43) is small.

#### *All arts therapies*

For all arts therapies together, there are results available for one qualitative multiple case studies research (Smeijsters, 2007). Clients reported experienced effects such as showing their vulnerable side, expressing anger, physical catharsis, exploring levels of tension, expressing different levels of tension, being aware of their

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