

INTEGRATING ART THERAPY IN SCHOOLS: A SYSTEMATIC LITERATURE REVIEW

GAL ABRAMOVSKI^{1,2}, MEY TAL FOGEL SIMHONY^{1*}

ABSTRACT. Art therapy is a method of treatment that involves the mental world of human beings. The purpose of this therapy is to improve the patient's emotional and physical functioning and condition. Art therapy is utilized for emotional and mental problems and as a diagnostic tool. This therapeutic technique is currently common in a wide variety of settings in varied therapeutic and rehabilitative settings such as: educational settings, hospitals and mental health centres. With regard to interventions implemented within schools, the significance and comprehension of art therapy is lacking. The purpose of this study is to identify the variety of interventions that exist in the literature on integration of art therapy in schools. Furthermore, this article will present the methods of evaluation, the results, as well as factors that influence the existence of this intervention. The results of the systematic review might be useful for continuing and expanding the integration of art therapy within schools.

Keywords: *Art therapy, adolescents, children, school children, learning disabilities, emotional and behavioural problems.*

1. Introduction

Art therapy began to appear in the early 1940s. Art therapy is utilized for emotional mental problems and as a diagnostic tool. Art therapy is a method of treatment that involves the mental world of

¹ *Doctoral School Psychology, Department of Psychology and Education, Alexandru Ioan Cuza University, Romania*

² *Lecturer at the Academic College of Society and the Arts, Natanya, Israel*

**Corresponding author: E-mail: meytalgs@gmail.com*

human beings and has a double purpose: First of all, there is direct implementation of the expressive tool as a healing tool. There is also, indirect implementation in the form of psychotherapy, where the purpose of the therapy is to improve the patient's emotional and physical functioning and condition (McNiff, 1992). This therapeutic technique is currently common in a wide variety of educational settings from early childhood through childhood to adolescence, and is applied in medical and mental health centres (Pinchover, 1998; Malchiodi, 2012; Snir & Regev, 2018). Therapeutic interaction normally takes place in a treatment room, accompanied by the therapist's observation of the creative process. The therapy utilizes and enlists the language of art in order to form insight, personal progress and growth (Case & Dalley, 2014). Expression through art is a tool in order to connect the patient's inner experience with the external world and constitutes a way of communicating feelings and sensations that the person finds hard to express in words (Amir & Or, 2005; Case & Dalley, 2014). For this reason, art therapy is recommended for various populations, mainly for those who find it difficult to give voice to their feelings, such as: the elderly and people with physical handicaps, mental, language and communication difficulties, as well as people who find verbal therapy hard. Nevertheless, art therapy is also recommended for those who have good and clear verbal skills, as it is a word-circumventing process through which many insights can be reached, even among those with excellent verbal skills (Rubin, 2016). Children and teens with various academic and emotional difficulties experience their world as one which lacks order and organization, such that any encounter or conflict can be experienced by them at very high intensities. As a result, their ability to express their experiences in words often encounters difficulties. Art therapy utilizes additional communication and visual channels that can help children express their feelings and troubles (Safran, 2002). A study on the use of art therapy with school children who have learning disabilities found that the participants reported a rise in their overall functioning. Art therapy had clearly helped the children explore their feelings and become capable of identifying their problems and difficulties. Furthermore, the ability to share with the therapist had deepened their awareness and self-insight (Frielich & Schechtman, 2010). Art therapy at school gives the child tools to connect to his creative side and to express experiences and difficulties

differently, in a way not possible with any other therapeutic process (Isis, Bush, Siegel, & Ventura, 2010). The integration of art therapy within schools facilitates the coping of school children with a wide range of difficulties. The therapeutic interventions provide a response to emotional and academic needs and aim for support, rehabilitation and hope by means of the creative tools (Nelson, 2010). Educational systems around the world have identified the significance and benefits of integrating art therapy in schools and have begun to use this therapy as an additional source of therapeutic support for children and teens (Cortina & Fazel, 2015; Snir & Regev, 2018).

2. Problem Statement

Art therapy has been utilized in diverse therapeutic and rehabilitative settings such as hospitals, mental health centres as well as preschools and schools. In everything related to interventions that take place within schools, the significance and comprehension of art therapy is lacking. The purpose of this study is to identify the variety of interventions that exist in the literature concerning the integration of art therapy in schools. Moreover, this study will also present the methods of evaluation, the results and factors that influence the existence of this intervention.

3. Research Questions

A review of four major papers on art therapy in schools (Cortina & Fazel, 2015; Isis et al., 2010; Laffier, 2016; Nelson, 2010) identified four main research questions:

1. For which types of populations and for which types of difficulties was art therapy in the school suggested?
2. What are the purposes of art therapy in schools?
3. How was the effectiveness of integrating art therapy in schools measured? And what were the results of the said integration?
4. Who are the role partners and what was their involvement in integrating art therapy in schools?

4. Study Aim

The purpose of the study is to identify the goals, aims, and challenges of integrating art therapy programs in schools, as portrayed in the research literature. Moreover, the study will present the tools, evaluation methods, and results of integrating art therapy, as well as the systemic attitude of role partners to art therapy.

5. Research Methods

In designing and reporting stages of the present systematic analysis of the literature, Uman's (2011) procedural guidelines were followed. In answering the research questions, the systemic literature review method was implemented. This method was chosen since it summarizes empirical studies on particular topics, offering conclusions on the actual scientific knowledge base and will also reveal unresolved aspects which need further investigation (Cooper, 1998).

In order to answer the research goals, the method used in this paper was the systematic literature review. The literature search included the following databases: Proquest - Educational database, ERIC, APA PsycNet and EBSCO - Academic Search Premier. The literature search was based on the following keywords and combinations: Art therapy, adolescents, children, school children, learning disabilities, emotional and behavioural problems.

Based on a search of each of the keywords separately, two thousand articles were found. The combination of all the key words together revealed hundreds of articles, which were filtered according to the following inclusion criteria:

- Studies published in English;
- Studies published between 2008 and 2018 in peer reviewed journals;
- Studies allowing full text access.
- Studies on art therapy within schools.

As a result of the keyword search, 45 studies were initially identified in the database. After applying the inclusion criteria, 37 studies were excluded. Two studies were removed due to duplication. Five articles were excluded (one article is on art therapy with students who have learning disabilities but the therapy does not take place within the school; four articles are on emotional therapeutic interventions in schools that are not art therapy). Ultimately, 4 studies were included in this review:

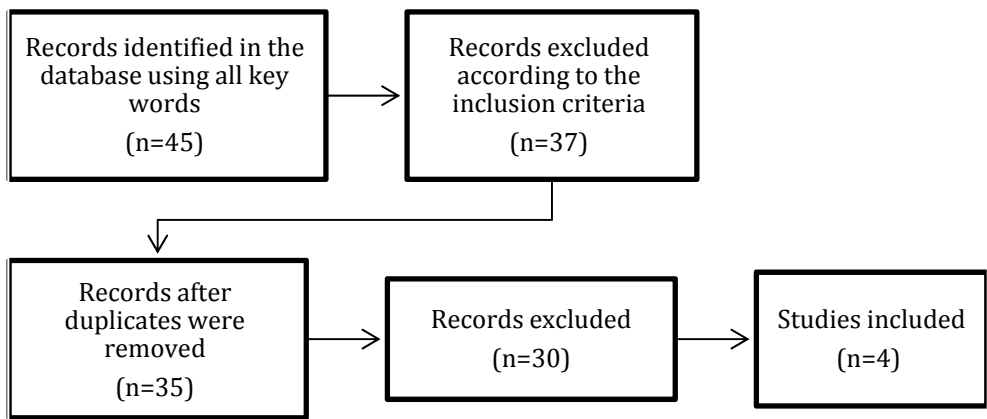


Figure 1. Flowchart for the selection process of studies referring to integrating art therapy in schools.

6. Findings

The studies reviewed are related to school children both in the mainstream educational system and in special education classes. With regard to the children's ages, one article referred to therapeutic interventions with children in primary school (Laffier, 2016); one article presented a wide review of art therapy with adolescents in high school

(Isis et al., 2010); and two articles reviewed art therapy interventions in an age range from primary school, through junior high, to high school (Cortina & Fazel, 2015; Nelson, 2010). With regard to the duration of intervention, three articles review art therapy interventions at school over many years with diverse populations (Cortina & Fazel, 2015; Isis et al., 2010; Nelson, 2010) and one article presents focused interventions regarding their time (several weeks) and population (Laffier, 2016).

Research question 1: For which populations and which types of difficulties was art therapy in the school offered?

The four studies included in the systematic review, portray art therapy interventions with school children at school. The interventions portrayed took place in the following countries: US, UK and Canada. The complete list of the populations that received art therapy and the difficulties handled by the children is presented in Table 1.

Table 1.

The population and the children's difficulties

The population and the children's types of difficulties
<ul style="list-style-type: none"> • School children with a low socioeconomic status, who have emotional difficulties and behavioural problems (Cortina & Fazel, 2015; Isis et al., 2010; Nelson, 2010). • Primary school pupils who were subjected to bullying or violence (Laffier, 2016). • School children at public schools who have emotional difficulties, learning difficulties and behavioural problems (Cortina & Fazel, 2015; Isis et al., 2010; Nelson, 2010). • School children at public schools who suffer from poverty, broken families, racial ethnic tensions, hunger, drug abuse, violence and street gangs (Cortina & Fazel, 2015; Isis et al., 2010; Nelson, 2010).

Research question 2: What are the goals of art therapy at schools?

The therapeutic goals in all four articles reviewed can be divided into two main aspects: the first aspect consists of the pupil's personal goals, aimed primarily at alleviating his/her emotional condition and personal well-being. The second aspect refers to pedagogical and social goals in the pupil's functioning within the school system. The list of treatment goals raised in the articles reviewed can be seen in Table 2.

Table 2.

The goals of art therapy in schools

The goals of art therapy in schools	
<i>Personal goals for school children</i>	<ul style="list-style-type: none"> • Personal empowerment, strengthening self-confidence and ability to cope with difficulties • Creating a safe place to build connections and trust • Safe space to express anger, tension and pressure • Self-expression • Life skills
<i>Pedagogic and social goals for school children from a systemic perspective</i>	<ul style="list-style-type: none"> • Social integration (in the classroom and in the community) • Reducing behaviour problems • Open to studying, with the goal of raising one's academic achievements • Exposing the student to use of creative tools and to intensify the learning experience

Research question 3: How was the effectiveness of integrating art therapy in schools measured? And, what were the results of integrating art therapy in schools?

The articles surveyed examined the results of art therapy through the following Aspects: the length of the intervention (several weeks and/or up to one year or more), measurement tools and the results of the therapy. In two articles dealing with time-focused interventions (up to 14 weeks), interviews and questionnaires administered before and after the intervention were the tools utilized (Cortina & Fazel, 2015; Laffier, 2016). In two articles that present a range of interventions held over several years, use was made of evaluation tools of art therapy, interviews, observations, documentation and viewing of art products and processes (Isis et al., 2010; Nelson, 2010). Some of the articles relate to humanistic therapy approaches that focus on the client's subjective experience, and some relate to dynamic therapy theories. The list of the diagnostic and evaluation tools, as well as the results of the studies surveyed, can be seen in Table 3 and Table 4.

Table 3.

Diagnostic and evaluation tools

Diagnostic and evaluation tools
<ul style="list-style-type: none"> • Use of questionnaires that measure strengths and difficulties (SMFQ, SDQ) The questionnaires were completed by the teachers and school children before and after the intervention (Angold, Costello, Pickles, & Winder, 1987; SDQ "Publications", 2014). • Use of an emotional cognitive evaluation tool named LECATA based on art therapy (Levick, 2009). • Conducting interviews with school children, parents and teachers before and after the art therapy intervention (Cortina & Fazel, 2015; Laffier, 2016; Nelson, 2010). • Documenting and observation of the sessions by the therapist (Cortina & Fazel, 2015; Isis et al., 2010; Laffier, 2016; Nelson, 2010). • The therapeutic program was based on humanistic approaches as well as on psychodynamic approaches to art therapy that combine spontaneous artwork with structured contents and also analysis and viewing of the artwork produced (Malchiodi, 2011; Rubin, 1984). • Use of the NNPE empowerment model as a research foundation (Zimmerman, 1995).

Table 4.

Results

Results
<ul style="list-style-type: none"> • The wide experimental intervention showed, based on reports by the school's teachers, headmasters and psychologists, that the integration of students with a variety of difficulties in art therapy programs helped them advance both emotionally and behaviorally (Cortina & Fazel, 2015; Isis et al., 2010; Laffier, 2016; Nelson, 2010). • The research results also showed a positive association between use of the artistic tool and emotional cognitive change, increasing self-efficacy, motivation, self-esteem and sense of control among students who participated in art therapy (Cortina & Fazel, 2015; Isis et al., 2010; Laffier, 2016; Nelson, 2010). • The students' reports showed that the therapeutic process and the artistic products generated following the sessions empowered and provided place for self-expression. The children also reported an improvement in positive feelings and also a boost in their mood (Cortina & Fazel, 2015; Isis et al., 2010; Laffier, 2016; Nelson, 2010). • In one study (Cortina & Fazel, 2015) the teachers reported a significant improvement in coping with the various difficulties – more positive social trends among school children. With regard to behaviour problems, there was a slight drop and no significant improvement.

Research question 4: Who are the role partners and their involvement in the integration of art therapy in schools?

Integration of therapy in the school stems from the multisystemic approach, which puts the child in the centre and enables support of the child from different aspects. Art therapists who are integrated in the school have several role partners – the homeroom, teacher, educational counsellor, psychologists, and school headmaster. All of these are dominant figures in the school's pedagogic system and constitute influential factors. In addition, the pupil's parents are significant role partners as they are the child's dominant source of support. It is notable

that at times the role partners are not sufficiently acquainted with the nature of the therapist's work, as the therapist often does not come from the educational discipline, but they acknowledge that the art therapist brings with him or her different and unique content world (Greenwald, 2012; Tortora, 2010). In art therapy within schools the therapist has several role partners who also affect the results of the therapy. All the articles emphasized the significance of role partners' involvement in the success of the therapy (Cortina & Fazel, 2015; Isis et al., 2010; Laffier, 2016; Nelson, 2010). The role partners and their involvement can be seen in Table 5.

Table 5.

Role partners and their involvement

Role partners	Their involvement
<ul style="list-style-type: none"> • Teachers • School counsellors • Psychologists • Headmasters • Parents 	<ul style="list-style-type: none"> • In most of the programs the teachers were the factor who referred a child for therapy and also played an active and reporting factor on how the child functioned. • In most of the integration programs, the teachers completed questionnaires/participated in interviews before and after the children's treatment, and thus contributed to understanding the treatment's efficacy. • A significant part of the intervention programs included multisystemic work with school teachers, counsellors, psychologists and headmasters. This was done in order to create cohesiveness and comprehension of the therapeutic language. The school staff participated in workshops which exposed them to the field of art therapy and that which is facilitated by use of the expressive tool. • Parent inclusion and involvement was an inseparable part of the programs. The parents took part in referrals and in following the results of the intervention.

7. Conclusions

This current article used the systematic review search technique to review the articles that exist in the literature regarding art therapy in schools, between 2008 -2018. The results of the review relate to populations from diverse backgrounds who have emotional, behavioral and academic difficulties. The articles review the existence of therapeutic programs implemented in primary schools, and all the way through to high schools. Furthermore, the literature review relates to two aspects of the goals of integrating art therapy in schools: the personal-emotional aspect and the systemic aspect. The studies reviewed for this paper present several measurement and evaluation tools that can be used to examine the effectiveness of integrating art therapy in schools. The results of the studies show a significant relationship between the therapeutic intervention provided to school children and improvements of emotional, behavioral and academic aspects, which raised the overall functioning of the children at school. Another major aspect evident from the literature review refers to the significance of multisystemic work with teachers, educational counselors, psychologists, headmasters and parents, as being capable of advancing the pupil's mental well-being.

The results of the article can help understand the significance and efficacy of integrating art therapy in schools. The results of the review indicate intervention programs focused on therapeutic goals for a defined time, as well as articles that review intervention programs spread over many years in a variety of populations and difficulties. The considerable effectiveness of art therapy, from primary school to high school, reflects the success and shows the benefits of integrating this therapy. In addition, the success of integrating art therapy in schools attests to an essential need to continue developing additional strategies and interventions that can assist children in school with personal, social and pedagogic development. Moreover, it is important to include all educational, pedagogic and therapeutic agencies in constructing intervention programs in order to create a specific fit for the population, type of difficulty and character of the school.

Notably, the small sample of studies found that after implementing inclusion criteria this might indicate a lack of evidence-based research on the use of art therapy programs in schools. The review shows no

uniform measurement and evaluation tools in which unique criteria for art therapy in schools can be generalized. Moreover, the small number of articles may be explained by the heterogeneity of the concept of art therapy. Some of the studies use terms such as creative art therapy, expressive and creative therapy, art psychotherapy. Another aspect uncovered by the review relates to art therapy as a marginal intervention among all interventions provided to school children in schools in recent years. The review shows that the integration of art therapy programs in schools is also motivated by the selection of resources and financial considerations.

In the articles reviewed, integration of art therapy in schools was provided as a service and support by therapists employed from a variety of settings and organizations external to the school. Educational systems around the world have identified the significance of integrating art therapy in schools and have begun to use art therapy as another source of support for children and teens. In Israel, the Ministry of Education has even included art therapists among its employees (Moriya, 2000; Snir & Regev, 2018). In recent decades, thousands of therapists have been integrated in the Israeli educational system, employed both directly and indirectly in a variety of educational settings (special education schools, regular schools with special education classrooms, municipal therapy centers, and hospital-based therapy centers). All these provide a response to students eligible for therapy under the Law of Special Education (1988). The nature of work with children and teens within educational settings in Israel is either individual or group therapy according to the pupil's difficulties as grasped by the system. One of the main goals of integrating art therapy in schools is to make it possible for school children to be more available for learning and for experiences of efficacy, self-confidence, success, self-acceptance and meaning in their future life as adults (Ofer-Yarm, 2014; Moriya, 2000; Ministry of Education, 2016; Nissimov-Nahum, 2013).

In summary, the multi-systemic approaches see the school as a legitimate and recommended place for conducting art therapy. These approaches simultaneously facilitate observation that relates to the pupil's needs in educational, pedagogic, functional, emotional and environmental aspects (Ofer-Yarom, 2014; Ottarsdottir, 2010).

Nevertheless, in order to understand the quality of the therapy's contribution within a school it is necessary and important to continue conducting and enhancing studies on integrating art therapy in schools in order to expand the comprehension, validity and reliability of the effect of art therapy in schools on children.

REFERENCES

- Amir, D., & Or, A. (Eds.) (2005). *Another language art therapies - Therapeutic stories*. Modan Publishing House Ltd. [Hebrew]
- Angold, A., Costello, E.J., Pickles, A., & Winder, F. (1987). *The development of a questionnaire for use in epidemiological studies of depression in children and adolescents*. London: Medical Research Council Child Psychiatry Unit.
- Case, C., & Dalley, T. (2014). *The handbook of art therapy*. New-York & London: Routledge.
- Cooper, H.M. (1998). *Synthesizing research: A guide for literature reviews* (Vol. 2). Sage.
- Cortina, M.A., & Fazel, M. (2015). The art room: An evaluation of a targeted school-based group intervention for students with emotional and behavioural difficulties. *The Arts in Psychotherapy, 42*, 35-40.
- Freilich, R., & Shechtman, Z. (2010). The contribution of art therapy to the social, emotional, and academic adjustment of children with learning disabilities. *The Arts in Psychotherapy, 37*(2), 97-105.
- Greenwald, N. (2012). Therapeutic approaches within educational frameworks. *Psychoactualiya – Quarterly of the Israel Psychologists' Association, 26-38*. [Hebrew]
http://www.psychology.org.il/sites/psycho/UserContent/files/psycho-actualia/psycho4_12.pdf
- Isis, P.D., Bush, J., Siegel, C.A., & Ventura, Y. (2010). Empowering students through creativity: Art therapy in Miami-Dade county public schools. *Art Therapy, 27*(2), 56-61.
- Laffier, J. (2016). Empowering bullying victims through artistic expression (L'autonomisation des victimes d'intimidation par l'expression artistique). *Canadian Art Therapy Association Journal, 29*(1), 12-20.
- Law of Special Education (1988). *Book of laws*, 1256. 114. [Hebrew]
- Levick, M.F. (2009). *The Levick emotional and cognitive art therapy assessment: A normative study*. Bloomington, IN: AuthorHouse.

- Malchiodi, C. (2011). *Handbook of art therapy*. New York, NY: Guilford Press.
- Malchiodi, C.A. (Ed.). (2012). *Art therapy and health care*. New York & London: Guilford Press.
- McNiff, S. (1992). *Art as medicine: Creating a therapy of the imagination*. Boston: Shambhala Publications.
- Ministry of Education (2016). *Guidelines for the work of educational personnel in the healthcare professions and of art therapists in the educational system*. Pedagogical Administration, Division A, Special Education. http://cms.education.gov.il/NR/rdonlyres/0945FB48-542C-49DD-A6CE-D2816B4DD80D/207449/resource_1625648987.pdf [Hebrew]
- Moriya, D. (2000). *Art therapy in schools*. Ramat Hasharon: Turbo. [Hebrew]
- Nelson, C.L. (2010). Meeting the needs of urban students: Creative arts therapy in Jersey City public schools. *Art Therapy*, 27(2), 62-68.
- Nissimov-Nahum, E. (2013). *Colours of soul and mind: Art therapy for children who behave aggressively*. Tel Aviv: Mofet Institute. [Hebrew]
- Ofer-Yarom, M. (2014). *Co-therapy by an educator and a therapist: Group art-therapy at special education school - From field work to a theoretic model*. (Ph.D. Thesis). Ramat-Gan, Israel: School of Education, Bar-Ilan University.
- Ottarsdottir, U. (2010). *Art therapy in education for children with specific learning difficulties who have experienced stress and/or trauma*. In V. Karkou (Ed.), *Arts and therapies in schools* (pp. 145-160). Jessica Kingsley.
- Pinchover, E. (1988). Art therapy for hospitalized children (inspired by Elizabeth Kuebler-Ross's approach). *Harefua*, 135(7-8). [Hebrew]
- Rubin, J.A. (1984). *The art of art therapy*. New York, NY: Brunner/Mazel.
- Rubin, J.A. (Ed.) (2016). *Approaches to art therapy: Theory and technique*. New-York and London: Routledge.
- Safran, D. (2002). *Art therapy and AD/HD: Diagnostic and therapeutic approaches*. London: Jessica Kingsley Publishers.
- SDQ Publications (2014, 17 February). Articles: Selected SDQ publications. <http://www.sdqinfo.com/py/sdqinfo/f0.py>
- Snir, S., & Regev, D. (Eds.) (2018). *When the creative arts therapies and Israeli educational system meet: Features and applications*. Haifa: The Emili Sagol Creative Arts Therapies Research Center, Haifa University. [Hebrew]
- Tortora, S. (2010). From the dance studio to the classroom - Translating the clinical dance movement psychotherapy experience into a school context. In V. Karkou (Ed.), *Arts and therapies in schools* (pp. 27-42). Jessica Kingsley.
- Uman, L.S. (2011). Systematic reviews and meta-analyses. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, 20(1), 57-59.
- Zimmerman, M.A. (1995). Psychological empowerment: Issues and illustrations. *American Journal of Community Psychology*, 23(5), 581-599.