Issue Nº 35 · Fall 2020



# PRACTICE NUTES

MINDFUL THERAPIES
WITH TEEN GIRLS WHO
HAVE EXPERIENCED
SEXUAL ABUSE

Movement and creative art therapies are designed for work with survivors of sexual abuse and other traumas. The effects of traumas become encoded in the neural circuits of the brain and nervous system. They are experienced as dysregulations of emotions, thoughts, behaviors, and physiology. Trauma, therefore, creates distressing mind-body connections. Movement and creative art therapies rewire neural circuits, have positive effects on mind-body connections, and foster self-regulation.

# Healing Through Movement and Creative Arts

Movement and creative art therapies are emerging as effective approaches to fostering recovery from trauma. These therapies engage the whole person, both mind and body. Engagement of the whole person is necessary because trauma becomes encoded in the neural pathways of the brain and the nervous system. Other treatments can reduce symptoms and increase coping, but they do not address the underlying problems, which are located in neural pathways.

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These therapies change the neural pathways in such ways that trauma symptoms lose their power and persons return to regulated states where they have capacities to manage emotions, thoughts, behaviors, and physiology and experience calmness, optimism, and confidence.

Movement and creative arts therapies include dance and movement therapies, art and music therapies, and talk psychotherapies, typically in group work with participants with the same gender and similar developmental level. These approaches engage emotions, imagination, thoughts, and the body. Participants in movement and creative arts therapy typically take part in individual and family therapy. Because participants may be on medications for anxieties associated with dysregulated behaviors, they consult with psychiatrists to monitor medications.

Movement and creative arts therapy groups have two facilitators, one certified in yoga, dance, or arts, or a combination, and another a licensed social worker or psychologist. There may be up to six participants in each group. It is important to have two professionals with a smaller group size, in order to appropriately support particapants. This allows the facilitators to balance the needs of participants and to support any disregulation that may occur:

- 1. A simple meal
- 2. Check in
- 3. Creative movement such as yoga, dance, and free movement
- 4. Art activities, such as pastels, collages, and clay
- 5. Reflection
- 6. Wrap up

The groups may be time-limited to 10 to 12 sessions or open-ended when participants enter and leave as is appropriate. The activities of each session are intended to bring participants into the present, to create a sense of safety where participants are able to retrieve traumatic memories and allow themselves to re-experience them without fear and dysregulations.

By engaging in these activities and then reflecting upon them, participants change their experiences of their trauma that in turn changes neural circuits. The emotional and social areas of the brain generate a sense of safety, confidence, and optimism. The thinking part of the brain activates capacities for attention, memory, and good judgment. Persons then are emotionally available, attentive to others, and able to learn and communicate well.



#### **Practice Considerations**

Information about trauma, its effects on mind-body connections, and recovery through movement and creative arts therapies are important to child welfare social workers for many reasons. Child welfare professionals are the center of a system of service providers for the children and families they serve. They can educate biological parents, foster parents, teachers and other school personnel, health care providers, and youth workers about the effects of trauma on child and adult functioning. By doing so, parents and professionals will be more equipped to understand and respond to the dysregulations that are characteristic of children and adults who have experienced trauma.

Teachers, parents, and other professionals are at-risk of being punitive toward these behaviors and therefore add to stress. Punitive responses can also cause breakdowns in relationships. Informed service providers and parents are likely to be more understanding with individuals with unattended traumas and may therefore form better working relationships with them. Working relationships are the foundation for effective service.

Child welfare professionals also make referrals for psychotherapy for the children and families in their caseloads. With information about the effectiveness of movement and creative arts therapies, they are more likely to seek out this form of therapy for clients.



# **Movement and Creative Therapy Organizations**

- » American Dance Therapy Association
- » National Coalition of Creative Arts Therapies Association
- » International Association of Yoga Therapists
- » International Expressive Arts Therapy Association

## **CASE EXAMPLE**

Jade's older brother Stan sexually abused her from the time she was 4 until she was 13, when she told a teacher. Jade had gotten her period, and she was afraid she would become pregnant. Jade didn't want her parents to know because she didn't want to let them down, and she was afraid of what would happen to her, to Stan, and the rest of her family. Her parents often told her how proud they were of her. She was a good student, loved singing and acting, and had close friends. Stan excelled at school and sports. He was president of his class and Homecoming King. He had recently been accepted at an Ivy League university.

Their parents adopted Jade and Stan from an orphanage in Lithuania. when Stan was 4 and Jade was 1.

Jade was alone with Stan through most of the evenings while their

parents were at work. The children did not detect warmth and affection between their parents. Their parents were kind, mildly interested, distracted and preoccupied.

Both children had worries that they didn't share. Jade was too young to have memories of her time in the orphanage, but she had anxiety issues that could have been neurobiological or could have been from substandard care in the orphanage. Stan had flashbacks, especially before he went to sleep at night, of someone with musty body odor and bad breath lying on top of him, moving and groaning. As he grew older, he realized this was sexual abuse, but he told no one. He had night terrors and walked in his sleep.

The parents were shocked and distraught when they found out about the sexual abuse. They did

exactly what the child protection social worker recommended, including spending more time with their children, enrolling both children in sex-specific treatment, and participation in couples, individual and family therapy. Jade also attended a creative arts group for girls who experienced child sexual abuse and other traumas.

This package of responses transformed each family member. Jade gradually felt safe through the creative arts components of movement, music, and expressive arts. She found that they brought her in touch with her hidden fears and anxieties. She gradually learned to accept the effects of her many traumas and to manage them well. Stan and her parents also grew to understand and accept themselves, and the family thrived.

### Summary

Movement and creative arts therapies are effective in the treatment of traumas and other adversities. They support the retrieval, re-experiencing, and transforming of traumatic memories, and they target the underlying problem, which is the encoding of trauma in the brain and other neural circuits throughout the body. Through these transformations, persons develop capacities for regulating emotions, thoughts, behaviors, and physiological responses that previously had activated themselves automatically.

Movement and creative arts therapies engage the bodies and the minds of participants and require the services of two facilitators. Treatment is typically done in groups of up to six participants who are same gender and at similar levels of development.

Familiarity with creative arts therapies is important for child welfare professionals because they are the hubs of a wheel of resources and services that children and families require when they have experienced trauma.

#### **Reflection Questions**

- Are you aware of mindful and creative art therapies in your community?
- 2. What are your thoughts about movement and creative arts therapies as part of case plans for the children and families you serve?
- 3. What challenges arise when you seek to provide services to parents and children with these issues?
- **4.** Under what circumstances would you consider referring children and families for movement and creative arts therapies?

## References and Resources

#### Videos

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Part 1: The Basics. youtube.com/watch?v=QoHYv9gjOaM&t=235s

Part 2: Program Components and principles. <a href="mailto:youtube.com/watch?v=da18VAinJ8Y&t=2s">youtube.com/watch?v=da18VAinJ8Y&t=2s</a>

Part 3: Mindful interventions. <a href="youtube.com/watch?v=ITKc-wyit8Y">youtube.com/watch?v=ITKc-wyit8Y</a>

#### **Books**

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King, J. L. (2016). Art therapy, trauma, and neuroscience: Theoretical and practical perspectives. New York: Routledge, Taylor & Francis.

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Suggested citation: Gilgun, Jane F. (2020). Mindful Therapies with Teen Girls Who Experienced Sexual Abuse. No. 35. Available at:

https://cascw.umn.edu/portfolio\_tags/practice-notes/

Editors: Korina Barry, Traci LaLiberte

Funding for this project: Practice Notes is published by the Center for Advanced Studies in Child Welfare (CASCW), School of Social Work, College of Education and Human Development, University of Minnesota. This issue was supported, in part, by grant #GRK129722 from Minnesota Department of Human Service, Children and Family Services Division. The opinions expressed are those of the authors and do not necessarily reflect the views of the Center, School, College, University or their funding source.



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