

## THE HEAL PROGRAM: USING CREATIVE THERAPIES TO SUPPORT THE MENTAL HEALTH OF NEWLY ARRIVED ADOLESCENT REFUGEES IN A SCHOOL SETTING, WHERE LIFE IS HAPPENING.

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### **ABSTRACT**

*The HEAL Program (Home of Expressive Arts in Learning) is a mental health service which implements multicultural best-practice in working towards improving resiliency, well-being and settlement for traumatised refugee adolescents. It is a unique, culturally responsive, early intervention program, situated permanently within Milpera State High School, targeting "at-risk" refugee young people using individual and group Music Therapy and Arts Psychotherapy. The creative therapies utilise drawing, singing, sculpting, song-writing, sandplay, and a variety of expressive modalities, to achieve therapeutic goals. This work aims to enhance understanding and allow exploration of past and present experience, and to offer a safe vehicle for emotional expression and for processing understanding about self knowledge, assisting settlement in a new culture and enhancing availability for learning. The successful combination of creative methods and the school setting allow young people of forced migration to access assistance where and when life is happening, in a way they appreciate.*

### **WHAT IS HEAL?**

HEAL is an evolutionary mental health service which offers early intervention using creative therapies to address the complex needs of refugee young people. Traumatic stress results both from the refugee journey and from the challenges of settling in a new and often very foreign culture. HEAL therapy takes place at Milpera, an English language secondary school. HEAL enhances availability for learning in those young people whose cognitive skills may be hindered by trauma symptoms. HEAL therapists follow the co-operative work ideas of Judith Herman (2007) with a focus on three main themes: restoring safety and control; allowing remembrance and mourning; and encouraging reconnection with ordinary life. Arts Psychotherapy and Music Therapy are used. Therapy can sometimes be difficult and challenging, however HEAL is a popular activity with participants, with negligible drop-out. The therapeutic alliance is strengthened via the use of creative methods and the accessibility of being at the school is important.

### **THE PARTICIPANTS**

The HEAL Program aims to assist "at-risk" refugee youth, and the group targeted are newly arrived students, from Africa, Afghanistan, Iraq; Burma and other countries which have experienced conflict. (HEAL also offers a fee-paying Outreach service to the refugee children of Brisbane primary schools). Of the newly arrived adolescents who come to HEAL, many have come from refugee camps, where personal violence was a part of daily life. Emotional, physical and sexual abuse is sometimes part of the refugee journey, as is the ensuing traumatic stress caused by past experience, but also exacerbated by the challenges of settlement.

Numbers of participants vary as does the school population, which is usually around 200 students. The school is a transition school; as numeracy and literacy in English are acquired,

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students exit to mainstream schools. Stays vary from two to eighteen months, but the average stay is about twelve months. In 2009, 127 individual young people were referred to HEAL; of those, 58 were initially referred for appearing to be sad or fearful; 28 were referred due to experiencing problems with peers, and 26 were seen because they displayed anger or poor impulse control at school. 210 students were seen in Music Therapy group work. Areas of interest which commonly arise in HEAL are the importance of safety and security; the differences in culturally acceptable approaches to conflict resolution; issues around self-control and emotional regulation; the importance of identity; and the value of our own strengths. Culture shock is also an important theme, acculturation being a difficult task.

(Recent work regarding brain plasticity suggests that neural networks which had their critical period of development in the original homeland are in plastic competition with the learning of new things in the new culture (Doidge, 2007).

As well as offering therapy to students, HEAL offers cross-cultural education to others, accepting student Psychologists, Social Workers, Art Psychotherapists, and Music Therapists on practicum, and offering workshops to nurses, teachers and others. HEAL therapists are currently working with QLD Transcultural Mental Health in delivering "BR ITA" resiliency work (Building Resiliency in Transcultural Australians), and with QLD University of Technology on a research project, running the "Tree of Life" narrative therapy program. HEAL also has contact with many agencies, for example: QPASTT (QLD Program of Assistance to Survivors of Torture and Trauma), Mercy Family Services, QLD Child Safety, and CHYMHS (Child Youth Mental Health Service).

### **DIRECT EXPERIENCE**

The HEAL Program is an innovative service because it is placed on the school campus, where the children already gather and feel comfortable. This precludes transport difficulties and reduces the stigma of visiting a mental health service. It also enables a unique form of assessment. Although much research has been written about using appropriate instruments and measures in assessing a multicultural population (eg: Briere & Spinazzola, 2005), where the mental health service is located in a school setting there is less reliance on forms and instruments, and more on direct observation and relating.

Assessment in HEAL has a phenomenologically based framework, using direct observation of lived experience. A great deal of life happens at school, and being there with these young people, observing emotional resilience, avoidance responses, affect regulation, interpersonal relatedness, and so on, offers rich data to therapists. For example, the therapist on-site may notice a particular child is often in the sick room at school, and may then inquire about somatoform symptoms; the therapist may hear of a child who is said to be experiencing difficulties with impulse control and socialisation, and can then observe his interactions with others in the playground; and so on. Importantly, the school setting also allows observations of a child's strengths. Another advantage of being on-site is that therapists can easily access class teachers and other student services staff, such as the Guidance Officer, school Nurse, and school Chaplain, who may share insight into client, on a regular basis.

### **OUTCOMES**

Qualitative methods are used to examine outcomes in HEAL. HEAL offers enduring outcomes to refugee young people. Anecdotally, teachers' feedback suggests student improvement in emotional, behavioural and academic fields. Students attend HEAL readily, and they express satisfaction with their progress. Often, years after attending HEAL, positive feedback is given to therapists. It is the voices of the young people which best explain the importance of the work done. Some of the actual words spoken by two past HEAL follow:

1. I was in Milpera 2007... We (would) talk and then we used these toys, just moved them around the sand to talk about how things were. I came to HEAL because I was not happy with home. I had arguments with my brothers and Mum sometime, because my younger brother wanted to be in charge. Too much fighting. Coming to HEAL helped me be happy because I felt more relaxed after I went there and nothing happened to me there. If there wasn't HEAL, lots of problems for me: fighting, angry, not happy. HEAL should happen in school to help students that have problems (Sudanese male, now sixteen years old)

2. I was at Milpera in 2006. I came to HEAL once a week, sometimes more, when I had trouble or I had bad things in school, sometimes I had some bad feelings at home, that's when I come back to HEAL so I can talk about it, and I can feel better. In HEAL I talked ..., draw, or I write about my feelings. I was talking about back home in my country when everything changed ... Coming to HEAL helps me a lot because when I first came to Australia I didn't know what to do. They were teaching me what I-could do ... and they helped me to talk about my feelings, and now I feel better ...HEAL was good for my life because I was going to kill myself and HEAL they said talk and they say come to hospital. I was in hospital one week and after that I didn't want to kill myself. So HEAL helped me a lot with that ... (Burundian male, now nineteen years old)

Colleagues also provided feedback, such as the following example:

*The HEAL program is a mental health service which provides an important response to the needs of young people at a most critical time during their first contact with schooling within the Australian context. The program implements multicultural best practice in terms of being uniquely sensitive to the needs of "at risk" youth using a range of therapeutic modalities including individual and group approaches to psychotherapy (and) music therapy... The HEAL program not only draws upon the most recent literature in the development of its methodologies but also reflects the adage that the person of the therapist is a significant ingredient in bringing about change.* (Associate Professor Robert Schweitzer, School of Psychology, OLD University of Technology August, 2010)

HEAL strengthens individuals' self-identity, offers creative caring to aid in processing trauma, and shares new ways of thinking about conflict resolution and relating to others, using art and music. This culturally responsive program is a successful example of best practice in a multicultural well-being service, and the author encourages others working with this client group to also consider working creatively within schools, where, for the adolescent, life is happening.

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