



*Onoclea sensibilis*

Sensitive fern, leaf with gold thread

KA, 2024

## Art Therapy in Schools: Art as Care for the Care Experienced Child

by Kathryn Allan

In this essay I explore the use of Art Therapy in schools in England. I will first define Art Therapy, precisising its broad scope, followed by a fleshing out of my chosen client group supported by relevant statistical information, e.g. data from the Department for Education (DfE). Drawing on relevant reading and research, I will then discuss how Art Therapy can support children and young people in schools, placing my discussion within Bowlby's theory of attachment. The reader should be left with an overview of the potentiality of Art Therapy to help the care experienced child survive and succeed in mainstream education where assimilating to the school environment conflicts with the impact of their adverse experience.

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The British Association of Art Therapists defines Art Therapy as:

an established form of psychological therapy delivered by trained art therapists/art psychotherapists. It's designed to help anyone by supporting their social, emotional and mental health needs. (BAAT, 2024)

Art Therapy, then, is a type of treatment relating to the human mind and to feelings. It is used to help people of any age feel better and to affect positive change. The *art* in Art Therapy is its use of visual and tactile media – the materials of making that can be seen and felt. It is a therapy of optics (pictures, images, sight) and haptics (the stuff of making, the three-dimensional image, touch), used in combination with talking and provided by Health and Care Professions Council-registered therapists. The qualified Art Therapist would be expected to come from a trained art background, with therapists working, as Case, Dalley and Reddick (2023, p.7) tell us, 'in public and voluntary sectors and increasingly in independent practice'.

*Of any age* is just that: a therapeutic offer that can support people at all life's stages, spanning challenge and experience from birth to death. For example, Art Therapy might be used to

support the traumatised mother of a premature baby, children in care suffering the effects of complex early life experience, someone who has suffered a bereavement, a person in prison, those who have experienced disaster and/or trauma, an aging older person, and a terminally ill patient preparing for death. Art Therapy might also be used to support those suffering mental and/or physical ill-health.

Working across ages and societies and across geographies and cultures, Art Therapy is a treatment that seeks to help by materially bringing forth into the therapeutic space a visualisation of the troublesome experience. Once made visible, the experience can be explored by client and therapist working in partnership (triangulation) with the image.

In discussing the different client groups with whom today's Art Therapist works, Case, Dalley and Reddick (*ibid.*, p.11) note, 'An important area of work for art therapists is working with children in schools and educational settings.' Data from the DfE (2023) tells us that in the academic year 2022/23 there were 24,442 schools and 9,073,832 pupils in England, of whom 23.8% were eligible for Free School Meals (a deprivation measure).<sup>1</sup> According to data from the House of Lords Library (2024), there were 83,840 looked-after children in England in March 2023, with reasons for a child being taken into local authority care comprising abuse or neglect (65%), family dysfunction (13%), absent parenting (9%), diminished parental capacity due to temporary family crisis (7%), child or parent disability or illness (5%), and low income or socially unacceptable behaviour (1%).

Being a care experienced child can have profound consequences. The NSPCC (2024) notes multiple impacts on children and young people: complex emotional and mental health needs as a result of earlier abuse, neglect and trauma; isolation and limited support networks due to family separation; an inability to form stable relationships reflecting the child's experience of short and unsuitable care placements; behaviour problems particularly related to forming secure relationships; missing children (attempts by the child to return to their family, running away due

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<sup>1</sup> The inclusion of the FSM statistic here is not to confuse deprivation and neglect nor to elide them. Rather it is to note, in broad terms, the financial inequality between pupils attending schools in England.

to unhappiness and boredom, absconding from a care placement by way of overcoming a lack of control in their lives); and poorer educational and mental and physical health outcomes when compared to children not in care. With these profound impacts in mind, the educational environment is a place of particular challenge. The school's physical environment and the groundhog nature of the school day present unrelenting opportunity for peer comparison and repetitive exposure to functional and loving families, the expectation to conform to institutional routine (to be controlled) and to develop positive peer relations, the constant academic demand and, not least, the presentation of (to the care experienced child) numerous potentially unsafe adults. Overwhelm and threat abound, daily.

Art Therapy has the potential to help the care experienced child in the school setting. First, it can provide a non-academic space within the school (akin to a non-clinical space within a hospital) in which the child can take physical and mental refuge from the school routine and intensity of the classroom: the opening of a valve on a pressure cooker is a useful analogy. In this space, the child can experience a degree of control – command and manipulation of art materials, within the boundaries set by the therapist, during the therapy session – countering the child's lack of control elsewhere in his life. Image-making provides a place for the child to make visible his experience of, for example, abuse, neglect and trauma – art as container and as symbol of *this is what happened to me* – which can, with the professional wondering and curiosity of the therapist, allow for exploration of that experience as the triangular relationship of artwork-therapist-client develops and further expressions of the child's experience surface. The Art Therapy session also gives the child opportunity to express through image his own wonderings around ideas of family (his absent family and his foster family), adults and peer relationships. More, the plastic and chromatic properties of materials – their ability to be messy, to be made and unmade, to be manipulated angrily but safely, to be employed for their softness or hardness, to be chosen for a particular hue – provide the means by which the child can make visual his experiences, illustrating his inner world in the presence of the trained therapist, and the means by which a child can begin to *represent* his feelings in place of acting them out, the acting out of feelings in

the school environment compounding the child's difficulties. The revelatory nature of Art Therapy – the literal revealing of feeling through image – in addition can be a helpful aid to piecing together wider safeguarding concerns involving the child and in multi-agency response.

In their review of the evidence-base for primary-school-based Art Therapy, Moula and McDonald (2021) noted a 30% post-Covid increase in children suffering domestic abuse and, in its light, a worrying decrease in such children coming to the attention of social services.

Where the school-attending abused or neglected child is brought to the attention of social services, schools are one of the vital agencies in providing support. More, in their frequent interactions with children, educators are particularly well-placed to piece together concerns around the unidentified at-risk child, and to action the appropriate referrals.

Art Therapy within schools is a growing resource. Moula and McDonald write, schools:

have been increasingly employing art therapists to support children express and understand their emotions, cope with stress and worries, as well as to develop self-awareness and self-esteem. (ibid.)

Whilst caution is warranted when interpreting the results from small sample sizes, the positive impact of Art Therapy in schools has been identified across a number of UK and international studies, such as in the 2019 study conducted by McDonald, Holttum and Drey where Art Therapy showed:

significant and medium effect changes in children's stress, conduct, hyperactivity, and prosocial behaviour, and a large effect on perceived impact of children's difficulties in their lives. (ibid.)

Although an emerging picture and sector-specific challenges must be noted (i.e. lack of school funding as a barrier to deployment), it seems an encouraging picture, with unique site-based potentials (noted is improved accessibility for the economically-disadvantaged child, the

neutrality of the school as therapy location being in contrast to the stigma of the mental health clinic, for example (ibid.)).

Attachment theory has influenced all kinds of therapies including Art Therapy. Briefly, it is the theory of the attachment system developed by the psychologist John Bowlby.

Secure and insecure attachments with a caregiver in infancy, he theorised, affect relationships and behaviour in one's life. Case, Dalley and Reddick (op. cit., p.208) note a role of the art therapist in supporting a child who has experienced an insecure or disorganised attachment (such as would have been experienced by a high proportion of care experienced children):

The art therapist can consider her counter transference to help understand aspects of the original relational environment that the client has experienced.

It can be seen how Art Therapy has the potential to aid the care experienced child in the school setting: to provide a place of refuge and release from the overwhelming and exhausting, and, to this specific client group, threatening school environment. The practising of Art Therapy within the safe and democratising space of the school, with the wider educational resource (including safeguarding policy and procedure) wrapped around the intervention, has the potential to provide I think – and in my experience – an unmissable opportunity to help our distressed young people. Let us look *with* them at their adverse experiences; let us value their wobbles, and in so doing perhaps help to slow the speed wobble in which their young lives have unfairly started.

I leave this essay here, with a deeper understanding of the potentiality of Art Therapy to provide a symbiosis of support for pupil, carer and school when wondering with image and object is, for all, a preferable alternative to action. I hope I leave my reader with this also.

It is dedicated to a child I taught who taught me.

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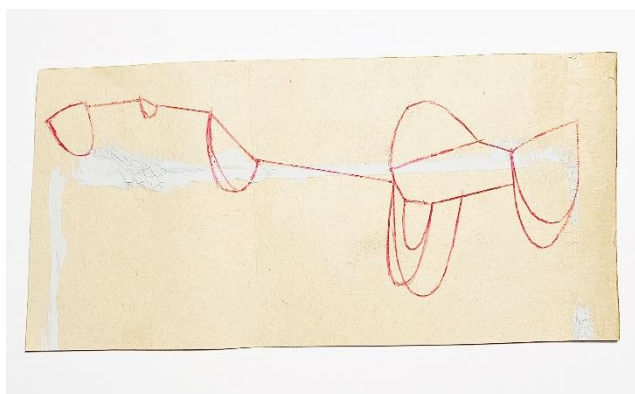
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Art Psychotherapy – personal responses



*paper*  
*tape*  
*bright check*  
*thread*  
*biro*  
*paint*  
*card*  
*collage*  
*pencil*  
*felt*  
*wire*  
*leaf*

