

Third Edition

ART THERAPY WITH STUDENTS AT RISK

FOSTERING RESILIENCE AND GROWTH
THROUGH SELF-EXPRESSION



STELLA A. STEPNEY, M.S., ATR-BC, LCAT

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STUDENTS AT RISK**

ABOUT THE AUTHOR



Stella A. Stepney, MS, ATR-BC, LCAT is a Registered and Board Certified Art Therapist. She is licensed by New York State as a Creative Arts Therapist and holds a New York State Teacher Certification in Art Education. Ms. Stepney obtained a Bachelor of Art degree in Art Therapy from St. Thomas Aquinas College in Sparkill, NY and a Master of Science degree in Art Therapy from Nazareth College in Rochester, NY. She is the recipient of the Award for Excellence in Art Therapy from Nazareth College.

Ms. Stepney has worked professionally in the field of art therapy as a clinician, educator, and independent practitioner. Her clinical work is grounded in the tenets of a cognitive-behavioral approach. Developmental and cultural sensitivity are fundamental for successful cognitive-behavioral work with children and adolescents. Ms. Stepney's primary focus is on prevention, which requires the identification of risk factors within a matrix of contextual influences that includes the biological, immediate environment, social and economic, and cultural. Protective factors are the supports and opportunities that buffer adversity and foster resilience.

Ms. Stepney is the author of *Art Therapy with Students At Risk: Introducing Art Therapy into an Alternative Learning Environment for Adolescents* and *Art Therapy with Students At Risk: Fostering Resilience and Growth Through Self-Expression*. She has contributed to book chapters. Ms. Stepney presents locally and nationally on resiliency theory and application in the areas of prevention and education. She continues to advance her research and work with diverse student populations. Ms. Stepney advocates that art therapy is a creative way to promote resilience. She maintains that creativity is a resilience that can reverse a bitter reality by turning discouragement into courage, despair into hope, rejection into significance, defeat into triumph, and struggles into strengths.

Ms. Stepney is a member of the adjunct faculty of the Master of the Arts in Art Therapy (MAAT) program at Saint Mary-of-the-Woods College in Indiana. The MAAT program is the first distance learning graduate art therapy program in the United States. Ms. Stepney is a member of the American Art Therapy Association and the Western New York Art Therapy Association. She is a member of the American Counseling Association and two of its affiliate divisions, the Association for Creativity in Counseling and the Association for Multicultural Counseling and Development.

Ms. Stepney is recognized in Aetna's 2013 African American History Calendar, *Complementary and Alternative Medicine: Celebrating African Americans Practicing Physical and Alternative Healing*, for her passion for wellness and work within the field of art therapy.

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Fostering Resilience and Growth Through Self-Expression

By

STELLA A. STEPNEY



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*To my husband, Harold, and our son, Terence
for your
love, support, and encouragement.
“The fruit of righteousness will be peace;
the effect of righteousness will be
quietness and confidence forever.”
Isaiah 32:17
NIV*

FOREWORD

I am honored that Stella Stepney, an exceptionally modest and deeply admired colleague, has invited me to contribute to the third edition of her book, *Art Therapy with Students at Risk*. Like its author, the book is clear, thorough, well organized, and full of information, incorporating recent research and the revision of earlier paradigms. As with previous editions, I have learned a great deal from reading the manuscript.

This book, while always relevant, seems especially timely at this moment in history. We live in an era that is incredibly exciting but equally challenging. While our rapidly proliferating technological advances can greatly enhance student achievement, the speed of societal change has also created problems for teenagers and their teachers. Indeed, I believe that students at risk for not being able to achieve their full potential are even more in need of thoughtful intervention by those in the helping professions than in the past.

The very scientific advances that allow us to see and to rejoice in the neurological plasticity of the adolescent brain, for example, have also produced a dizzying avalanche of visual and auditory input into young minds that threatens to overwhelm them. Given the seduction of social media, the addictive lure of video games, and the easy availability of chemical escape routes, teenagers need to be able to muster a good deal of inner strength to be able to resist such temptations. For good biological reasons, adolescents have always been impulsive risk-takers, feeling themselves to be virtually invulnerable. Though their enthusiasm and energy as well as the creativity of this developmental period offer great opportunity for change, the alarming rise in opioid addiction and suicide among this age group is cause for concern.

These “at risk” adolescents desperately need thoughtful practitioners like Stella Stepney to be able to resist toxic addictive temptations and to actualize their full potential. Fortunately, this 3rd edition of her book offers a critical combination of clarity and conviction. Both are necessary in my opinion to be able to harness the considerable potential of art therapy to help such

students to grow. Neither optimism nor operational specificity alone would be sufficient. Together, however, they are powerful.

After six decades of working with people of all ages, including many adolescents, I firmly believe that you cannot be an effective *therapist* of any sort if you are not sincerely hopeful about everyone you see. Similarly, I am also convinced that you can't be a successful *art therapist* if you don't honestly believe like Viktor Lowenfeld (1957) that "*we are all by nature more or less endowed with intrinsic qualities. One of these intrinsic qualities is that every human being is endowed with a creative spirit*" (p. 430).

Adult expectations of youngsters' behavior are incredibly powerful and, in fact, do become "self-fulfilling prophecies." Here are a few examples . . . In Pittsburgh Dr. Elsie Broussard, a pediatrician, child psychiatrist and child analyst, gave mothers of newborns a simple instrument she called the Neonatal Perception Inventory (NPI). It asks the mothers to say whether their baby is below, average, or above average on a number of dimensions, such as crying. It measured maternal perception rather than any objectively assessed behaviors (Broussard & Hartner, 1970). Dr. Broussard then followed those mothers and their children longitudinally, bringing them in for assessments every five years for 30 years. I was one of the clinicians assessing the five-year-olds and was impressed by the thoroughness of the evaluation of the children and their interactions with their mothers. One of my tasks was to request human figure and other drawings. What was most impressive was that the mothers' initial *perceptions* of their youngsters were predictive of how well (or poorly) they would develop over time, as well as the nature of their capacity for attachment as adults (Broussard & Cassidy, 2010).

Just as maternal perceptions of newborns have dramatic effects on the youngsters' development, it has also been shown that teachers' perceptions of students can have equally dramatic effects on academic performance and even scores on IQ tests. This was demonstrated in a Harvard study published half a century ago (Rosenthal & Jacobson, 1968, 1992). The researchers administered a fake "test" to elementary school students and randomly selected names of 20% of them that were given to the teachers in whose self-contained classrooms the students were to be taught the following academic year. Not only did the grades of those children improve, but their IQ scores went up, presumably because the teachers perceived them more positively. The basic conclusion of the study by Rosenthal and Jacobson was that when teachers expect students to do well and show intellectual growth, they do; when teachers do not have such expectations, performance and growth are not so encouraged and may in fact be discouraged in a variety of ways.

This is, of course, not a new idea. But it is profound, and is especially

applicable to work with the students highlighted in this book, who may well be perceived with pessimism by those whose task is to help them grow. The Latin *vis*, the root of both *vitality* and *violence*, reminds us that the life force can be either directed toward living, loving and creative coping; or can be turned and twisted toward destructive behaviors. As noted earlier, adolescents are full of vitality and creative energy; our challenge as art therapists is to help them to actualize their full potential (Maslow, 1954) by believing in themselves. Thus optimism – when coupled with a repertoire of clear operational procedures – can enable even the most discouraged youngster to blossom.

It seems to me that viewing individuals with a positive attitude is similar to looking at strengths and capacities rather than problems and deficits. Such a stance on the part of the art therapist fosters *resiliency*, and may be related to the finding that some children, even those with mentally ill parents, show a remarkable capacity not only to survive, but also to prosper. E. James Anthony, a child psychiatrist and analyst, called such youngsters, “dandelion kids,” because they could thrive even in hostile environments (Anthony, 1987). Perhaps their resilience was related to some adult (the other parent, a grandparent, a teacher, a coach) viewing them optimistically, despite receiving mixed messages from a parent with a mental illness.

Sigmund Freud said that a healthy person is able to love and to work (Erikson, 1960/1985, p. 265); Erik Erikson added the need to balance work and love with play (1977). The creation of the *true self* (Winnicott, 1971) through play with words and art is not only a *possibility*; it may even represent a *need* which, unmet, leaves a kind of deprivation all the more insidious as its effects are invisible. All human beings need to feel worthwhile, to possess “self esteem.” Art therapy offers a wonderful pathway for overcoming obstacles to self-actualization (Maslow, 1999). Perhaps even more important, art therapy is a way for each individual to find his or her own unique *voice* – through discovering a preferred modality and developing a personal style. It is truly a distinctive pathway to *self-definition*, as well as an opportunity for developing *self-esteem* through pride in artwork. I believe that this kind of self-discovery is most likely to happen when the clinician has a truly positive attitude, conveys it without reserve, and focuses on strengths. It seems to me that such a stance is conveyed in this book, that will hopefully inform a new generation of art therapists working with students at risk.

JUDITH A. RUBIN

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PREFACE

The twenty-first century ushered in new paradigms within the fields of neuroscience, psychology, education, prevention, and human services. Perspectives within this postmodern worldview recognize that truth and reality are understood as points of view encircled by a matrix of contextual influences. This matrix includes the biological context, the immediate environment, the social and economic context, and the cultural context. These contexts do not exist in isolation. They are constantly interacting, helping to shape development. This paradigm shift offers new ways of thinking and working with individuals, especially during the developmental period of Adolescence.

Strength is the ability to do or endure. Competence is a pattern of effective adaptation in the environment. Resilience is manifested competence in the context of significant challenges to adaptation or development. Resilience provides the process by which strength is developed. All cultures have strengths and some cultures value certain strengths more than others. Cultural socialization may impart strengths that help children and adolescents develop resilience.

Resilience research maintains that children and adolescents have enormous strengths, referred to as assets. A strength-based perspective offers a new paradigm shift. A shift away from seeing only risk in the lives and circumstances of children and adolescents to seeing their incredible resilience. Art therapy is positively associated with identifying and capitalizing on strengths.

Students at risk have the potential for displaying academic, behavioral, and social problems. Within educational settings, at-risk students are found at every point on a continuum of services—regular classrooms, special education classrooms, alternative schools, and residential schools. Art therapy is a creative and engaging way to address inappropriate behaviors; identify barriers to learning; increase student retention; support students with disabilities; promote resilience; and enhance academic performance.

Art Therapy with Students at Risk: Fostering Resilience and Growth through Self-Expression reflects the current research, legislation, and trends that impact the theory and practice of art therapy with diverse at-risk student populations. A theory is an organized set of assumptions about how things operate. The tenets of cognitive-behavioral approaches are well researched and theoretically sound. They provide a solid foundation for working with adolescents and directs theoretically driven interventions. With respect to at-risk students, research findings indicate that cognitive-behavioral interventions have shown effectiveness across educational environments, disability types, ethnicity, and gender. The book is divided into eight chapters. It includes twelve therapeutic techniques. The art experiences provide opportunities for students to express thoughts and feelings coupled with confirmation that their art is important to them and to others. During the Adolescent Art stage of creative development, art might be considered a metaphor, or speaking to issues. A deepened awareness of the environment, a more acute sense of self, and a purpose in creating becomes evident.

Chapter 1, "Adolescence," examines the developmental period between childhood and adulthood. Adolescence has always been characterized by cognitive, emotional, and social challenges. However, the knowledge gained from neuroscience with respect to brain development indicates that it is possible to influence young peoples' lives for the better. Adolescence is now characterized as an *Age of Opportunity*. Developmental plasticity refers to the malleability or adaptability of the brain during periods in which the brain is developing and its anatomy is changing. Adolescence is a period of heightened plasticity, which allows individuals to acquire new information and abilities. Therefore, adolescence is an optimal time to intervene to promote positive development. The critical developmental domains in Adolescence include: physical, adaptation, cognitive, moral, personal, identity, racial identity, and creative. Adolescents' participation in health risk behaviors is an important consideration. If development is amiss in any of these areas, there is potential for negative outcomes. Early identification, early intervention, and the availability of mental health services are keys to preventing negative outcomes.

Chapter 2, "Alternative Schools," describes the development of alternative schools in the United States through legislative reform, education reform, and civil rights. Alternative schools have historically served diverse populations of student, including those whose family's academic, social, political, or religious values diverged from the mainstream, as well as those who were unsuccessful within the regular public school system. There are three "pure" types of alternative schools. Type I alternatives are popular innovations characterized by choice. Type II alternatives are last chance pro-

grams to which students are sentenced. Type III alternatives have a remedial focus and are characterized by referral. The concept of “at-risk” was introduced in the 1983 report published by the National Commission on Excellence in Education titled *A Nation at Risk: The Imperative for Educational Reform*. Academically at-risk students fail to achieve and are predictably dropout prone. Behaviorally at-risk students display inappropriate school behaviors. Socially at-risk students are faced with disciplinary charges and may have been brought to the attention of the juvenile justice system. The early alternative schools like today’s alternative schools represent innovation in terms of their small scale, informal ambiance, and departure from bureaucratic rules and procedures. The goals that continue to drive the establishment of alternative schools include: reduction in dropout rates; reduction in student truancy; redirection of disruptive and inattentive students from mainstream institutions; and re-engagement with learning and the community.

Chapter 3, “Alternative Education,” explores the catalyst for policymakers to make quality education a civil rights issue. The U.S. Department of Education is the agency of the federal government that establishes policy for education and administration and coordinates federal assistance to education. The Department’s mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access. The U.S. Congress has passed important federal legislation to ensure excellence and equity in education and special education. The term “dropout” is used to describe the event of leaving school before completing high school and the status of an individual who is not in high school and who is not a high school completer. The 2006 groundbreaking report, *The Silent Epidemic: Perspectives of High School Dropouts*, with its “Open Letter to the American People” alerted the public to the high school dropout epidemic in America. The central message of the report is that while some students drop out because of significant academic challenges, most dropouts are students who could have, and believe they could have succeeded in school. Current research findings point out that the dropout epidemic continues to merit immediate, large-scale attention. America’s Promise Alliance is the nation’s largest partnership dedicated to improving the lives of children and youth. The GradNation campaign is the centerpiece of work for America’s Promise, with the year 2020 goal of increasing the national high school graduation rate to 90 percent.

Chapter 4, “Emotions and Learning,” investigates the relationship between emotions and learning and the impact of this relationship on academic achievement. To be successful in school, students must be able to perform academically, function in a structured environment, and develop social skills.

An emotion is a feeling state that arises when a person psychologically processes the stimuli associated with particular external or internal events. Adolescents' capacity to exercise control over what they think, what they feel, and what they do contributes to their achievement, mental health, and social success. Emotion is important in education because emotion drives attention, which in turn drives learning and memory. The emotional system is primarily located in the brain, endocrine system, and the immune system but it affects all other organs. The emotional system is viewed as an integrated biochemical system. The interrelationship among the brain, endocrine system, immune system, and behavior is helpful in understanding the relationship between emotions and learning. As evidenced through the advances in cognitive science and neuroscience, a student must be thought of as more than brain tissue and body. Powerful hormones are converting body and brain tissue into a vibrant life force, fashioning not only the mental and physical components but also the social and emotional components, which encompass the *whole* child that must be educated in the twenty-first century.

Chapter 5, "Multicultural and Diversity Competence," focuses on the changing demographics in the United States which have significant implications for the art therapy profession. The United States is projected to become a majority-minority nation for the first time in 2043. Minorities are projected to comprise 57 percent of the population in 2060. Cultural pluralism is a condition in which many cultures coexist within a society and maintain their cultural differences. The Art Therapy Multicultural and Diversity Competencies (2015) clarify the types of multicultural awareness, knowledge, and skills art therapists need to acquire to work effectively with persons from diverse racial, ethnic, and cultural groups. Cultural competence is the ability to engage in actions and create conditions that maximize the growth and development of clients. Acquiring self-awareness, knowledge, and skills implies an active, developmental, and ongoing process. From this perspective, cultural competence is conceptualized as "ways of doing." Cultural humility is the ability to engage in a lifelong commitment of self-reflection and self-critique. It implies an accurate view of the self while maintaining an openness to the other. From this perspective, cultural humility is conceptualized as "a way of being." Acquiring cultural competence and engaging clients with cultural humility by being open to their beliefs, values, and worldviews ensures that clients will be respected and their unique cultural identities will find an appropriate place in art therapy assessment and treatment. This new paradigm offers a balanced way to implement cultural sensitivity into art therapy practice.

Chapter 6, "From Risk to Resilience," highlights the paradigm shift in resilience research away from the deficit, pathology-focused model of devel-

opment, referred to as the Damage Model to the Challenge Model. The Damage Model posits that children and adolescents are vulnerable, helpless, and locked into their troubled families. In the Challenge Model, children and adolescents are vulnerable to the toxic influence of hardship, but they are also challenged to rebound by utilizing self-protective behaviors. Over time, these self-protective behaviors develop into the clusters of strengths called resiliencies. Risk factors in resilience research are variables that have either proven or presumed effects that can directly increase the likelihood of a maladaptive outcome. For children and adolescents, notable risk factors include: Cradle to Prison Pipeline, Juvenile Justice System, School to Prison Pipeline, Ecological Hazards, Motivation, and Discipline. Protective factors in resilience research are those variables that increase the likelihood of an adaptive outcome. Protective factors are the supports and opportunities that buffer adversity and enable development to proceed. For children and adolescents, notable protective factors include: developmental plasticity, developmental assets, character strengths, and competence. Adults have the power and responsibility to provide the critical supports and opportunities that build resilience strengths. By focusing on the belief in youths' innate resilience and developmental wisdom, adults are in a position to find out what allows youth to thrive.

Chapter 7, "Art Psychotherapy," provides insight into the unique criteria that distinguishes it from other types of psychotherapy. Psychotherapy is a general term for treating mental health problems. All psychotherapies share one distinctive characteristic; they are all methods of learning. However, the use of art media as a means of expression and communication, the multi-leveled meaning present in visual expression, and the therapeutic effects of the creative process offer a distinctive mode of learning. The ancient Chinese proverb states, *I hear and I forget; I see and I remember; I do and I understand; In the doing is the learning*. Learning is a relative permanent change in behavior as a result of experience, practice, or both. The guiding principle behind art therapy is the creative process inherent in art making. In art therapy, individuals are asked to use their creativity to make original and imaginative artwork. From this perspective, the creative process is a learning experience because it provides individuals with an opportunity to experiment with new ways of seeing or being.

Chapter 8, "Art Therapy with Students at Risk," presents a foundational framework for developing and implementing an art therapy program within a traditional or nontraditional learning environment. In 1985, the American Art Therapy published *Art Therapy in the Schools A Position Paper of the American Art Therapy*. In 2003, the American Art Therapy Association developed *Art Therapy in the Schools: Resource Packet for School Art Therapists*. In 2011,

the toolkit, *Art Therapy in the Schools*, was developed by the American Art Therapy Association. Art therapy is making a positive difference in education outcomes through the implementation of successful art therapy programs in urban, suburban, and rural school districts. The foundational framework provides direction and documents for advancing art therapy in educational environments. It addresses important topics related to ethical decision making; informed consent; record keeping; confidentiality, privileged communication, and privacy; assessment; goals and objectives; treatment planning, and therapeutic intervention. Treatment is conceptualized from a cognitive-behavioral approach. Developmental sensitivity is fundamental to successful cognitive-behavioral work with adolescents. Therefore, while considering contextual influences, treatment targets the cognitive-behavioral level to influence cognition, affect, and behavior. All art therapists, regardless of theoretical orientation, must choose the most appropriate art materials and expressive methods to use with clients. The Expressive Therapies Continuum (ETC) provides a theoretical framework from which to choose appropriate materials and methods. It offers a method of formulating objectives that includes how to begin in therapy and how to create interventions that guide direction for treatment.

The “message in a bottle” provides a thought-provoking metaphor for *Art Therapy with Students at Risk: Fostering Resilience and Growth Through Self-Expression*. The message in the bottle is one of hope. Hope to reclaim students at risk because they are our hope for the future. This book is designed for art therapy students, professional art therapists, educators, administrators, and practitioners in the allied professions of counseling, social work, psychology, prevention, and human services. It is my hope that as I cast it out to sea, it will reach shore, land on “good” ground, someone will read it, and I receive a favorable reply.

STELLA A. STEPNEY, MS, ATR-BC, LCAT

INTRODUCTION

*Let us build communities and families in which our children and youth,
especially those who are most troubled, can belong.*

—Nelson Mandela

The word troubled is used to emphasize what it feels like to be alone and in conflict. The word discouraged describes what it feels like when courage is denied. Courage implies a firmness of mind and will in the face of opposition and adversity. The concept of the courage versus discouragement paradox has been introduced into strength-based prevention and intervention. The four universal needs of belonging, mastery, independence, and generosity are viewed as foundational for psychological resilience and positive youth development.

The seeds of discouragement are embedded within four ecological hazards in the lives of at-risk youth: destructive relationships, climates of futility, learned irresponsibility, and loss of purpose. These ecological hazards shift the paradigm away from the negative labels of at-risk youth toward the transactions within their environment.

Self-esteem is the view of the self as competent, effective, and worthy. The four sources of self-esteem include significance, competence, power, and virtue. The four sources of self-esteem correlate with the four universal needs of belonging, mastery, independence, and generosity. Larry Brendtro, Martin Brokenleg, and Steve Van Bockern (2002) propose Belonging (*I am loved.*); Mastery (*I can succeed.*); Independence (*I have the power to make decisions.*); and Generosity (*I have purpose in my life.*) as the central values of positive cultures for education, strength-based prevention, and intervention. The philosophy inspires adults to develop reclaiming environments, where change is created to meet the needs of youth and society. The philosophy also empowers adults to foster resilience in youth.

A metaphor compares two unlike items. “Something is like something else.” Metaphors juxtapose one thing with another, exchange meaning, and

open up new possibilities and understandings. In art therapy, metaphors provide a powerful means for expressing ideas and feelings that might otherwise remain unspoken, unwritten, or undiscovered. Metaphor is a vital component of creativity because it allows familiar circumstances to be seen in new ways; it enhances understanding and presents opportunities for change.

The metaphor of a garden composed of healthy plants, choking weeds and seeds provides an interesting focus on self-awareness to foster resilience through creativity with students at risk. Within a Garden of Self, the healthy plants represent developmental plasticity, developmental assets, character strengths, and competence. The choking weeds are the seeds of discouragement that represent the ecological hazards of destructive relationships, climates of futility, learned irresponsibility, and loss of purpose. The seeds represent the clusters of strength, or resiliencies that form a protective ring around the self. The resiliencies include insight, independence, relationships, initiative, humor, creativity, and morality. Bonnie Benard (2004) maintains that resiliency is a cross-cultural universal capacity; it is the process of healthy development.

Creativity, as a resilience, is the safe harbors of imagination where one can take refuge and rearrange the details of life to his or her own pleasing. In the developmental period of Adolescence, creativity is referred to as shaping. Steven Wolin and Sybil Wolin (1993) assert, "Resilience is the will to accept the discipline of an art form in order to shape your pain into 'something else.' Resilience is expressing your feelings in flights of fancy and returning to earth in control of yourself and better for the trip" (p. 175).

Creative power is one definition for imagination. Art therapist Pat Allen (1995) highlights the power of imagination:

Our imagination is the most important faculty we possess. . . . It is through our imagination that we discern possibilities and options. A relationship with our imagination is a relationship with our deepest self. Whether we have cultivated our imagination or not, we each have a lifetime of patterns and habits of thoughts embedded there based on past experiences. Our expectations of ourselves and the world flow from these patterns. (p. 3)

Creative power must be formed and refined to gain insight into possibilities and options. Carl Jung (1971) maintains, "It is the function of the conscious not only to recognize and assimilate the external world through the gateway of the senses, but to translate into visible reality, the world within us" (p. 46).

The world within us is translated into visible reality through the processes inherent in the visual arts. Kinetic energy is made visible through drawing. Sensual energy is made visual through painting. Emotional energy is made visible through color. The three-dimensional and instinctual compo-

nents of experience are made visible through sculpture. The dynamics of perceived structures found within an image can be transposed into recognition of behavioral patterns and then into an expansion of adolescents' awareness that can be used to foster resilience, develop strengths, and enhance cognitive, emotional, and social growth.

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I welcome opportunities to advocate for art therapy in school environments. I extend my appreciation to Principal Lavonda Lofton for the opportunity to introduce art therapy to the staff and students at Destiny Christian School in Rochester, NY. Destiny offers a Biblical worldview education for grades K-12 with a mission to build a strong academic and spiritual foundation in children and adolescents.

My affiliation with the American Art Therapy Association frames my professional identity and reflects a deep commitment to the profession. The opportunities to serve as a Director on the Board of Directors enabled me to

contribute in governance. The opportunities to Chair committees enabled me to not only lead but also inspire others to have confidence in themselves to lead. I fully embrace the Association's mission. To my colleagues, thank you for your dedication and commitment to move the Association forward in the twenty-first century and advance its vision that the services of licensed, culturally proficient art therapists are available to all individuals, families, and communities.

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**ART THERAPY WITH
STUDENTS AT RISK**

Chapter 1

ADOLESCENCE

Every child and adolescent deserves to experience joy, have high self-esteem, have friends, acquire a sense of efficacy, and believe that he or she can succeed in life.

—Bright Futures Children’s Health Charter

Bright Futures is a national initiative to promote the health and well-being of infants, children, adolescents, families, and communities. Since its inception in 1990, Bright Futures has been funded by the U.S. Department of Health and Human Services, under the direction of the Maternal and Child Health Bureau. The Bright Futures Children’s Health Charter offers a vision for promoting the mental and emotional health and well-being of all children as a critical element of child and adolescent health care. This recognition of the importance of mental health care is significant in today’s complex society.

What is mental health in children and adolescents? Dr. Judith Palfrey (as cited in Jellinek, Patel, & Froehle, 2002) provides an excellent explanation:

Mentally healthy children and adolescents develop the ability to experience a range of emotions (including joy, connectedness, sadness, and anger) in appropriate and constructive ways; possess positive self-esteem and a respect for others; and harbor a deep sense of security and trust in themselves and the world. Mentally healthy children and adolescents are able to function in developmentally appropriate ways in the contexts of self, family, peers, school, and community. Building on a foundation of personal interaction and support, mentally healthy children and adolescents develop the ability to initiate

and maintain meaningful relationships (love) and learn to function productively in the world (work). (p. xvi)

Healthy outcomes fundamentally linked to children's and adolescents' mental health include self-esteem, sense of identity, sense of morality, positive relationships with family, social competence, avoidance of high-risk behaviors, success in school, and independence. However, negative outcomes can result when cognitive, emotional, and behavioral problems remain undiagnosed and untreated (Jellinek, Patel, & Froehle, 2002). Therefore, the keys to preventing negative outcomes include early identification, early intervention, and availability to mental health services.

NATURE OF DEVELOPMENT

Development is the process of orderly, cumulative, directional, age-related changes in an individual. Normative development is the general changes in behavior across ages that all individuals share. Individual development is the variations around the normative course of development seen in each individual's uniqueness.

The concepts of qualitative change and behavioral reorganization are evident throughout development. Qualitative change is a developmental change involving a transformation of a physical or cognitive ability. Behavioral reorganization is a qualitatively new way of organizing and using capabilities. The reorganization of thoughts and actions always results in more complex behavior.

A developmental perspective is a way of understanding an individual's behavior. Each developmental stage presents new milestones for development and mental health.

CONTEXT OF DEVELOPMENT

A theory is an organized set of assumptions about how things operate. It is an attempt to account for current observations and to predict future ones. Developmental psychologist Urie Bronfenbrenner (1917–2005) postulates the theory that the development of each child will take place within a matrix of contextual influences. Both genetics and environment play major roles in the context of development.

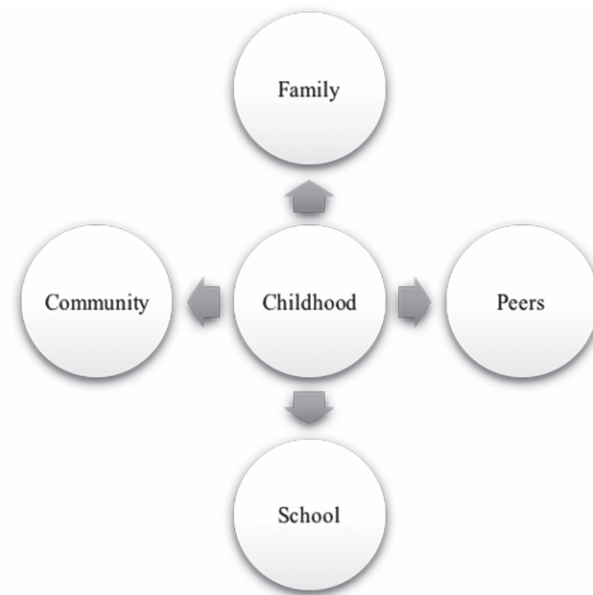


Figure 1.1. Bronfenbrenner's Four Worlds of Childhood.

Bronfenbrenner's Bio-Ecological Systems Theory (1979) looks at a child's development within the quality and context of the systems of relationships that forms his or her environment. He identified four types of system, which contain roles, norms, and rules that powerfully shape development. These systems include the biological context, the immediate environment, the social and economic context, and the cultural context.

According to Bronfenbrenner (1979), the most powerful influences come from family, school, peer group, and community, which he referred to as the "four worlds of childhood." Bronfenbrenner (1979) proposes that young people thrive in ecologies with caring families, positive peers, concerned teachers, and supportive communities. If the child's ecology is strained, there is the potential for negative outcomes.

DEVELOPMENTAL PSYCHOPATHOLOGY

Developmental psychopathology is the study of developmental challenges and vulnerabilities, healthy and unhealthy psychological adaptations, and the complex influences that determine developmen-