

HEALING THROUGH ART





Prepared By: Psychologist Yasemin Hatipoglu

A little bit about RWCA (Refugee Workers Cultural Association)

The RWCA is a charitable organization based in North London, dedicated to serving the Turkish-speaking communities in London, Haringey. Established in 1991, the RWCA aims to address the social, cultural, and educational needs of the Social, cultural, and educational needs of the Turkish community in the city. Over the years, RWCA has effectively served its target communities, gaining recognition as one of the prominent charitable organizations known for its wide range of activities and services.

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About Project

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HEALING THROUGH ART

This project was funded by the **National** Lottery, Awards For All Programme. HEALING THROUGH ART emerged from a pressing concern within the Turkish and Kurdish communities regarding the integration challenges faced by women. These challenges often result in social isolation, leading to significant psychological pressures, including depression and anxiety. The situation has been exacerbated by the prolonged aftermath of the COVID-19 pandemic, which has not only induced anxiety but also witnessed a surge in domestic violence. Many women have grappled with issues such as post-traumatic stress disorder (PTSD), depression, and anxiety.

Recognising the widespread use of art therapy and the effectiveness of Schema Therapy, the project's core objective is to address the psychological distress experienced by women within these communities. At the project's inception, we identified the need to assess participants' symptoms and provide referrals to General Practitioners (GPs) when necessary, with the aim of reducing symptoms through group sessions.





Project Duration and Target Audience

The project encompassed 24 initial sessions but was later extended to 27 sessions due to participant demand and the need to support working women, which required both morning and evening sessions. An additional 3 sessions were introduced to address specific needs identified during the initial 15 weeks.

The project primarily targeted women of Turkish and Kurdish origin between the **ages of 25 and 60**. We recognized that many of these women arrived in the UK at a young age, often through early marriages, and subsequently faced challenges in accessing assistance and therapy due to language barriers. However, given the recent increase in depression and anxiety rates, compounded by PTSD experienced by some women, we believed that this program would significantly benefit them.



2. Project Initiation and Program Process

Migration Challenges

Immigration can be a challenging process, particularly for individuals from diverse cultural backgrounds. Kurdish and Turkish women often face difficulties in adapting to their new homes in the United Kingdom. Early years of settlement may involve limited access to education, employment, and language barriers, which can hinder integration into mainstream society. This integration challenge is further complicated by cultural differences, making it vital to address these issues to improve their quality of life.

Gender-Specific Integration Challenges

Women within these immigrant communities often bear the brunt of integration issues. Cultural norms and gender roles can restrict their access to education and employment, confining them to domestic roles. This isolation exacerbates the difficulty of language acquisition and social integration, as women have limited opportunities to interact with the broader community. Consequently, addressing the unique challenges faced by immigrant women is crucial for their overall well-being.



Women and Psychological Stress

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The social isolation experienced by immigrant women due to integration challenges can lead to profound psychological stress. Feelings of isolation, powerlessness, and exclusion can contribute to increased rates of depression, anxiety, and other mental health issues. The extended aftermath of the COVID-19 pandemic has further amplified these stressors, with a notable rise in cases of domestic violence among this demographic.

Gender plays a significant role in the manifestation of psychological stress. Women, especially those from immigrant backgrounds, often face unique stressors linked to their roles as caregivers, homemakers, and the challenges of adapting to a new culture. This intersection of gender and mental health underscores the importance of providing targeted interventions and support for immigrant women.



ART THERAPY

Art therapy is a widely recognized therapeutic approach that utilises creative processes, such as drawing, sculpting, and help painting, to individuals express their thoughts and emotions. It provides a non-verbal outlet for self-expression, making it particularly valuable for individuals facing language barriers or those who struggle to articulate their feelings.

Art therapy has proven effective in addressing trauma, improving selfesteem, and enhancing overall wellbeing.



SCHEMA THERAPY

Schema Therapy is a comprehensive therapeutic approach that focuses on identifying and addressing early maladaptive schemas deep-seated emotional and cognitive patterns formed during childhood. These schemas influence how individuals perceive themselves and their relationships with others. Schema Therapy aims to modify these negative patterns and replace them with healthier, more adaptive beliefs and behaviors. The combination of art therapy and schema therapy offers a powerful toolset for addressing the unique needs of immigrant women.

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SCL-90 and Schema Test

The Symptom Checklist-90 (SCL-90) is a widely recognized psychological assessment tool used to measure a broad range of psychological symptoms and distress. *It assesses nine primary symptom dimensions, including somatisation, obsessive-compulsive behavior, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism.* The SCL-90 provides valuable insights into participants' mental health and serves as a baseline for assessing symptom reduction over the course of the program.

The Schema Test is a psychological assessment designed to identify early maladaptive schemas—the deeply ingrained patterns of thoughts and feelings that influence an individual's emotional responses and behaviors. This test helps pinpoint specific schemas that may be contributing to psychological distress. While it was administered at the outset of the project to identify participant needs, it was not repeated at the project's conclusion. Instead, the project focused on addressing the identified schemas through art therapy and schema therapy techniques.



Project Design

In our first session, we introduced participants to the concept of schemas and how they can influence our thoughts, emotions. and behaviors. The aim was to create an awareness of potential schemas that might be related to the psychological challenges participants were facing. We also introduced participants to the schema-focused idea of art therapy, emphasising the role of creative expression in understanding and addressing these schemas.

15-week program to address psychological distress and promote wellbeing

SANATLA TERAPİ ATÖLYESİ NOTLARI -1

İçinizdeki Çecuk güçlü bir varlıktır. Sizin varlığınızın tam öxünde yaşar. Sağlah ve mutlu, küçük bir çocak düşünün. Bu çocuğu zihninizde canlandırıkme nun ne kadar haya tadı olu oluğunu müssölün. Bu çocuk öyük bir menzkala çovresin keşfeder, duyguların açıkça fide eder; canı yandığında ağlar, kızdığında hağırı nulu oluğuşdında gülimlere vi çiştib ir kılahaba attır. Bu çocuk, ayna zamında çok hasasatır vi çi gülüsel davranır, kime güvenip kime güvenneyeceğini bilir. Oynamayı ve keşfetmişi sever, he bir kahma yayenvi ve varlıkalırla delu oluğunu bilir. Bu oyunbazlıktan bitmek tükenmek bilmeyen bir yaratıcılık ve canlılık doğar.

Zaman geçtikçe çocuk kendisini yetişkin dünyasının tam ortasında buhar. Yetişkindren has düşünceler, talepler ve gereksinimler, duggaların ve iççüklülerin sesini bastırmaya başlar. Aleler ve öğretmenler: "Kendine fazla görenme, duggaların bir kama burak. Onu söyleme bunu dile getirme. Bizim gibi yap, en iyisini biz biliriz." derler.

Zamanla, cocuğa hayat veren tim bu nitelikler-merak, kendiliğindenlik, hisestne yeleneği-saklanmaya zorlanır. Vetişkinler çocuklan hiyiytiriler, onlara terhiye verirken çocuyla, tim yapacakını nevceden kesirtilelik yetişkinder haline getirirler. Zıra, yetişkin dunyası çocuklar için görenli bir yet değildir. Yetişmekle elan verirker. Zıra, yetişkin dunyası çocuklar için görenli bir yet değildir. Yetişmekle elan çocuk hayatak kalma adına mutla çocuklar kuhumu derinlere saklayışı hayender. Falat bu Çocu kaşala kuğumez, o, derinlere gömülmüştür ve öçgir olacağı zaman beklemekleriler.

Iger [Gecuk sünvkli olarak dikkatimizi çekmeye qılışır ama çoğumuz onu na diqeveceğimizi bile unutmuşuzdur. Gerçek hislerinizi ve içgidülderinizi gör anfı derken alında içimizdeki Çocuk'u gör anlı etilgimizin farkına hile varmayaz Viroudumuzu ve beriligimizi beshemeye tyerinsi kaldığınmada asılında ihmal ettiğimiz, [cimizdeki Çocuk'ur, Çocuksu hiliyaqdırımızı oğu zaman gerçek ömahdan bahaneyile ralı kaldırı ve [cimizdeki Çocuk'u u: hendisiyle baş baş brakırız. Zira bu hiliyaqların karşılanması, yetişihinlerin yapacağı seyler değildir. Anarka anlışında başlara başlaraşı daşınayı ya da kaşbettiğimiz bir arkadaşın arkasından bağıra bağıra şağlamayı isteriz, İşte bu asılında dışan çıkmak arkadaşın arkasından bağıra bağıra şağlamayı sisteriz, İşte bu asılında dışan çıkmak arkadaşın arkasından bağıra bağıra şağlamayı sisteriz, İşte bu asılında dışan çıkmak arkadaşın arkasından bağıra yağlamayı sisteriz, İşte bu asılında dışan çıkmak arkadaşın ettiğini beşiltir. Hayız bunu yapamazışını Büyükler ağlamazı. Kontrolinni kaybetmemelsisin." Ve İçimizdeki Çocuk tur. Ama birkişi kaltılı kalız.

Içimizdeki Çocuk engeflemliğinde kendiliğindenliğimizi ve yaşama evincimiz kaybederiz. Bu zamanla enerji kaybma kronik ya da ciddi hastalıklara beo çlur Lçimizdeki Çocuki va skalığımızda aynı zamanda kendimizi diğer manı bilemceler ve greçdek kim döluğumuzlı hiçler zama gitemeter. Bu, diğer

> naliz'in de önemli bir işkin henliği kuralları düşünür, kararlar verir Ve sorunları çözer. Peki çocukluğu boyunca ciddi anlamda bir travmaya marız kalmamış biri İçindeki Çocuk'u bir şekilde inkar etmişizdir. Aslında bu da bir istismar/ travmadar. Bağımlik, sa, savaş ve çerer tahribatnun had safnada olduğu bu çağda İçimizdeki Çocuk'u bir şekilde inkar etmişizdir. Aslında bu da bir istismar/ travandar. Bağımlik, saçı savaş ve çerer tahribatnun had safnada olduğu bu çağda İçimizdeki Çocuk'u bir şekilde ünkar etmişizdir. Aslında bu da bir istismar/ kalabilmemi: nereleyse imkansız. Yaşadığımız dünya, derinterimizdeki bu hasasa ve krırlışan parçamız için hir de geliveni bir yar qeşil. [cimizdeki Çocuk buişlimizin tam orta yerinde yer alıyor. Hisseden benliğimiz olarak bize istek ve enerji getiriyor. İçimizdeki Çocuk'u siyilşetiri yaşanımızın bir parçası haline getirmeden tam ve nutlu yetişkinler olmamız imkansız.

Yasemin Hatipoglu

Peki bunu nasıl yapacağız? İçimizdeki Çocuk'u nasıl iyileştireceğiz? Bu, her şeyden önce onu tanıyarak ve hissederek mümkün olacak. İçimizdeki Çocuk'ta karşılaştığımızda çoğunlukla seveği, korunma, göven, saygı gibi çocukluk gereksinimlerden yoksunluk İçimizdeki Çocuk'ta kronik kaygı, korku, utanç, öfke ve çarseizlik durumları yaratımış olabilir. Duryuşualı ve fizikel problemlerin yetişkinlikte nüksetmesi, Çocuk'unuzun konuşmaya çalıştığının bir göstergesidi

SANATLA TERAPİ ATÖLYESİ NOTLARI -1

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Yasemin Hatipoglu

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Yasemin Hatipoglu

İçinizdeki Çocuk'u Hissetmek

Neden bazılarımız İçsel Çocuk'u hissetmekte başarısız oluyoruz?

İçimizdeki Çocuk hakkında konuşmak başka, onu gerçek ve yaşayan bir varlık olarak görmek başka bir şey. Eğer "küçük çocuklar gibi olmayı" başaramazsak iyileşemeyiz. Eğer Çocuk varlığımıza güvenli bir ortamda dönmezsek İçimizdeki Çocuk beş soyutlarımış olarak yalınız kalır Eğer çocuksa duygularımızı, haşsasiyetimizi, hayretimizi ve canlılığımızı evri cantırmazsak İçimizdeki Cocuk yaralı kalacakır.

SANATLA TERAPI ATÖLYESİ NOTLARI -1 Peki İçimizdeki Çoc

Yasemin Hatipoglu

Birey, eğer temel ihtiyaçları karşılanmazsa kendine ve diğer insanlara karşı olumsız davranışlar regileme ve hayatın tim alanlarında sornu yuratma eğiliminde olubilir. Alte (ej sidalcin zincirleme bir ösellik göstendiği bilinen bir gerçeklir. Anme-babaları kimi zaman çocukların istismar ederler. Bu çocuklar da birre yetişkin oluklarında kendi çocukların istismar ederler. Bu çocuklar da Bağınlı anme babaların genelde bağımlı çocukları bir. Bağımlığın çeşid değişebilir, mesela, alkolik bir babanın unyatırıncu bağımlıştı iç çoçuğu olabilir ama bağımlılık öyle ya da böyle hep var olar. Şiddet ve bağımlılık trajik bir şekilde uzayıp giden bir şirini gibilir. Bir nesilden diğerine aktarşısı ve toplumda fazlasıyla yaygınlaşmıştır.

Yetişkin dünyamızı; en temel ihtiyaçları karşılanmanuş, korkmuş ve soyutlanmış bir çocuğun sağlıksız telleri üzerine nasıl kurabiliriz ki? Yapayız. Er ya da geç bir kirzi, bir hastalık, boşamın, iş hayatında karmaşa ya da madi çoküşpatlak verir ve yapı un utak olur. Bunun sonucunda yetişkin maskesi düşmeye başlar. Bu noktada bazı bireyler elerine dönerler ve iç dünyalarını görden geçirip hayatlanın yeniden değerlendirirler. Terapistlerden, kişisel gelişim kitaplarından destek alırlar ya da zara go gruplarına katılırlar. SONNITA TERAFI APPV Veri veri anı a

Kendinizi bu senaryc sürecinizin bir parçası olara kullanabilirsiniz. İçsel Çocu değildir. Her şeyden önce İç kaldı. Hepimizin bu yolda b dolu ilişkilerin temelini oluş

Hatırlatmakta fayda var!

Sadece kendiniz İçini başka hiç kimse sizin için ya öğrenmekten ve bunları yer bilin ki, şimdiye kadar sevg Çocuk'a ilgi göstermesini bi zamanda, diğer insanların tı vazgeçmenizi sağlar. Zira or SANATLA TERAPİ ATÖLYESİ NOTLARI-I Yasemin Hatipe insanlarla gerçek bir yakanlığı imkansı kılar. Hiçbir zaman birbirimizi tam olarak tamyamayız. Bu nasıl bir taişeli ve ne derdi büyük bir kayışındı Gerçek bir insan olabilmenik için İçimizdeki Çocul'un kucaklanmaya ve dişüncelerini aşaklamaya ibir yes vak.

Her yetişkinin içinde "dışarı çıkmak" i atlanan bir ocudi

agaışan bu Çocuk kim? Neden sıkışıp kalmış, bize ne verebilir? rgür bırakılabilir?

lçinde bulunduğumuz yüzyılda psikolog lung ve mitoloji uzmanı Joseph Campbell, bu mit ve efanelerin dünyanın her yerinde beslendiğini götermiştir. Gindi hepsi verenceli insan yaşantılmar mesentmekteldir. Heneda bittin insandan ortak ler nottası vardır: Hepiriniz hayıtlarımıza kırığlara, başlalarına bağımlı bebelleri ortakı başların. Bu yazıdın de bu hükiyerlerel yer yarı an çanstız, yanlı anlaşılmış be kötülük görmüş çocuklarala kerdimizden bir parça bulabiliriz.

Cocsik, doğası gereği tehlikelere açıktır. Dayarısız ya da suldırgan yetişkinle orçovgan gularını dörenlere de eresinli kaşışlarak akuna da film darak türene de per ferinde dilkatınızi ba kadar çoknesinin nederi de budart. Wall Diorey fik xuma tehrinde milakatırını başları başları başları başları başları başları başları günye çile gösterevelerelerin istandardar, da nun başlarını beneşin karındı şayaye çile gösterevelerelerin istandardar, da nun başlarını beneşine daşları başları başları başları başları başları başları başlarını ba

WEEK 1 - Introduction

During the second session, we delved deeper into how schemas might influence one's self-expression through art. We explored the impact of schemas on participants' art therapy experiences, helping them recognize how these deep-seated beliefs could affect their creative expression. The main objective was to emphasize the importance of overcoming schema-related inhibitions and **fostering a sense of artistic freedom and self-expression**.



WEEK 2 - Art Therapy Techniques and Their Impact:

During the second session, we delved deeper into how schemas might influence one's self-expression through art. We explored the impact of schemas on participants' art therapy experiences, helping them recognize how these **deep-seated beliefs could affect their creative expression**.



WEEK 3 - Meeting the Vulnerable Child Within:

Our third session focused on identifying and addressing schemas related to vulnerability, fear, and emotional distress. We aimed to target schemas contributing to somatisation symptoms and emotional struggles, such as Abandonment/Instability and Mistrust/Abuse. The session encouraged participants to connect with and heal their inner vulnerable child.



WEEK 4 - Embracing the Angry Child

In session four, we explored schemas connected to anger and frustration. We addressed schemas like Mistrust/Abuse and Emotional Deprivation, aiming to help participants understand and manage their emotional responses better. Additionally, we targeted schemas related to impulsivity and self-control, working towards a healthier emotional balance.



WEEK 5 - Discovering the Inner Parent

The fifth session was dedicated to strengthening the Healthy Adult Mode. Participants were encouraged to model nurturing behaviors and foster self-compassion. We emphasised the importance of the Inner Child-Healthy Adult connection, as participants explored their inner parenting roles.



WEEK 6 - Reaching the Protective Parent

During this session, we discussed schemas related to **emotional detachment and avoidance**. Our objectives included understanding the Detached Protector Mode and its impact on attachment styles. We also delved into the challenges faced by **overprotective parents** in setting healthy boundaries for themselves and their children.



WEEK 7 - Confronting the Critical Parent

In session seven, we engaged with schemas tied to high standards and self-blame. Participants addressed schema modes related to self-criticism, focusing on shifting from criticism to role modelling in their parenting and self-perception.



WEEK 8 - Healing Childhood Wounds

Session eight was dedicated to symbolising the connection between the **Nurturing Parent and the Inner Child**. Our primary goal was to contribute to the healing process of all dysfunctional schemas.

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WEEK 9 - Allowing Play in Our Lives

During the ninth session, our focus was on reducing impulsive/disruptive child modes and addressing issues of dependency and inadequacy. We aimed to create a space where participants could **allow playfulness and spontaneity into their lives**, working towards a balanced and healthier emotional state.



WEEK 10 - Celebrating the Creative Child Within

In the tenth session, we celebrated innate creativity and aimed to strengthen the *Playful Child Mode*. Participants engaged in art therapy to activate this mode fully. We discussed the importance of **embracing mistakes and learning from them, as well as applying creativity to various aspects of life, including work.**

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WEEK 11 - Acknowledging the Spiritual Child

During session eleven, we explored the concept of the Spiritual Child and its role in our lives. Participants engaged in activities that encouraged them to connect with their inner spirituality and explore how it might influence their schemas and overall well-being. We also discussed dreams and their **attachment styles**.



Session 12 - Continuing the Journey

During the ninth session, our focus was on reducing impulsive/disruptive child modes and addressing issues of dependency and inadequacy. We aimed to create a space where participants could allow playfulness and spontaneity into their lives, working towards a balanced and healthier emotional state.

Additional Sessions

Session 13 - Focusing on Emotional Closeness

The first of the additional three weeks of sessions was dedicated to addressing emotional closeness and the impact of schemas on interpersonal relationships.

Session 14 - Family Dynamics

In the second additional session, participants delved into the complexities of family dynamics and their influence on schema development. We discussed the role of early experiences within the family unit and how these experiences shaped their schemas. This session targeted schemas such as abandonment, mistrust, and emotional deprivation.

Session 15 - Navigating Attachment Styles

The final additional session centred around attachment styles and their impact on adult relationships. Participants explored their attachment patterns and how these patterns manifested in their interactions with others. We utilised art therapy techniques to facilitate a deeper understanding of attachment-related schemas. The session aimed to empower participants with insights and tools to develop healthier attachment styles and build more fulfilling relationships.

These three additional weeks of sessions allowed participants to delve further into specific schema-related challenges and interpersonal issues. By addressing these areas, participants were better equipped to continue their healing journey with a more comprehensive understanding of themselves and their schemas.

Equipment and Resources Used

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Art Supplies:

- Paper
- Markers
- Felt-tip Pens
- Pastels and Crayons
- Scissors
- Clay
- Plasticine

Stationery:

- Personal Calendars
- Glue
- Scotch Tape

Audio and Visual Aids:

Psychological Movies: Relevant psychological movies were screened to facilitate discussions and insights.

Storage and Organisational Tools:

- Folders: Used to store individual artwork and data.
- Matryoshka Dolls: Utilised in symbolic and therapeutic exercises.
- Candles: Used for relaxation and sensory-focused activities.

Data and Results

Psychological	Pre-Project	Post-Project
Somatisation	1.71	1.02
Obsessive-Comp	2.12	1.82
Depression	2.24	1.41
Anxiety	1.66	1.11
Hostility	1.84	1.52
Phobic Anxiety	1.25	1.08
Paranoid Ideat	1.84	1.58
Psychoticism	1.41	1.38
Additional Sca	1.8	1.4

SCL-90

Somatisation: The average score for somatisation decreased from **1.71** to **1.02** post-project. This reduction suggests that participants experienced fewer physical symptoms related to psychological distress. Art therapy and schema therapy likely contributed to participants' enhanced awareness and management of psychosomatic complaints.

Obsessive-Compulsive: Participants' scores for obsessive-compulsive tendencies declined from **2.12** to **1.82** post-project. This decrease signifies a reduction in repetitive and distressing thoughts and behaviours, reflecting improved mental health and coping strategies.

Depression: The average depression score decreased from 2.24 to 1.41 postproject, indicating a substantial alleviation of depressive symptoms. Participants may have gained emotional resilience and a more positive outlook through therapeutic interventions.

Anxiety: Participants' scores for anxiety decreased from **1.66** to **1.11** postproject. This reduction signifies a notable decrease in overall anxiety levels. Art therapy's emphasis on self-expression and schema therapy's focus on emotional regulation likely contributed to this improvement.

Additional Scales: Scores on the additional scales also exhibited noteworthy reductions. These decreases suggest that participants experienced enhanced psychological well-being, as evidenced by improvements in interpersonal sensitivity, hostility, phobic anxiety, and other dimensions.

Interpretation

The significant improvements in SCL-90 scores post-project are encouraging and suggest that the "Healing Through Art" program had a positive impact on participants' psychological well-being. The art therapy and schema therapy techniques employed throughout the project appeared to be effective in addressing and alleviating psychological stress and maladaptive coping mechanisms among participants.

The reduction in somatisation scores indicates that *participants experienced fewer physical symptoms resulting from psychological distress*. This suggests that they gained better control over psychosomatic complaints through the therapeutic process.

The decrease in obsessive-compulsive scores implies that participants *achieved relief from intrusive and distressing thoughts and behaviors*. The project likely contributed to their improved capacity to manage obsessive-compulsive tendencies.

The substantial reduction in depression scores reflects a noteworthy alleviation of depressive symptoms among participants. This *attributed to the development of emotional resilience and more adaptive coping strategies* during the project.

The decrease in anxiety scores signifies **a notable reduction in overall anxiety levels**, which is indicative of improved emotional regulation and a reduced impact of anxiety-related symptoms on participants' lives.

The improvements in SCL-90 scores demonstrate the positive impact of the "Healing Through Art" program on participants' psychological well-being. The combination of art therapy and schema therapy techniques played a pivotal role in addressing psychological distress and promoting emotional healing among the participants.

Schema Test Scores (Pre-Project)

The Schema Test was employed to determine participants' specific early maladaptive schemas. The pre-project results highlighted the prevalence of the following schemas among the participants:

- Emotional Deprivation: 32.1
- Defectiveness/Shame: 24.3
- Emotional Inhibition: 27.2
- Social Isolation/Alienation: 38.5
- Failure to Achieve: 32.0
- Dependence/Incompetence: 21.6
- Enmeshment/Undeveloped Self: 23.4
- Subjugation: 31.9
- Abandonment/Instability: 29.7
- Mistrust/Abuse: 34.6
- Vulnerability to Harm or Illness: 40.6
- Negativity/Pessimism: 41.2
- Self-Sacrifice: 50.6
- Punitiveness: 34.1
- Unrelenting Standards/Hyper criticalness: 48.4
- Entitlement/Grandiosity: 44.5
- Insufficient Self-Control/Self-Discipline: 43.1
- Status-Seeking: 46.1



Impact on Schemas

Throughout the project, we observed positive changes in participants' early maladaptive schemas. By actively engaging with schemafocused sessions and employing art therapy methods, **participants reported increased self-awareness and improved schema coping mechanisms**. The post-project evaluations highlighted the effectiveness of the therapeutic approach in addressing psychological stress and maladaptive schemas among the participants.

These results reinforce the potential of art therapy and schema therapy techniques in facilitating emotional healing and enhancing psychological well-being among marginalised communities facing integration challenges.

The pre-project SCL-90 scores revealed a range of psychological distress indicators among the 65 participants. Notably, participants exhibited average scores in various dimensions of psychological distress, including depression, anxiety, obsessivecompulsive behaviors, and more. These scores underscored the presence of psychological stress and maladaptive coping strategies.



Observations

Throughout the course of the project, various observations were made during the therapy sessions. These observations included a noticeable increase in participants' comfort and engagement over time. Initially, participants may have hesitated to express themselves through art, but as the sessions progressed, **they became more open and expressive**. One significant observation was the reduction in emotional distress, particularly in anxiety and depression symptoms. Participants also exhibited enhanced self-awareness, recognising emotional triggers and patterns related to early maladaptive schemas that contributed to their distress. Art therapy played a crucial role in empowering participants to confront past traumas and gain control over their emotions and narratives. The group dynamics within the sessions were observed to be highly supportive, fostering a sense of belonging and validation among participants.

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Participant Feedbacks

The feedback from participants provided valuable insights into the impact of the program. Many participants reported a positive emotional shift, describing feeling lighter and more hopeful about the future. Importantly, they highlighted the acquisition of improved coping strategies to manage stress, anxiety, and depression. Participants expressed a deepened self-understanding, allowing them to make more informed choices in their lives. The safe and non-judgmental environment created during the sessions was highly valued by participants, as it enabled them to share vulnerabilities openly. Notably, a significant portion of participants expressed a desire for the program to continue, underscoring the ongoing mental health benefits they experienced.

These two subjects shed light on the program's effectiveness in improving participants' mental well-being, enhancing their coping mechanisms, and fostering a supportive and healing environment.

Future Goals and Project Continuation

Our commitment to improving immigrant and refugee mental health is unwavering. To reach even more individuals, we plan to expand the Healing Through Art program. By increasing session frequency, opening satellite locations in immigrant communities, and forming partnerships with local organisations, we can offer vital support to a wider audience.

In our pursuit of excellence, we aim to continually improve our therapeutic techniques. This includes integrating advanced art and schema therapy methods, providing specialised trauma-informed care, and collaborating with experts to ensure our participants receive the best care possible.

Our project extends beyond therapy rooms. We're dedicated to advocating for immigrant and refugee mental health rights. This involves pushing for supportive mental health policies, launching awareness campaigns to combat stigma, and partnering with educational institutions to promote cultural sensitivity training.





The Healing Through Art project has shown us the transformative power of therapy, support, and community. By expanding access, enhancing therapeutic techniques, advocating for mental health, and ensuring sustainability, we aim to create a brighter future for immigrants and refugees in need. Your ongoing support is crucial as we work toward these goals.



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