

Co-Led Group Expressive Therapies:

Reparative intervention for children impacted by trauma.

INTRODUCTION

KidsXpress is a not-for-profit organisation that provides a unique therapeutic intervention to children school aged to 14 years who have experienced or are experiencing trauma. "A trauma is a psychologically distressing event that is outside the range of normal childhood experience and involves a sense of intense fear, terror, and helplessness" (Perry, 2002 p.23).

KidsXpress has two delivery models: The first via a dedicated therapy centre in Moore Park; the second via an Outreach model where therapy is delivered in schools and community settings within Inner Sydney and Western Sydney regions.

KidsXpress' model involves Co-Led Group Expressive therapy. Three expert therapists work with closed groups of up to six children, typically grouped by age and referral reason. The program is ten weeks in duration, with sessions delivered once a week.

The KidsXpress program's aim is to enhance the social and emotional well-being of children impacted by traumatic life experiences.

Expressive Therapy is a somatically based, emotion focused, person centred, experiential, creative arts-based, transpersonal approach to psychotherapy (Pearson & Wilson, 2009). A broad range of modalities may be employed to help children engage with, process, and understand their difficult experiences and emotions. At KidsXpress the range of modalities used includes Music, Art, Drama, Play and Dance Movement Therapies. The specific combination and salience of modalities utilised with each group depend on client needs, developmental capabilities, and preferences.

METHOD

A mixed-method approach was employed for this research investigation. Pre- and post- quantitative measures of children's psychosocial well-being were complemented with qualitative responses from Parents/Carers and Therapist session notes.

Participants

This study comprised 126 participants in the age range of 4-12 years of age. Informed consent and pre-therapy assessment was achieved for all 126 participants. Mean age of participants was 9.4 years. 59.5% were male and 40.5% were female.

KidsXpress has a very low attrition rate. One parent asked for their child's data to be excluded from the investigation, leaving data from 125 children.

Measures

Psychosocial well-being was measured through conferred therapist ratings at the start of the program. Subsequent weekly ratings were blind-recorded for both group and individual scales. Group development was scored using MacKenzie's (1983) Group Climate Questionnaire – a widely utilised and validated measure of group development. Individual functioning was also measured on a 7-point Likert scale, where eight measures of well-being were deduced by leading childhood development experts from multiple international measures.

Parents/Carers and Referrers completed written questionnaires either online or by hand. These tools measured Parents/Carers' perceptions of change in their children's well-being, behaviour, emotional expression and social functioning.

RESULTS

Group & Individual Development

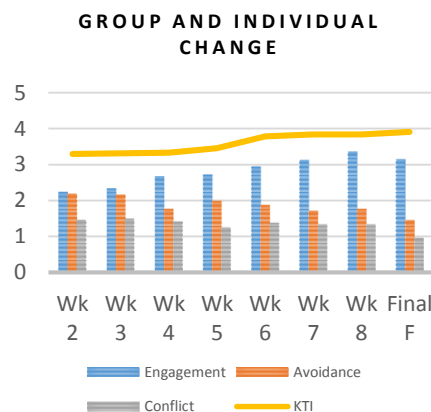
Children entered the therapeutic intervention through either the centre-based or outreach delivery model. They were assessed against a number of key indicators of psychosocial well-being: (A) Self-awareness; (B) Expression of Feelings & Emotions; (C) Connection to Others; (D) Recognition of Impact upon Others; (E) Understanding Others; (F) Regulation / Control of Behaviour; (G) Listening; (H) Ability to work in a Group.

Table 1: Pre- & Post- Transformation Indicators. Mean pre- scores are shown in blue and mean post-scores are shown in white.

A	B	C	D	E	F	G	H
3.1	3.1	3.2	3.0	3.1	3.4	3.7	3.7
3.8	3.8	4.0	3.7	3.8	3.9	4.1	4.2

Group data demonstrates significant change on the Engagement and Avoidance scales. Conflict decreases but not significantly. MacKenzie (1983) indicated that social development does not require Engagement and Conflict to be oppositional, suggesting groups may be engaged and in conflict concomitantly.

Kivlighan's (2012) research explicates the interrelated nature of group & individual change. **KidsXpress data concurs with the literature that positive group climate precedes individual enhancement.** Graph 1 illustrates that relationship.



Outcomes Reported by Parents/Carers

Parents/Carers completed time series measures pre- and post- therapy, and also provided qualitative feedback.

A seven year old's mother said: *"My daughter's behaviour is better now compared to before in terms of showing her emotions."*

A nine year old's mother said: *"She seems to have a lighter air. Not so serious or anxious. I think it's also built up her self-confidence and she is more assertive but reasonable concerning her own needs. It appears that she is better able to relate to her peers and from what she has told me has a more assertive approach to problem dealing."*

A six year old's carer stated: *"KidsXpress gave him a safe outlet through which to explore some darker feelings, and by exploring them it opens lines of communication at home."*

Outcomes reported by Parents/Carers include:

- Enhanced Family Happiness
- Improved Family Communication
- Better Emotional Well-being

DISCUSSION

The research from KidsXpress efficacy study aimed to articulate the impact of the program on the psychosocial development of children impacted by trauma. In doing so, a secondary intention was to explore the impact of the program's outcomes on family and social functioning.

Results demonstrate statistically significant increases in psychosocial well-being from pre-program to immediately post-program.

The Parents/Carers measures contribute insights which elucidate generalised uptake of expressive capabilities developed within the therapy program; explicating their role in enhancing family communication, elevating interpersonal connection in the family unit, and increasing levels of happiness.

Literatures articulates the interconnectedness of social and personal development. Accordingly, this study contributes a model of therapy that aligns to those assertions, evidencing the value of Group Therapy for children school aged through to 14.

Limitations

Readers should be mindful of the study limitations when drawing conclusions from the investigation. The study design (time series comparison) does not involve a control group for the purpose of comparing attendance against non-attendance to the program. This would be a strongly advised approach for future study.

Conclusion

This study indicates significant benefit of the KidsXpress Co-Led Group Expressive Therapy program, with immediate outcomes and subsequent lasting impact. Significant benefit is noted in psychosocial well-being of children and positive family function. Such findings warrant further research funding to develop and advance this type of intervention.

REFERENCES

- Kivlighan, D.M., London, K., & Miles, J.R. (2012). Are two heads better than one? The relationship between number of group leaders and group members, and group climate and group member benefit from therapy, *Group Dynamics*, 16(1), pp.1-13.
- MacKenzie, K. R. (1983). The clinical application of a Group Climate measure. In R. R. Dies & K. R. MacKenzie (Eds.), *Advances in group psychotherapy: Integrating research and practice*, pp. 159-170. New York: International Universities Press.
- Pearson, M., & Wilson, H. (2009). *Using expressive arts to work with the mind, body and emotions: Theory and practice*. London, UK: Jessica Kingsley.
- Perry, B. (2002). 'Stress, Trauma and post traumatic stress disorders in children', Caregiver Education Series, Child Trauma Academy, Houston, TX. Reprinted in Trauma and young children – a caring approach, Women's Health Goulbourn North East (2012). 'Literature Review – A trauma-sensitive approach for children aged 0-8 years'.



'Untouched' by Emma, aged 10.