



## Bringing restorative justice and art into mental health settings

Initial summary findings from the Mental Health Matters project:  
The UK, Greece, Hungary, Spain and Cyprus



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## About the Mental Health Matters project and this e-book

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Our mental health has long been ignored by all those with legal and ethical responsibilities for health and social care. In fact, there is evidence to believe that it is one of the most cited factors for stigmatisation and exclusion. In addition, we have evidence that show that bad mental health can lead to different forms of disability, while it is responsible for 30-40% of chronic sick leave and costing some 3% of GDP. More common than diabetes, cancer or heart disease, mental illnesses fill up to 21% of all hospital beds at any given time. Moreover, people suffering from mental illness and especially those who live in mental health structures are in the forefront of socially disadvantaged groups, suffering from social stigmatization and marginalization.

Admittedly, we have come a long way in acknowledging and dealing with some mental health issues, and society is gradually becoming more accepting. This progress is not the same across Europe as some countries are impacted by ingrained attitudes, societal and cultural factors while they might also lack the awareness, knowledge and skills that are needed to respond to current realities.

I have put together the Mental Health Matters (MHM) project to respond to this need. The impetus came from my belief that empowerment in mental health settings and therapy can have a significant positive impact on patients' healing process. This belief came from my in-depth study of restorative justice as an ethos, a philosophy and a practice. I have observed this concept being implemented in many settings and have seen over and over again the empowering effect that it can have on parties, whether these are victims of crime, offenders, mental health patients, our families, you and I.

Of course, this does not mean that restorative justice always works, or that it is appropriate for everyone. Quite the contrary. I have repeated in many publications the need for the restorative justice movement to stop producing evidences that would prove its superiority but focus on understanding where it works, when it works and why (Gavrielides 2010; 2012; 2014; 2018; 2019).

The Mental Health Project is one of my attempts to advance the restorative justice intellectual capital while producing concrete tools that will bring together the power of dialogue and art for the benefit of mental health patients.

I am not an artist and indeed my engagement with arts has been rather limited. However, I have always been moved by certain types of art that were able to speak to me in a must stronger voice than any scientific study or experiment.

If art and restorative justice as two separate concepts can create unique emotions and a process of empowerment and healing, then why not bring them together as therapeutic tools for mental health?

Art's healing effect on mental health is being acknowledged more and more. However, it is not an optional therapeutic approach for most mental health structures in many European Countries. Moreover, even though, there is an obvious need for more contemporary approaches which will possibly reduce the use of medicines, most mental health providers are stuck to old protocols avoiding alternative methodological approaches. The potential and benefits of combining therapeutic art with restorative justice are still not translated into educational material and programmes leaving many adult learners and professionals in the field unaware.

So, what is restorative justice? In 2007, I defined it as "an ethos with practical goals, among which is to restore harm by including affected parties in a (direct or indirect) encounter and a process of understanding through voluntary and honest dialogue. Restorative justice adopts a fresh approach to conflicts and their control, retaining at the same time certain rehabilitative goals" (Gavrielides 2007: 139). This definition was the result of around 250 interviews and questionnaires that were completed between 2001 - 2005 with practitioners, researchers and policy makers from around the world. The research pointed out that none of the practitioners called restorative justice a "practice", while none of the researchers called it a "theory"! There was an overwhelming consensus, however, that "ethos" was an all-encompassing word that could probably capture the richness and fluidity of restorative justice. This is key in understanding how to use restorative justice in mental health settings where crime and restoring harm that results from it might not be relevant. A restorative justice ethos is one that balances power; this can be the power between the practitioner (or mental health expert) and the patient.

Hui and Stickley's (2007) view on power is also helpful. They see power in mental health in two ways; either using a top-down approach where changes in policy and legislation impact on how mental health services are or a bottom-up perspective such as charities and patient groups who advocate for a change in services in which the patient is at the centre of their care. This second type of power has taken on a new name; empowerment. The aim of empowering the patient is to redistribute power so that the patient takes on greater responsibility for their health and have more control over their care. This may sound simple but it requires a significant undertaking. Such a rebalance requires shifting the very

foundations upon which mental health services are built on, from a medical and scientific way of working to a more holistic and person-centered approach.

But if restorative justice has shaken the very foundations of our criminal justice system worldwide, can it not do the same for mental health services?

I believe it can. But first we need to relinquish our own power. Restorative justice requires a shift in the social dialogue and perception of mental illness. Rather than the doctor as the expert in the room, the patient becomes the expert of their life story. Mental illness is seen not as something that has 'happened' to the person but something that the patient is going through and experiencing themselves.

Mental Health Matters through Restorative Art (MHM) aims to respond to this gap by bringing together a cross-sector, strategic partnership of 6 organisations from the UK, Cyprus, Greece, Spain, Hungary. The project is funded by Erasmus+ and is coordinated by the RJ4All International Institute. The partners are the Centre for Social Innovation (Cyprus), EDRA (Greece), Intrac (Spain), Athens School of Fine Arts (Greece) and Lelekben Otthon (Hungary).

Ultimately, MHM aims to enhance the skills, knowledge and experience of mental health professionals through the use of art and restorative justice. MHM also aims to train artists to use restorative justice in order to facilitate the relief of mentally ill and their social restoration. To this end, the project will create innovative tools that enhance the healthcare provision. This is the first project to also create a methodological approach which puts together the benefits of the art therapy with the values of restorative justice.

This e-book forms part of the project's results and it is the first step in developing its evidence based tools. The e-book is the result of the partners' collective effort as they conducted primary and secondary research with the aim to depict the implementation of restorative justice and art for mental health.

This e-book is the short version of longer e-book that expands on the summary key findings that we included here. The longer version includes chapters that were written in the partners' national languages.

I am grateful to the MHM partnership for their diligence and the hard work they have put in for this e-book. This is the first step in understanding how the power of dialogue and the values of restorative justice can help us

bring about policies, tools and trainings that will enhance mental health practice and theory in our individual countries but also across Europe.

### **Professor Theo Gavrielides**

RJ4All Founder and Director

MHM Coordinator

June 2020

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# CHAPTER 1: Art as a restorative justice tool in the field of mental health in the Spanish context

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## ABSTRACT

Besides being an expression of the individual uniqueness, art may be a powerful instrument to generate communication channels which may bring to greater mutual understanding, which is an aim pursued also by restorative justice. This study supports the idea that their combination through what we call “restorative art” might be a sound investment for the mental health sector, where professionals are constantly looking for innovative resources to promote personal and community development. This research aims at describing the current use of art as a restorative tool in the mental health field in the Spanish context. Both the literature review and the field research carried out with this purpose, underline the benefits that art practices have on people with mental health issues and the necessity to keep investigating, defining methods and procedures to encourage its use as a restorative tool.

## 1. Key objective of the country report

This report has been produced with the final aim to describe the use of art as a restorative tool in the field of mental health, specifically in the psychosocial rehabilitation and in the community integration services in Spain. For this reason, both a literature review and a fieldwork investigation have been conducted. The ultimate objective is to help inform the Erasmus+ funded “Mental Health Matters” project and its intentions to create capacity building tools for mental health professionals.

## 2. Methodology for the secondary and primary research

The Spanish chapter was produced using a mixed methodology. First of all, a secondary research has been carried out through a thorough revision of the existing literature on the use of art in the mental health sector in Spain. Afterwards, through a fieldwork investigation, raw data have been collected thanks to the

contribution of mental health professionals and art practitioners, through face-to-face/video interviews and online questionnaires. 20 relevant professionals have been involved in the investigation, specifically 10 mental health professionals (7 women, 3 men; aged 25-41) who work in different areas such as psychosocial rehabilitation, community-based accompaniment, personal assistance, job placement, vocational education and 10 art practitioners (9 women, 1 man; aged 25-36) also working in mental health services delivering art workshops.

	<b>Mental Health professionals</b>	<b>Art practitioners</b>
<b>Age range</b>	25-41	25-36
<b>Women</b>	7	9
<b>Men</b>	3	1
<b>Working Area</b>	Psychosocial rehabilitation Community-based accompaniment Personal assistance Job placement Vocational education	Art therapy for people with mental health issues

### **3. Current state of the art in Spain**

Restorative art is not a term that is used often. It has been defined as an educational process oriented towards the rehabilitation of people who have been involved in crime through the use of a creative process aimed at fostering self-awareness and provide a symbolic restitution to the victim. Its main application occurs in the penitentiary setting, since the practice intends to support the prisoners' rehabilitation and eventual reintegration into society.

The present study is aimed at exploring the use of art as restorative tool to support people with mental health issues in their rehabilitation and reintegration in the community, thus going beyond the penitentiary setting, to explore other contexts where art and restorative justice could bring meaningful benefits.

People with mental health issues, indeed, usually face many conflicts within their closest environment, and these conflicts provoke harms which could be effectively addressed through the practice of restorative art. The search for the term "restorative art" lead to few results in the Spanish literature. Therefore, our review mostly focused on art therapy, a wide discipline implemented in the

clinical, but also in the educational and social fields, which include approaches very close to the restorative art model, in terms of pursued goals. For the purposes of this study, the research was oriented at the identification of connections between art and the restorative-based approach.

Spanish professionals define by consensus art therapy as “a specific work which uses the process of artistic creation to accompany and facilitate processes of psychotherapy and promote the bio-psycho-social welfare in the framework of those individuals or groups of people who require informed and agreed therapeutic relationship.” (Federación Española de Asociaciones Profesionales de Arteterapia, 2018, p. 5) The discipline promotes dynamics of transformation which, despite the necessary distinctions, might be considered comparable to the transformation of people, relations and communities sought by the restorative justice approach.

Art therapy, in addition, offers the possibility to make evident some conflicts and the situations that led to their occurrence; it also allows to experiment some conflicts again, transferring them in a safe environment, where it is possible that people gain awareness about their actions. Art therapy supports the identification of distress, fears, harms and needs generated from a conflict (López Martínez, 2009), which are goals pursued by the restorative justice approach as well.

Art therapy is a relatively new discipline in the Spanish context, but considering its use in the field of mental health, since the beginning of its implementation, it went through different stages: firstly, art was used with a diagnostical approach; then the focus moved to the analyses of art products as representations of the illness; finally, art began to be considered as vehicle of communication. (González Falcón, 2004) Right in this last stage, we can observe a parallelism with the restorative practice, specifically in their intention to provide opportunities to dialogue.

Art can be used in several different ways; in the Spanish context, the most used approach seems to be the humanistic one, which pursues the development of positive and healthy aspects which allow people to reach states of fullness through the artistic creation, fostering personal growth and self-realization (López Martínez, 2009), which are fundamental to support rehabilitation and reintegration in the society, also pursued by restorative justice.

Most of the investigations carried out in the Spanish context are recompilations of articles from different authors who mainly define the discipline and its difference from other similar ones or are qualitative descriptions of case studies with different target groups. People with mental health conditions appears among the most addressed target groups, even though there is a lack of studies completely focused on the methods and procedures to implement art practices with them (López Martínez, 2009). In Spain, moreover, there are just few official centres to study this discipline and, despite the acknowledged benefits of its use, this profession is still not widely practiced.

Besides identifying the need to keep exploring and promoting art therapy, this literary review showed that there are some aspects of this approach in line with the restorative justice values, therefore, considering the benefits that their combination could bring to the community, it seems highly relevant to keep investigating in this direction.

#### **4. Findings from the MHM fieldwork**

The field research was carried out with two different methodologies, but in order to present the key findings in an organic way, they will be summarized in two different paragraphs, considering the profession of the people interviewed: mental health professionals (a) and art practitioners (b).

##### **a. Mental Health Professionals**

The population interviewed is part of the staff of Fundación INTRAS, the Spanish partner of the MHM project. INTRAS is a no profit organization dedicated to high quality research and intervention in the mental health field. The professionals interviewed work to promote the reintegration of the people with mental health issues in their community, fostering their autonomy and independency. They are involved in activities aimed at improving the quality of life of people with mental health issues, providing different services such as psychosocial and labour rehabilitation programs, occupational and vocational training, pre-labour workshops, counselling and professional coaching, personal assistance and therapeutic accompaniment.

Most of the professionals interviewed do not use arts in their work and have a limited knowledge of its use as restorative tool. Art therapy, according to some of them, is strictly related to the expression of feelings and with the facilitation of communication. Some of the professionals did not provide any kind of definition, showing little knowledge of the topic. The only exception was one professional

who carries out a workshop about creativity and resourcefulness in the framework of an active ageing initiative. Its main aim is making participants aware of the creative process, unleash peer support dynamics by sharing and bringing new points of view, participate and co-create.

All the mental health professionals involved in the research stated that they would really appreciate the possibility to learn more about the use of art as restorative tool in the field of mental health. According to them, creative processes could have a significant role in supporting the adoption of restorative justice values, which they considered as highly suitable to support mental health service users to deal with different kinds of conflicts and to limit their occurrence. Many service users, indeed, daily cope with unsolved conflicts within their closest environment. Many times, family members or partners try to impose their decision and limit the autonomy of their loved ones with mental health conditions. Sometimes these are overprotective measures, while other times they reflect the lack of trust in the possibilities of people with mental health issues. Restorative art could help these people to regain confidence, enhance their empowerment and improve their decision-making power.

#### b. Art practitioners

The professionals who contributed to this investigation as art practitioners are also working or sporadically collaborating with INTRAS. Their knowledge of art therapy is extensive, although they also expressed their willingness to keep learning and exploring new ways of put it into practice. They work/collaborate in the day care centre or in the psychosocial rehabilitation centre of the organization, supporting people with mental health issues in their recovery process. Some define their profession as "creative accompaniment" aimed at improving the way people in a disadvantaged situation manage their life.

As a result of their background and experience in the field, they are highly aware of the art therapy tools which they use with people with mental health issues. They work with different kind of arts, depending on their interests, talents and the resources they feel more comfortable to work with. Indeed, this last point seems to be very important, especially because art therapist agreed to say that their workshops tend to be dominated by improvisation. Feeling comfortable with a specific type of art is important have enough flexibility to adapt to the demand of the group. "Sometimes you plan an activity but the users come with low motivation, bad disposition or suffering from the side effects of a medication and

there is no way to go on with the plan". Very often, the expectation of the facilitator can be just partially met, but the most important think, according to all the people interview is let the process flow anyway, because the process is far more important than the product. Most of the art therapy programme are planned as 6-months weekly sessions, enough time to let interesting dynamics arise spontaneously within the group. Art is a powerful mean to open a communication space and promote peer support dynamics which, for instance, permit the building of genuine relationship based on trust and reciprocity who benefits both the individual and the group.

Reflection-generating questions generally open an art therapy session. They are followed by the creative process and closed by a sharing moment where participants recognize both their creation and those of the other ones. This mechanism of reflection-creation-sharing is essential to promote on one hand self-awareness and on the other hand, the recognition of the other. Regardless the specific tools used, art therapy processes open dialogue channels which potentially foster both personal and community development.

## **5. Reflective section**

Figuratively speaking, exclusion and marginalization has been the punishment that our society, with their eyes blinded by stigma, historically has inflicted on people with mental health issues. Nowadays, in Spain, their living conditions in terms of inclusion are improving, although their ability to participate as equal members keep being highly underestimated.

Mental health professionals and many other relevant actors daily strive for their empowerment, but there is still a long way to go. The scientific community supports the use of art as a relevant tool to promote this process, relying on its power to generate communication channels which can make a dialogue possible.

In line with this belief, the field research conducted in the framework of the MHM project underlines both the desire of professionals to keep exploring new resources to improve the service provided and their trust in the efficacy of this practice to guide mental health service users in their personal development and in the building of more inclusive communities. Therefore, restorative justice and

restorative art in particular might have a role to play in capacity building them to better support those with mental health issues.

## **6. Training needs analysis**

Most of the mental health professionals involved in the study do not have any experience related to the use of art as a restorative tool. Restorative justice as a concept was also unknown. Some of them would like to receive a theoretical framework to have as reference, but most of them insist on the necessity to get a practical training under the guidance of professionals who already use art with people with mental health issues.

Clear and practical guidelines were considered fundamental in their preparation for future implementation. Some professionals expressed their desire to explore the possibility to adapt this practice in their specific working area such as, for example, the labour insertion. Practical exercises have also been considered important to deeply understand the possibilities of this practice and study its potential adaptation to different specific working areas.

Finally, mental health professional would like to rely on trusted tools to monitor the impact on the service users and understand the potentialities of art to: improve self-expression, promote communication, deal with emotions, overcome psychological blocks, cope with the effects of traumatic experiences, identify and prevent crisis, foster emotional intelligence, promote assertiveness, improve reflection, attention and concentration.

Art practitioners would like to keep improving the service offered to people with mental health issues and for this reason they would appreciate more professional interchange opportunities to keep exploring the unlimited possibilities of arts. Visit other centres, have access to databases collecting meaningful experiences might support the improvement of their work. According to them, it is important to keep developing more and more activities to engage with the group, create activities oriented to specific goals, explore new tendencies such as the appreciation of the role of playful elements which can complement the creative process. Play spaces, indeed, offer a symbolic space to face challenges connected with our existence, they provide the chance to risk in safe space and finally enhance the assimilation of learnings. (López Martínez, 2009)

## 7. Concluding thoughts

The research indicates that, in the Spanish context, restorative art has not been much explored yet, although some art therapy approaches show consistency with the values of restorative justice. In the framework of the recovery approach that is currently the most used one at national level to assist people with mental health problems, there are good conditions to turn this practice into one of the mainstays of their recovery process. Its efficacy keeps being recognized, now it is time to respond to the needs of professionals demanding for additional guidelines and support to put it into practice. In order to develop a truly innovative model, in addition, besides responding to the underlined needs, the project team should keep fostering a reflection on the connections between art, mental health and restorative justice, since, as showed by this study, their link needs to be consolidated.

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## Chapter 2: Restorative justice through art therapy in mental health in Cyprus

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### Abstract

**Objective:** To investigate the field of restorative justice through art therapy in mental health in Cyprus.

**Methods:** A literature review was conducted as well as 10 in-depth interviews based on a semi-structured guide; 5 with mental health professionals and 5 with art therapists. The interviews were analyzed through qualitative analysis methods, which resulted in several of conclusions.

**Results:** The use of art therapy in mental health structures in Cyprus is limited. At the same time, restorative justice in mental health structures as well as in art therapy seems to be an unknown field.

**Conclusions:** Although the positive effect of psychotherapy through the arts on people with mental health problems is widely recognized, its application in Cyprus is very limited. This is due to the limited financial resources provided in this field, as well as the difficulty presented by the competent bodies, which is largely due to ignorance. MHM can be a very useful project for the promotion of the under investigation field raising key issues such as the positive impact art therapy may have on people with mental health issues while it could also give solutions regarding place and time for the implementation of such a practice.

### Key objective

This report aims to outline the situation regarding the implementation of art therapy in mental health care structures in Cyprus.

## **Methodology**

The research conducted in the framework of the European-funded Erasmus+ project “Mental Health Matters Through Restorative Art (MHM)” regarding the implementation of art therapy in mental health structures in Cyprus is based on qualitative research conducted on two levels.

Firstly, the research was based on literature review, however, the identification of sources regarding the issue under examination was not possible at all. Beside some articles in the newspapers of art therapists talking about their work it wasn't possible to find any other reference material. This reflects both the lack of relevant research regarding as well as the limited use of art therapy. In addition, it underscores the lack of information available to the general public on this issue.

Secondly, we conducted personal interviews based on a semi-structured questionnaire with both mental health professionals and art psychotherapists; visual therapists, dance therapists, and drama therapists. The aim of the interviews was on the one hand to record the knowledge and experience of therapists in relation to the application of art therapy to people with mental health problems in Cyprus and on the other hand to outline the application of art therapy in mental health structures by mental health professionals. After the completion of the interviews, a qualitative analysis of the results was made, and the results were recorded in various categories. It is noted that in the context of the investigation, the personal data of the interviewees as well as the professional secrecy were secured.

The target group consisted of 10 people, 9 women and 1 man, 8 people aged 25-34 and 2 people aged 35-44. Of the 10 participants, 5 were mental health professionals: 2 mental health clinic managers - 1 from the private sector and 1 from the public sector - 2 mental health nurses and 1 occupational therapist in mental health structures. The other 5 people were psychotherapists through various arts: 3 were visual therapists and 2 were dance therapists. It is noted that some of these individuals are active in associations of mental health therapists and spoke to the research team under this capacity of theirs as well.

Target Group	Total	10			Total		10	
Mental Health Professionals	5	Specialty	Public Sector	Private Sector	Gender		Age	
		Clinic Managers	1	1				
		Occupational Therapist	1	0				
		Nurses	2	0				
Art psychotherapists	5	Visual Therapists	3	0	Men	Women	25-34	35-44
					1	9	8	2
		Dance Therapists	2	0				

**Current State of the Art in Cyprus**

For the case of Cyprus, it was not possible to refer to the State of the Art as the identification of sources regarding the issue under examination was not possible. This reflects both the lack of relevant research regarding as well as the limited use of art therapy. In addition, it underscores the lack of information available to the general public on this issue. There is also lack of information regarding Restorative Justice and the utilization of its principles during the therapeutic procedure.

**Fieldwork**

As part of the field research, the research team conducted 10 interviews based on a semi-structured guide, which aimed to outline the situation in Cyprus regarding art therapy in mental health structures. At this point it should be noted that the interviews were conducted by telephone to replace the focus groups, which were impossible to carry out due to the emergency situation created in Cyprus by the COVID-19 pandemic. It is also noted that the personal data of the interviewees were kept secured and confidential and were only used for the purposes of this report.

Starting with the conclusions drawn from the target group composed of mental health professionals, it seems that everyone was aware of the term “art therapy.” Some said that they had experienced this kind of treatment at one of the structures where they worked, while others said that they heard that this method

is applied in the framework of some mental health structures, but not to those where they happened to be working. It is also noted that these individuals were not informed about this subject during their studies or occupational specialization.

It is important to note that despite the fact that the mental health professionals have heard of art therapy, most of them did not know exactly what art therapy is. Some of them perceived this process as a free time activity. Those who have more knowledge on the topic reported that due to the limited time that therapists have with patients, art therapy fails to reach depth and is thus limited as a means of entertaining or relieving patients.

Conducting an overall assessment of the situation, mental health professionals stressed that the effects of art therapy on patients are particularly positive and obvious. "People come to these meetings with anticipation and enthusiasm", said one clinic manager. It was also reported that in a day care structure, people are attending art therapy meetings most often than any other.

It was also noted that art therapy helps people regarding cohabitation and group work, while at the same time it improves their mood. The following incident was mentioned as an important achievement by an occupational therapist: "People at the center where I worked, after some time of drama therapy, managed to present to the public a small theatrical performance, which is very difficult for these people to do as their mental state involves stress, social distancing, and low self-esteem. With the help of drama therapy, they improved a lot."

Mental health professionals pointed out that through their experience they realized that art therapists often do not have the necessary, specially designed space to create the right conditions needed so as to go through with the specific treatment. In addition, they noted that the time given to art therapists is not enough for the treatment to have significant results and impact on patients. In this context, a clinic manager said: "is also included the fact that the art therapists do not manage to make any assessment of the effects of the therapy on people involved. Attending a session once a week, for a period of six months, in a group therapy setting, is not enough to develop the therapy at the level that they want and record the results." As they pointed out, this is due to the extremely low funding that the government gives for this type of treatment, which before the financial crisis of 2013 was much higher.

As a final comment, all health professionals noted that art-based psychotherapy is a very beneficial treatment for patients in mental health structures, which should be given attention and financial support.

With respect to the target group of art therapists, they said that this type of therapy is not very common in Cyprus. They mentioned that its application is very limited and the general public does not know what it is, while it does not exist in the academic field as there is no research or school that offers an art therapy degree, at any level.

It should be noted, however, that there are associations of music therapists, dance therapists, drama therapists, and art therapists, although the latter has not yet been established as a profession. It should also be pointed out that in relation to their studies, the majority of the interviewees (4/5) stated that they studied Psychology and had a two-year specialization in Art therapy. The academic background of art therapists is currently a topic of discussion in Cyprus, as some argue that one cannot practice this profession if he/she does not have a degree in Psychology and does not complete the necessary two-year specialization. On the other side, some people claim that psychotherapy through art can be applied by people who come from an art school and have specialized in two years.

Art therapy in Cyprus is practiced both in private and public structures, such as mental health hospitals, day-care centers for people with mental health issues, care centers for people with mobility issues or intellectual deficits, centers treating alcohol and drug addiction, schools with students showing delinquent behavior, as well as centers that provide individual sessions for personal empowerment.

The therapists, referring to the methodology they apply, mostly referred to "restorative justice" practices, saying that the content of the session with a patient is decided by the patient and the therapist, depending on the issue that concerns the patient at each time, their feelings and thoughts. Based on these, the therapist forms the method that will be applied during the session. Based on the results of the session and its effects on the individual the therapist plans the next steps accordingly.

Therapists reported that they face fundamental problems in Cyprus, as in recent years both the centers that offer such therapy as well as the time allotted to this

kind of therapy have been greatly reduced. Regarding the private sector, they reported that the practice of this therapy is limited to a few centers throughout Cyprus. Regarding the public sector, they stressed that the time allotted is not enough for the treatment to have results for the patients, therefore it is limited to a means of relaxation or as an activity for people in their free time. An art therapist said: "Since I see people once a week, I can't develop the therapy to the desired level. That fact must be considered."

They also referred to a common problem in the provision of art therapy, which is the lack of adequate space, which will contribute to the healing process. A dance therapist said: "The spaces given to us did not create conditions for privacy, so to develop a context of trust during the healing process." Incomplete knowledge of the relevant bodies in this field is also mentioned. People in governmental and other relevant positions are not aware of the effects of art therapy, thus they limit the therapeutic session's time and context. Specifically, it was said by a dance therapist: "I was hired at a school to help students who were demonstrating delinquent behaviour. Despite all the effort I put into art therapy, I eventually became another school attendant, as I was given neither the space nor the opportunity to apply what I have studied."

The therapists emphasized, confirming the health professionals, that the resources for the provision of this type of therapy in Cyprus are limited - today even more limited compared to the time before the economic crisis. Therefore, everyone came to the conclusion that measures should be taken to inform the competent bodies and general public in relation to art therapy and its beneficial effects, so that it can be supported and implemented to a greater extent. As they recommended, it is important to develop therapeutic programs through art in a larger number of organizations, in the necessary time and space.

### **Conclusions and Suggestions**

Art therapy in Cyprus is practiced in very limited ways. This fact is confirmed by the ignorance of the general public, by the absence of bibliographic/ research reference in this field, but also by its application to a very small number of organizations and structures.

In particular, the research conducted to find relevant literature and academic research did not lead to any results. In addition, the field research conducted on

the basis of personal quality interviews with mental health professionals and art therapists shows that in the case of Cyprus major changes need to be made in order to practice art therapy and to have the desired results for people who need it.

In Cyprus, art therapy is practiced in limited private spaces and public institutions. However, even though its effects on individuals is very positive, the duration and space where it is applied do not meet the standards. Therefore, art therapy cannot be evaluated qualitatively and is limited to its application as a means of relaxation and entertainment rather than as a therapeutic agent.

Given the above, some suggestions can be made. It is important to create informative material, both for the competent bodies and for the general public, about the beneficial effects of art therapy on people with mental health problems. In addition, in the context of MHM project's next steps it is important to develop tools to assess the impact of the therapy process, even through a small number of sessions. A useful tool can also be a guide about the space arrangement during the treatment process, which can be communicated to the competent state bodies, to mental health structure operators, as well as to art therapists.

Furthermore, in the case of Cyprus the principles of restorative justice need to be promoted into the mental health structures and art therapy. For this purpose, MHM could provide knowledge, information and examples of practices, which should be followed from professionals in the abovementioned field.

## Chapter 3: The use of restorative art in mental health structures in Hungary

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### **Abstract**

In Hungary, art professionals connect to the health system in two different ways. Either they are art therapists with a certificate in the profession which has existed since 2007, registered in their occupation registration list since 2011, or as artist in training in psychiatric nursing. Artists without training are not permitted to work in the health care system. Two types of qualitative research were done to investigate the use of art in the mental health system in Hungary, by art therapist or artists working in psychiatry. One was a focus group held at the Debrecen Psychiatric Institute. The second was five private interviews and questionnaires provided to artists and art therapists working in different areas of Budapest. All findings show close relationships between patients' well-being, supportive factors of art, diagnostic framework, and collaboration with mental health professionals. The awareness of restorative justice is either low or non-existent, and there is appetite for learning more about its theory and practical implementation in the mental health sector.

### **Key objective of the country report**

We aimed to investigate the relationship and current state of art - mental health services, therapy and restorative practices in Hungary. Initially, we conducted a literature research on the Internet, later with resources from Research gate, PubMed, and Academia. We tried to get an overview of the current situation in Hungary and later after the field work some explanation and suggestions based on our theoretical and practical findings.

First of all, we have found that theories of restorative justice are known but not widespread in our country. In google research we can find 50 800 findings for

“restorative justice” in Hungarian. If we have combined the search with “mental health” it dropped to 7900. Reviewing these results, we find mostly either doctoral theses or homepages of civic foundations. Most detailed is a book published in 2010 on the European Good practices of Restorative Justice in Law (2010 Konferencia kötet). The most visited foundational sites are Family, Child, Youth Association, Forsees Foundation, Konszenzus Foundations, Partners Hungary Organization. These mentioned associations offer services for families, public schools or companies and do research, training and services in public institutes (Prisons for juveniles). According to informal research, restorative justice is not part of the mental health educational programmes, except in clinical and school psychology as a restorative conflict resolution process. The concept is being researched at academic level, but it is not known in public health (as we will see in the focus group). Doctors, nurses, therapists try to do their best to balance between the theories and possibilities and reality when it comes to terms as safety, freedom, and human rights. Psychotherapy focused treatments often have daily encounter groups where patients and the staff can resolve conflicts or problems.

Patients, especially in the 1950s who needed psychiatric care really suffered from injustice during treatment based on ideological or governmental measures (Kapocs 2017). For example, mental illness was seen as an artifact and side effect of capitalism most psychiatric home cares were placed on to the western border of the country making family visits of the clients impossible. Or because lack of concept these homes were not controlled and directed by psychiatrists rather by undereducated social workers and volunteers. In the 1930s, the previous practice of family care units ceased. There have been three forms of free national health services available to patients since the 1960s: psychiatric homes, psychiatric clinics and psychiatric care. In the big psychiatric homes rehabilitation programs aiming the betterment of the patients started only from the 2000-2010s (Kapocs 2017).

In 2002, the TASZ (HUNGARIAN CIVIL LIBERTIES UNION) conducted a study on the rights of psychiatric patients and found that the standard of living and treatment of these institutions changed according to the management of the house. Mistreatment, abuse or negligence have occurred, and have come to light in recent decades. In 1999 the Rosenthal Report criticized the large, overburdened institutes and lack of community psychiatry services. The integration and re-integration of patients is a great challenge as social service network operates with a very low budget and a neglected branch of the political will and activity. According to research by the TASZ the lack of civilian control is also an obstacle in the enhancement of human rights in psychiatric homes.

In 2007 the national psychiatric and neurological clinic in Budapest (OPNI) was terminated and reorganized. Some day care emerged as a civic initiative. Psychiatric care services provide medical psychiatric treatment and most often verbal psychotherapy. Psychiatric clinics and homes provide medical treatment and various therapy forms (verbal, non-verbal) and daytime activities.

Art as therapy appeared in mental health structures only in the last 10-20 years. Szentgotthárd which is the biggest psychiatric home in the country with 700 inhabitants, started to use art and art therapy in 2006 to fight off aggression and frustration among patients.

Previously in most psychiatric clinics occupational therapy was the most common ~~form~~ method to keep clients active and prevent them from boredom and frustration. Later, craftsmen were employed to teach weaving, pottery or such for the clients. In the 60s and 70s, some psychiatrists began collecting the works of mentally ill people who were artists or were keen to create works of fine art (Jakab at Pécs, or psychiatrists of OPNI). Since the 2000s art therapists working in psychiatric care are either artists or have MA diploma in humanities. In our research we tried to obtain interviews equally in all fields. In 2004 OPNI organized the first Hungarian Art Brut Exhibition with civilian and American grants, based on artistic qualities of the collected works. Due to the closure of OPNI, it was closed in 2008 and then revived in 2013 in a private law, civil initiative as the Tárt Kapu Gallery (Open Gate Gallery). Nowadays there are several foundations that offer art therapy for mentally ill people, besides Tárt Kapu, occasionally Moravcsik Foundation, BAB, or the Félziget (Peninsula) Foundation . With our recent research we would like to evaluate these findings in practice.

## **Methodology for the secondary and primary research**

Following the theoretical research of the field of restorative justice, mental health and art in mental health in Hungary we carried out our field research as presented in H1 and H2

H1. A focus group was conducted in Debrecen Psychiatry. Recruitment was voluntary with no financial compensation. 12 members of the Kenézy Gy. County Hospital Psychiatry participated there: 6 psychiatrists, 3 psychologists, 1 mental-hygienic assistant and 2 artist psychiatric nurses.

H2. Interviews and questioners were carried out with five artists-art therapists concerned with their experience in art therapy in the mental health care.

	gender		average age	occupation					
	male	female		doctor	psychologist	nurse	craftsman	artist	art therapist
H1	5	6		6	3	3	3		
H2	0	5	45,4		2			3	5
			40,8				3	3	5
Sum	5	11	43,1	6	5	3	6		5

Gathered data was analyzed to find key themes and topics relevant in the questionnaires and narratives.

### **Current state of Art in Hungary**

Art Education basically exists in three public universities in the Country (MOME, KME, PTE MK) and some private universities (MET). Digital art, design, graphics, textile, etc. are parts of the education. MOME provides postgraduate training in Visual Arts Education (two-year program) and PTE Art Therapy Postgraduate program (three years). Another University called John Wesley has a two-year Artistic Therapy postgraduate program.

Artists graduated in academic art education often try to find their ways in industrial environment: in fashion, car design, animation, graphic design, films, commercial field etc. Only a few of them became fine- artists. It is not easy to live as an artist in Hungary, national grants and subsidies are often difficult to obtain. Sponsorship is available by ideological interests or social network. There are three big national galleries and more private ones.

From 2012, the government established the Hungarian Art Academy (MMA), which decides about financing, patronage. Members of this Academy elected by the government. The Academy (MMA) is governed, and financed by the Ministry of Human Recourses (besides health and education). Hungarian art and artists often struggle with the specific phenomenon of the country.

Artists are often sensitive to social issues, but those who enter art therapy training often seem to have some familiar background or experience with mental health clients. So the encounter with psychiatric lifespans and narratives is based on personal motivation rather than artistic articulation.

## Findings

H1. The Kenézy Gy. Debrecen County Hospital provides various mental health programs for clients. It is an interdisciplinary institute with psychiatrists, psychologists, nurses and art therapists working in a team. They have four departments: Addictionology, Rehabilitation, Innovative Psychiatry and Psychiatric Daycare. All departments employ artists or art therapists for the benefit of the patients. Psychiatry holds a cognitive psychology approach and offers various types of therapies. Other than art therapy there are encounter group, cognitive therapy, schema-therapy, tale group, sensory group, animal assisted therapy, music therapy, folk dance, biblio (literature) therapy, drama therapy, psychodrama, relaxation group, film group, sewing group. The staff has not heard of restorative justice theory but found it interesting. They could connect to the concept with the daily big group encounter group facilitating conflict resolution and daily matters of the psychiatry. Both patients and staff share ideas and thought about living or being together in the institute.

They explained all forms of therapy that are provided for clients.

**Available art or artistic therapies are:** complex art therapy, year-circle group, arts and crafts group.

- Complex art therapy analytic approach based on Jung's theories. Analytic art therapy would be a one to three years long process. With psychiatric care only elements of the methods are used. Requires self-reflection, art works reflects to myths, symbols, fairy tales, archaic images (archetypes), poems.
- Year Circle Group: Reflects to the basic Hungarian traditions, holidays and anniversaries of the year. Creative process and free group interaction are combined.
- Arts and crafts group: painting for music, free creating, clay and ceramics work, basketry.
- Other art modalities such as music, drama, or dance combine drawing, painting or other creative elements of art therapy.

**Artists' reflection on the benefits of art in the mental health program:** the art therapy sessions and creative groups are opportunities for self-reflection and community development. People meet their creative and healthy self-part. They can open up toward each other, share feelings, emotions, and often explore their inner issues that were unconscious before. Mentally ill people often have difficulties in emotional and self-expression, but through non-verbal images they can identify with the inner states and feelings that help them to realize and verbalize. This self-expression may foster improvements in mental health state.

Art and the creative process are activities that help to energize and enhance competence and feelings of confidence. Clients can try imaginary and thought in a pretend mode through forming images and create pictures. Also, because art therapy sessions are not achievement-oriented they can ease anxiety and become familiar with working in a relaxed state of mind.

Creating art can aid the diagnostic process as well, or can provide feedback regarding improvement. Traumas that can be pre- or post-verbal can show up in the image and client may be able to reflect on it, or get a new perspective or narrative of the event. Clients may empathize and identify with characters of films, short stories, tales that help them to learn about themselves and life strategies.

The creative process, recreating, or changing the image gives feedback to clients that everything is changing, and everything is changeable (not just the images, but personality and life as well), which provides hope and self-esteem for many clients. The process of change and improvement are visible yet it is an evidence of betterment for the client which is not just beneficial for the patient but the therapists and the team as well. Improved self-esteem contributes to better coping strategies, new chances some risking in life. Rehabilitation is challenge that has to help the clients to reintegrate into society and find their place and responsibilities again. So art making can be a bridge between illness and future health and work opportunities.

Mental health professionals saw art as a supportive occupation of clients with benefits in emotion regulation and self-competence. During the focus group they realized the possible and additional diagnostic source of art-making, and the detection of the healing process. It seemed that more case studies and team group (case supervision) would be necessary to combine health profession with art as therapy.

## **H2 The interviews**

The interviews with artists and (or) art therapists revealed similar findings as above. Three of the therapists work at hospital psychiatric department, one in addiction department and another one in social services for orphanage of public care. All the therapists obtained MA degree then studied in postgraduate program to be an art therapist. Initially 3 of them are artists, 2 of them are psychologists. All of their clients struggle with mental health issues, many of them have severe symptoms of personality disorders or psychosis. The average age of clients is 21-53 years. The artist-therapist, before explaining the theory, had not heard of restorative justice, it seemed interesting to them, and during the creation they shared thoughts of a sense of equality and freedom among the participants and

staff. They all seemed sensitive to the needs and sufferings of clients, but had a professional view of the need for boundaries in the treatment of clients with mental health. In their view, the concept of restoration conflict resolution should be taught in early childhood, so the families partially would have a tool to solve problems. It seems for them that patients often violate the lives of family and friends as well, just as society offends patients, with their isolation in institutions.

Therapist	Do you work with mental health patients?	Age of clients	Have you heard about RJ?	Do you believe art can be help in mental health ?
1	yes	17-25 (M=21)	no	yes
2	yes	18-70 (M=53)	no	yes
3	yes	18-56 (M=37)	maybe	yes
4	yes	18-65 (M=41,5)	no	yes
5	yes	18-60 (M=39)	no	yes
		21-53		

Psychiatry and Department Addiction provide many other forms of therapy including art therapy. Art therapy in all cases is a part of the clients' weekly routine. Art therapists typically run 2-3 small groups in the institute. Clients may enroll the art therapy group with the aid of their psychiatrist or, in the rehabilitation phase, they may continue on individual initiative.

In the children's home the artist has three small groups a week. Children are sometimes brought by caregivers, teenagers and young adults come voluntarily. Groups are divided by age groups.

Therapists summarize **the effect of art on clients** in the following ways. Art helps to communicate those emotions and feelings that are hard to express. The materialization of the inner content gives opportunity of distancing from it that provides safety and chance of examination. The introspection of creative process changes focus from performance to the course of action, and symbolically speaks about the pathology that might bring relief.

Visibility and re-composition of problems, tensions, feelings in another- the visual, imaginary- modality improves condition of clients. The safe environment of the art therapy group with the feedback of group members and the therapist help the patients to express their own feelings and to understand of others' emotions. The group serves as a container of suffering and strong feelings, and of course hopes and joys.

Beyond the effect of group dynamics such as belonging to a community, acceptance, connectedness, mutual respect art activates creating symbol which may hold unspeakable contents. Unconscious may represent itself, but comprehension depends on the client, that gives feelings of control and competence, and transformation of old patterns.

Expressing our inner world through arts strengthen the sense of individuality, gives self-competence. Imagery is connected to preverbal development and for this reason many especially traumatic memories can be reached only by imagery.

Most art therapists use **techniques** of free or themed semi structured drawing, painting, oil or soft pastel works, montage, collage, clay work and textile work. The focus may vary from content to method and material or specific technique. Many of what connect the art making to movements or dance, music, literature and film experiences brought by clients or therapist. Multimodality is well applicable. Most artist art therapists prefer techniques that are non-figurative and do not require any specific skill or knowledge, artistic trends such as gesture painting, reliefs, monotypes, figurines or ink techniques is adequate to this kind of approach.

Most art therapist combine individual work in group with group work, where shared canvases or common creating is a priority.

Most art therapists questioned in H1 or H2 work in a team in close collaboration with mental health practitioners. Most of them would require more team meetings where they can share experiences about the clients. Little information change happens between the psychiatrists and artists, and especially in the focus group I turned out that specific knowledge and perspective of the artists could serve as a very useful source in the healing process. Those who worked in pairs with an art therapist, or psychologist colleague reported regular weekly meetings and cases.

### **Reflective section**

Both focus groups and interviews confirm the positive effect of art in mental health care. They emphasize three basic element of curative effects of art making which we have found resonate to the theory of Expressive Therapies Continuum-ETC (Lusenbrick, Kagin 1978) which postulates that art as therapy effect three levels of the individual in accordance with the three levels of neuropsychological information processing. It is the kinesthetic- sensory level where client experiences and reaches preverbal experiences such as rhythm, texture, sensation. Interaction with various art media stimulates primal areas of the brain and meets basic expressive needs such as scents, tactile information or movement. Engaging with the art modality and choice of medium refers to these primary needs. Since traumatic events – even if we consider PTSD events, or continuous

traumatization which both are very frequent phenomenon in mental health pathologies (Turner 2004, Thoits, Kessler1985) causes dissociation (Bessel1995) we might see the correlation of art materials and expression of preverbal or post-verbal experiences. We need to highlight those current art therapy researches that try to reveal the connection of art mediums and the level of stress relief (Iskovitz, Czamansky 2018) which emphasizes the fluidity and control factors of the material to be key components of stress relief. More recent studies were made also on the effectiveness of clay as a medium that hold possibilities of emotional regulation through the effect of manipulation of the material to the sensomotor system

The second level is perceptual-affective level where focus is on the self-expression, visualization and materialization of emotions and feelings. It may combine with verbal thoughts, but it can remain at the level of gestures, and intensity of feelings. Image or creation usually bring satisfaction or relief to the client because an inner reality has been shared with the other being presence. The emotion regulative component of art making and art therapy is studied in recent years especially concerned with anxiety (Chambla 2008), stress (Kaimal 2018) ad personality disorders(S. Haeyen 2015).

The third level is the cognitive symbolic level a way of expression when creation and planning are combined. Although it is a process of symbolizing, finding meanings and association to the image that has been made. The mentalization based art therapy approach (Harvesteen,2015) investigates this approach. Where reflection to the process and the image is equally important. And clients may focus on working mechanisms through the creative phase.

Also those art therapy techniques which combine visualization, relaxation or symbol creation may operate on this level. The material and method is secondary for clients functioning this level, rather the expressed content is in the front.

The fourth is the creative level of functioning which integrates previous levels.

### **Limitations:**

We have found very little description, concrete knowledge, and awareness of restorative justice, but perhaps this will be achieved through conflict resolution.

The art-therapist focuses on the self-expression values of art rather than aesthetics which is a requirement in professional art. It is a worry that though mastery of materials and techniques might be taught to clients that can have a beneficial effect on cognitive functioning, but if art has expectations, vulnerable people might be uncertain to express their emotions freely through art.

Passive art therapy, where professional art could be in dialog with the feelings and emotions of patients might be useful as well. But psychiatric patients have few opportunities to visit exhibitions.

In our further research the question was raised as to whether art could be used to build bridges between the clients and society (health care institution or relatives, family members). Unfortunately, there were no examples of these forms. We considered it a restriction. Restorative element of art can be expanded if mental health clients and their environment can co-create. This would be a new form of dialog, and educability and connection.

### **Training needs analysis -Suggestion**

Training material should be provided for mental health professionals on:

- the concept and practices of restorative justice and restorative art
- art as a way of nonverbal dialogue and personal communication
- the benefits of passive art therapy and community art
- the benefits of an open studio in psychiatric homes and clinics, as well as in psychiatric care as a prevention
- art therapy as self-sufficiency for mental health professionals
- connecting ~~to~~ with patients through co-creating art

Training material for artists

- the concept and practices of restorative justice and restorative art
- art, catharsis and passive art therapy, how art ~~can~~ influences mood and self-reflection
- art made to express or mirror suffering. Or art as a reflection of the “life story of the other” from different perspectives and viewpoints. We meant this is a bit like the playback improvisation theater, where an “editor” tells a story and others act that out.
- making art as an expression of beauty, optimism or gratitude
- making community artwork for healthy or mentally challenged individuals

### **Concluding thoughts**

Our conclusion is that art can be a transitional zone between individual emotions, needs and acceptance by society. Both sides can learn a lot from each other and about each other. In Hungary, we see that mental health professionals and artists are also very sensitive and empathetic.

Today, society is very closed, impatient and anxious for cultural, existential and political reasons. We doubt that if society faces the suffering of the mentally ill, it

raises the level of awareness although we believe in its importance. The first art, which focuses on basic human acceptance, shared values as the need for belongings, support, comfort, individuality and different perspectives, can be gentle steps towards each other.

Following our research, we have announced a tender for amateur and professional artists. LOKA provides books for the winners. Artworks are planned to exhibit and put for auction. Proceeds can be used to sponsor psychiatric art therapy studios. The title of the competition: Comfort in Hard Times. For amateur or professional artists, clients of art therapists (even groups), psychiatric patients who are willing to create. Instruction: with any technique you like or comfortable with make an image in 30x40cm size reflecting on the theme "Comfort in hard times". It is known that there is more and more depression, anxiety and insecurity in the world. If someone is facing challenging times or they struggle with some mental health issues they might feel it everyday. Think about what you miss or need most in such cases, what would comfort you, or how could you support the others around you. Take a picture of everything you think or feel.

Such initiatives can bring people closer to understanding and mentalizing each other. We believe that this can restore relationships and also justice.

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## CHAPTER 4: The use of restorative art in mental health structures in Greece

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### ABSTRACT

The purpose of the present report is to present the findings from the research on the use of restorative art in mental health structures in Greece, as part of the European project titled “MHM - Mental Health Matters through Restorative Justice”. The research included literature review and field research conducted by the two Greek partners of MHM as follows: one focus group with five (5) representatives / artists who have participated in programs for people with mental health problems, carried out by the Athens School of Fine Arts (ASFA), a public institution of Higher Education; one focus group with five (5) representatives / professionals of mental health, which was organized by the Non Profit Coop EDRA, a body for the promotion of mental health and the rights of vulnerable groups. The research methodology included the completion of the MHM questionnaires by the members of the two focus groups. Survey results provide feedback on developing new practices in Restorative Art programs, the role of a therapist-artist in a Mental Health Unit and the co-create artworks by artists, therapists and people under mental treatment.

Key words: art residencies, restorative art, art therapy, mental health, therapist-artist, artworks, co-creating procedure

## **Key objective of the country report**

The present document is an executive summary of the National report on the use of restorative art in mental health structures in Greece, prepared as part of the MHM project's Intellectual Output 1, titled "Training Manual: The use of restorative art in mental health structures". It presents a) the state of the art on the use of art in mental health structures, highlighting as best practice the excellent cooperation of the two Institutions in the field of mental health; b) the results of the targeted research work concerning the position and the attitude of both the sample of the artists as well as of mental health professionals, on the subject of the art therapy and restorative art for people with mental health problems. The findings of this research aim to contribute to the development of specialized training programmes for mental health professionals, mental health structures' coordinators, mental health carers and restorative justice practitioners as well as for emerging artists, as foreseen in the "MHM - Mental Health Matters through Restorative Justice" project, which is funded by the Erasmus+ Programme. The findings address the need for continuous professional training of the mental health professionals in accordance to the Erasmus+ adult education priority on "supporting the setting up of, and access to, upskilling pathways". Also, they highlight the need for participation and collaboration of therapists and artists in official and long-term scientific programs for people who have mental health problems and are under mental treatment.

## **Methodology for the secondary and primary research**

In order to present and analyse the use of restorative art in mental health in Greece, a thorough literature review (secondary research) has been carried out. Then fieldwork (primary research) was conducted as follows:

### **a. Recruit Research Participants (1-15 March 2020)**

ASFA participated in the research process organizing a focus group with five (5) artists. According to the philosophy, the subject and the activities of ASFA, the research team decided that the target group should consist of two male and three female representatives. All of them had participated in Restorative Art programs aimed at educating people with health problems through art; also participated in programs through non-pharmaceutical interventions such as the "Mental health art projects", during their last two years of study.

EDRA participated in the research process organizing a focus group with five (5) mental health professionals". The scientific team of EDRA selected representatives consisted of professionals of mental health who have participated in programs to empower individuals through the art of psychiatric experience either as coordinators or as trainees, observers or as supporters (occupational therapist, psychologist, social worker, nurse and sociologist). Especially, they participated in the program "Art Residencies & Art4more" with ASFA.

The selected members gave their consent for their participation in the two research groups, freely and voluntarily. The table below summarizes the profile of the research participants:

<i>Demographics</i>	<b>Artists</b>	<b>Mental Health Professionals</b>
<b>Age group &lt;25</b>	1	
<b>Age group 25-34</b>	4	5
<b>Women</b>	3	4
<b>Men</b>	2	1
<b>Level of education: Bachelor or equivalent</b>	5	5
<b>Current profession</b>	art professionals (3) construction professional (1) decorator (1)	occupational therapist (1) psychologist (1) social worker (1) nurse (1) sociologist (1)

b. Gathering Data (16-20 March 2020)

After the formation of the two focus groups, the research process was developed in both Institutions, using the specific research tool developed for each of the research group. Due to the extraordinary national security measures against Covid-19, the researchers requested a meeting through a platform for modern education / teleconferencing (skype for business, Zoom). The process was set to take an hour. For the validity and reliability of the research, the research questions and a brief description of the entire project were translated into the national language and adapted accordingly so as to operate in these groups. The

researchers developed the research objectives in the groups and provided all the necessary explanations for the questions, when it was asked. Due to the special conditions, all members agreed to individually answer the research questions and send them to the researchers via e-mail / via Google Forms

The researchers collected and processed the data.

### **Current state of the art in Greece**

References as scientific data, especially in Greece, are not enough. This means that while art is essentially involved in mental health structures, a scientific framework does not support it. Art as a tool of healing and rehabilitation in the field of mental health is mainly associated with the art of theater / drama, music art, dance / movement and less with the breadth of the visual arts. Occupational therapists appear to shoulder the art healing process, more so than other mental health professionals do.

A very representative example of the use of art in mental health structures in Greece is the “Art Residencies & Art4more” initiative, implemented successfully by ASFA & EDRA since 2016. “Art Residencies & Art4more” is an experiential program for the study of art as a process of therapeutic tool for recovery in mental health. Those involved are properly trained mental health professionals working in EDRA and visual artists, selected students and graduates of the Department of Fine Arts of the School of Fine Arts. The works of art produced in collaboration with mental health users are presented at the ART4MORE International Festival organized on World Mental Health Day and is dedicated to contemporary art, Mental Health and public awareness of social issues (i.e. exhibitions, music concerts, etc.).

### **Findings from the MHM fieldwork**

The key findings from the MHM fieldwork are presented below:

- The goal of the experiential art therapy program is to rehabilitate people who have lost daily life skills, to strengthen their self-image and to empower, especially those who live in context, their education as a whole in vital daily functionality.
- The main difference between this type of treatment and the rest is that it is possible to communicate in non-verbal ways. The participant can express his

feelings and himself through alternative processes and the language of each medium.

- Arts have all the necessary tools to heal the human mind and through the connection of the human body, the eye, the ear, the senses and the mind to achieve reactivation to what he had forgotten or never known.
- Arts such as dance, theater, music, painting, which commonly used in therapeutic programs, help participants in non-verbal expression, internal search and personal development.
- Playing in the process of creating a work of art is also therapeutic.
- The goals of non-pharmaceutical intervention through arts are to enhance the personal development of individuals from a sociopsychological point of view, more specifically, to the development of non-verbal communication (emotional) and to strengthen the socialization of patients (experience society, group learning and projects).
- As arts and science evolve, the two areas become more closely intertwined and art therapy will become an increasingly recognizable method.
- Art therapy has been extensively researched in abroad with many and encouraging results in autism in mental retardation and in psychiatric patients.
- In a case study, we observed that a woman resident with mental problems who is in tension, through painting reduces her internal emotional pressure. Although for us her messages are often incomprehensible, painting is a way of communication for her.
- For functional beneficiaries / patients with mental health issues, their participation in the art empowerment program is a creative, relaxing, fun activity that fills them with joy.
- The “Restorative Art” project enables functional beneficiaries / patients to receive satisfaction from the discovery / recognition of skill in their arts / talents.
- Beneficiaries / patients with mental health issues express their pleasure in interacting with the group, collaborating with students / young people, learning about art and creating works of art.

## **Reflective Section**

After the scandal of Leros and the commencement of the “Psychargos” program, great steps of progress have been made in Greece in the past 25 years, when it comes to the psychiatric patients' deinstitutionalization and their integration in mental health units which are part of the community. Primary goal of every mental health unit or community unit is the battling of the stigma that accompanies a psychiatric disease. This goal is being implemented through

countless events (artistic and not) against social discrimination, and a great progress have been noted in these past years, although there is still a lot of ground to be covered when it comes to social equality. All mental health units support the use of art as a therapeutic mean, and so art therapy has been incorporated in the daily program of those units. According to the study that was made in the MHM context, art therapy plays an important role in the improvement of one's communication and expression, even more so when someone has trouble connecting through verbal communication. In conclusion, it can be stated that restorative justice, and art in particular, can play a great role in the development of one's self-image and sense of self (establishment of relationships, development of self- knowledge, empathy) in people with mental health issues, and in the improvement of the therapeutic relationship between patient and therapist.

### **Training needs analysis**

Most of the professionals from the two focus groups, that participated in the study didn't know the term "restorative justice" and seemed to need practical training in specific tools that can be used in the existing art groups, as well as theoretical education experts in the artistic field, so as to make good use of their skills.

These mental health professionals want this chain of restorative justice, art and mental health to be assessable, if that is possible. Also, it is being made that there is imperative need in enhancing the professionals' abilities, in the term that MHM studies, in order to prevent upcoming crises or to better handle an existing one.

The artists that participated in this study agreed that the exchange of experiences between mental health professionals is very useful, but they need the collaboration with more mental health units. They are willing to be trained in mental health issues, so that they can develop more artistic programs.

### **Concluding Thoughts**

According to this study, even though art is being used as a therapeutic method in the Greek mental health units and psychiatric hospitals, the term of restorative justice has not been fully examined, in order to unify art and mental health. Both mental health professionals and artists need a better, fuller training (practical and theoretical) with specific guidelines, so as to develop their skills and to be able to connect these three fields. Also, according to those who participated in the focus group, the programs mentioned below could evolve the use of art as a therapeutic method.

1. Wider inter-university collaborations in Greece for the development of academic Mental Health Programs (undergraduate-postgraduate) in order to create certified therapists-artists.
2. Expansion of research programs in collaboration with educational institutions, hospitals and certified mental health institutions, at national, European and international level.
2. Certified seminars aimed at empowering mental health professionals.
3. Continuation of the promotion of collaborations such as that of the bodies, of ASFA and O. EDRA, with the aim of raising awareness and informing mental health professionals about how art can be therapeutic in psychiatric patients.
4. Strengthening the collaborations of institutions such as ASFA and EDRA, aiming at social awareness for the therapeutic function of art and its restorative dynamics in mental health.

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# Chapter 5 Art as a Restorative Justice tool in the field of mental health in the UK

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## ABSTRACT

In the current climate, where prisons are overcrowded and the spent on the public sector higher than ever, new innovated approaches, minimising costs in delivering positive outcomes for patients, professionals and the society are needed. This chapter is written within the context of the Erasmus+ funded “Mental Health Matters” (MHM) project. It aims to provide a review of the use of art as a restorative healing tool for mental health services in the UK. It also explores the risks and benefits of using “restorative art” to service users and its availability to professionals with a focus on the criminal justice sector. Two types of research were conducted: a literature review of the current state of the art, and a fieldwork through in-depth interviews. Key findings are outlined and the training needs for both, artists and mental health professionals discussed.

### 1. Key objective of the country report

The report is produced to overview and highlight the current situation of restorative justice and art techniques used in the mental health sector in the UK. This report focuses on the use of restorative justice and therapeutic approaches in the criminal justice sector. The information is intended to set the grounds for the MHM project where new innovating training platforms will be introduced for mental health and art professionals. The aim is to combine their expertise and experience to produce tailored restorative justice tools for use in day to day mental health practice.

### 2. Methodology for the secondary and primary research

The research team first carried out extensive literature review looking at academic and media sources as well as policy papers and online material on the use of restorative justice in mental health settings. As expected, the information was scant. While restorative justice has been researched to a great extent and there is an array of definitions, its use in mental health settings is underdeveloped. To conduct the fieldwork qualitative research was used to explore in-depth the restorative justice availability in the current climate. One of the data collection

methods was in-depth interviews with professionals allowing us to explore the topic in detail.

In particular, we engaged with professionals working in the UK prison system as well as artists providing therapeutic structures within the service delivery in individual or group settings. Two separate sections of fieldwork findings will be presented by summarizing data collected during the interviews with: mental health professionals (a); art practitioners (b). All in all, 6 professionals working in criminal justice field and 6 art practitioners were interviewed.

	<b>Mental Health professionals</b>	<b>Art practitioners</b>
<b>Age range</b>	22-38	28-55
<b>Women</b>	3	5
<b>Men</b>	3	1
<b>Working Area</b>	Custody Case Management	BAAT Accredited Art therapy

### **3. Current state of the Art Therapy and Restorative Justice practices in the UK**

The role of the arts in mental health has become increasingly more prominent as we move towards a more holistic approach in healthcare. Art therapy can give people the chance to take control of their recovery, focusing on the individual rather than the diagnosis. It can encourage people to express their trauma and difficulties in a positive way, encouraging self-confidence and creativity. This can be particularly helpful when the individual has difficulty verbally expressing their thoughts and feelings and can be a way of reaching out to others in a cathartic way (Lyemere, 2017).

The British Association of Art Therapists (BAAT) is the professional organisation for art therapists in the UK. It works to promote art therapy and provides professional support and advice to its members. The BAAT represents art therapy within national organisations and has a growing international profile. Since 2009, the BAAT has put art therapy research at the forefront of its priorities and is actively involved in promoting work in this field. To this end, the BAAT has created a research library that lists art therapy research articles, outcome measures and also provides basic training to get started with evaluation. The BAAT also runs an Art Therapy Practice Research Network for its full members and has prioritised involving service users and carers within its research work (BAAT, 2020).

Another organisation in the UK, Voluntary Arts England, advocates for increased resources for the arts in a number of ways including improving the mental wellbeing of individuals. In this way art has been described as a method of recovery. Voluntary Arts England gives a number of examples of how art has helped to transform ones experience of mental illness, with one individual with

Bipolar Disorder describing it as a way of being consciously immersed in an activity and forming a connection with ones materials, be it paint, music or materials, as well as placing greater autonomy on the individual to make their own change, while another individual suffering from anxiety describing her art as a way of connecting with others going through the same experiences (Devlin, 2010).

The initiate of formal Restorative Justice practices introduction to forensic mental health in the UK is yet to be determined (Drennan, 2018). Also, a number of forensic mental health services are offering relevant to RJ module training for staff and compliable templates. Well known Restorative Justice Intervention implementations within forensic mental health structures in the UK are Sycamore Tree programme, Khulisa and Silence the Violence.

#### **4. Fieldwork key findings**

The field research findings will be presented in two paragraphs reflecting the interviewed professionals' area of expertise: criminal justice professionals working with people with mental health issues (a) and BAAT accredited art therapists (b).

##### **(a) Criminal Justice/Mental Health Professionals**

The fieldwork participants from the Criminal Justice/Mental Health sectors were selected based on their experience and expertise. For example, they are all providing innovating approaches to prisoners, often with mental health issues, in custodial setting. The selected professionals also work for Offenders Management Unit in one of London prisons, where they are providing case management service to medium and low risk prisoners. They are delivering end to end supervision and sentence planning to service users as well as coordination, monitoring and review of their behaviour in custody. Selected Criminal Justice/Mental Health Professionals support prisoners' transition from custody to offending free behaviour in the community.

All interviewed professionals stated that they have some awareness of the Art Therapy concepts although has limited to none understanding of the terminology and the specifics used within the specifications. When discussing their interaction with service users the following reflecting to Art examples within their practise were provided: In-Cell packs, visual learning tools constructed and issued to prisoner to complete, intended for reflect on their offending, risks and circumstances leading to the offence; colouring books or word search issued to support prisoners in their IN-Cell activities when other services are limited. The participants stated being aware of the restorative justice practice due to available restorative justice information in OMU department and information gain though professional experiences, mostly in completing their education studies. All participants have mentioned Sycamore Three – victim awareness programme, provided in their

establishment, as the main restorative justice course that they are most familiar with from their current professional practice.

#### (a) Art Professionals

All participants were selected based on their formal education and experience with Art Therapy. All interviewed Art professionals' holds accreditation within BAAT (British Association of Art Therapists). Their experience and education in supporting people with mental health conditions varies from clinical supervision to other art provision in a forensic setting to filmmaking/animation or art therapy sessions. Majority participants were qualified in supporting wide range of clients: children, young people, adults and the elderly, providing individual and group sessions. The participants confirmed that during the session's art media is used as its primary mode of expression and communication and mediates when addressing emotional issues which may be puzzling and upsetting. The service users may have a wide spectrum of problems, incapacities or diagnoses. These include emotional and behavior issues, mental health problems, learning or physical disabilities, demanding conditions, neurological or physical illnesses.

The therapist states that they are fully aware of the techniques and tools required to deliver safe and proactive space to the clients to discover their emotional and mental capacities. The practitioners emphasized the importance of using art therapy techniques only if the relevant training and accreditation is established. It was highlighted that providing art opportunities on individual or group setting and providing a successful therapy session distinctive misinterpretation of the approach. The participants stated that in mental health sector the methodologies and practices used when delivering Art therapy sessions are completely distinguishing and lacking of cooperative affiliation.

Most participants state that prior to the interview they had none or close to none understanding and awareness of restorative justice concept, although during the process concluded the benefits of its concepts when discussing the future of unconventional mental health approaches. It was discussed, that social justice very often uses Art to communicate ideas and provides tools for marginalized communities to share their perceptions and emotions were other form of dialog is not obtainable. It was discussed that the concept of shared power is significant when completing community projects, where repressed anxieties or traumas could to be addressed significantly thought Art.

### **5. Critical reflections**

This research set off to understand the use of or Art and Restorative Justice Techniques in the context of the mental health sector in the UK. Based on the information obtained it would be reasonable to state that Art therapy and

Restorative Justice are rarely used as combined methodology. However, the handful of examples presented by this research that Art could be utilised to support in visualizing restorative justice dialogue and support individuals and communities, experiencing mental health concerns. Moreover, Art is a powerful tool to encourage individuals to share their ideas and communicate their anxieties through creative expressions where other communication forms do not accommodate.

Also, Restorative Justice could be adapted and used as a template in rehabilitative programmes in mental health sector where communication is limited due to the lack of cognitive impediments, art therapy could be used to visualize these concepts and used as a communication tool to generate the dialog between participants, where they are able to express their past experiences relatively through alternative channels.

Art therapy practices is an effective solution when working with individuals and supporting their identity perception issues, recognising interpersonal relationship needs and addressing mental health problems. These protective factors are achieved through self-image reproduction and emotional development course. Community arts programmes are conceptualised by providing opportunities in marginalized communities to explore self-expression and encourage self-esteem as well as emotional development, necessary to implement restoration.

## **6. Training needs analysis for the Mental Health Matters project**

Although the collected data outlined diverse level of perception and understanding of restorative justice concept as well as benefits of Art techniques used as therapeutic tool, all participants confirmed that the overall concept and idea of restorative art when engaging with individuals with mental health issues is promising and would be relevant to their practice when explored more. Criminal Justice/Mental Health and Art Professionals stated that most service users that they are engaging with have some sort of diagnosed or mild mental health condition and limited available recourses provided in their establishment. Therefore, they would like to discover and educate themselves more about the subject and would be interested in training opportunities. The participants were eager to explore the possibilities of rising new unconventional approaches to support people and communities having mental health issues as well to provide new innovative tools to deliver their practices and support their service users in communicating their emotions.

Art Therapists were determined that although new innovative approaches are eminent and necessary, it is of importance to only participate in accredited and "safe" training where the practitioners will be supported to provide safe space for

service users to express their emotions and communicate their feelings without risking to trigger professionally required to managed traumatic life experiences.

All participants' states during the training process they would like to be introduced to practice example of the restorative art concept and outlined that that would be the most supporting training tool to improve overall knowledge. They agreed on the standard training module as the most productive one, where interactive exercises would be delivered together with reading materials and the role-play when relevant.

## 7. Conclusion

The research concludes that in the context of the UK, both Restorative Justice and Art Therapy practices are well established across different sectors. However, the longing for new unconventional approaches and treatments for people experiencing mental health issues were presented and outlined by all interviewed professionals. There is a number of practitioners providing Art cohesion project with reflection on Restorative Justice ethos and values, although not being able to outline the terminology or familiarity between these concepts. There is a number of mental health practitioners using visual (Art) tools when engaging with service users together with Restorative Justice techniques, hence unaware of its benefits and potential due to the lack of available training. MHM Trough Restorative Art project is designed to create a new innovative Restorative Art module, where a link between art, therapy and Restorative Justice could be established and utilised when supporting individual or communal needs in a mental health setting.

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The project aims to challenge current practices in mental health settings by bringing together restorative justice with art. The two concepts can help rebalance power amongst patients and providers, while providing healing and therapeutic results. MHM aims to create the first methodological approach for bringing together the practices of restorative justice and art, while creating innovative tools and training material for key stakeholders such as artist, mental health professionals and restorative justice practitioners. This ebook presents the first findings of the project.

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