



Art therapy in a range of gallery-based arts interventions for the wellbeing of parents and infants

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Description

'Art at the Start' is an ongoing project offering a range of arts-based interventions to promote the mental health and wellbeing of parents and their infants (aged 0-3 years). We have a particular focus on reaching families vulnerable to poor attachment relationships and who may be facing multiple deprivations and mental health difficulties. These target groups are also likely to be under-represented within cultural spaces. It is a collaborative research project between University of Dundee and Dundee Contemporary Arts (DCA), led by an art therapist. The art therapist delivers a spectrum of approaches to improve parent and infant wellbeing within the gallery space. These include art therapy sessions to support poor attachments and mental health through targeted referrals, public messy play sessions to encourage families to engage in interactive play through shared art making and art boxes for use at home to support vulnerable families during COVID-19 lockdown.

Context

The wellbeing of parents and infants in the early years has profound implications for the health of both parent and child. Positive interactions in attachment relationships promote infants' emotional well-being, capacity to regulate, sense of self and brain development (Belsky, 2001) while there is growing recognition of the importance of parental mental health on the attachment process (Murray et al, 2010). An estimated 10-20% of women develop a mental health condition whilst pregnant or in the first year of a baby's life which, in addition to the impact on the mother, will likely impact upon their capacity to form optimal attachment relationships. Pre-existing mental health conditions such as anxiety or other social circumstances such as isolation or domestic violence can also impact upon early attachments.

In the locality in which we work, families face multiple disadvantages. These include a higher percentage of first-time mothers under 19 than the national average, more parents living with long-term physical or mental health issues and an estimated 30.1% of children in Dundee live in households that experience both low income and

material deprivation. These additional stressors impact on the wellbeing of the parent-infant dyad. Crucially there are currently no psychological therapies available for perinatal mental health locally, so we wanted to enhance the available provision.

Dyadic interventions can help to improve early relationships and mental well-being and improvement to the quality of attachment relationships may have a mitigating effect on the impact of poor post-natal mental health. There is promising evidence for the use of art therapy in the context of dyadic intervention, for parents and infants together (Armstrong & Ross, 2020).

Our project aims to build strong attachment relationships by maximising the opportunities for parents and infants to have positive interactive experiences together during art making and by supporting mental wellbeing. By embedding an art therapy service within a gallery, a public building with visible creativity and a social community space, and by providing a spectrum of art-based activities, the art therapist is better able to meet the needs of a diverse range of families. We can offer the support that is most appropriate to a family's needs; for those who are vulnerable this may be containment and support, while others may just need the encouragement and space to engage in art making with their child. At both ends of this spectrum we are seeking to enhance wellbeing through dyadic art making.

Parent-infant art therapy groups support dyads to engage in playful art making together which helps encourage positive interactions, whilst giving therapeutic support to parental wellbeing, encouraging attuned responsive parenting, and increasing behaviours which build secure attachments. Messy play sessions open to all parents and infants aged 0-3 years encourage engagement with the gallery and more shared art making, giving parents ideas and infants new experiences and potential for connection through art making. The Home Art Boxes support families while we are unable to see them in person by providing materials and encouragement for parents to try art making with their infants at home.

Method

- **Art therapy groups** focus on parents and infant dyads aged 0-3 who may be vulnerable to low wellbeing and to attachment difficulties, referred by health visitors, family nurses, social workers and voluntary agencies. We offer 12-week group art therapy in the gallery, with around 8 dyads in a group, focused on supporting them to engage together and using the new art experiences as a way to build their communication and the parent's attunement and responsiveness. They have space to make art together and to reflect. The therapist provides containment, both in practical terms by holding the boundaries of the sessions and in psychological terms by helping to manage difficult emotions that arise. The art therapist may need to scaffold interactions for an infant if a parent is not managing at that time, while redirecting towards positive dyadic interactions. The art process itself is central, with the joint making helping to draw the dyads together into interactions with a shared focus of engagement. Exploring new materials together gives numerous opportunities to encourage parents to reflect back how infants may be feeling and to be responsive.



(All images in this case study are included with permission from parents/guardians)

- A second strand runs for the general public, offering gallery based **messy art making sessions for ages 0-3 years and their parents**. These open sessions draw upon current exhibitions as a jumping off point for creative exploration. These are not intended to be therapy, but they do draw on the learning from the art therapy strand of the project to develop activities which best encourage positive interactions between parent and child. These sessions have an added benefit of offering art activities that parents and children who have attended a block of art therapy may wish to move on to. We are undertaking outreach by running further art activities within the community with marginalised groups as a way of broadening participation in these public sessions. These include sessions for a number of voluntary organisations who work with women from Ethnic Minority communities, refugee women and families facing deprivations.



- A third strand of **Home Art Boxes** has been added to our activity in the wake of the coronavirus pandemic to work with families remotely. While we were putting regular creative activities online for families to access, we were aware that these may not reach our target families where the impact of digital exclusion during the pandemic has only exaggerated inequalities in children and families' access to the arts. As well as online arts content relying on families having the financial security to possess sufficient digital access, some of this activity potentially requires having a range of arts-and-crafts materials at home. Even when this is not a requirement it may still be a perception, putting off families who face deprivations. In addition to physical resources, the use of online arts content requires less tangible resources within the family unit; significantly an adult needs to have capacity (both in terms of time and mental wellbeing) to make it available for children. Knowing that families were struggling with low wellbeing over this time, particularly those with pre-existing vulnerabilities (Gassman-Pines, 2020), we began a project to support families by delivering Home Art Boxes. These contained art materials, information on why art making is beneficial and instruction worksheets to guide them through a series of creative ideas with variation for age and stage, aimed at enhancing opportunities for playful parent-infant interactions. Families who would benefit from this are referred by health or voluntary agencies where there are worries about the wellbeing of a parent and infant and it is felt that the relationship could be supported by encouragement to play together through art making at home. In addition, many of the families referred would not be able to access the art materials themselves due to financial constraints. The Art Boxes give parents practical help by providing resources alongside the encouragement to give it a try. This increases their opportunities for positive playful interactions and can help them feel connected to each other and supported by the project.



Outcomes

We use a mixed methods approach to collecting outcomes data as we operate across a range of contexts, from referred families where we have several months of involvement to families who we see as members of the public for a one-off session.

The questions we ask vary across the activity; in art therapy sessions we look to evaluate clinical outcomes, whereas in public sessions we are interested in more general improvements in parents' engagement in creative play with their children. Each aspect of the project is informed by the others, thus the attachment outcomes from art therapy sessions have influenced the activities offered in the art boxes, and activities with positive feedback from parents at public sessions may inspire activity suggestions within art therapy. Researching outcomes is integral to our project and we have ethics approval from the University of Dundee.

- Our collection of quantitative data from **art therapy** uses pre and post intervention measures on perception of the relationship and on parental wellbeing as well as analysis of video footage of interactions from the first and last session to look for changes in behaviour. Outcomes from our piloting of the art therapy groups were positive with a significant increase in parental wellbeing and in positive attachment focused behaviours (Armstrong et al, 2019).

In our current research stage (2018-2022), we have run sessions for 51 dyads, expanding to compare outcomes from art therapy groups with standard services over a four-year period. We collect qualitative feedback through questionnaires. There is a focus in responses on their increasing confidence with play and mess and on the benefits of meeting others. Asked what they valued, participants gave fun, bonding and mess as repeated themes, and that sessions were relaxed. Most said they would continue making art and there were repeated comments about not wanting to end, which we hope reflects parents valuing the group rather than feeling as if the work had not come to an end.

"It has had a very positive effect on my general wellbeing"

"I'm more confident in going out"

"[positives have been] having a purpose once a week, gaining confidence in playing with my baby"

- For the **public messy play sessions** our preliminary feedback showed that families were making return visits and valued the opportunity to make a mess and the relaxed atmosphere. In our observations as facilitators we saw families coming back and saw parents surprised by how much their infants could engage with art making, several babies having their first experience of paint in the sessions.

"A chance to go out, socialise, learn, develop motor skills and have fun"

"playful environment with lots of new things to try"

"my baby painted for the first time! It is not easy to make space for that at home since it gets so messy and we have carpets"

We have moved to gather more targeted quantitative feedback on connection to infants and confidence to try these kinds of activities through the use of scaling questions and this data analysis is underway.

- The **Art Boxes** contained feedback cards that participants could return (54 received, a 35% response rate), and a sub-sample of 20 participants and referrers were followed up for interview. The preliminary findings of this are recently published (Armstrong & Ross, 2021). Results showed that the Art Boxes encouraged positive interactions between young children and their parents through the art making (table 1).

Disconnecting Experiences	Poor well-being over lockdown period Boredom and difficulty finding things to do together Loneliness and isolation Lack of usual support systems
Qualities of art materials and boxes to support connections	Supporting connection through material support of appropriate resources Supporting connection through <i>feeling</i> supported Final art works representing a memory of shared connected experience
Supporting parents' capacity to offer connection	Parents' own enjoyment and well-being Keeping busy/distracting from difficult feelings Parents getting ideas/information and feeling confident with art Feeling good enough as a parent
Changes observed in infants during connected art making	Enjoyment Agency Anticipation
Building connections within the parent-infant dyad	Through shared activity/increased involvement in the play Through increased playfulness Through increased looking/eye contact
Connecting to others beyond the dyad	Through family members or friends joining in the art making Through sharing images with family and friends

Table 1: Themes from analysis of parent interviews following art boxes (Armstrong & Ross, 2021)

Parents reported seeing their infant's increasing eye contact and looking to show them things (a sign of joint attention) as well as showing excitement when the art materials came out (a sign of anticipation). Parents said they were joining in the activity more than they normally would in play with toys as they felt it was something for them to do together. These kinds of connected, shared experiences are positive for infant wellbeing and can help to build strong attachment relationships so we can see that the Art Boxes helped to facilitate these experiences at an otherwise hugely challenging time for parents. We also saw an increase in parental wellbeing through doing these activities together with their child.

"I feel that I'm doing a good thing for my children. Where I felt, while we were at home with no things to do, that maybe I'm not doing a good job for them and that they are not getting all the things that they need to do, to try. So by doing this, I feel that I have done something for them and that makes me feel good." - parent

Key learning points

We found that parents and infants involved in our project have appreciated the opportunity to get involved in the arts and the support offered. We saw families try new activity and interact through play. We saw **positive improvements in the interactions and confidence** of families vulnerable to attachment difficulties. This meets the Allied Health Professions (AHP) Public Health Strategic Framework (AHPF, 2019) for wider determinants of health by supporting nurturing environments for children. The project has also supported vulnerable communities as we see **increased participation with the gallery** which has broadened its reach to more diverse audiences, including families facing deprivation, families with long term mental health conditions, and families from minority ethnic communities; all are groups that can be underrepresented in galleries traditionally.

In the AHP framework (AHPF, 2019) for population healthcare, our parent-infant art therapy group has been able to offer an early intervention where there are attachment difficulties which could have a long-term **impact on children's mental health and parental recovery from perinatal mental health conditions**. We have seen that the **capacity to offer emotional containment** that comes from therapeutic training may be useful for those instances where parents became overwhelmed, struggled to keep the focus on their child, or struggled to provide safe boundaries, or in managing the group dynamics. In feedback a number of the parents explained how they did not attend 'normal' parent groups due to feelings of anxiety and judgement and that they would not previously have considered going to art events offered in the art gallery by themselves. The art therapy group offered safety for these parents to attend.

By providing a **spectrum of interventions**, ranging from those which are about participation and engagement in the arts for everyone to those which offer additional layers of support to engage with the art process for those who need it, we have been able to meet the needs of our local community. Art therapists can bring their skills and undertake work across the spectrum of Arts in Health interventions from community arts, social prescribing, and participative arts to art therapy. As art therapists most often come from an art background and all must maintain their own art practice, they are able to work at many levels from where they are in the role of artist themselves to where they need to draw on their training in psychotherapy and mental health. This **capacity to shift between levels of practice** whilst always maintaining a therapeutic understanding can help us to serve the best interests of the individuals or families that we work with.

During this project we have found many benefits from working in a gallery space. We find a real added value from the creativity of being in those spaces and we notice parents visiting the exhibitions after the sessions with their children. Arguably it also removes some of the stigma that may be felt from a referral to the art therapy groups as it is in a public space rather than one associated with health or social care. Admittedly, gallery spaces may be intimidating but we have found that having had a home visit from the art therapist this has been manageable. Perhaps attending the group will demystify these spaces for some of the parents, encouraging them to continue to **engage with arts venues in the future**. We are hopeful that the outcomes from the art boxes will also be that families feel more connection to DCA and those who have never been will engage in future. The family programme in DCA

is largely free and offers parents continued opportunities to take part in art activities with their children. Given increasing evidence of the benefits of attending galleries and museums and their potential for social change (Desmarais et al, 2018) this would be an additional beneficial outcome from the project.

Having seen the increase in participation that has come out of having an art therapist based with them, DCA are now planning to embed this in the future and are actively seeking funding to create a position when our research project comes to an end. This connects to the AHP framework for Health Improvement with local capacity building for health, wellbeing, and resilience. This has also been achieved in our outreach work for community groups. We have engaged several local organisations such as the International Women's Centre, Amina, and Homestart, so are raising awareness of the benefits of art making for wellbeing amongst their staff as well as their clients.

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