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Exploring Effects of Improvisation in Expressive Arts Therapy with Children: Development of a Method

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Expressive Arts Therapy

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Abstract

In the domain of therapeutic approaches, rich literature exists for trauma-informed expressive therapies and improvisational expressive therapies. However, there is very little research combining the two perspectives, especially in the case of children. Research in the field of improvisation states it can be beneficial in helping individuals broaden their capacity to learn, play and engage with others, but the field of trauma informed expressive therapies does not take from this body of knowledge. The aim of this qualitative study was to explore the effects of improvisational expressive arts therapy with children. The approach was qualitative, multimodal and trauma-informed, using various expressive arts modalities. The inquiry was phenomenological in nature. Five sessions of "improvisation group" were observed, documented and analyzed with children aged 10-12 at a therapeutic afterschool program. Several themes like resistance, creative avoidance, importance of rapport building and holding space, need to balance creative risk taking with clear boundary setting and consideration of preferred art modalities/materials emerged. This research adds to existing literature on trauma-informed expressive arts therapy, while opening up possibilities to also have that work be non-directive in nature. It also encourages the use of improvisation as a research method and a skill to be used by clinicians who work with similar populations.

Keywords: improvisation, expressive arts therapy, trauma informed, children, creative arts therapy, qualitative, phenomenology

Exploring Effects of Improvisation in Expressive Arts Therapy with Children

Introduction

Improvisation is a word that, depending on one's frame of reference, can mean different things to different people. For one person, an image of John Coltrane and other great jazz musicians may come to mind. For another, a rather hilarious episode of the television show *Whose Line is it Anyway?* may be recalled. For a visual artist, it may manifest an inexplicable urge to create and stop only once the piece is done. Whereas for a creative writer, writing simply until the words makes sense may be a way to find creativity through improvisation. Nachmanovitch (1990) wrapped all these instances up when he states succinctly, "in a sense, all art is improvisation" (p. 6). As a student of expressive arts therapy, innumerable examples, scenes, and instances come to mind. For example, writing a haiku on the spot, engaging in a movement warm up with my classmates as we willingly let out sighs and groans to express ourselves, giving up attempts to control and direct watercolors on my paper as I learn how to go with the flow, making response art pieces as a witness to a peers' art making process and making magical music together in a drum circle. Reflecting on my experiences in the last three semesters, I have realized that a lot of what I have learned about the expressive therapies involves the use of at least some principles of improvisation and creativity.

The word improvisation itself has several meanings, depending on the context it is used in. As I set out to search for a comprehensive definition for the purposes of this research, I was surprised at how frequently all the authors I read simply assumed a definition of the word. In certain instances, there were snippets of a description strewn throughout a paragraph; in other situations, it was an entire chapter that somehow managed to successfully escape any concrete description of improvisation but conveyed all the information for a reader to conceptualize a definition themselves. I realized the irony of trying to look for a standard definition for the word

improvisation, and in the process learned one of my first lessons in this research. I did, however, decide to go back to the basics. The Merriam Webster collegiate dictionary (2003) described the word improvise in the following ways: (a) to compose, recite, play, or sing extemporaneously, (b) to make, invent, or arrange offhand, and (c) to make or fabricate out of what is conveniently on hand (p. 626). All these definitions reinforce the countless expressive arts therapy activities that have been demonstrated in different classes in my time at Lesley University. The first definition, especially related to the arts, highlights what this research study explored. Stephen Nachmanovitch (1990) discussed improvisation as being extemporaneous - something done outside of time - and in a state of little concern for the product and more focus on the process. Sajnani (2012) echoed this sentiment as she discussed how "popular definitions of improvisation" allude to the creation of something extemporaneous; "an invention, performance or composition that is distinguished by the fact that it emerges without premeditation or rehearsal" (p. 80). Pressing (1984) highlighted the importance of improvisation by stating that it is "central to the formation of new ideas in all areas of human endeavour." (p. 345).

Peters (2017), who wrote extensively on the philosophy of improvisation made an argument that improvisation is "not primarily a genre, idiom, style, technique, skill or talent, improvisation is first and foremost a *predicament…* not something that is freely chosen but a predicament within which one *finds oneself* or into which one is 'thrown'" (p. ix). The author also explained that improvisation, while often used synonymously with uncertainty, contains an inherent and true structure. He argues that artists often end up manufacturing uncertainty by "bending, dismantling or destroying whatever structure is at hand" (p. 24). It is a fallacy to assume that improvisation does not need forethought and is exclusively based in the present. This assumption undermines the effort, consistency and discipline that goes into artistic

improvisation. Nachmanovitch (1990), in a similar vein stated, "To create, we need both technique and freedom from technique" (p. 73). Technique implies a beginning before the beginning of improvisation. Technique implies a history and practice. Thus, Peters (2009) clarified, "improvisation has always already happened. The indecisiveness of a beginning, the marking of an unmarked space, always comes after a multitude of false starts, erasures and abortive attempts to get things going" (p. 1).

My interest in using improvisation as a form of treatment began with an experience in a drum circle, which like its name indicates, involves people gathered in a circle playing drums and other percussion instruments. I discovered the power of people coming together and making music. As this interest developed, I chose to explore work opportunities that further piqued my interest in the potential of the improvisational arts. As I got more comfortable facilitating drum circles, I started shedding my scripts and experimenting. Sometimes, it worked well, other times it fell flat. However, this process taught me the importance of taking creative risks which eventually got me to Lesley University to study expressive arts therapy. In my third semester, I took a class on developmental transformations, a form of drama therapy intervention "that is based on an understanding of the process and dynamics of free play" (Johnson, 2009, p. 1). That experience further opened a plethora of possibilities and potential for my research. I realized that while the individual modalities within the expressive therapies had specific intervention frameworks and models that focused on improvisation, such a framework was lacking in expressive arts therapy. When the arts were used intermodally, the presence of improvisation was never explicit. This emphasized the rationale for pursuing this research.

For the purposes of this research, improvisation has been defined as the following – a framework that emphasizes creative risk taking within different arts modalities, spontaneity, and problem solving. By exploring different avenues of creativity, one can push the boundaries of one's level of comfort and discover more adaptive behaviours and responses. The exploration done through this research study also aimed to include two more considerations in its framework. First, the goal was for the method to be trauma informed, which added more layers of complexity and nuance. Second, it was meant to be used with children, which meant that simply pursuing improvisation for the sake of the construct would have been counterproductive. Care was taken for the interventions to be accessible, clear and developmentally appropriate. Debriefing, personal check ins with staff and the opportunity for the children to leave the space for a break was also provided.

Overall, my lived experience is what has led me to pursue the expressive therapies as a career. As I further continue on this journey and discover who I am as an artist, a student and an expressive arts therapist in training, I use my lived experience and creativity as a form of knowledge and inform my foci for future research. Rogers (1993) explained, "It is important to have experienced personally that which you wish to adopt professionally" (p. 13). However, there is no denying that bias will be inescapable, and maybe even probable. But staying aware of the curiosity to explore and balancing that out with self-reflection and improvisation as part of my research method, I hope to avoid any blind spots and report all that I observe as meaningfully as possible.

The topic investigated in this capstone thesis is exploring how multimodal improvisation – improvisation that uses several different art forms – affected children between the ages of 6 – 12 years in a therapeutic after school setting. The hope for this research is that it sheds light upon

the potential that multimodal improvisation might have to encourage children to take creative risks. The challenge that was anticipated was the creation of a container that would be perceived as safe enough for the children to benefit positively from those creative risks. This exploration began with a search in the literature to define and connect the different constructs involved in the topic. The development of the method was then elaborated upon, along with the contextual setting in which this research took place.

Literature Review

The purpose of this research was to explore how improvisation using expressive arts therapy would affect children (aged 6 to 12 years) in a therapeutic after school program. The research also used a trauma-informed lens for the exploration. While working with the traumatic memories or events was not the primary focus of this work, using that lens was vital because of how pervasive trauma was in the lives of the children in this study. For the exploration, several different constructs namely, improvisation, expressive arts therapy, the expressive therapies continuum, trauma and attachment, came together for the eventual development of a method. All these constructs have been acknowledged as interrelated in different capacities in different fields, but they have not been explicitly combined together to come up with a comprehensive framework to work with the population targeted in this paper. The fields of drama therapy and music therapy have been more regular in describing improvisation – as evidenced by a database search of the Lesley University library website - as a technique and a method to be used with different populations

Expressive Therapies Continuum

The expressive therapies continuum (ETC), delineated by Lusebrink (1992, 2010) is a schematic framework that incorporates the systems approach into art therapy. However, the

author also makes a case for the ETC to be used in the expressive therapies and in an intermodal manner. Even though it is called a continuum, the framework consists of three hierarchically arranged levels that increase in complexity as one moves up them. The level at the bottom is the kinesthetic/sensory (K/S) level, which is followed by the perceptual/affective (P/A) level. Above these two is the cognitive/symbolic (C/S) level which represents the highest level of processing and complexity (Lusebrink,1992).

The highlight of the framework is in the description of the fourth level, the creative level (CR) which has the ability to traverse all the three levels and move through them, giving rise to the image of a continuum. Natalie Rogers (1993), a humanistic expressive arts therapist and the developer of the creative connection method, effectively highlighted a very similar holistic aspect in her own creative connection process, which mirrors the rationale of the ETC. She stated that "the creative process originates in our whole body/mind/emotions/spirit system" (p. 12). As we traverse up the levels of the ETC, there is a change in the reflective distance, which aids in and leads to a deeper and more complex form of processing. Lusebrink (1992) explains that each level has a "...healing dimension and an emergent function" (p. 395).

Kinesthetic/sensory level. The kinesthetic/sensory level focuses on letting out energy, expressing oneself through spontaneous movement or focusing on the sensory aspect of a material or an experience. In this level, the reflective distance is very little, owing to how much the level consists of experiencing and expressing through the body. In other words, the "embodied expression" that can take place at this level could be very authentic, less filtered and more insightful.

Perceptual/affective level. In the perceptual/affective level of the ETC, processing takes place through representational images and affect associated with those images. Processing

depends on whether the information is generalized or based on something one has experienced. Thus, the reflective distance in an individual's personal process can fluctuate.

Cognitive/symbolic level. In the final cognitive/symbolic level, the reflective distance is the greatest, owing to the processing through words, symbols and metaphors (Lusebrink, 1992). A symbol, depending on the situation could be more or less personal and "emotionally charged" (p. 400). This can lead to a variation in the reflective distance and make it easier to rationalize and even put off thoughts and activities processed at this level.

Expressive Arts Therapy and Improvisation

Kossak (2009) talked about how essential improvisation was to the process of using expressive arts therapy and creating therapeutic attunement. In addition to this, he highlighted the importance of mind/body connection, aesthetics, space and time. In his article, Kossak stated that expressive arts therapy practice required both the therapist and the client to be creative, playful, take risks and be open to discovery and meaning making and engaging in an interpersonal relationship using these principles. He also described in detail the various aspects of attunement, embodiment, improvisation, play and embodied transcendent attunement. These aspects were then situated contextually in the therapist-client scenario. The author also elucidated how they can be used to establish, grow and even repair a therapeutic relationship.

This information was useful in the context of this research because of the reports provided by the case managers and the observation of the children at the after-school program in the first semester of the internship year. Several children, including the ones involved in this exploratory study were not trusting of many adults in their lives. Relationships built over months could be easily broken as the children tested boundaries at the internship site with all staff

members. Considering this, Kossak's explanation about how improvisation, play and attunement can be used as anchors to repair therapeutic relationships was helpful.

Natalie Rogers, (1993) in her book *The Creative Connection*, defined expressive arts therapy as using "…various arts-movement, drawing, painting, sculpting, music, writing, sound and improvisation – in a supportive setting to facilitate growth and healing" (p. 2). She went on to explain the humanistic principles used in person-centered expressive arts therapy and her creative connection framework. The first humanistic principle she stated was "all people have an innate ability to be creative" (p. 7). The creative connection framework focused on increasing a dialogue between different modalities of expression. Rogers described the process with a succinct example:

> Moving with awareness, for example, opens us to profound feelings which can then be
> expressed in color, line, or form. When we write immediately after the movement and art,
> a free flow emerges in the process, sometimes resulting in poetry . . . . With each opening
> we may deepen our experience. (Rogers, 1993, p. 4)

In this regard, Rogers explanation seems to mirror Lusebrink's (1992) rationale of the expressive therapies continuum. Understanding that moving through different modalities can help magnify feelings, perceptions and narratives that may come up was an important foundational stone for this research. However, one cannot move through the modalities without a certain level of creative risk taking, especially if one has trouble processing things on a certain level. Peters (2017), in his book on improvisation, also said that it "enacts and thus reveals what is inherent, but often concealed, in all art practice – the co-presence and interpretation of immediate sensuous experience and a mediated logic of pure becoming." (p. 11). While the author made this argument in the context of artistic improvisation, it also holds true in a

therapeutic context. Another important caveat in the creative process is one's personal choices and preferences; even if we do not consider ourselves artists, we all have a preferred modality of expression. Improvisation may ask that one let go of one's preferred mode of expression (even temporarily) to grow, stretch and make room for a new way to perceive something. It may be further intimidating if the directive or artistic prompt gives the perception of being unstructured, unclear or requires reflection that one is not ready to engage in.

Improvisation in Music, Art, Dance/Movement and Drama

The following is a brief overview of some of the techniques that either directly or indirectly use improvisation in different specific art modalities. It is important to note that music therapy also had a critical feminist review of the technique of improvisational music therapy, which is briefly explained below. The fields of art and dance/movement therapy returned only a handful of searches related into improvisational skills and techniques.

Music therapy and improvisation. Several different techniques that exist in the field of music therapy use some or the other principles of improvisation like spontaneity, extemporizing and spontaneous creation of individual, duet (with the clinician) or group music (Bruscia, 2014). In improvisational methods and techniques, the therapist may offer an idea upon which the client(s) may scaffold theirs. There is also improvisational music therapy, which focuses on attunement and synchronization. The therapist may play attune – attune through playing music – to the client through different kinds of mirroring activities and staying "in the same modality of expression (same instrument, similar movement, matching pulse, rhythm, dynamic and/or melody)" (Bruscia, as cited in Aalbers et al., 2019). Improvisational music therapy has been used in interventions with young adults suffering from depressive symptoms (Aalbers et al., 2019) and children on the autism spectrum (Nielsen & Holck, 2019; Salomon-Gimmon and Elefant, 2019).

Strehlow and Hannibal (2019) made a great case for how improvisational music therapy can impact the ability to mentalize, which they describe as "the capacity to reflect upon oneself and others and to recognize that internal thoughts and feelings are connected to the outside world" (p. 335). In that sense, mentalization involves self-reflection and can aid in the growth of inter-personal skills, something that children on the autism spectrum or children who have experienced trauma may lack. Seabrook (2019), however, questioned the dominant practices in improvisational music therapy through a critical, intersectional and feminist lens. The author challenged what ideas of health, wellness and well-being are assumed in the traditional framework of improvisational music therapy and how much they are likely to be based in able-bodied, Western medical, heterosexual, white dominant narratives.

Even though this does not directly relate to this research project, it is important to keep in mind that all techniques and frameworks operate under certain ideas and narratives of what is "right" and "wrong." While enough research in expressive arts therapy has not explicitly used improvisation as a method or technique, keeping in mind that critical reflection doesn't have to wait until something becomes popular is essential. The various practices of music therapy and improvisation have contributed greatly to this research, since two of the sessions involved some form of music making.

Drama therapy and improvisation. When one thinks of improvisation, theatrical or theatre related improvisation may come to the forefront. Since improvisation has such a strong connection with theatre and drama, drama therapy frameworks and skills most often use improvisation explicitly in interventions. Developmental transformations (DvT), involves the therapist and client(s) engaging in highly embodied free play that focuses on emergent images and scenes that develop and transform as they are being played out (Johnson, 2009). This

practice does not involve the use of any props or external stimuli. The core theory that DvT takes

from, is that of the principles of Buddhism, which states that being (living, existing) is inherently

unstable and existence is chaotic. However, unlike Buddhism, DvT does not aim to do away with

the turbulence and instability, but rather reduce the fear that it may cause. In other words, using

embodied and improvised play can help one come to terms with the inherent anxieties and

instabilities of life. Playback theatre (PT) is a different technique but also operates within the

framework of improvisation. PT involves a group of actors who are led by a conductor. They call

upon a person from the audience to narrate a story which the actors then play back to the person.

PT uses props and music instruments to create a scene, actors to play out different animate and

inanimate characters who then bring that scene to life (Lubrani Rolnik, 2009; Salas, as cited in

Romanelli and Berger, 2018). These tasks require intuitive thinking and mental flexibility.

Romanelli and Berger (2018) emphasized how these skills should not only be taught to clients,

but also be possessed by therapists themselves, thereby becoming a "ninja therapist" like ninja

actors in PT who may not have a particular role but rely on their intuition to enter a scene and

make it more meaningful.

       Dance/movement therapy and improvisation. The most common technique that

involves improvisation within the field of dance/movement therapy is authentic movement.

Authentic movement is non-directive technique which involves two people – a mover and a

witness. The mover focuses on their own impulses, often with eyes closed, and moves at

whatever pace they deem comfortable (Garcia-Diaz, 2018). The witness observes the mover and

reflects the movement back to the mover once they are done. Garcia-Diaz (2018) conducted a

research study which explored emotional states of the movers post authentic movement sessions.

The author found that the more authentic movement a person engaged in, the more they were

likely to become aware of their inhibited emotions. Subsequently, negative affect was likely to increase because "psychological mechanisms that facilitated its inhibition (e.g., avoidance or denial) cease to act." (p. 23). Similar was the case with positive affect. Thus, authentic movement facilitated the process of affect congruency.

Lavendel (2017) also explained the benefits of using authentic movement within psychotherapeutic practice. The author stated that the practice's interpersonal nature can help strengthen the therapeutic relationship and provide an opportunity for a non-verbal dimension of that relationship to develop. Lavendel underscored the role of the therapist as the witness as she described how her process of observing and reflecting evolved to become deliberate, meaningful and situated in the present. Colace (2020) used the broader technique of movement improvisation within the process of psychotherapy. She also echoed Lavendel's (2017) findings and highlighted a few more essential concepts. Colace (2020) described how embodiment can aid the process of mentalization and offer a new avenue for processing information. She also emphasized the role that "psychobiological attunement" (p. 46) played in the therapeutic relationship.

All of these studies point to the value of incorporating embodied processing and expression in therapeutic contexts. While engaging in authentic movement in a children's group could be challenging, the underlying principles and the potential of affect congruence prove that improvisation is a key process and improvised movement could be used in different multimodal contexts.

Art therapy and improvisation. The fields of art therapy returned only a handful of searches related into improvisational skills and techniques. A possible explanation is provided by

Pressing (1984) when he explained why research in improvisation is so unevenly distributed in different art practices:

> Improvisation is that it concerns actions whose effects are indelible. If erasing, painting over, or non-real time editing exist, improvisation does not . . . it is among the time-based arts, namely music, dance theatre and mime that we find the greatest literature (p. 346).

However, Whitaker (2005) offers a different perspective as she made a case for the similarities between art therapy with performance live art. The author spoke about non-directive art therapy and how it helped clients engage in a process of reflection, expression and presentation, much like performance live art. Improvisation and subjectivity underlie this process as everything that is usually taken for granted was reconsidered. Whitaker also stated, "by involving the body in art, and the movement of art by the body, improvisation is taken to a new level" (p. 27). This conscious embodiment allowed clients to break down fixed images and representations of themselves and like live art, "loosens defense mechanisms, through its play with meaning identity and socialization" (p. 29). Thus, the author, in connecting the processes common to non-directive art therapy and live or performance art highlighted the way improvisation and subjectivity are a key factor influencing these processes. The author also made a case of intermodal art making as she describes the value of using one's body to express and inform the journey of reflection.

In another interesting intermodal overlap, Rosen, Pitre and Johnson (2016) described how the principles of developmental transformations was used as a technique in visual art therapy. The technique delineated how a therapist could encourage the client to lead an artistic conversation by engaging in a joint art making process that went back and forth. The aim was to "present a graduated set of interpersonal demands on the client through artwork, helping the

client find adaptive responses to accommodations required by others as well as reduce the client's fears of intimacy and encounter" (p. 195). Using techniques like mirroring, faithful rendering, emergent rending and divergent rendering within conversational artwork, the therapist helped the client become aware of issues around "autonomy, enmeshment and intimacy" (p. 195). The authors thus, made a case not only for the use of nondirective, client centered visual art making, but also underscored the value of using principles from one artistic modality in another.

Trauma-centered Expressive Therapies Research

Dereboy, Demirkapi, Şakiroğlu, and Öztürk (2018) conducted a study that included 69 participants (majority of whom were female), to study the relationship between childhood traumatic experiences, emotional regulation, identity confusion and psychopathology. They found that childhood traumatic experiences could lead to difficulties in emotional regulation, hamper identity development in adolescence and increase the likelihood of self-harming behaviors later in life. They also stated that these constructs did not affect each other in a linear manner. For example, emotional abuse, one kind of childhood traumatic experience was associated with identity confusion. Difficulties with emotional regulation partially influenced this relationship further, thereby creating a spiral of behaviors. Marusak et al. (as cited in Dereboy et al., 2018) explained that in terms of brain development, childhood traumas could have an adverse effect on the amygdala, which could lead to increased sensitivity, especially with regard to the perception of threat.

Van Westrhenen and Fritz (2014) stated how the field of creative arts therapy lacks a cohesive framework for a trauma informed protocol while working with children and reviewed research in the field. They also concluded that research was primarily reported in a narrative style with an emphasis on the therapist's perspective. They recommended that creative arts

therapists and researchers come together to create better and more robust research designs. In 2017, van Westrhenen et al. described a semi-structured module called the creative arts in psychotherapy (CAP) that was used with children aged 8-12 years who had suffered complex trauma. Over 10 group sessions, the authors delineated themes to be followed, multiple directives that could be used within those themes and termination. They also highlighted the importance of creating a safe space, selection criteria for children based on how safe they could be in a group and follow up care.

Veronese and Barola (2018) conducted a quantitative, but non controlled intervention with children of war from Palestine. The intervention involved expressive and narrative tools that were used throughout to help children feel a sense of control and ownership over their life story, articulate and safely express what happened to them, and consequently, build resilience. The authors were careful, sensitive and insightful enough to include symbols and metaphors from local folklore and stories, so that the intervention would feel more relevant and personal. An important finding from this research was that while the children's scores on resilience and other positive factors improved, so did their scores on the negative factors. The authors argued that creating positive narratives and emotions do not negate negative ones but help children to learn to live with the reality of their experiences and cope with them better.

With regards to Veronese and Barola's findings, Johnson (2009) underscored a similar point in his explanation of the theoretical underpinnings of developmental transformations (DvT). For children who have endured traumatic experiences, the fear of instability may be much higher. Thus, incorporating practices like free play and expressive narration that can be transformed into skills may help children to deal with the spectrum of positive and negative narratives that come up. Incorporating those skills may also help them cope adaptively with the

idea of instability and reducing maladaptive responses that manifest intrapersonally, interpersonally and transpersonally.

Overall, the literature shows how essential it is to consider different aspects – which may seem as though operate separately but work together and influence one another. A lot of similarities in different modality techniques and frameworks were found, giving credence to the fact that improvisation, creativity and playful encounters work and operate at many different levels. However, bringing improvisation and the different artistic modalities of expression to the foreplay of a framework has not yet explicitly be done for children, especially keeping in mind a trauma informed perspective. This exploration was able to begin this process by leading several sessions that used expressive arts therapies with improvisation at the forefront of the intervention as well as the foundation of the research.

Method

Project Design

The sessions for this research were conducted at a therapeutic after school program that has been designed for children between the ages of 6 to 12, who are unable to attend mainstream after school programs and have a higher level of need. The children are either referred to the program by the Department of Mental Health or the Department of Children and Families. The focus of the program is on behavior management through a trauma-informed lens. It is a highly structured environment and is goal-oriented in terms of day-to-day functioning. Each child at FASP has weekly goals that they work on and get daily feedback points, which can be redeemed for treats and community-based outings.

A general day at the program for a child would look like this:

2.30 – 3.00 pm   Snack upon arrival

3.00 – 3.25 pm	Free time game
3.25 – 3.50 pm	Welcome meeting
3.50 – 4.30 pm	Group
4.30 – 4.35 pm	Transition time
4.35 – 5.05 pm	Homework/reading time
5.05 – 5.10 pm	Transition time
5.10 – 5.25 pm	Community meeting and dismissal

Type of Study

This exploration was qualitative and phenomenological in nature. It explored the experience of a small part of the children's steady and structured day. The group was called "improvisation group" and took place once a week. This group was facilitated by me, the researcher, and staff members for the entire duration of my internship experience. However, for the purpose of this research, five consecutive sessions were chosen, reported, and analyzed. These sessions took place over five weeks, approximately four months after the group began. Several methods were used within this qualitative research. The first one was participant observation, since I was the facilitator of the group and the researcher. The second one was bracketing, a data collection method which involves separating the observer's subjective comments from the objective facts. According to Tufford and Newman (2010), this helps "to mitigate the potentially deleterious effects of preconceptions that may taint the research process" (p. 80). The third one was the improvisation, which helped me be flexible and creative in planning and facilitating the sessions.

Collaborators

I facilitated all of the sessions and had a staff member present as a co-leader. Each session design was determined during the site's weekly group planning meetings and in person with the co-leader. As stated above, improvisation was also used as a foundational research tool, since the final decisions of what would be appropriate in the session were often made after assessing the children's emotional and behavioral states on that particular day.

Participants

The participants in this research varied by session and the attendance was inconsistent due to child absences. Overall, there were five children in total who participated in the sessions recorded. Like most other kids in the program, these children came from low-income families and were between the ages of 10 and 12.

One child in the group was biracial while the other children are of Haitian, Algerian, Salvadoran, and Dominican descent. Most of these children have had some form of developmental trauma in their lives and may have witnessed or experienced some form of domestic violence. Some of the some of the mental health challenges that belong to this group of children are attention deficit hyperactivity disorder (ADHD), anxiety disorder, depression, attachment issues, and post-traumatic stress disorder (PTSD).

The sampling for this group (as for all the groups in the program) was purposive in nature. Each child (except a new enrollment at the program) was assessed and placed into the group for potential therapeutic benefits and having an opportunity to learn new skills in a group setting. The merits and limitations of this kind of sampling are elaborated on in the discussion.

Group structure and flow

All the sessions involved use of different arts-based interventions like storytelling, visual art, music, singing and movement. Each session was intermodal in nature since it had at least two

different interventions used. It also had a consistent beginning and ending ritual. The expressive

therapies continuum was used as a reference and foundation for group planning. However, on

most occasions, improvisation and adaptation on part of the researcher was necessitated because

of different events that preceded the sessions.

Sessions

Prior to recording the sessions for this research, improvisation group (IG) was set up and

facilitated weekly. The juxtaposition of a group with activities that were largely non-directive in

nature in a setting that is highly structured, and directive meant that the members took time to

understand the expectations of the group and build rapport with the facilitators. To reinforce

autonomy and accountability in IG, a community contract was written by the group members in

the beginning. The children and facilitators came up with one guideline that they each thought

was essential for the members to follow to have a meaningful group. Reading this document –

which was written and signed like the constitution of the United States of America – became a

beginning ritual. Before the sessions for this research were recorded, rapport was well

established, the members were familiar with the group structure and the expectation of taking

creative risks was already well established.

Sessions one and two – music, movement, visual art and story writing. Session one

had a census of four children, A, B, C and D. These were the children that were chosen to be in

this group long term. The session began with reorganization of the room and reading of the

community contract by the staff and children. The activity for the day involved two options:

making music with percussion instruments while seated or using scarves to move around, and

dancing to the music being made. Three out of 4 children chose to make music for the entire

duration of the group. We began the music circle by playing a familiar rhythm from the previous

week. After getting comfortable, all the children were asked to volunteer a new rhythm.

Throughout the time we made music, I reminded them that they could choose to play with the

scarves if they wanted. As the group went on, several different rhythms evolved and faded out.

Lots of creativity emerged in different forms. Only one child, D, chose to play with the scarves.

The session ended with a conscious recollection and debrief. I encouraged the kids to reflect on

the session and think of an instance where they took a creative risk.

Session two also had four children, A, B, C and D. For this session, the goal was for each

child to work individually with visual art and then come together in a group and use their art to

create a collective narrative. The session warm-up involved everyone standing in the circle and

engaging in a body percussion warm up. The children were then asked to sit, not in a circle in the

center of the room, but on the couches in the room, so each had space to work. The prompt for

the first half of the activity was to imagine and draw one's "dream house." Consistent prompts

were given to remind the children how much time they had for this part of the activity. Part two

of the activity involved everyone coming into the center of the room and sitting around the

coffee table. Everyone was encouraged to share their dream house. Post the sharing, everyone

was given more paper to place between them and their neighbors on either side. They were asked

to draw "bridges" that connected their dream house to their neighbor's. This part involved

discussing and negotiating with one's neighbors, settling on a common idea and then drawing it.

The group ended with everyone sharing and describing their bridges with the group.

Session three – visual art and storytelling.

Session three was a bit of an anomaly. In fact, if improvisation were not part of the

research perspective, this session would have been excluded for several reasons. First, we had a

new member in the group, client E, who ended up staying for only this session. Client E was a

new enrollment into the after-school program and was expected to try out all the different

therapeutic groups throughout the week. In terms, of purposive sampling, she would be

considered an outlier. In addition to a new member, clients A and C were absent. While I had

planned to build on session two's activity, the session plan had to be changed on that day when I

was informed of all these changes.

The session began with introducing client E to the group and explaining to her what

improvisation group was about. We read the community contract but did not move the coffee

table out of the way. Everyone was asked to be seated around the table and I explained the

activity for the day, which was to build on last week's dream home and neighborhood activity by

expanding it into a city. I explained to client E what we did in session two and gave clients B and

D their artwork from that session. They were given papers, markers, oil pastels and colored

pencils and the option to draw by the table or on the couch with a clipboard. Everyone was given

a two-minute warning and then asked to stop drawing. We moved the coffee table out of the way

to set up our "city." It ended up becoming a circle. Once the "city" was formed the group walked

around and looked at different dream homes from last week and the new buildings from this

week. We all tried to make a story based on the "city." The session ended with a cleanup.

Sessions four and five – embodying emotions, memories and self-love. Sessions four

and five were also inconsistent in terms of attendance, but for different reasons. Client E was

assigned another therapeutic group, which seemed better suited to her needs. In session four,

only A and D were present in the group. The staff member that co-facilitated this group was also

different. Different events at the beginning of the day (see Results section) led to all these last-

minute changes and I had to adapt my session plan and style of execution yet again.

Session four began with welcoming a new staff member as a temporary co-leader. The

children and I told her what we do in improvisation group and what the community contract is.

We read the community contract and warmed up with stretches and groans. The groans were

encouraged for everyone to non-verbally express their mood. The activity for this session was

called "confidence walks". The children were encouraged to visualize different scenarios in

which they had varying levels of confidence. They were then asked to walk around the room,

showing the group how a particular confidence walk would look. The activity started with a walk

in which one felt a 100% confident about an activity. The group then moved on to 70%, 50% and

25% confidence walks. Finally, the children were asked to think about an activity or skill they

are have not learned yet but are looking forward to learning. This translated to a zero percent

confidence walk but that term was avoided to keep the focus on the possibility to learn.

Throughout the group, after every round of walks, the children were asked to reflect on the

changes that occur in their body language and emotions and why that might happen. This session

ran a little over time and had to end abruptly to maintain the overall program schedule.

However, this session was unique in many ways. Since the attendance was low and there

was time to make the activity specific and relatable, I took the opportunity to ask clients A and D

to recollect their first day at the after-school program and their dominant emotions. I asked them

to compare it to the present day and how they feel coming to the program now. Here I introduced

the goal for the group – to realize that there will always be a first time for things and that first

time can make us nervous and anxious. But eventually, we become more comfortable with time

and practice and find new activities and skills we love. Thus, if one doesn't take the first brave

step, the creative risk, one might never find something they might be very good at or simply love

doing. A and D have been at the after-school program for more than 3 years and I was able to use their experiences at the program to make the activity more meaningful and relevant for them.

Session five had three children – A, B and D. Client C was absent. For this session, the children were given the opportunity to choose between reading the community contract first or doing stretches. They chose to read the contract, followed by stretching. The goal for this activity was to express appreciation, gratitude and love for one's body. The activity began with everyone seated in a circle and a discussion of how our bodies help us perform several different tasks every day and how we might take them for granted. I introduced the idea of saying thank-you to one's body and showing it some tender, loving care. I informed the group that we would massage and thank each body part, starting from the feet and going up to the calves, knees, thighs, arms, neck and head. At the end of this activity, everyone was given a paper, asked to draw themselves, and point to a part of their body they have a lot of appreciation for. The session ended with a compliment circle, where each member gave a compliment to everyone in the group.

Self-Reflections. Post every session, time was dedicated to write the field notes in as much detail as possible. On the same day, I made response art in my field notes journal to record my own thoughts and feelings about how the session went, the degree to which it was different from or similar to the session plan, and what emerged for me as a facilitator and not a researcher. Reflexivity was an essential part of my self-reflection process as well.

Jootun, McGhee and Marland (2009) described reflexivity to be essential in qualitative research, especially if one wants to avoid getting enmeshed with the participants and reduce the quality of the data collected. It is a process that involved continuous reflection and evaluation of one's relationship with the participants and its possible implication on interpretation of the data

or overall research. Since I was donning several hats in this scenario – the intern who interacts with the children almost every day in the milieu, the group facilitator who lead improvisation group and a student researcher, I was careful to keep knowledge from my varied experiences as distinct as possible so that the sessions recorded were not overcast by knowledge outside of what happened in group.

The reflective art made after every session was extremely helpful to avoid mixing of preconceptions, outside observations and data from the sessions. It helped me focus on my role as the facilitator and how I could use feedback from my emotions and physical sensations to become aware of expectations I had for myself and the group. I was also able to pause, make space for the emergent, and express it creatively through visual art or poetry. Creating a time and space for me to express my feelings openly helped me focus better as a facilitator on the needs of the group and as a researcher, on the data collected. This process was also extremely helpful in aiding my own process of improvising and adapting sessions to the needs of the group members.

Analysis

The data was collected through detailed field notes, bracketed into two parts: an objective description of the events, and all corresponding feelings, comments and observations of the researcher during the session. Response art was also made at the end of each session and have been reproduced in this paper. The data was analyzed for different codes, themes and categories that developed.

<p align="center">**Results**</p>

This research aimed to explore the effects of improvisation when used with multiple arts modalities with children in a structured and behaviorally focused therapeutic after school program. Data was collected from weekly sessions of "improv group" that were held at the

program. For the purposes of this research, a total of five sessions were observed. They were

recorded through detailed field notes, transcribed and analyzed for themes and patterns that

emerged. Post each of the five sessions, the researcher also engaged in art making and creative

writing for self-reflection. The response art for each session has been reproduced in this section

and further analyzed.

The most interesting aspect to examine in all the sessions was the evaluation of creative

risks – particularly what fell truly under that category, and what was a behavior or choice that

seemed like a risk, but was a power struggle with the staff member or avoidance behavior. It is

important to note that creativity was not missing in these situations. Thus, the term "creative

avoidance" was coined by the investigator to help better distinguish some of the behaviors and

reactions during the sessions. Another important theme that came up in every session was that of

a power struggle between a staff member and a child. It is essential to note that this was a

concern for most of the children in the program, regardless of the groups that they were in. Since

all staff members spend all the program time with the children in different settings, struggles

from one part of the program permeate into another part of the day. This might not have been the

case if these groups were run in an outpatient setting. So, while the emergence of power

struggles was not specific to this group or the intervention, it presented the researcher with an

opportunity to observe how this might influence the process of creative risk taking, group

coherence and improvisation. In most sessions, a child was given a five-minute break, which

involved leaving the room, taking the break alone or with another staff member, and returning to

the group. The five-minute breaks are part of the program's behavioral management strategy to

avoid escalation of behaviors by giving children the chance to disengage, de-escalate and return

to the milieu. This trauma-informed strategy is an important contributor to the no-restraint policy at the site being a success.

Session one

In the first session, music and movement were offered as opportunities for the group members to engage in. This choice was put in place to observe the degree to which the members might be comfortable leaving one activity and engaging in another. The ambiguity in this activity was intentional. There were several themes and patterns that emerged throughout the session. The most prominent one was that of apprehension/reluctance/resistance. All members were apprehensive to switch from music making to using the scarves for movement. In fact, the apprehension preceded this activity and was present at the beginning of the group when most members refused to read out the community contract as they always do. The apprehension seemed to momentarily dissipate when the percussion instruments were brought out, but it returned when the scarves were displayed and the opportunity to get up and use them was presented. Only one child (D) chose to go up to the scarves and use them with the facilitator, while the rest of the group continued to make music with their instruments. An absolute lack of interest in the scarves and movement was interesting to note in this session, because the members had participated in a past session which involved recorded music and scarf dancing. Another theme that appeared (in seeming contrast to the first one) was that of creative risk taking within one modality. While the members did not engage with the scarves (except client D), they did engage fully with the musical instruments, building rhythmic and vocal layers on the rhythm with different sounds. The member of the group who often communicated through head nods (client C), chose to make a loud growling sound for his turn. After he made that sound, he also made a sweeping circular action with his arms, exaggerating his playing of the egg shakers and

embodying the growling sound he was making. Client D got up at one point and took her little drum onto the floor and used it as a cup to play a rhythm she already knew. She was eager to show competency in the rhythm and its choreography with her "cup." This was an interesting incident because on the surface, it might seem as though this could classify as a creative risk. However, she was merely recreating what she already knew, while the other group members were trying to build their own rhythm. In the beginning of the session, when everyone was warming up to the musical instruments, subject Client A received a five-minute break for using his instrument inappropriately. He was asked to leave the group, take the break by himself and return to group. This appeared to be the result of an ongoing power struggle between him and a new staff member, who was the co-facilitator of the group.

Overall, each child was able to provide a unique beat to add to the group rhythm and a unique sound to add to the vocal layering. When the rhythm and sounds started coming together, the group members seemed to recognize the shift that had taken place in the group. This session began with low energy, but due to the musical participation, it ended on a high note. At the end of the session, I asked the children to recall one time in the group they had been creative. None of them were able to answer with an example. But when I mentioned a specific contribution of theirs, they enthusiastically agreed.

Regarding self-reflection, the predominant emotions post the session were captured in a poem and a visual art scribble (see Figure 1). The main questions that arose were, (a) "How do I place these power struggles in the context of group?" (c) "How do I, as an intern, negotiate my authority in the group with the staff member who is a co-leader, but also in charge of setting limits?" and (c) "What is and is not a creative risk?"

Today has been so many things
Surprising,
Overwhelming,
Tiring,
Confusing...
Today, I have been so many things
Surprised,
Overwhelmed
Tired,
Confused...
Was it me or was it the day?

Today had also been good.
Because even though I write things that
have happened to me,
something I have been an unfortunate,
passive recipient of,
I have actively learned.
So today has been many things,
But it has also been a good day
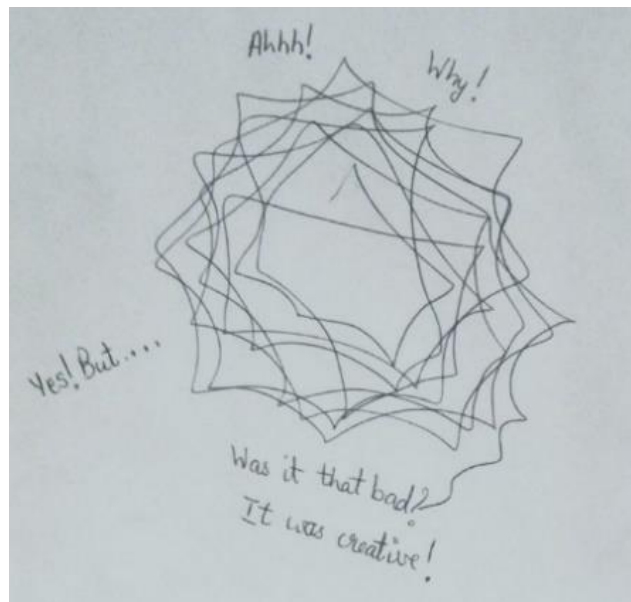
Figure 1. Artistic responses for session 1.

Session two

In session number two, the activity was more directive compared to the previous session.

The aim for the group members was to engage in an individual creative process first and then

come back into the group and engage creatively with each other. In the first 5 minutes of the

session, the facilitator addressed the general lack of energy, and asked for feedback from the

group members. Before the feedback session could begin, client B got into an argument with the

co-facilitator and was given a five-minute break. During the feedback session, only one child (D) spoke up and gave me feedback. Client C, due to complete lack of participation and ignoring all prompts for the beginning of the activity, was also given a five-minute break. When client B came back into the room, he was upset over being given a break and was still very adversarial. He refused to engage in the "draw your dream house" activity stating that he would not do anything for the facilitators of the group. At this time, everyone had their own space in the room, so I was able to have a brief moment of clarity with him. I informed him that everything he did in this group was only for his own benefit, not that of the facilitators. He could choose to engage in the activity or pass it up, but only he would experience the benefits. This was a breakthrough moment with client B, because his hypervigilance led him to focus more on interpersonal conflict and less on himself, even if he was engaging in a preferred activity. This changed his perception of the activity and he fully engaged in the session from that point. Client D was vocal, engaged and participated in the group from start to finish. Since visual art is her preferred modality, she was comfortable making art alone and with the group.

     Clients A and C were both very reluctant to engage in the activity for different reasons. Client A left his drawing paper blank, and when asked to share what his dream house was, he stated that he "drew" a white castle in a snowstorm. When it was client C's turn to share, he took a page out of the same book and stated that he "drew" snow on his paper. This is where the theme of "creative avoidance" came up explicitly. In that moment, I was unsure of how to respond to their explanations, since it did seem like client A got very creative with his resistance, but upon further reflection, it was identified as avoidance behavior that he would often engage in at the program, especially in the case of non-preferred activities.

Another important theme that came up for all the children, was that of insistence on use of a particular art material. All of them requested to use only pencils to begin drawing. They were visibly uncomfortable with the use of markers and crayons. In part one of the activity, they all wanted extra time to draw and were reluctant to come to the center to begin the second part of the activity together.

However, once the second part about drawing "bridges" with their neighbors on each side was explained, everyone got engaged in the activity. The aim of this second activity was to encourage collaboration, conversation and artistic negotiation as the children moved from individual art making, to making art in a group. Clients B and D enthusiastically communicated with members on either side. The co-facilitator and I were client C's neighbors. While he did not actively participate, he engaged in conversation with us as we drew bridges to his blank paper, and he said yes or no to different ideas. The playful tone used by both facilitators helped him open up a little. Client A had difficulty focusing on his neighbors and bridges, and frequently interrupted client D and my conversation to tell us what kind of bridge we should build. He had to be redirected to focus on himself and his area of the activity. This theme of control for A became a recurring pattern in future sessions too. At the end of the session, clients B, D and A were very proud of their drawings and the mood of the group was considerably different compared to the beginning of the session.

When I reflected on the session, I felt good about how everything played out. The beginning was quiet, and the group members were passive and reluctant to engage. However, once the activity began, the mood of the group changed. I reflected on this as progress from the first session, even though there were multiple breaks given to the children. Overall, the level of engagement in both parts of the activity was high. Each child used their imagination freely to

make very creative dream homes and bridges. The feeling of accomplishment that the children

experienced at the end of the group was observable. The positive feedback I received from their

reactions, encouraged me to continue this activity for one more session to build on the progress

the children had already made. My art response involved a short poem and figures of building

blocks (see Figure 2). The image of the game Jenga came to mind because I reminded myself

that the building blocks I imagined were and will continue to be wobbly. Hence, the right amount

of structure was essential to balance a safe space with room for creative risks and imagination.

Today was a puzzle
Oddly good?
Goodly odd?
Going away but coming together
Finding space and community
Finding balance
Discovering a dream
Making it real
Recognizing a good feeling
Wanting to be recognized
Recognizing a familiar far away,
One house over.
Wanting to move there,
Wanting to do nothing
These are all parts
of the scaffold
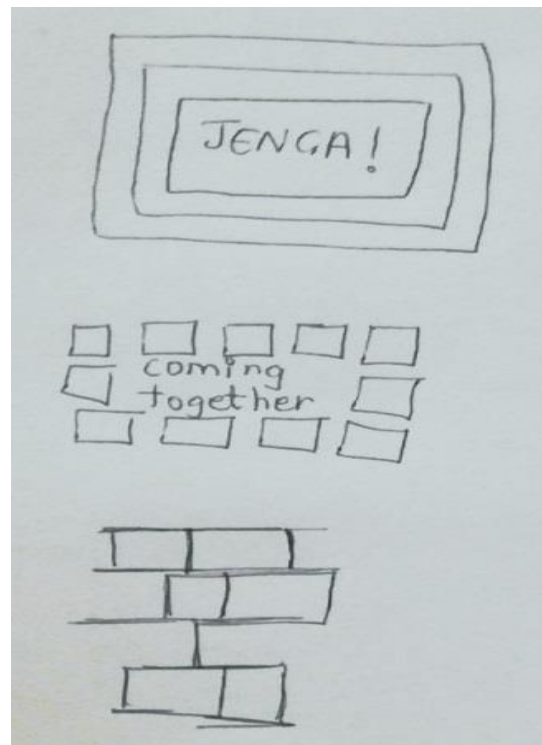we built today
Isn't a scaffold just a vertical puzzle?

Figure 2. Artistic responses for session 2.

Session three

        Session three was one that was an anomaly in terms of attendance and group dynamics.

The absence of clients A and C, and presence of the new child E created a scenario that felt like

this session was the first one. A lot of time was spent on setting boundaries and explaining

expectations of the group to client E, while a lot of focus was not given to clients B and D's

artistic process. The aim of the activity in this session was originally to build on the visual art activity from the previous week, by inviting the group members to draw different parts of a neighborhood and make a "city." Since clients A and C's absence was last-minute, and client E's addition was scheduled the morning of the group, I realized I would have to tweak the activity in some form. At the end, I decided that we would all eventually make a "city" with our drawings, but the group members would have the opportunity to make new homes and other buildings.

The themes that came up in this session were mainly confusion (for all group members), reluctance at the beginning, insistence on using certain art materials, focus on the new member of the group, and invasion of artistic space. Similar to the last two sessions, there was low energy at the beginning of this session as well. Client E, however, was excited, asked a lot of questions, interrupted facilitators and needed a lot of redirections. Despite the atmosphere of unruliness, all the group members participated in both parts of the activity. Here, the request for using pencils to draw came up again. I explained that today I did not included pencils in the materials because I hoped they would be brave enough to try drawing with crayons or markers. I also clarified that the purpose was to be creative and not make a perfect drawing. Mistakes were okay. There was some hesitation and annoyance, but all the children used crayons or markers.

Once the first part of the activity was over, everyone was asked to share the drawings they made. We then placed them in a circle to form a "city". Here, I also brought out clients B and D's drawings from the previous week and encouraged them both to find appropriate places for their homes in the city. Once the circle was arranged, we all walked around it. At one point, client E lifted client B's drawing, rotated it and placed it back down again. After client E picked it up and moved it, the co-facilitator attempted to do that, too. This upset client B a lot and he became angry. For him, it was an invasion of his artistic space, and disregard towards his choice

of placing his art a certain way. There was not enough time to process what happened in group

and it had to end rather abruptly.

This session left me feeling disoriented and not competent enough and this is what my

artistic representation revolved around (see Figure 3). I felt as if I was unable to hold space for

the children, which is why we all experienced chaos and confusion. I also felt like the co-

facilitator and I were not on the same page about how the activity was expected to flow. The

absence of two regular members and the presence of a new child led to a very different dynamic.

In addition to this, client E's needs were not met effectively during the group. As facilitator of

the group, I realized that client E needed a more structured group setting and asked for her to be

placed instead in a different group. While this session ended on a confusing and angry note for

the children, I realized that a certain level of continuity, familiarity and rapport was needed for

the space to stay safe enough for a creative process to occur.

I am riddled with self-doubt
and I do not feel good.

I keep thinking of
what I could have
done differently

OH MY GOODNESS WHAT JUST HAPPENED?!
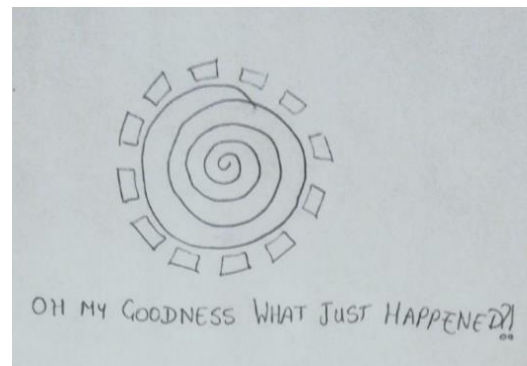
Figure 3. Artistic responses to session 3.

Session four

Session four was also unique in many aspects. There was a different staff member as co-

facilitator for the group. The regular co-facilitator and client B were not able to participate in

group that day because of a safety incident that took place on the way to the program. Client C

was absent. Thus, only clients A and D were present in the group, along with the facilitators. It

was an interesting dynamic to witness because A has been at the program for six years and client

D has been here for four. I was unaware that client B would not be joining the session until 20

minutes before the session began. This decision was made due to the expression of unsafe

behaviors on the way to the program. I had to tweak the intended group activity again.

The aim of the activity in this session was to embody and recognize different levels of

confidence through the "confidence walks" activity. The group members were asked to think of

different activities that they felt confident about in different capacities. Some interesting themes

that came up in this session were more verbal processing than expected, an added intermodal

layer to the activity, client A's controlling behavior and the personal friendship between clients

A and D. At the time, there was also insufficient knowledge about client B's temporary

suspension due to the safety incident. However, that was not addressed in the session because the

facilitators received all the details of the incident only after the session was over.

The impromptu addition of music during the confidence walk activity was first done by

the researcher and was received and replicated with enthusiasm. I asked for some background

beats to be played as I walked around the room. Each group member then took on that

intermodal layer and asked for specific music to be played for each of their turns. This led to the

emergence of client A's controlling tendencies once again, as he took on the role of the music

director and was eager to tell everyone what kind of music they should have in the background.

This was addressed openly and playfully, and client A was able to take the feedback well. This

behavior also gave us a glimpse into clients A and D's long friendship. A lot of the examples

they chose for their individual walks were activities they shared outside of the program. We were

also able to explore clients A and D's experience of when they entered the program and how

they might feel about the program now. This prompt got a very enthusiastic and embodied

response from both as they eagerly pretended to be their younger selves and narrate what their

first days were like. This was one silver lining to having only the two of them in the group.

       Another theme that emerged was the unconscious reliance of all the group members on

verbal processing. All the members processed their choices and even explained how different

levels of confidence can be expressed differently in the body. That did not take away from the

embodiment of all the feelings, however. The children were able to accurately choose an activity,

a level of confidence and distinguish it from other activities and levels of confidence.

       For this session, I waited to write my field notes and creative response until after the staff

meeting took place and the entire safety incident was processed with all staff members. It

appears the group was calm and controlled, while the rest of the program outside the room was in

a stormy flurry that we were oblivious to. I also realized that each session alternated between

"confusing" and "making progress" for me. My artistic response (see figure 4) reflected both

these feelings.

What are these
high highs and low lows?
How are the groups
alternating?
One bad,
One good?
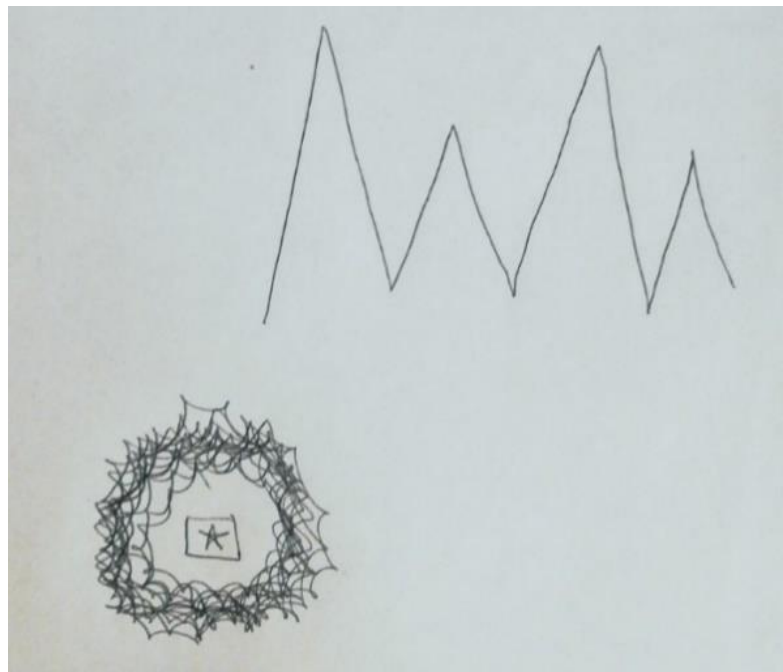
Figure 4. Artistic responses for session 4.

Session five

   This session was designed to be simple and focus on showing love and appreciation to

one's body. While the activity was an embodied one, it involved no movement. The main goal of

this activity was for the children to recognize and appreciate different parts of their bodies

explicitly. There were familiar and unexpected themes that emerged in this session. Similar

themes of reluctance at the beginning of the group and passive resistance came up. The

unexpected themes that came up were awareness and verbal expression of thought processes,

empathy for absent members, and recognition of positive emotions and working through difficult

feelings. There were also two separate incidents in group that highlighted the need for this work

to be done in a trauma sensitive manner.

   I was not surprised at the reluctance from group members at the beginning of the session,

but that reluctance turned into disbelief and amusement when I explained the activity. I began by

asking the children if they have ever thanked themselves or a part of their body for all the hard

work it does for them. My question was met with looks of bewilderment. I further stated that we

will be expressing gratitude to our bodies today, verbally and physically. The activity involved

identifying a part of the body, discussing ways in which that particular part is essential and

massaging that part to appreciate it. Once the activity began, clients B and D were able to

contribute to the conversation and discuss how different parts of their bodies help them play their

preferred sports or games. In the first half of this activity, client A was silent and refused to

participate. As we reached the middle of this activity, he loudly stated that he hated his body and

did not want to be part of this activity. This revelation was a surprise to me and the co-facilitator.

The group was paused, and client A was asked to go and check in with his clinical case

coordinator. The incident was immediately addressed, and the group continued. Clients B and D did not seem to have been concerned by client A's behavior.

The second activity for this session involved group members drawing themselves on paper and showing love to a particular part of themselves that they valued a lot. This activity was meant to reinforce the first one through the use of another modality. During this activity, client B asked for a pencil again. I invited him to take a creative risk by using markers. He did not get upset but insisted on using a pencil and explained with great detail why using a pencil would make him less upset compared to a marker. If he made a mistake with a marker, he would get very frustrated and thus, wanted to use a pencil for this activity. The fact that he was able to articulate his thought process and have insight into his actions – instead of getting upset and engaging in interpersonal conflict – was a big achievement for client B. At this point, I was both surprised and impressed at how he was able to appropriately express his needs. I realized that letting him have his preferred art material would be more productive and helpful to the long-term process than asking him to take a creative risk at that point in time.

The last activity for the session involved each group member sharing their artwork and saying one appreciation ("I appreciate xyz for…") for all the members present. Both clients B and D said appreciations for staff members and each other. They appreciated client A, even though he wasn't in the room. This was unexpected but highlighted how far all the children had come in the group. At that moment, the children were able to empathize with client A's struggles and appreciated him even though he was not present in the room. Client A returned to the group when there were five minutes left for the session. I explained the drawing activity and my surprise, he chose to participate in it. He also asked for a pencil and made a silhouette with a lot of pressured scribbles on his paper. He made arrows pointing to his arms and shared with the

group that he appreciates them. The group ended on a heartwarming note with clients B and D

repeating the appreciations they said for client A when he was not in the room.

Overall, this group presented me with several surprises, some of which were sudden and

required quick decision making and action taking on my part, while others were more pleasant

and required me to move out of the way and let the process unfold. I felt like I was witness to

several moments of growth for each child, as they displayed awareness, insight and empathy.

When client A verbalized his feelings, I was shocked. However, I realized that the feelings he

brought up would be better processed in a dyadic setting and offered him the opportunity to do

so. The fact that he did not engage in passive resistance or a power struggle, was a big step

forward for him. In addition to that, client A coming back and completing the second activity

also indicated progress for him. Client B's awareness of his feelings and behaviors was also a

huge step forward for him. I felt as if I had been able to hold space well enough for the group to

voice their feelings and continue to participate. My artistic reflection (see Figure 5) for this

session focused on the moment client A expressed his difficult feelings.
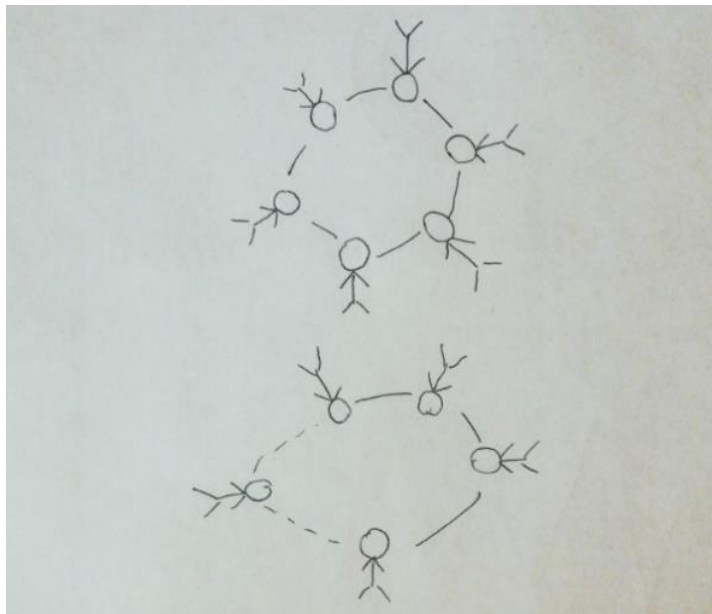
Figure 5. Artistic response for session 5.

Discussion

The project intended to explore the effects of improvisational expressive arts with children at a therapeutic after school program. The exploration included a trauma-informed lens and multimodal approach. A total of five sessions were observed, recorded and analyzed. The findings include discovery of the themes that arose in every session as well as the adaptation that was required within the research methodology. The analysis of different emergent themes echoes some literature present in the field and also points to new directions and possibilities for future research.

The "Beginning" – Reluctance and Resistance

The most common theme that emerged was that of resistance in the beginning. In all of the sessions, group members did not actively participate in the beginning. This could have been due to experiences within the preceding parts of the after-school program like the welcome meeting. This resistance seemed to remain even if the activity was in the child's preferred art modality. It manifested most often in the form of reluctance to engage in the beginning rituals of the group. This was also the most common time for power struggles to be initiated between the children and the staff members. This led to certain children getting five-minute breaks at the beginning of the group. Post the break, the children would be willing to engage in the session. Peters (2009, 2017) explained that improvisation has a beginning before a beginning. In other words, improvisation does not exist in the bubble of the present. In fact, the author argued that it almost always has more to do with the past being lived out instead of a future hope being imagined. In that sense, the "marked" beginning of the group was but a formality, which allowed a lot of history (immediate and far) to emerge and play out.

Preferences, risk and avoidance. The most common theme that emerged in the group once the activities began was engagement based on the perception of the activity itself. On several occasions, the interest and engagement of the children ebbed and flowed as the activity progressed and they processed information through various levels on the expressive therapies continuum (ETC) (Lusebrink, 1992). Within one session, some children preferred processing embodied activities more verbally, while some children enthusiastically expressed emotions through movement in a primarily verbal setting. Thus, the children did not only take creative risks in terms of trying new art modalities, but also trying to process information through different levels of the ETC. Similarly, creative avoidance was observed when children – even within a preferred activity – refused to move out of their preferred form of processing information. As a result, came up with creative ways to stay inside of their comfort zone.

Reciprocity, holding space and creative risks. During several sessions, risk-taking and avoidance behavior had an underlying catalyst – reciprocity. Reciprocity between the children as well as the children and facilitators created a sense of trust, interest and safety. Reciprocity between the facilitators was essential to effectively hold space. When interactions between facilitators and the children focused more on the activity at hand and less on directive behavior management, the "play space" was able to develop and subsequently, risk taking became less risky. The more conducive the environment was in the session for play, the better the outcome was. This pattern was also delineated by Nachmanovitch: (1992) "play enables us to rearrange our capacities and our very identity so that they can be used in unforeseen ways" (p.43).

Figure 7. Themes that emerged in the study.

Limitations. While this study brought to light many of the themes underlying

multimodal improvisation, there were some limitations. Due to university rules, no quantitative

or direct data was collected from the children. All data collected was observational in nature.

Also, the data recorded was from sessions when most children already knew what to expect from

this group. Second, the sampling was purposive, due to the larger goals the children had at the

after-school program. That decision was made for the potential benefits that the children in the

group would have received.

Recommendations. Exploration of improvisation in the field of expressive arts therapy

holds a lot of potential. For future research, it is recommended that a greater number of sessions

be recorded, along with accompanying quantitative data and interviews. It would also be

interesting to explore how improvisation could be used as a skill in an open admission group, in

an outpatient group setting (as opposed to in a daily after school program) or with a different age group.

Conclusion

The aim of this study was to explore the effects of using multimodal improvisation and subsequently develop a method for the same. This study helped delineate several patterns and themes likely to emerge in this process, provide detailed insight into using improvisation within a therapeutic framework and also using it as a valuable research tool. While there is no doubt that several principles in the process of improvisation are also inherently present in expressive therapies, this research study showed the potential of using it explicitly as a framework to work with children in a group setting. While current literature in the field of trauma-informed expressive therapies has taken a more directive approach, improvisation (and its inherent structure) offers an opportunity to explore new avenues of working with different populations in a non-directive, yet transformative way.

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