The Use of Expressive Arts in Making Sense of Traumatic Experiences

Rachel Ann Parr

MLAC Institute for Psychosocial Services
De La Salle University

Traumatic experiences brought about by natural disasters may find survivors in a psychological state where rational and verbal modalities are not always readily accessible. Play and Mindfulness-Based Expressive Arts Therapy with Cognitive Reframing (PMBEAT) was used to look into the experiences of 39 survivors of Typhoon Yolanda through their individual and collective narratives. The resulting themes of fear, anxiety, grief, isolation, guilt, and responsibility were generated through the individual stories of the survivors shared in groupings based on their developmental stages. The collective themes of unity and transcendence were gleaned from the visual and verbal output expressed in the family collage activity. The theme "A New Beginning" was agreed upon by the entire group after reflecting on what represented them as a whole. The interpretations and themes used in the study were checked for reliability and accuracy using a modified "inter-rater clinical judgment and discussion consensus" model.

Keywords: expressive arts, family, collage, Yolanda

From the year 2000 to 2013, the Philippines experienced major natural and man-made disasters at least once every year. From the Payatas dumpsite tragedy and LRT bombings in the year 2000 up to the onslaught of Typhoon Yolanda (international name: Haiyan) in 2013, these disasters brought about devastation that can only be

Correspondence concerning this article can be addressed to Rachel Ann Rosales Parr, MLAC Institute for Psychosocial Services, #2 Kaunlaran St., Kawilihan Village, Bagong Ilog 1600, Pasig City. Mobile No.:+639178010866. Email: richie_0108@yahoo.com

described as catastrophic.

Traumatic experiences brought about by natural and man-made disasters have posed serious threats to the normal psychological functioning of the many survivors who continue to rebuild their lives amidst the economic and political challenges faced by the country. Given these threats, the need for relevant, sustainable, and effective methods of intervention has never been more underscored in the last decade or so. In order to be effective, programs of rehabilitation and intervention must take into consideration the multilevel nature of trauma given the different age groups and social contexts affected by it and the different systems of human functioning that tend to get disturbed by it (Saul, 2014).

In response to the complexities of trauma and the damages brought about by typhoon Yolanda, a team of psychologists, formed in part by the researchers of this paper, conducted an intervention program with 39 Yolanda survivors using a unique and innovative method of intervention. This method has evolved through the years stemming from the experiences of the team, who have been accompanying trauma survivors in their journey towards healing, recovery, and transcendence since the 1990s. This approach highlights the importance of play and mindfulness-based expressive arts as forms of therapeutic intervention combined with cognitive reframing techniques (MLAC Institute for Psychosocial Services, in press). The term Play and Mindfulness-Based Expressive Arts Therapy with Cognitive Reframing (PMBEAT) was coined by Dr. Ma. Lourdes A. Carandang (M. L. A. Carandang, personal communication, December 14, 2014) to encompass the critical elements of the model.

This study looked into the experiences of 39 Yolanda survivors based on their individual stories and family realizations during the PMBEAT intervention.

RELATED LITERATURE

The Nature of Natural Disasters

The geographical location of the Philippines is part of the Pacific Ring of Fire, which is an area in the Pacific ocean where earthquakes

and volcanic eruptions tend to occur. The Philippines is known to have about 300 volcanoes, 22 of these are currently listed as being active. In addition to being in an active volcanic region, the country is also located along the typhoon belt wherein an average of 15-20 typhoons strike every year, oftentimes bringing massive floods and landslides (Carandang & Nisperos, 1996; Verzosa, 2011)

Flashfloods and landslides have resulted in the loss of property, the death of thousands of individuals, and tens of thousands of missing and family members unaccounted for. People find themselves homeless, grieving, orphaned, and scared. Rainfall, no matter how light, can cause high levels of apprehension, terror, and anxiety in both children and adults (Carandang & Nisperos, 1996; Verzosa, 2011). Verzosa (2011) described the pervasive psychological effects of the stench of rotting and decaying human and animal flesh on survivors of the 2004 Infanta, Quezon Typhoon tragedy. Adults and children, as Versoza (2011) mentioned, are sometimes muted and immobilized by these catastrophes.

Furthermore, as seen in the experiences of families who survived previous typhoons (i.e., Typhoons Pepeng and Santi in 2009), the condition of being displaced and put into overcrowded evacuation centers made up of tents and unsafe temporary shelters adds to the stress and insecurity of not being in a safe environment (Verzosa, 2011). Survivors who have lost their means of livelihood talk about having to tolerate hunger and learn how to live on a day-to-day basis, relying on food donations from government and non-government agencies (Verzosa, 2011).

Impact of Typhoon Yolanda. Typhoon Yolanda hit the Philippines in November 8, 2013. It was, and still is, the strongest tropical cyclone ever recorded. According to an article in the Philippine Government website, Yolanda caused massive losses affecting 1,473,251 families with 6,300 casualties (Philippine Government Official Gazette, 2014).

According to the 2014 fact sheet of the United States Agency for International Development (USAID; 2014) on Typhoon Yolanda, 5.9 million workers lost their means of livelihood as a result of the loss and damage to economic, financial, and communication infrastructures in the affected regions. More than a million families had lost access

to food and financial resources. Healthcare facilities and the delivery of basic services (i.e., water, sanitation, and hygiene) were disrupted or completely blocked for weeks on end leaving the sick, the dying, and the dead unattended to and exposed to an already traumatized community. More than a million families suffered some form of tragic loss leaving them at great risk for individual and collective trauma.

Impact of Trauma on Psychological Needs of Individuals and Families

Impact on relationships. According to Landau, Mittal, and Wieling (2008), a person tends to experience a sense of being disconnected from other people during times of trauma. Saul (2014) discussed how major disasters can disturb and upset family systems that are needed for members to draw strength from as they see themselves in the midst of traumatic experiences. This can leave adverse effects on the self and its interpersonal relationships as manifested in one's thought processes, emotions, memories, and sense of agency. The negative effects on relationships may not be seen by simply focusing on individual symptoms and might be more evident through group settings. For instance, extremely stressful events may have repercussions on parenting and healthy communication patterns between family members.

Carandang, Aguilar, and De Asis (2014) stressed the need of people to feel that they are accompanied in times of hardship. Human beings need to be socially connected with others. Being supported and knowing that one is not alone is a basic human necessity. This tends to be generated from a sense of belonging to a family, peer group, and a community.

Somasundaram (2007) mentioned how whole communities go through hopelessness and desolation in the light of massive destruction and widespread loss of life and property. As mentioned, this can be harmful to the psychosocial state of individuals and families as social bonds tend to be weakened and compromised. In collectivist societies, people respond to trauma as a social unit. In time, families in these societies will respond and give common meaning to their experiences. Common coping strategies develop from shared stressful experiences

and mechanisms for emotional support are provided by the interaction that takes place between members of a social unit.

Impact on a sense of continuity. In addition to social connections, people may lose their sense of continuity from the past and to the future, which in turn may hamper the inner resilience needed in times of trauma and loss (Landau & Saul, 2004). They suggested that trauma creates discontinuity and a feeling of being disconnected from a "transitional pathway," which is described by Landau, Mittal, and Wieling (2008) as that delicate and vital connection linking an individual's and family's past, present, and future. A person derives strength and resilience from a sense of connectedness to one's family history or one's past. This mental access helps adolescents and adults create the connection between where they came from, where they are now, and what they need to hang on to and let go of for the future (Landau et al., 2008; Landau & Saul, 2004).

Impact on the self. For many survivors of catastrophes, the effects of trauma are not visible and readily detected. The American Psychological Association (APA; 2013) concurs with the view that human trauma resulting from natural disasters can be an emotional rather than physical experience. The loss of family members, friends, homes, and livelihood can lead to intense and debilitating feelings of helplessness and worthlessness. Levine & Frederick (1997) mentioned that overwhelming sensations brought about by highly stressful events can make people suffer from an overpowering sense of being defeated and beaten.

Carandang et al. (2014) talked about personal significance, affirmation, affiliation, and self-expression as some of the basic needs of every individual. As discussed, it is essential for people to know that they matter and that someone will ultimately look out for their interest. Saul (2014) mentioned how social fragmentation caused by widespread traumatic events can be very painful and destabilizing to survivors. People need to be able to feel that their feelings and thoughts can be listened to and accepted without judgment.

Williamson and Robinson (2006) talk about a sense of safety, participation, and development as vital concepts in promoting the sense of well-being of human beings. People need to have a sense that they can be their own agency of security and development. It is important

that survivors are able to dynamically participate in activities that promote and strengthen their personal capabilities for growth. These activities may involve those needed to provide for themselves and their families together with people of similar and/or common experiences.

Expressive Arts as a Therapeutic Tool

As was emphasized in the previous section, catastrophes tend to have multidimensional physical, social, psychological, and spiritual effects on the lives of human beings. The adverse effects put people through very powerful emotional states such as helplessness, terror, intense fear, loss of control, and eradication. The severity and complexity of these experiences warrant the need for methods of intervention that recognizes the extreme levels to which human resources, both physical and mental, are challenged (Ladrido-Ignacio, 2011).

The belief that every person is in possession of internal resources for understanding and healing in the face of traumatic experiences has been a guiding philosophy for therapeutic models that focus on strengthening a person's sense of agency and capacity to form and follow his own path to recovery. The role of expressive arts in harnessing and bringing these resources to consciousness is underscored in times of trauma when rational and verbal modalities are not always readily accessible to the traumatized person (M. L. A. Carandang, personal communication, August 1, 2014).

Expressive arts is a method widely used in the field of psychotherapy. Expressive arts, according to Malchiodi (2005), falls under the category of expressive therapies that mental health practitioners use to address differences people have in their communication styles. Malchiodi (2005) further talked about how it has been able to provide an alternative means for people to talk about themselves and their experiences in an authentic and effective way.

The use of expressive arts as a form of therapy is recognized as a viable and effective method because of its capacity to cut across the different developmental stages from childhood all the way to late adulthood (N. Rogers, 2011). It has found its place as an effective intervention tool for adult and child survivors who are adversely

affected by bereavement, war, and suicide (Thompson & Neimeyer, 2014).

In relation to the contention that people are inherently capable of understanding and healing from their traumatic experiences, Levine and Frederick (1997) described constructive transformation as a process brought about by resources, energies, and potentials that are present in every individual. This transformative process can be thwarted by the faulty belief in the need to be always in control and rational in conducting oneself. The inability to express oneself verbally and coherently can make one feel out-of-control and further threatened and confused. Verbal methods can sometimes constrain people (children in particular) as a result of language barriers and undeveloped verbal skills due to age and/or educational experience. As a a result, the individual may retreat and feel even more isolated because of these constraints.

Carandang and Nisperos (1996) wrote about the experiences of the survivors of the 1990 Luzon earthquake. The authors combined these experiences with that of people who survived other natural disasters. These encounters were put together with those of the psychologists who accompanied these survivors in their trauma recovery process. The outcome was a healing manual entitled "Pakikipagkapwa-damdamin", which was meant to serve as a guide for all who work with survivors of natural and man-made disasters. The manual already recognizes the highly complex nature of trauma through the multilevel psychosocial interventions that were mentioned. In this manual, the concept of expressive therapy was described as a set of techniques by which children, in particular, can be assisted in expressing themselves, thereby facilitating their coping and problem-solving skills. This can further enable children and develop their abilities to process emotional challenges they may be going through.

Carandang (2009) presented expressive arts as one of the methods under the child directed play therapy (CDPT) mode of intervention wherein children are able to express themselves in a natural and age-appropriate way using drawing materials, clay, paint, etc. Art is used as a medium of expression to aid the child in coping with trauma. Its therapeutic properties have been proven effective with adolescents and adults as well (Carandang, 2009). It provides a safe

and spontaneous mode of communication that a person can do at his own pace with his own rules using his chosen materials. In a primer for trauma and recovery written for trauma workers (MLAC Institute for Psychosocial Services, in press), expressive arts was more accurately defined as a combination of different mindfulness-based methods of intervention. Play was presented as an instinctive way for children to express themselves. Mindfulness is an encompassing state or mindset that makes a person (therapist and/or client) aware and tuned-in to one's feelings in a non-threatening way, at the present moment, with acceptance, and without judgment (Hanh, 1991, as cited in MLAC Institute for Psychosocial Services, in press).

In as much as there is individual trauma, collective trauma is also seen as an inevitable consequence of natural and human-caused disasters. According to McNiff (2004), the artistic emotional expression of one person can trigger responses from others that carry similar emotional content and depth. The act of creating art in a group setting and observing others in the same process can establish a therapeutic environment in the way that it establishes a flow of artistic expressions triggered by the images of the art and the people creating them. In this regard, expressive arts is a vital tool in building a sense of belonging and community in group therapy sessions (J. Rogers, 2011). Collective narration, in the form of stories shared through narrative, the arts, and theatrical performances, can aid in healing and recovery (Saul, 2014).

These stories can be identified, categorized, and understood through the use of thematic analysis (Reissman, 2008). The author further states that the method of collecting data for narrative analysis may take on a variety of approaches. This is expected and what is important is that the method selected is able to describe and portray the account.

Expressive arts becomes a therapeutic tool in the way that it helps survivors understand their own experiences. This allows them to reframe their stories in a way that has meaning to them. The art activities provide ways by which survivors may construct, deconstruct, or reconstruct their narratives and retell their stories – as individuals, as a family, and as a community. This paper will present emerging themes from stories of trauma and recovery, analyzed and extracted

using an approach that focuses not just on the individual but also on the family and the community as units of analysis.

METHOD

This paper utilized a qualitative multiple case study design where the unit of analysis included the individual, the family, and the community. Focused group discussions were conducted to allow for individual stories to emerge. Independent group activities with the family as a unit of analysis were created in order to facilitate the extraction of narratives formed from the experiences of the family and community as a unit.

Participants

There were a total 39 (male = 19, female = 20) respondents who participated in the study: 14 government employees together with 25 family members. All of them were survivors of Typhoon Yolanda. All 14 government employees were between 30 and 50 years old. The rest of the participants were between the ages of 3 to 65 and are residents of Region 8 (Eastern Visayas). All 39 survivors willingly agreed to join in both individual and group activities.

There were 11 families in the group. Three employees did not have any family members with them. The sizes of families ranged from 2 to 5 members. Participants aged 13 and below were grouped as children. Those who were between 13 and 22 were grouped as adolescents and those who were above 23 were grouped as adults. Table 1 shows the demographic profile of the participants in this study.

Procedure

Individual processing. This section describes how the individual participants were grouped: first according to age and later as family groups. This was deemed necessary in order to gather as much information/data as possible on the experiences of the participants. Before the grouping procedure, a representative introduced each member of the research and intervention team. Each government

Table 1. Demographic Profile of Respondents

Employee Gender	Number of Family Members	Age of Family Member	Gender of Family Member
1) Male	2	64	Female
		30	Female
2) Female	4	52	Female
		21	Male
		19	Male
		12	Male
3) Male	3	59	Female
		59	Male
		3	Female
4) Male	0	--	--
5) Male	1	54	Female
6) Female	1	22	Female
7) Male	2	61	Female
		62	Female
8) Female	3	49	Female
		27	Male
		11	Female
9) Male	3	13	Male
		12	Female
		7	Male
10) Female	0	--	--
11) Female	2	41	Male
		9	Male
12) Female	1	7	Male
13) Female	3	20	Male
		65	Female
		22	Female
14) Male	0	--	--

Note. Total of 14 employees and 25 family members.

employee was also invited to introduce himself/herself and their respective accompanying family members. A short talk on the nature of trauma and what reactions were to be expected were given by an expert on trauma and recovery.

Individuals were first grouped according to their developmental stage (i.e., early to middle childhood; adolescence, and adulthood). Each participant was invited to talk about themselves, their experiences, and their memories of their experience of Typhoon Yolanda. The participants were given writing and coloring materials in order to provide more options on the best way to express themselves. Toys consisting of cars, soldiers, animals, trees, rocks, and dolls were also provided for the children's group so that they could also have the option to play during this activity. The instructions given by the researchers were as follows:

1. Meron po ba kayo or meron ka bang gusto ikwento tungkol sa karanasan mo nung bagyong Yolanda? (Is there something you want to tell us about your experience during Typhoon Yolanda?)

2. Ano yung naiisip mo o nararamdaman mo kapag naaalala mo ang iyong karanasan? (What do you tend to think of or feel when you recall your experiences during the typhoon?)

The data gathered here comes from those who were willing and able to share. These formed the resulting categories for individual experiences.

The researchers would like to point out that one of the participants in the children's group was a 3 year old child. This child was allowed to play with the other children during the individual data gathering activity. The data generated from the individual processing activity does not include any verbal expressions from the said child. The non-directive nature of the intervention approach used allows for young children to participate in their most natural way, talking to the researchers while playing or doing artwork. It was natural for this young child to be with the other children and vice versa during the individual processing activity.

Group Processing. After the individual processing, participants were grouped according to family units in recognition of the natural social setting they would be going home to after. The three employees who came alone were asked to form themselves into a group. Each

group was provided with art materials such as manila paper, colored art paper, colored metacards, modeling clay, crayons, pencils, and markers. Participants were asked to reflect on their experiences as a family during the onslaught of Typhoon Yolanda and on any insights they had during the individual psychological processing conducted earlier.

Each group was asked to come up with a verbal and/or non-verbal representation of these experiences and perceptions. The exact instructions given were as follows:

1. *Mag-isip ng isang salita o grupo ng mga salita, o kaya simbulo o grupo ng mga simbulo na sa pakiramdam ninyo ay maaring maglarawan o kumatawan sa kabuuan ng inyong karanasan sa Yolanda bilang isang pamilya. Maaring gumamit ng kahit anong salita para dito.* (Think of any word or group of words, symbol or group of symbols that you feel can represent your total Yolanda experience as a family. You can choose to express this in any language you choose.)

2. *Ilarawan o isulat ang inyong napiling simbulo gamit ang kahit na alin sa mga art materials na narito.* (Create or write this symbol using any of the art materials we have at present.)

The final group output was called the family collage and each family was invited to present this to the entire group. The data collected from the group activity was the basis for the resulting categories for family experiences.

As a culminating activity, the entire group was asked to think of a community theme that could apply to all survivors of Yolanda. All of those present gathered together in a circle and the participants who volunteered to share their thoughts gave suggestions for this community theme.

All participants and stakeholders were verbally informed about and verbally consented to having the proceedings recorded for research and documentation purposes.

Data collection. The data consisted of (a) the images and symbols created by the participants using the art materials provided together and (b) the textual messages written by the participants themselves. The visual and textual data gathered were further combined with the verbal explanations of the participants as they talked about their collective theme or family collage. All hardcopies

of the artwork were willingly submitted by the participants to the research team. All participants gave their permission to be recorded and have their output used for research purposes.

Data Analysis

The collective themes generated from each individual and each family were analyzed according to textual and conceptual elements that appeared to express connections and similar ideas. In order to ensure the stability and accuracy of the classifications generated, a modified interrater clinical judgment and discussion consensus model (Carandang, Fernando, & Sison, 1999) was employed.

In this model for reliability and validity, a team of eight psychologists was consulted to discuss the interpretations of the responses generated from the family collage activity, four of which were part of and the other four were not directly part of the intervention procedures. Three psychologists had a minimum of 10 years experience in the field of trauma and psychosocial rehabilitation, two had 3 years experience, and one psychologist had a year of training and acted as documentor for the sessions. A graduate student in psychology was asked to help in documenting the proceedings. Those who were not part of the intervention procedures were invited to participate in order to ensure independent and objective analysis.

The data analyzed consisted of the actual family artwork created by the participants together with a video and audio recording of the family presentations. The data for individual experiences came from (a) the written notes and recollections of the psychologists who handled the sessions and (b) the notes of the psychologist who acted as documenter. The interpretations were always matched in accordance with the explanations and elucidations provided by the participants. The discussions culminated in a consensus on the categories and labels to be used in summarizing the collective themes.

RESULTS

The following section shows the resulting themes and categories stemming from the individual and group activities. The themes from

individual narratives were taken from the combined stories of all age groups. The family group categories were also gathered from all the family groups.

Themes From Individual Narratives

Sense of fear and anxiety. Several individuals coming from both child and adult groups talked about the haunting images of dead bodies, the sight of abandoned houses and stores being looted, and the stench in the air caused by rotting corpses and decaying organic material scattered everywhere. Rumors of NPA rebel soldiers and Badjao bandits strolling around streets in the absence of law and order enforcers added to the participants' anxiety. Some adolescents in the group mentioned the fear of another typhoon or another similar catastrophe in the future. There was a strong sense of uncertainty as to what the next catastrophe will be and if they will be prepared to face it. Part of the fear and anxiety of some of the adults came from imagining what life would be like if they had lost a child or a family member.

Sense of grief. The sense of grief came from the loss of family members, neighbors, and friends. A lot of the individuals talked about the pain of losing their home, sources of livelihood, and life savings. After hearing each other's stories, other participants talked about the sense of loss that they felt after seeing what had happened to their community. They had lost their schools, churches, parks, trees, hospitals, etc. Their mourning was both personal and shared as they listened to each other.

Sense of isolation. The sense of isolation came out when the participants talked about the realization that they had no one but each other saying, *"Wala tayong makapitan kundi ang ating mga kaibigan at kapatid."* (We have no one to cling to apart from our friends and family.) The participants knew they had each other as a family and as neighbors, but they were isolated from the rest of the world. Several of the individuals mentioned how they no longer had a community to speak of. They had lost their schools, hospitals, parks, and churches–institutions that gave them a sense of belonging to a community.

Sense of guilt. Several of the participants talked about the guilt they felt when they saw their neighbors and friends struggling through

the typhoon saying, *"Hindi ko sila natulungan. Hindi ko sila masagip. Wala akong magawa."* (I could not help them. I could not save them. There was nothing I could do.) The participants recognized a feeling of helplessness as they watched other people fight through the wind and the rising waters while trying to ensure their family's safety and survival.

Sense of responsibility. Adults mentioned feeling a very strong need to be strong and alert as they needed to make quick decisions while their houses where being torn down by the wind. They had to look tough and brave as they watched the rising floodwaters and water surges submerge everything and everyone around them. In their minds, they should not let other members see their dread and alarm in order to avoid causing or adding panic in the group.

Themes From Group or Family Narratives

Sense of unity. Unity was a salient theme in the family group activity. In fact, the local (i.e., Waray) term for unity, *pagkaurusa*. was repeatedly mentioned during the presentations. The theme was also evident in some of the family collages.

In each group, all members were given tasks in creating their family symbol/message. In one family collage, one person drew dark clouds. The other placed cutouts of boats, trees, and debris being blown by a strong wind. Another member drew the parents pulling a cart with the children on it. By putting together their individual experiences, they were able to piece together a shared family experience.

Some groups attributed their unity to the common faith that they shared. One particular collage contained a house with people inside, all made from cutout shapes with the adage, "The family that prays together, stays together," written in metacards.

Another group stressed the importance of staying together in order to fully recover from the onslaught of Yolanda through cutouts showing people inside a house with the words "Till death do us part" written inside the house.

One metaphor described the family's foundation as being strong like a rock, which was represented using a cutout of a boulder with the work "rock" written underneath–the strength of which comes from

love, unity, peace, and from being prayerful. This was echoed in one collage wherein cutouts of people using art paper were arranged to look like beads forming a rosary.

Another metaphor stressed the value of staying together and not leaving anyone behind, no matter what happens, in the face of adversity and good fortune. A collage was presented with sketches of a house and people forming a family with one family member in charge of drawing while the others participated by coloring the drawings. [*"Sama-sama walang iwanan, kahit anong mangyari sa hirap at ginhawa."* (Together as one. No one will be left behind no matter what, in good times and bad times.)]

Others talked about strength coming from unity and cooperation in the family. This collage was also presented using colored cutouts of people forming a family inside a drawing of a house.

To those families who did not lose any family members, realizing the wholeness of their family gave them the sense that they were not really affected by the storm because they were still whole and united.

Gaining a sense of normalcy. Some families focused on the events that took place after the typhoon. One family created a picture with cutouts of a bright yellow sun, blue skies, and flowers growing around. "Sunshine after the rain" was the message that came along with this artwork. In one collage, the bigger portion of the artwork was filled with sources of strength while a smaller portion contained the bad experiences during Yolanda. Some shared that by cleaning their houses after the typhoon, they were able to make it seem like nothing happened. Some families reiterated this by talking about how they needed to get back to their routine to achieve a sense of regularity. According to them, this gave a realization of their capacity to find ways of bringing things back to a level of normalcy where they could begin to cope with the aftermath with a sense of efficacy and power.

Another family wrote messages with markers and cutout letters. The messages included, "Always looking out for a better tomorrow", "We are now stronger because we help each other", and "Yolanda is just a passerby."

Some individual survivors came up with additional mottos for always being prepared in times of calamity. They realized that the preparations they made prevented the disaster from taking everything

they had and this proved to be a very valuable lesson for the future.

New beginning. The Tagalog phrase *"bagong simula"* (new beginning) was expressed repeatedly during the culminating activity wherein participants were asked to volunteer suggestions for a common theme that could apply to everyone in the entire group (plenary). A consensus was reached within the group of participants as all agreed to the relevance of this theme. The researchers translated the Tagalog phrase into English in order to maintain uniformity in the language used for the resulting themes.

DISCUSSION

The following section will discuss the resulting themes and categories in light of the knowledge generated from the work of groups and individuals who have worked extensively through the years with survivors of natural and man-made disasters. The subheadings are labels chosen by the researchers to organize the points being discussed and to represent themes that the researchers have identified from the data.

Emerging Themes

Social aspect of trauma and recovery. In the verbal and visual sharing of their stories and their collective experience, the participants found commonalities in their trauma and in their sources of strength. These commonalities allowed the participants to realize a new social environment in the light of their shared experiences. According to Verzosa (2011), a person who is said to be mentally healthy is one whose physical, psychological, and social needs are equally satisfied. The social needs pertain to establishing positive relationships within a realized social environment. People need to have a sense of belonging to a social unit such as a family or a community. The results of the group activity suggest that the participants felt a sense of belongingness to a family unit or to a larger community. Some of the realizations and lessons learned by the participants in the group activity respond to the basic psychological need of being reaffirmed as an integral part of a whole, a basic psychological need identified by

Carandang et al. (2014). This could be seen as a reflection of how the dimensions of mental health (i.e., social, psychological, and physical) affect each other and how this reciprocity is most likely what forms a healthy integrated sense of well-being.

The family context. The trauma suffered by each family had to also be faced as a family. As a social unit, the family is seen as a major component in a person's social life (Medina, 2001). The importance of preserving and protecting the completeness of the family was a common theme reaffirmed and validated by several family groups through their artwork. Carandang et al. (2014) talked about how every person needs to feel that he or she matters and that everyone is important. The group activity allowed the families to do this for each other and reaffirm what they have always had as a source of strength (i.e., the family). Verzosa (2011) stressed the importance of focusing on the family to which individuals belong because this sense of belonging and unity is fundamental to a person's well-being. The resulting individual themes of grief, guilt, and isolation were countered with family collage themes of strength found in unity, the power of unity, and the value of unity. Each participant experienced Yolanda together with other family members and they would be going home as a family unit after the activities. The family collage activity was conducted in recognition of this natural setting that was present during and after the trauma.

The community. In the light of their trauma as a community, the participants also needed to heal as a community. This underscores the basic psychological need to connect and remain connected with others (Carandang et al., 2014). Somasundaram (2007) talked about how an individual's sense of self tends to be defined by its connection to wider social groups. In times of disaster when the institutions that make up this social fabric are destroyed, individuals' recovery is contingent on the rebuilding of their social environment.

Emotional dimension. The psychological need for love and compassion is also highlighted in the family collages that talked about the foundations of strength in the family. In the same way, love is essential not only in preserving the family unit but also in maintaining togetherness in communities, barangays, or even in evacuation centers (Williamson & Robinson, 2006). The importance of caring

for each other within family units, barangays, evacuation centers, and communities lies in the way it fosters a person's sense of well-being as it promotes joy and pleasure (Williamson & Robinson, 2006). Ladrido-Ignacio (2011) stressed the value of addressing the emotional dimension of traumatic experiences as these can help preserve and strengthen social units that people need to survive and thrive. Love, unconditional acceptance, and affirmation give a person that sense of worth and the strength to go on (Carandang et al., 2014). This becomes crucial in times of trauma when survivors can feel completely lost and helpless.

The participants talked about and/or expressed the emotional upheaval and the realizations they had about themselves in the light of their experiences. While they felt helpless, they also felt grateful that they were able to save their family members. In realizing their greatest fears and remembering moments of extreme fright and panic, many of them came face to face with their own abilities to put the interest of family members ahead of their own. They controlled their fear in order to protect and reinforce the determination of others to go on and strive to survive.

Individual and collective resilience. The concept of individual transformations that reflect resilience tend to, but not always, result from adversities and painful experiences (Ortigas & Perez, 2009). The researchers extend this concept of individual transformation to the family and the community as discrete social units. This transformation can be seen in the way individuals see themselves and how families see themselves now in the light of their losses and realizations. They are stronger now and better prepared.

The need for a sense of competence and transcendence are also mentioned as basic and fundamental to a person (Carandang et al., 2014). This was seen in the way each family saw themselves as people who were able to survive and who can learn to be more equipped mentally and physically as a family and as a community in the face of another Yolanda experience. The realizations include seeing themselves in terms of the family units and the community they belong to in the light of their common experiences. These realizations involved seeing themselves as tougher, more united, and ready to face another disaster because of what they have learned and because of

what they have always had.

A positive visualization of one's future and a restored sense of hope (Saul, 2014) amidst the difficulties they still face in the aftermath of Yolanda seem to have emanated from the personal, family, and community resources that were realized from this activity. Lev-Wiesel & Amir (2011) talked about the importance of knowing the existence of social support groups through family, friends, and community as instrumental to posttraumatic growth. This knowledge most likely helps the individual become cognizant of what his resources are as an individual within the context of a family and a community.

Expressive Arts as a Medium

According to Saul (2014), the human spirit needs to access biological, psychological, social, and spiritual resources in order for it to overcome and surmount adversities in life. This ecosystemic context provides the fundamental capability to withstand adversities in life. Williamson & Robinson (2006) also state that the different dimensions of human functioning (i.e., physical, social, emotional, and material) are interrelated and therefore must be addressed as integrated parts of a whole in responding to the needs of people who have experienced traumatic events. Marcelino and Francisco (1991) underscored the fact that not only do natural and man-made disasters destroy property and livelihood but these tend to disrupt and disturb a person's sense of security and well-being.

The PMBEAT method (MLAC Institute for Psychosocial Services, in press), used to facilitate the process of healing and recovery for the participants in this study, provided a way for the survivors' internal resources to resurface and reemerge through the non-directive modalities that involved listening to them talk and reflect on their experiences–mindfully, intently and with full acceptance. The other modalities included verbal and non-verbal visual expressions through art materials, which were selected and used by the participants based on what they felt was appropriate and suitable to them. The approach as a whole helped them talk about and make sense of their own strengths and weaknesses as individuals and as family units in a way that they could own and utilize based on what they felt was comfortable and

appropriate.

Williamson & Robinson (2006) concur with the view that working with survivors of catastrophes necessitates a model that allows a two-way flow of assistance where survivors are active participants in their own recovery and healing. Carandang et al. (2014) also mentions the importance of self-expression, which refers to the process by which individuals can articulate or communicate what they are feeling to another person who is openly and intently listening. This was achieved in the way that each individual and each family unit was able to find a way of expressing their feelings about their experience and about each other through narratives, visual arts, and music in an environment where they were listened to and accepted completely and mindfully. Expressive therapies provide ways for children and adults to express themselves, which in turn facilitates the processing of emotional pain and problem solving through their own realizations that are made possible by the ability to communicate (Carandang & Nisperos, 1986).

Limitations of the Study

The findings of the study are based on what the participants shared with the researchers during the individual and group activities. The descriptions of their experiences and the events that took place are limited to what the participants could recall and were willing to share. The stability and reliability of the interpretations were ensured as much as possible by inviting experienced psychologists who were not part of the intervention process. Documenters were hired to write down what the participants shared orally and what they observed in both individual and group proceedings. The researchers tried to achieve as much accuracy as possible by recording the proceedings of the presentations using both video and audio recorders. The data gathered from the recordings were combined with the documenter reports and interpreted based on the understandings and experiences of the psychologists who were part of the data analysis. The data gathered were deemed rich and substantial enough to meet the main objective of this research endeavor, which was to look into and present the total experiences of the 39 survivors using a multiple case method that utilized the individual and the family as units of analysis.

The researchers recognize the possibility that there may be more to gather and uncover from other members of the community who were not there. However, the documented and recorded reactions of the participants after sessions combined with anecdotes and testimonials of improved work and family relations that were shared with the researchers 2 weeks after may be used to support the conclusions of the study. As mentioned, this paper is not meant to be an evaluation of the intervention approach. It is a presentation of the experiences of individuals and families who survived and even flourished amidst the challenges posed by Typhoon Yolanda.

Conclusion

The psychological approach described in this paper originated from an orientation that upholds a strong belief in the inner resources of every individual, regardless of age, economic status, and physical well-being (Carandang & Nisperos, 1996). The participants went through a process that was cognizant and respectful of these inner abilities. The process took into account the innate wisdom and power of children and adults to respond, to understand, to make meaning, and move from their traumatic experiences towards a positive direction.

Reconstructing and interpreting traumatic experiences were facilitated by the insights and realizations they themselves expressed as individuals and as family units. These insights and realizations emerged through the individual and group activities involving oral exchanges and expressive arts. The family collage provided a synthesis of their individual experiences and underscored what is and what has always been their source of strength: the unity and completeness of their families.

These insights and realizations were further studied within the framework of known basic psychological needs of people, which included the need to be socially connected, emotional nurturance, and the need for competence and transcendence. The experience of being listened to individually, mindfully, and with acceptance created an atmosphere where they were open to listening to one another and affirming each other's experience. The realization of their personal and collective capacities, which included how they were able to express,

communicate, and give meaning to the crucial dimensions of their total experience (e.g., social, emotional, and spiritual) gave them the sense that they will be able to transcend and face future challenges of the same, or even greater, magnitude. This could be interpreted as gaining a sense of control over themselves and their future. The sharing of individual stories and family collages appeared to reflect a reframed sense of self, family, and community. This could be seen as a reconstruction of the social fabric that was destroyed by Yolanda. The meaning given to the Yolanda experience took on a positive note as it was collectively seen as a new beginning for everyone. This concept of a new beginning suggests not only the end of something but also gives the sense of looking forward to a fresh start. It is also appreciated within the context of a realization coming from a negative experience–a realization that provides hope for the future. The ability to hope is seen by the researchers as a sign of recovery. This was also interpreted as a positive outcome based on the view that planning for a new life is a major component in the recovery process of trauma (Herman, 1992).

Recommendations

Implications for clinical practice. This paper hopes to stress the importance of knowing how to utilize different methods or modalities in trauma therapy given the different dimensions affected by trauma and given the individual differences in the way people handle and process traumatic experiences. Expressive arts, as a modality, gives therapists a wide range of activities that could be classified and selected accordingly based on what is age appropriate and culturally relevant. This research project further aims to emphasize the importance of recognizing the natural social settings in which certain types of trauma are experienced together with and in relation to the individual internal experiences of people.

Future research. It would be beneficial to conduct a study that focuses on a thorough evaluation of the innovative family-focused approach used in this paper. The framework that recognizes and upholds the value of the natural setting in which most significant life experiences occur (i.e., the family context) warrants further investigation using the various non-directive approaches to therapy.

Given the wide range of activities that fall under the expressive arts category, added knowledge on the relevance and application of these techniques could significantly benefit the field of psychosocial intervention.

The researchers recommend that more studies be done on other expressive arts modalities (e.g., movement and dance, using other art materials such as clay or rubber foam that can be used to create shapes, drama, and/or other music-based activities) in terms of how they are able to help in communicating traumatic experiences brought about by natural and man-made disasters in the Philippines. It would be interesting to see if certain methods can draw memories that are more sensory and physical in content. A study that maps out these activities according to demographic (e.g., age, educational background, etc.), and possibly other latent factors and dimensions, would help deepen the existing knowledge on methods of intervention.

A study on how survivors of armed conflict, mining accidents, and other man-made disasters select play and mindfulness-based expressive arts activities would be worth exploring in order to find out if survivors have a tendency to lean towards certain types of expressions (i.e., visual vs. oral and/or verbal vs. non-verbal).

The researchers offer this paper as a testimony to the viability of expressive arts as a tool wherein individuals and families can explore and share elements of their experiences thereby paving the way for conscious realizations, insights, and reaffirmations – all of which contribute to how individuals and families make meaning out of these experiences in life.

AUTHOR'S NOTES

REFERENCES

American Psychological Association, (2013). *Recovering emotionally from disaster*. Retrieved from http://www.apa.org/helpcenter/recovering-disasters.aspx.

Carandang, M. L. A. (2009). *The magic of play*. Philippines: Anvil Publishing.

Carandang, M. L. A., Aguilar, T., & De Asis, B. (2014). *Back to basics: The seven psychological needs*. Philippines: Anvil Publishing

Carandang, M. L. A., Fernando, P., & Sison, B. A. (1999). Pagkatao, pagkababae, at pagkalalaki: How prostituted children view themselves, their sexuality and their experience and their experience of prostitution. *Philippine Journal of Psychology, 32*(1), 102-113.

Carandang, M. L. A., & Nisperos, M. K. B. (1996). *Pakikipagkapwa-damdamin: Accompanying survivors of disasters*. Philippines: Bookmark Inc.

Herman, J. L. (1992). *Trauma and recovery*. USA: Basic Books.

Ladrido-Ignacio, L. (2011). The impact of catastrophes on the human community. In L. Ladrido-Ignacio (Ed.), *Ginhawa: Well-being in the aftermath of disasters*. Retrieved from https://flipsidepublishing.wordpress.com/2013/11/18/ginhawa/

Ladrido- Ignacio, L., & Verzosa, M. L. (2011). Focus on the human person: Promoting well-being. In L. Ladrido-Ignacio (Ed.) *Ginhawa: Well-being in the aftermath of disasters*. Retrieved from https://flipsidepublishing.wordpress.com/2013/11/18/ginhawa/

Landau, J., Mittal, M., & Wieling, E. (2008). Linking human systems: Strengthening individuals, families, and communities in the wake of mass trauma. *Journal of Marital and Family Therapy, 34*(2), 193-209.

Landau, J., & Saul, J. (2004). Facilitating family and community resilience in response to major disaster. In F. Walsh and M. McGoldrick (Eds.), *Living beyond loss* (pp. 285-309). New York: Norton. Retrieved from http://ariseinterventionnow.com/assets/docs/ResponsetoDisaster.pdf.

Lev-Wiesel, R., & Amir, M. (2011). Posttraumatic growth among

holocaust survivors. *Journal of Loss and Trauma: International Perspectives on Stress & Coping, 8*(4), 229-237.

Levine, P., & Frederick, A. (1997). *Waking the tiger: Healing trauma.* California: North Atlantic Books.

Malchiodi, C. (2005). *Expressive therapies.* USA: Guilford Publications.

Marcelino, E., & Francisco, C. (1991). Ang kultura ng kalamidad: Pag-angkop at pagbangon. *Diliman Review, 1,* 66-70.

McNiff, S. (2004). *Art heals: How creativity cures the soul.* Boston: Shambhala Publications Inc.

Medina, B. T. G. (2001). *The Filipino family* (2nd ed.). Philippines: The University of the Philippines Press.

MLAC Institute for Psychosocial Services. (in press). *P.R.E.S.E.N.C.E: A primer on trauma and recovery for the use of trauma workers.*

Ortigas, C. D., & Perez, J. P. (2009). *Psychology of transformation: The Philippine perspective – Philosophy, theory, and practice.* Philippines: Ateneo De Manila University Press.

Reissman, C. K. (2008). *Narrative methods for the human sciences.* London & Thousand Oaks: Sage Publications.

Rogers, J. E. (2011). *The art of grief: The use of expressive arts in a grief support group (series in death, dying, and bereavement).* New York: Routledge.

Rogers, N. (2011). *The creative connection for groups (person-centered expressive arts for healing and social change).* USA: Science and Behavior Books.

Saul, J. (2014). *Collective trauma collective healing: Promoting community resilience in the aftermath of disaster.* New York: Routledge.

Somasundaram, D. J. (2007). Collective trauma in Sri Lanka. *International Journal of Mental Health, Psychosocial Work and Counseling in Areas of Armed Conflict, 1*(5). doi:10.1186/1752-4458-1-5.

Thompson, B. E., & Neimeyer, R. A. (2014). *Grief and the expressive arts: Practices for creating meaning (series in death, dying, and bereavement).* New York: Routledge.

Philippine Government Official Gazette. (2014). *Typhoon Yolanda a year later.* Retrieved from http://www.gov.ph/crisis-response/

updates-typhoon-yolanda/

U. S. Agency for International Development. (2014, April). *USAID Fact Sheet on Typhoon Haiyan/Yolanda in Philippines.* Retrieved from: http://iipdigital.usembassy.gov/st/english/texttrans/2013/11/20131112286248.html#ixzz3qudxEZNU

Verzosa, M. L. (2011). Disasters: The Philippines. In L. Ladrido-Ignacio (Ed.), *Ginhawa: Well-being in the aftermath of disasters.* Retrieved from https://flipsidepublishing.wordpress.com/2013/11/18/ginhawa/

Williamson, J., & Robinson, M. (2006). Psychosocial interventions, or integrated programming for well-being? *Intervention, 4*(1), 4-25. Retrieved from https://psychotraumanet.org/sites/default/files/documents/int_059.pdf.