CULTURAL ART THERAPY IN THE COMMUNITY

PROGRAMME EVALUATION REPORT



**Sinéad Casey**

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# Introduction

This cultural art therapy in the Community project was developed by the National Gallery of Ireland Education Department in response to a major exhibition of the work of Lavinia Fontana at the Gallery during 2023. Lavinia Fontana, Trailblazer, Rule-Breaker was the first monographic exhibition of Fontana’s work in over twenty years and brought together works from international public and private collections. Both the exhibition and the cultural art therapy project were generously supported by funding from Bank of America Europe DAC.

### National Gallery of Ireland, Education and Outreach

In its Strategy 2019-2023, the National Gallery of Ireland (henceforth the Gallery) sets out three core strategic goals, one of which commits that: “The Gallery will listen to and share with its audiences, to understand their needs and enable them to access it on their terms.”

The purpose of this goal is to intensify community engagement, increase accessibility, and advance knowledge and research. The gallery aims to make its collection more widely available, while also sharing expertise with other museums and galleries in Ireland. Additionally, the Gallery plans to enhance community involvement through long-term partnerships, engagement with schools nationwide, and providing leadership in arts and cultural policy development.

The Education Department of the Gallery is specifically tasked with the role of creating accessible and inclusive engagement opportunities for the public, both on-site and off-site. The department's remit spans “cradle to grave” from early childhood programs to initiatives for older adults and everything in between. In this context, outreach and community engagement has become a strategic priority for the institution and the department has broadened its focus in recent years to prioritise community and outreach programs, aiming to create more visibility and awareness of the institution's offerings beyond traditional education programmes.

The leadership of the Education department is determined that the Gallery has a civic responsibility to be inclusive and accessible to all.

*“This is a public institution. We have a civic responsibility. And there is absolutely a role for the arts to play, not just in artistic, but in social and civic life. And so for myself and the team, it's about thinking, how can we do that? It's about maintaining those [core educational programmes] but also thinking, where are we not going? And what new ways could we be doing it? How can we think about art education in a much broader sense? What is that key thing it can do in society that we know because we're extremely privileged, because we've been experiencing it for a long time, that transformative power that's inherent in the arts. And so the community piece really gives us the opportunity to expand that and very much do it in a co-created process.”*  Sinéad Rice, Head of Education, National Gallery of Ireland

Through this cultural art therapy project, the National Gallery’s strategic goals are being fulfilled by increasing engagement with the Gallery's collection, fostering collaboration with other institutions, and contributing to the knowledge base in respect of providing art therapy in cultural institutions.

### Art and Well-Being

An in-depth review of the evidence of the role of the arts in improving health and well-being by the WHO (Fancourt & Finn, 2019) found that there is increasing evidence for the positive impact of community arts programmes in improving mental health.

Multiple studies of the benefits of art therapy to the mental health and well-being of diverse groups are outlined in the review; with positive outcomes achieved among for example cancer patients, people with cardiovascular disease, women with eating disorders. The mental health benefits range from decreasing anxiety, stress and depression, and increasing general well-being and improving quality of life.

Fancourt and Finn’s review references a study by Schouten et al, 2015, which systematically reviewed the effectiveness of art therapy in the treatment of traumatised adults, and found that art therapy may assist in diminishing anxiety among adults who have gone through trauma, “as well as potentially lessening the impact of an event and reducing avoidance, re-experiencing and arousal.”

The review concludes with a series of policy considerations, suggesting that policymakers should *“Recognize the added health value of engagement with the arts by:*

*• ensuring that culturally diverse forms of art are available and accessible to a range of different groups across the life-course, especially those from disadvantaged minorities;*

*• encouraging arts and cultural organisations to make health and well-being an integral and strategic part of their work;”* (Fancourt & Finn, 2019)

The role of art in supporting mental health and emotional wellbeing, has become a more accepted view within the National Gallery, particularly since the COVID-19 pandemic. This recognition of the interplay of engaging with the arts and health, particularly mental health, has been adopted wholeheartedly by the Gallery through the work of the Education Department. The Head of Education describes the Gallery's role as instigators, thinking outside the box about where the Gallery can intervene in support of communities. She is particularly keen to emphasise the Gallery’s public and civic role and the ownership of the collection by the people of Ireland and for the benefit of the people of Ireland. Importantly, the Education team defers to the expertise of healthcare and other professionals in their field, and clearly articulates its role as facilitating ever-wider access and opening the Gallery’s collections for the benefit of all.

### Art Therapy

Art therapy is a form of psychotherapy, which uses creative techniques such as painting, modelling, collage and more to help clients explore and process their experiences, thoughts and behaviours and promote self-awareness and healing.

Art therapy as a distinct discipline began to emerge in the mid-20th century, gaining recognition and formalisation as a therapeutic approach in the 1940s and 1950s. Early pioneers, such as Margaret Naumburg and Edith Kramer, contributed to the development of art therapy as a recognized field. Since then, it has continued to evolve, gaining acceptance and incorporating various theoretical approaches and techniques. (Junge, 2016)

The Montreal Museum of Fine Arts has been a pioneer with regard to integrating art therapy into the day-to-day operations of a museum. Coining the term “museotherapy”, they have appointed a museum Art Therapist. They have implemented a range of projects aimed at promoting social inclusion among children with speech or sensory difficulties, enhancing body image among women with eating disorders and raising awareness of suicide in indigenous groups. The overarching theme of all of these projects has been to foster a sense of community and inclusion among marginalised groups, with the museum as a focal point.

### Lavinia Fontana

Lavinia Fontana, an Italian Renaissance painter born in 1552, holds a significant place in art history as one of the first female portrait painters to achieve widespread recognition. Her work not only broke gender barriers but also paved the way for future generations of women artists.

In her personal life, Fontana's work was both a passion and a profession. Born into a family of artists, she received early training from her father, gaining valuable skills that would later define her career. Despite the societal norms of her time, which limited women's opportunities in the arts, Fontana pursued her passion for painting with determination and talent.

As a portrait painter, Fontana's works reflected not only the beauty and elegance of her subjects but also the subtleties of their inner lives. Her portraits were characterised by meticulous attention to detail and sophistication of expression; showcasing her technical mastery and artistic sensitivity.

Fontana's success as a female painter in a male-dominated field was ground-breaking. She defied societal expectations and established herself as a respected artist. She set up her own workshop and was the first woman to paint public altarpieces and female nudes; all while also fulfilling her “expected” roles as wife and mother.

Lavinia Fontana's courage, talent, and determination serve as a reminder of the transformative power of art and the courage and resilience of women who dare to defy convention and pursue their passion. Her legacy extends beyond her own achievements, and will continue to inspire generations of women and artists to come.

# Cultural Art Therapy in the Community

### Overview

Inspired by the ground-breaking work and life-story of Lavinia Fontana the Education Department at the National Gallery of Ireland (the Gallery) developed this cultural art therapy programme in order to connect with vulnerable women and domestic abuse support networks through art and creativity. This has the dual advantage of being aligned with its mission to connect with underserved audiences, and the desire to harness the power of the national collection for the emotional and mental well-being of the Irish people.

Andrea Plunkett, an Art Therapist and member of the Irish Association of Creative Art Therapists, artist and former social care professional, was engaged to deliver the programme of art therapy.

The community partner on the programme was Saoirse Domestic Violence Service (SDVS), who are frontline providers of domestic violence (DV) services in southwest Dublin and west Wicklow.

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### Audiences and objectives

The ambition for this cultural art therapy in the Community project was to create a model for cultural institutions to engage meaningfully with sufferers of domestic violence in a non-clinical setting. An aspiration of the Education Team at the Gallery was that the development and careful documentation of this programme would enable others to benefit from their learning and similar programmes could be replicated nationally and internationally.

The project objectives were:

(i) To bring tangible benefits and support to female survivors of domestic violence, some of the most vulnerable members of our society.

(ii) To bring the benefits of process-based arts engagement to social support bodies, such as women’s refuges.

The project addresses two distinct audiences: the primary audience is survivors of domestic violence, and a secondary audience comprises support staff working at domestic violence refuges. High level goals for each cohort are as follows:

Survivors of Domestic Violence

* The programme of art therapy will provide emotional support, healing, and empowerment to women affected by domestic violence.

Workers at Domestic Violence Refuges

* The integration of Continuing Professional Development (CPD) for staff at the Domestic Violence service will enhance the tool-kits and experience of staff working in exceptionally challenging circumstances with clients in crisis.

The project is fully aligned with the strategy, mission and values of the Education Department of the Gallery, reaching an underserved and marginalised audience in crisis, expanding Gallery touchpoints and creating a deep collaboration with a community support organisation.

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### Evaluation Methodology

The primary inputs to this evaluation were one-to-one structured interviews with three groups involved in the project. Interviews were conducted with project stakeholders, staff members at Saoirse Domestic Violence Service and female domestic violence survivors who participated in the closed art therapy group held between October and December 2023.

Depth interviews were conducted in person with the following project stakeholders:

* Sinéad Rice, Head of Education, National Gallery of Ireland
* Andrea Plunkett, Art Therapist
* Nadine O’Brien, Outreach Manager, Saoirse Domestic Violence Service

Structured private depth interviews were conducted with four other staff members of Saoirse Domestic Violence Service at one of their refuges. The interviewees held the following positions:

* Manager
* Two Key Workers
* Child and Youth Worker

Finally, five of the seven women involved in the closed art therapy group gave feedback via a private structured interview with the evaluator. Another woman expressed an interest in giving feedback but due to illness and scheduling issues could not find a time to do so. Three interviews were conducted in person at the Gallery prior to one of the final art therapy sessions in December 2023, the other two interviews took place via video conference during December 2023 and January 2024.

The five interviewees were of a range of ages, family situations and nationalities: two were Irish, two European and one African.

Indicative profiles are as follows, all have been given pseudonyms:

* Jan, age 40-49, European
* Helen, age 25-34, Irish, no children
* Diana, age 30-39, African, two children
* Aileen, age 45-55, Irish, older children
* Maria, age 35-44, European, two children

Guarantees of confidentiality were given to Saoirse staff and the women involved in the closed art therapy group. Statements made by SDVS staff are attributed to SDVS Staff. The names of the women in the closed art therapy group have been changed to maintain confidentiality. Verbatim statements have been included throughout the report, some have been lightly edited to aid comprehension; ellipses (...) indicate where a statement has been cut, this is to avoid repetition or for clarity.

At the beginning of each session a paper version of the CORE-10 questionnaire was self-administered by all participants. These results are reported in Chapter 5 below.

### Community Partner: Saoirse Domestic Violence Services (SVDS)

##### About Saoirse Domestic Violence Service

SDVS has evolved significantly from its origins as a single refuge in Tallaght in 2006, expanding its operations to deliver an array of domestic violence services and accommodations for women and children across South West Dublin and West Wicklow. The organisation’s stated vision is: *“a society where DVA is never tolerated or silenced, empowering women and children to live in safety, free from fear.*”

SDVS strategically provides life-saving and transformative support services, aiding women and children in their journey towards safety and recovery. This includes providing refuge and safe house accommodation, a 24-hour helpline and specialised outreach services, children and youth services and court accompaniment, all tailored to address the complexities of domestic violence.

Beyond direct intervention, SDVS engages with communities to proactively educate and challenge prevailing attitudes towards domestic violence, emphasising prevention and raising awareness. The organisation actively campaigns and advocates for societal change, legislative measures, and government policies aimed at addressing and mitigating the impact of domestic violence. This multifaceted approach underscores SDVS's comprehensive strategy to combat domestic violence on multiple fronts.

Saoirse’s 24-hour telephone helpline service received 3,313 calls during 2022. Three in ten calls to the helpline were accommodation related, 24% of calls were to access information and 17% of calls were for support.

SDVS currently maintains two refuges, the original refuge in Tallaght which comprises 6 apartments and a refuge in Rathcoole, which can accommodate 5 women and their children which was opened in 2019.

##### Profile of Service Users[[1]](#footnote-1)

During 2022, the organisation accommodated 121 women and 124 children in refuge or hotels, and a further four women and two children in safe houses. The average length of stay in refuge was 28 days. The ongoing housing crisis has had a profound impact on the services, with the organisation recording391 requests for refuge that could not be accommodated due to lack of capacity.

The age profile of women in refuge skewed younger with 18-35 year olds comprising 59% of residents, unsurprisingly, the age of children in refuge was also quite young with 51% under the age of 5 and a further 20% aged 5-8.

The profile of women accessing outreach services is slightly older, with 39% 18-35 years old and 50% in the 36-60 age group.

While the vast majority of clients (81%) had been residing in the Dublin area, the national and ethnic profile of SDVS clients is diverse and becoming more so. Among clients in refuge, 58% were Irish in 2022, and 9% were members of the travelling community. The non-Irish client base (42%) included women from Asia, Eastern Europe, Africa, the Middle East, South America and the UK, with non-Irish clients staying on average a week longer in refuge than Irish clients.

Clients accessed refuge services through a range of touch-points, half were self-referrals with a further 30% referred by the Gardai or Social Work services.

##### Funding and Services

Core funding for SDVS is provided by Tusla and the Department of Justice (for Court Accompaniment), with other small amounts received via donations, fundraising and special programme grants. SDVS had Income of €2.63 million in 2022 vs expenditure of €2.59 million. However, the vast majority of funding received from government sources is received under strict SLAs and can only be used to cover staffing.

This means that, funding for programmes and interventions outside the core services of refuge provision, the help-line and court accompaniment is often granted on an ad hoc basis depending on external sources available to SDVS and the team having the time and resources to commit to applying for funding that may or may not be awarded. As Saoirse’s outreach manager put it:

*“We’re really badly under-resourced, we have to hustle, and I use the word hustle, all the time because that's what I feel that we have to do. We have to hustle for money to be able to provide these life-saving and life-changing interventions… I feel like I'm hustling all the time for funding, for money, filling out applications, applying for grants, everything.”* Nadine O’Brien, Outreach Manager, SDVS

Services are offered along a continuum from crisis to recovery. Clients will get in touch at various points on this continuum depending on their unique circumstances and their personal trajectory through the trauma of domestic violence.

During initial stages, services provided to clients are practical interventions such as help accessing refuge or leaving home, accessing social welfare services, applying for housing and so forth. Further on in a woman’s journey, Saoirse provides court accompaniment services and assistance to women navigating the justice system where that is required.

Among other important services offered by SDVS is The Freedom Programme, a free 12-week intervention for women affected by domestic violence. Weekly confidential group meetings focus on recognising warning signs, offering peer support, and exploring strategies to challenge abusive beliefs. The programme aims to enhance self-esteem, build confidence, and foster connections among women with similar experiences, whether currently in an abusive relationship or having left one.

Saoirse also prioritises children as direct victims of domestic violence, providing dedicated services to address their needs. Child & Youth Keyworkers facilitate settlement in refuges, and provide child-centred keywork to give children a voice and help them to process their experiences. Programmes focus on social and emotional learning, self-esteem, and non-directive play, fostering a supportive environment. The organisation extends Outreach Services to both mothers and children, encompassing parenting programmes and referrals to community resources and emphasising prevention through education initiatives like the Healthy Relationships School Talk.

Healing interventions, therapeutic and counselling services are available but entirely dependent on ad hoc grant / special programme funding. Senior managers noted that funding from sources such as County Councils and the National Lottery was decreasing and there was increasing competition from other charities for the same finite and diminishing sources.

*“So all of our programme money we all have to beg, scrounge, run around for crumbs. … It's very frustrating because that time should be put into developing our programmes, growing our services, and really dealing with the preventative work or the systemic issues.”* Nadine O’Brien, Outreach Manager, SDVS

Within these constraints, SDVS provides educational programmes like BASC - Be Aware of Self-Care for women, one-to-one over the phone counselling, life-coaching and alternative therapies including art therapy. However, these are often provided via a one-off grant for a defined period, meaning programmes cannot be developed and improved or offered consistently to clients.

Another staff member described the challenges in accessing therapeutic services and the difficulty of having to rely on volunteer and pro-bono therapeutic services for women and children or having to refer clients to other charities and organisations working with their own funding dependencies and long waiting lists.

Despite funding difficulties and other operational challenges, all the service users spoken to in the course of this evaluation were enormously positive about Saoirse, the services offered by the organisation and the people working there. Every woman spoke forcibly and often emotionally about the help, supports and empathy they have received from Saoirse Domestic Violence Services.

*“They have been absolutely amazing and without them I don't know where I would be… there's nothing I can say they could do any more [than what] they've done for me personally anyway”*Helen

*“They provided a lot. A place to sleep was one of the big things. Very massive. Somewhere to be warm, somewhere to be away from the cold…. They were very understanding of my situation. And I was very open to them. I was very truthful. And I think it has really helped me for them to understand me fully.”* Diana

*“I was in contact with them for a year before I left my relationship …they've provided… court support, helping me give a statement to the guards, holistic therapies, counselling, refuge, a safe space. I had to go into refuge and … I wouldn't be here today without their support … I mean things that I didn't even ask for were provided to me.”* Aileen

# Programme Methodology

### Outline

The programme was conceived in two phases, however it was necessary for the programme team to take a flexible and adaptive approach due to the sensitive and confidential nature of the women’s personal circumstances and their recent experience of trauma. Building the trust of clients and the domestic violence service was a critical foundation to ensure the success of the project.

Phase 1 was the preparatory phase and involved planning, research, pilot art therapy sessions and CPD for staff at SDVS and the Gallery.

Phase 2 built on the learnings and experience of the initial phase and involved further community engagement days, drop-in art therapy in refuge and a ten-week group art therapy programme.

### Programme Team

**Brina Casey, Education Officer and Project Manager**

Brina Casey joined the Education Department of the Gallery 17 years ago, and has delivered a wide range of arts and health programmes in that time, both onsite at the Gallery and in an outreach capacity, working in partnership with a diversity of community organisations. In addition to her work in the Gallery, she is an accredited psychotherapist in private practice, holding an MSc in Psychoanalytic Psychotherapy from Trinity College Dublin and a professional diploma in Psychotherapy and Counselling.

**Andrea Plunkett, Art Therapist**

Andrea is an art psychotherapist in private practice, a member of the Irish Association of Creative Art Therapists, and an artist. She holds a bachelor's degree in Psychology and a MSc in Art Psychotherapy awarded by the University of Ulster in 2020. Previously she worked in social care and with domestic violence services, including Saoirse Domestic Violence Service for over 15 years.

### Design Considerations

Continuing Professional Development (CPD) for SDVS staff was introduced as an essential component of the programme to ensure staff had a consistent and experience-based understanding of art therapy. Although confidentiality and trust are fundamental to the operation of the DV service, the CPD served to further reinforce the importance of the privacy and confidentiality of clients in the art therapy process and gave staff an understanding of how best to support clients attending art therapy. Further discussion and evaluation of the CPD is discussed in Chapter 4.

Cognisant of the trauma suffered by DV survivors, a bespoke CPD workshop was also offered to Education Staff at the Gallery and attended by 6 staff members. The Art Therapist designed this CPD to provide a baseline primer in trauma-informed practice. The information covered included defining trauma and art therapy, and appropriate modes of interaction with traumatised clients to ensure the safety of the women participating in the programme and of staff themselves.

### 

### Programme in Detail

**Phase 1: Research, Development and Pilot**

This phase comprised three main components, desk research and programme planning, Continuing Professional Development (CPD) for staff and pilot drop-in art therapy sessions in a refuge.

**Research & Planning**

Dates: From February 2023 to May 2023

Duration: 16 weeks

Owners: Education Team and Art Therapist

Key Activities: Appointment of a qualified Art Therapist. Desk research into the DV service, the Gallery and Lavinia Fontana. Consultation with the Gallery and DV service refuge staff. Framework for programme and project plan developed.

**Continuing Professional Development (CPD)**

Dates: 7, 16, 23 June

Venue: National Gallery of Ireland

Format: 2 hour workshop facilitated by Art Therapist

Attendees: SDVS Workshop 1 - 8 attendees; SDVS Workshop 2 - 14 attendees; Gallery Education Team Workshop - 6 attendees

Three CPD workshops were delivered, two for staff of Saoirse Domestic Violence Services and one for the Gallery’s Education team. For Saoirse staff, this took the format of an information session, a taster art therapy session and a tour of the exhibition and a modified version of this was delivered to Gallery Education staff.

The purpose of these sessions was to introduce the concept of art therapy to staff at SDVS and the Gallery and develop an understanding of what the process involves and what DV survivors would experience while taking part in the programme. The CPD was also critical to ensure that all involved had a common understanding of trauma and how it manifests and would come to the project with a trauma-informed lens. This was particularly important for Gallery staff who do not have a background in working with domestic violence survivors who are in active trauma.

**Pilot Drop-in Art Therapy Sessions in Refuge**

Dates: From 21 April 23 to 26 May 23

Venue: Refuge 1, six apartment service

Format: 6 x 1.5 hour drop-In art therapy sessions, with concurrent child art workshops facilitated by an artist.

Art therapy sessions inspired by Fontana, took place on a weekly basis in Refuge 1. These were drop-in sessions, available to any of the women available in the Refuge at that time. As the women in Refuge are by definition in a crisis period, these sessions were light touch, with the objective of creating a safe space for the women, while also giving them a sense of familiarity with the art materials available.

As these sessions took place, artist-facilitated workshops were provided for any children of the women who were present, freeing them from caring responsibilities for the duration of the workshop and allowing them to fully engage with the Art Therapist.

As this was the first time the Gallery had worked with a domestic violence service and with women in the crisis stage of coping with domestic violence, the pilot was an important component of planning and enabled the project team to learn, evaluate best-practice and modify their approach for the next phase.

**Phase 2: Full Programme**

This phase comprised three strands, drop-in art therapy in the refuge, a closed art therapy group and two community engagement days, both held in the Gallery.

**Drop-in Art Therapy Sessions in Refuge**

Venue: Refuge 2, six-bedroom service

Date: 8 September to 6 October 2023

Duration: 5 Weeks

These sessions broadly followed the format of the pilot sessions and took place on a weekly basis over a 5 week period during autumn 2023. Drop-in art therapy was made available to women in crisis accommodation, with art classes made available to their children simultaneously.

**Community Outreach Closed Art Therapy Group**

Venue: National Gallery of Ireland

Date: 13 October 2023 to 15 December 2023

Duration: 10 Weeks

Time: Fridays, 10am to 12pm

Clients of the domestic violence service were invited to attend a closed art therapy group in the Gallery. A group of seven women met on a weekly basis in the Gallery with the Art Therapist. This group had moved through the crisis intervention stage of their DV experience and were comparatively more settled in their communities. The closed nature of this group and private room at the Gallery allowed for deeper intervention and engagement with the art therapeutic process and with the Gallery’s collection.

The format of these sessions was informed by the group dynamic and was largely audience-led, however the same overarching process was followed in each session, this included:

1. Guided, slow-looking in the Gallery
2. Individual art-making
3. Group reflection session

During slow looking, the Art Therapist tailored questions for the group based on a range of considerations including: the groups’ needs, the stage of the therapeutic process, the individuals present and the artwork available. This framework was developed by the Art Therapist drawing on object relations theory, visual thinking strategies and her experience of art therapy in a gallery setting.

Below is an overview of what the slow-looking process might look like:

* Participants are asked to think about what is going on in the picture/image/sculpture/installation.
* The Art Therapist supports a guided slow look with the group.
* A follow up question is posed based on group needs to encourage deeper exploration.
* Finally, participants are asked to “Title the work”

After some time in the gallery spaces, participants returned to a private room and began making art in response to their feelings and experiences at the time. Materials were provided and participants were encouraged to work quietly on their own.

Finally, the group came back together and spent time sharing and reflecting on the art that they had made and how this related to the art they had initially viewed and their own life experiences.

The movement of being together, working to make art alone, and then coming back has been developed by the Art Therapist to model a healthy attachment style, and is intended as a key unconscious takeaway for survivors of domestic abuse from cultural art therapy.

**Gallery Community Engagement**

Two Family Events were facilitated at the Gallery.

**Summer Family Event**

As part of Saoirse’s summer programme, and drawing on Lavinia Fontana’s personal resilience and inspirational life story, a family sensory workshop took place at the Gallery during July 2023 and was facilitated by artists on the Gallery’s Education panel. This was attended by a group of 32 including, DV service users and their children, with two key workers in a support role. The women and their children were welcomed into a supportive and social environment; they could take part in collective art-making activities, while a tour of the Gallery was offered to any women attending without children.

**Closed Group Family Event**

At the instigation of the women involved in the closed art therapy Group a half-day family event was held in the Gallery in January 2024. The women invited family members and the Art Therapist was also in attendance. Thirteen people attended and took part in group participation games, followed by a facilitated, collective weaving experience, using recycled materials.

# Evaluation of Programme

### CPD for Saoirse Staff

Two Continuing Professional Development (CPD) sessions were facilitated by the Art Therapist for the staff of SDVS. This was perceived as an extremely positive experience by the staff who took part. Of the four staff members interviewed, three had attended one of these sessions. Key themes which emerged were as follows:

* Strongly Positive Experience for SDVS staff
* Initial Scepticism and Discovery
* Team-Building and Well-Being
* Therapeutic Benefits of Art

##### Positive Experience of CPD

All three interviewees spoke about their enjoyment of the CPD day in the Gallery, finding it to be a positive and enlightening experience. The experience of engaging with art during the CPD day is described as enriching and empowering.

*“It was a really nice day, it flowed really well”,* SDVS Staff

The connection between Lavinia Fontana’s story and the everyday work of the DV service was very much appreciated.

*“ And I think for the women that we work with, going to see a really empowered, strong woman… you can see how empowering that can be…. and she was an artist and just a real powerhouse and we're always trying to really empower women here, to do things for themselves and find who they are again because they've been lost in the mix of all that [violence and abuse].”* SDVS Staff

Participants also appreciated having some time to themselves, to be mindful and to do something completely different to the day-to-day.

*“I know I have a creative side but it's just never been harnessed or nurtured or brought out and I think… I can speak for a lot of others, my colleagues and a lot of other females that I know, it was snuffed out at an early stage in the education system.”* SDVS Staff

##### Scepticism and Discovery

An initial apprehension and confusion about the purpose and format of the CPD day was expressed by some interviewees. One had very recently started in the organisation and thought that the CPD was intended as a staff well-being initiative. She expressed an initial curiosity about what would be expected from individuals as participants in the CPD. Another participant felt nervous about attending due to her self-perceived lack of artistic ability.

*“To be honest, I was a bit nervous because like I said, I wouldn't be arty, I wouldn't be able to draw. I was thinking, oh my god, mine is just going to look like a blob, whatever they ask me to do.”* SDVS Staff

However her perspective changed during the tour of the galleries. Having learned about Lavinia Fontana she found herself enjoying how she could connect with and interpret the art in a way that was meaningful to her.

The non-judgemental and inclusive nature of the day was emphasised by another interviewee. She was impressed by how personal it felt and having initially been unsure of her ability to engage with art, found herself immersed in the experience and unable to drag herself away from the exhibition.

*“I think I was the last person to walk out of the Gallery because I was literally just mesmerised by all of [the paintings].”* SDVS Staff

##### Team Building and Well-Being

The organisational and personal benefits of the CPD day were mentioned by interviewees. As one interviewee said: *“I think the whole team really benefited from it”*.

*“It would definitely tick the box of a well-being day because it's very focused around taking care of yourself and you know, reflection and slowing down.”*  SDVS Staff

One participant explained how she would regularly tell clients to take time for themselves but rarely took her own advice.

The team-building aspects of the day were raised by one interviewee, who connected with colleagues from different departments with whom she would rarely meet or interact.

*“It was great because we're such a big organisation and there was people from all different departments. It was really nice to have that space with everybody… It was a really open group and everyone was really engaging and stuff like that so yeah it was really good.”* SDVS Staff

##### Therapeutic Benefits of Art

One interviewee emphasised the therapeutic benefits of art, highlighting its role in facilitating communication, particularly with children who may find it challenging to express themselves verbally. She was so inspired by the focus on exploring art and its therapeutic applications, that she contacted the Art Therapist after the session to find out about further learning opportunities in the area:

*“I really want to do [further] CPD in relation to art…. It was a little reminder, that this is why I love art and why I use it so much, with the children.”*  SDVS Staff

##### Importance of CPD for Programme Success

*“I think once I had experienced it, I was like, this will be amazing”* SDVS Staff

One interviewee noted how inspiring it was to be able to tell clients first-hand about art therapy and what they would get from the experience when it came to finding candidates to take part in the closed art therapy group.

*“It gave you the feel of what it could be like for … our clients and how that would work. I think sometimes if you have that piece you're more likely to push it as well and engage and be excited about it and passionate about it, if you have that experience yourself.”* SDVS Staff

Meeting the Art Therapist and experiencing the CPD day also provided significant comfort and reassurance to DV service staff working with vulnerable clients that the programme would be conducted sensitively and appropriately and that trust, confidentiality and safety could be assured.

One of the managers emphasised the importance for staff of attending the CPD day, both for their own benefit and to give them a deeper knowledge of what is involved with art therapy and its benefits. She suggested providing flexible timings and active promotion by management to maximise attendance.

##### Improvements and Suggestions

The CPD session was designed to be both educational and experiential, and there was an appetite to make the session longer to enhance the mindfulness and restorative aspects of the day in the Gallery.

*“I think I could have stayed there all day to be honest…. It probably went too quick. … because I find even in the work that we do we're constantly going going going and we don't stop. We forget to remind ourselves to just actually stop and be in the moment and actually just look. Do you know and see what you can see and what stands out for you.”*

The Art Therapist noted that one of the CPD sessions went an hour over schedule, which indicated how immersed and engaged participants were. From her perspective, the larger group with 14 participants did not flow as well as the smaller group (8) and a better group dynamic was achieved with a smaller group, with a recommendation that the optimal group size is 8, maximum 10.

Another participant suggested incorporating more small art activities in the morning to ease participants into the creative process. This would work as an icebreaker while also reassuring those people concerned about their artistic abilities that they were not going to be judged or compared to others.

Having experienced the taster art therapy session, it was suggested that there could be follow-up with further information on art therapy and its benefits to really emphasise these to key workers who do not have a psychotherapeutic background. This iterative approach of learning, experiencing and then learning more was suggested as a way of really emphasising the potential benefits of art therapy for clients.

Finally, the emotional impact of the art therapy process and the potential vulnerability of participants should be acknowledged, with one interviewee suggesting the option of a follow-up session to ensure participants have a chance to process and discuss any arising emotions.

### Gallery Community Engagement

The staff interviews provide some insights into this community inclusion event held during summer 2023 at the Gallery. One of the women interviewed as part of the closed art therapy group had attended with her two children, and her views are also represented below.

Feedback to Saoirse management from the family event in the Gallery was positive. This was the first event as part of SDVS’s annual Summer Programme, and participants reported that it was an engaging and enriching experience.

*“We did have a mam who came from here and she had no children and she got to go and do the tour and she loved it. She had never done anything like that before and she was so grateful to have that experience.”* SDVS Staff

One SDVS staff member commented on how well-attended the event was, and that the Gallery team had provided taxis to bring women to and from the event. This effort to reduce access barriers was noted as a significant contributor to the large attendance.

*“The transport being provided was so helpful, it really broke down barriers to people engaging… it's amazing the little things... Like we might have had half the numbers if transport hadn't been provided, you know? So it's really, really important in social care services to look at that and break down the barriers and try to see how do we get people to engage.”* SDVS Staff

This event provided an opportunity for families to engage in positive and creative activities amid challenging circumstances. Art-making activities offered a fun and creative outlet for expression among the women and children who took part. The family day facilitated community building, offering opportunities for socialisation and relationship building.

*“It's different to be in the room and you have to do something. So we were given a lot of materials, things like to try and do something. I didn't know what to do…. My [older] daughter was good, she's seven and a half.… She wasn't sitting with me. She joined a different table… she did enjoy it. So it was good with the small groups of parents and kids. Yeah, I did enjoy it that day. “* Diana

##### Challenges and Potential for Improvement

One SDVS Staff member expressed some challenges associated with managing a group of families and children during the family event. The structured nature of the event and the diverse needs of some of the children, as well as the exceptional circumstances of women and children who have recent experience of crisis and trauma, posed practical challenges.

*“It was busy… it was all our families that we would have for summer project and some of them wouldn't have been used to … going on field trips… We had children that were really hyperactive. We had children with additional needs. So it was a lot. And we had a lot of moms that were quite anxious. And you could feel, I could feel it -that it was their anxiety that was affecting the children.”* SDVS Staff

Following the trauma of living with domestic violence for a sustained period of time, many women suffer from anxiety about leaving the perceived safety of the house to do simple tasks like go to the shops or bring children to school. In this context, travelling from their locale into the city to the unfamiliar and somewhat alienating situation of an art gallery was a significant effort for many of the participants. This contributed to stress and anxiety, as mothers attempted to manage the behaviour of small children who wanted to behave like children and run around and bounce on cushions.

*“they [the children] were doing more of a collage of the Lavinia Fontana piece of work but they were kind of hopping to and from and then I could see that a few mams were getting a little bit anxious [and] were withdrawing a little bit a… you could just see that uncertainty … and again it could be mams coming into a new place and they didn't know some of the other mothers and children… it was a new environment they'd never been [to]... some of our families just stepping outside that door is a huge thing”* SDVS Staff

This staff member suggested the inclusion of some type of physical activity at the outset to calm the children and the inclusion of more sensory activities and a less structured approach, as a way of mitigating the stress of the situation. She emphasised that the issue was more with the number of children with additional needs and that more planning might be required to tailor experiences for families based on their individual needs and backgrounds.

Overall, while the family day at the Gallery was perceived positively, there were practical considerations and suggestions for improvement to optimise the experience for all involved. These included addressing challenges with large groups and tailoring experiences for additional needs participants.

### Refuge Art Therapy Sessions

#### Drop-in Art Therapy Pilot, Refuge 1

The pilot phase of the Lavinia Fontana art therapy project at Saoirse Domestic Violence Service (SDVS) was conducted weekly at Refuge 1 over a six week period during May and June 2023. Sessions took place for 90 minutes on Friday morning and were led by the Art Therapist. She was supported by an artist who facilitated workshops with the children of the participants, in a separate space in the refuge. This enabled the women to engage fully in the knowledge that their children were being looked after and entertained.

| Refuge 1 | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 |
| --- | --- | --- | --- | --- | --- | --- |
| Attendees | 1 | 2 | 1 | 3 | 2 | 0 |

All the women staying at the refuge were welcome to take part in the art therapy sessions. The busiest week was week 4, which was attended by 3 women, none of the women at this refuge were available to take part on week 6. Deliberately limited art materials, primarily clay and paint, were chosen to provide a sense of safety and predictability. The Art Therapist maintained consistency in the environment, set-up and her own participation in art-making to offer familiarity, stability and comfort to participants. Participants were encouraged to bring artwork back to their personal spaces, fostering ownership and self-expression outside of the sessions. Indeed, some of the women were so enjoying the work that they asked if they could bring art materials back to their rooms so they could continue to work creatively on their own.

##### Social and Emotional Dynamics

The art therapy group provided a supportive environment for participants to connect and form friendships outside of their experience of crisis and allowed them to express other facets of their identity beyond the commonality of having experienced domestic abuse. Many participants expressed interest in continuing to stay in touch with the Art Therapist, highlighting the significance of the therapeutic relationship formed.

##### Psychoeducation and Support

The Art Therapist navigated language barriers with technology (Google Translate) and accommodated participants with very young babies by incorporating psychoeducation on topics such as trauma, motherhood, and child development into the sessions. This holistic approach addressed both emotional and practical needs, contributing to a more comprehensive support system.

##### Children’s Art Workshop

The children’s art workshop was held concurrently with the adult art therapy session. Over the course of the six weeks, two children attended these workshops, a four year old boy and an infant girl aged seven months. The artist trialled a range of activities with the children including line and mark making techniques, colour theory, shape and paper construction, printing techniques, painting, sculpture and 3D forms.

The boy participated in all the sessions and the infant girl in the first two. Both children were pre-school age but the artist concluded that the workshop lessons would work well with children of a range of ages, and could be adapted to suit a variety of ages and interests. She noted that the workshops supported creativity and curiosity, and facilitated learning. The wide range of quality art materials that were made available promoted exploration and the child grew in confidence as the weeks progressed.

Overall, the artist was happy with the six week process. The refuge staff were supportive and the workspace was of high quality. Both children engaged with the process, with the little boy in particular growing in confidence and developing a good rapport with the artist.

##### Difficulties Experienced

Staff unfamiliar with art therapy raised concerns about its safety and effectiveness in a crisis setting. This lack of familiarity with the process and confidentiality of art therapy was underlined when one staff member asked to see a participant's artwork after the session.

On another occasion, a manager suggested cancelling the session as there were very few families in refuge on that day. The Art Therapist maintained that she would stay and “hold the space”, to provide a sense of stability and constancy in a refuge, a place that is, by its very definition, a transient space.

##### Learning Carried Forward

The experience of the pilot informed the CPD session for SDVS staff. One objective of the CPD was to impart knowledge about the concept and process of art therapy. Following the experience of the pilot, the issue of participant confidentiality and privacy within the therapeutic process and with regard to the outputs (i.e. the artworks created) was emphasised to ensure that this was understood and supported by staff and key workers.

The importance of maintaining professionalism, through consistency, punctuality and “holding the space”, was reinforced by the experience of the pilot sessions. The Art Therapist underlined how important it was for her and the Artist to provide this structure and constancy for women living through chaos and trauma in their personal lives.

A final addition was the creation of small “art-packs” to enable women to carry on with their creative work in their rooms. This allowed a sense of continuity after the art therapy session was over, and gave the women a chance to regain the positivity, peace or escape they had experienced through the creative process.

#### Drop-in Art Therapy, Refuge 2

The second phase of the drop-in art therapy sessions was held weekly at Refuge 2 over a five week period during September and October 2023. Sessions were held on Friday mornings, beginning at 10am. The Art Therapist and Artist facilitator followed a similar format to the pilot, building on the experience amassed previously. Similar attendance levels to the pilot were achieved, with 1-3 women of a potential 6, participating each week.

| Refuge 2 | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 |
| --- | --- | --- | --- | --- | --- |
| Attendees | 3 | 2 | 1 | 3 | 2 |

The objective of these sessions was to help women in active trauma to cope with their distress and provide some respite from the stress of their situation. The transient nature of the refuge population is such that no continuity could be assumed and it was unknown whether any of the participants would be there from one week to the next. This meant that these sessions needed to be held at a surface-level and the Art Therapist had to be very careful not to activate any significant traumas in participants, as future support could not be expected or promised.

Four staff working at Refuge 2 during this tranche of drop-in art therapy were interviewed. They all spoke positively about the sessions and their clients’ reactions to the experience. The main positive themes that emerged included:

* Wellness and Community
* The Value of Positive Interactions
* Inclusion of Children
* Professionalism of Team

##### Wellness and Community

Key workers reported positive feedback from clients who participated in the drop-in art therapy. Time in refuge can be stressful and chaotic for clients as women navigate their changed circumstances and attempt to rebuild their lives and staff saw value in the self-care aspect and the mindfulness of art-making. One staff member portrayed the project as an opportunity for women to have a break from the challenging aspects of their lives and come together and interact with each other in a positive and creative context as women, not as DV survivors.

*“They really enjoyed it … the kids were doing their own piece, so it was a space for the mommies and I think that's really important as well… we don't usually see it, you know, the families have different lives, different things going on, so it's lovely to see when they do come together. And some of them are really proud of what they achieved and what they got out of it.”* SDVS Staff

##### Value of Positive Interactions

The cumulative value of small positive interactions was noted by staff at Refuge 2:

*“Even if a woman comes in here and she has one day of interaction with key workers or a little bit of DV education, you hope it's enough that even if she leaves that night she has [gotten] something. So I think there is value in it. It might be the first time they ever experienced something like that [art therapy] but it might make them interested...And I do think for more external referrals that are going to be longer, they might be more willing to engage if they've experienced it a little bit.”* SDVS Staff

And this was echoed by the Art Therapist:

“*to be able to offer people who are in crisis a safe space to just touch base with their body and how they're feeling; that's huge*.” Andrea Plunkett, Art Therapist

##### Inclusion of Children

One staff member particularly valued the consideration of the children in the process and the bespoke workshops for them. Children eagerly participated, and enthusiastically looked forward to “art day” on Friday.

*“There was one little girl and she had engaged in it and then she couldn't be here the next week, but [the artist] actually made up stuff for her and the delight that she was thought of and that there was art for her, because she got back and she was like, I missed it. And I was like, oh my god, wait till you see, wait till you go out to the pod and see what she left for you. And she [the artist] had made her these gorgeous crowns and masking tape and stuff that she’d prepared for her - that was so important for that child that it wasn't just left …it’s the same in therapy it's that holding that space even if you're not there like I'm holding it for you.”* SDVS Staff

##### Praise for Team

The Art Therapist and Artist were both praised for their inclusiveness, sensitivity and professionalism. The Art Therapist was commended for her gentle approach, “holding the space” and meeting the women where they were:

*“ I think two weeks that I was here the women were like no we're not engaging, we're not gonna do it today and Andrea said, it's grand I'll just set up … and then I'd be walking by and there was three of them at the table doing it… so it was nice the approach that Andrea had.”* SDVS Staff

##### Areas for Improvement and Learning

Saoirse staff and the Art Therapist were all asked specifically to think about any challenges experienced and potential for improvement or change. This elicited responses concerning communication, accommodation and the scheduling of art therapy sessions.

*Communication Challenges*

All four of the refuge staff interviewed highlighted communication challenges internally, both among the refuge team and with management about the project. They acknowledged that communication within their organisation was an issue at times, due to the intensive workload and the stretched nature of the service. They emphasised the importance of effective communication, especially when dealing with rotating staff and a range of shifts and shift-patterns. For example, some staff were unsure of basic project details such as the timings and duration of the project. The need for clear communication and information dissemination was stressed for effective support. Better notice would have allowed for improved planning and could have improved participation.

The suggestion was made to appoint a key worker as a liaison to the project team to ensure better communication and coordination. This person could be charged with briefing clients and co-workers, providing adequate notice, and giving reminders the night before and morning of sessions.

*Accommodation*

The venue in Refuge 1 was a private garden room at the back of the refuge, which the Art Therapist felt was very appropriate as it was private, slightly separated from the main building and the children could work in an adjoining but separate room. This type of set-up was not available in Refuge 2, instead the sessions were held in a communal kitchen area, through which refuge staff had to traverse to reach an office and staff bathroom. This significantly compromised the level at which the art therapy could be delivered as the room was not private and both staff and residents had reason to access the room. The Art Therapist noted that as a result of the lack of privacy, she had to keep the process at even more of a surface level than at the other refuge. Despite this, she noted the value of providing a respite from crisis and trauma to the women who attended, and felt that the process was beneficial and achieved its goals “in the moment.”

*Scheduling of Sessions*

The sessions in refuge 2 were aligned with the arrival of the hairdresser every Friday morning as this is a regular event in the refuge. However, some staff mentioned how busy the mornings can be for women in refuge as much of their administrative burden gets pushed into the few hours during which their children are at school. Afternoon sessions were suggested by one interviewee. However, the Art Therapist emphasised that it is not appropriate to work with trauma victims in the evenings when the usual supports are not in place and there might only be one staff member in refuge overnight.

### Community Group Art Therapy Sessions

Over the course of ten weeks from mid-October to mid-December, seven participants took part in Group art therapy for two hours on Friday mornings in the Gallery. These sessions were facilitated by the Art Therapist and held in a private workshop area in the Gallery that was closed to the public.

All seven women attended on the first week of the programme, in the following weeks, attendance ranged from 6 participants to 1 participant. (NB: On the eventing of Thursday 23rd November, the day before the Week 7 session, there was rioting in Dublin City Centre. Many businesses and institutions closed the following day and it was suggested that staff, customers and students avoid travelling into the city. Many of the women felt unsafe in the immediate aftermath of this event.) Barriers to attendance are discussed below. Despite the low attendance on some weeks, all the women who were subscribed to the group remained committed to the process.

| National Gallery | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Attendees | 7 | 6 | 5 | 6 | 3 | 4 | 1 | 5 | 1 | 4 |

Six of the seven participants agreed to be interviewed for this evaluation, however for logistical reasons one interview did not come to fruition.

The five interviewees were of a range of ages from their late 20s to late 40s; and nationalities: two were Irish, two European and one African.

The participants were all extremely positive about the group art therapy and their experience of the Gallery. Common themes that arose through the interviews are summarised as follows:

* Access to Art Therapy
* Supportive Environment
* Cathartic Experience
* Community and Connection

##### Access to Art Therapy

All interviewees expressed appreciation for the opportunity to participate in the art therapy programme held at the Gallery.

*“Coming to the Gallery is such an [important] part, for me, even putting a bit of makeup on in the morning. I know they’re just things a lot of people do anyway… I feel special coming here [to the Gallery]. I feel privileged to have this opportunity.”* Aileen

They highlighted the positive impact of the group on their well-being.

“*I don't come into town. I kind of isolated myself and stuff like that. So it's been nice to get a break … and coming in and just feeling part of a group, a supportive group enjoying it. It's lovely to come into the National Gallery. It's a nice experience.*” Aileen

Interviewees also emphasised the therapeutic benefits of creative expression, one participant described how uplifting the mere experience of being in the Gallery was for her:

*“The beauty of this particular programme is that we actually have experience to go and observe the real art first and then we will do our work and that was very uplifting… when you look at something beautiful, you kind of get fulfilled…. It's a very nice energy. For me, every time it was an uplifting experience… Although I had sad feelings, but seeing the art before was extremely uplifting and I really liked it.” Jan*

##### Supportive Environment

The Gallery was praised for providing a safe, welcoming, and supportive space for participants and the staff of the Gallery were described as kind and accommodating.

*“I felt really comfortable coming in. Everybody's always smiling, everybody's always very kind.”* Jan

*“The staff are lovely and they've always been very happy like, hi morning and stuff like that and open the doors for you.”*Helen

*“You know, even coming in, the security on the door, going into the actual gallery ... it just makes us feel so safe.”* Aileen

The Art Therapist was commended for her gentleness and understanding, contributing to a sense of comfort and trust within the group.

*“She's very good at holding space. So she's not in your face. She doesn't ask questions. She let it flow in a very nice … and gentle way guiding us but leaving us time also for the chats and the sharing of this week … so it felt very safe and it never was daunting.”* Maria

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##### Cathartic Experience

Participants described the art therapy sessions as cathartic and emotionally relieving. Engaging in art-making activities offers a sense of serenity and a break from the challenges of daily life, fostering healing and self-expression.

*“I do believe anything to do with art and non-speaking communication… just expressing yourself is such a soft form of therapy, which is extremely powerful and extremely helpful. And that's probably because not everybody wants to talk and not everybody is able to talk. And some people are just in the stage that talking is too much hurt, but doing something and letting it go, I think it's extremely important.”* Jan

*“The music was so calming. The quietness, like, oh, the girls are not around, nobody's climbing, nobody's running, nobody's... It was so good to know that here I have two hours, everything is quiet.” Diana*

##### Community and Connection

The art therapy programme facilitated a sense of community and bonding among participants who share similar experiences of domestic violence. Participants described how comforting it was to be in a group of people who could understand behaviours and feelings that other friends or family might minimise or dismiss.

*“And it's great to have people that actually can relate how mentally tiring it is and how mentally challenged it is to confront somebody that you are afraid of and how you get to the position that you are afraid of somebody that is meant to be the person that you love the most … so for me the group, it was a breath of fresh air to me … they're amazing. All of them. … It's great to have somebody that actually understands and knows exactly what it is. Because at the end the reactions we have are not logical, but they are caused by the trauma we have lived. People that have not gone through the same situation, they can be sympathetic and they can be supportive… They are, but they are not. If you haven't gone through, you don't know what it is.”* Maria

The group has provided a unique and invaluable source of empathy, empowerment and support.

*“I love it because one of the things is the setting. Having to meet other people who could, even for only 30 seconds, share their experience… not going through their life, but share something for 30 seconds. It makes a difference and makes you realise some part of their situation is worse than yours… Other people are also having similar experiences and they are here. And we should just feel like a community. So it was good for me.”* Diana

*“So it was really refreshing to meet other women [and hear what] they have gone through. That they understand exactly how I feel. And being empowered, I think women are amazing.”* Maria

*“...we're all so open… because we're all at different stages. And it's just been wonderful… I trust everyone there. And we all support each other…. It's terrible to say you're not the only one going through because no one should go through the reason why we're all here.”* Aileen

The bond created among the women in the group was raised by the Art Therapist who highlighted how important these friendships could be to survivors of domestic abuse who become isolated from family and friends by their abuser.

*“Everybody wants to meet everybody else's family. It shows the depth of the relationships that were built … And obviously with domestic violence, the perpetrator breaks down your communications, breaks down your friendships, makes sure that you don't have anyone to rely on. So a lot of people that have experienced domestic violence end up with no relationships … so to have that peer support, it's just lovely to see.”* Andrea Plunkett, Art Therapist

##### Suggestions for Improvement

Interviewees were prompted for challenges, difficulties and suggestions for improvement, these fell into three broad themes:

* Programme Duration
* Logistical Challenges, Inclusivity and Accessibility
* Confidentiality

Programme Duration

There is a consensus among interviewees that the duration of the art therapy programme could be extended to allow for a more sustained therapeutic impact. Some participants felt that the programme went by too quickly, while others express a desire for follow-up sessions or longer-term support. Several interviewees expressed the desire for the group to go on longer.

*“It went very quickly. I wanted to keep going forever. That's the truth. Like, I miss it already.”* Maria

The duration was also raised by the Art Therapist who found that she had to work more slowly with this group due to their vulnerability. The Art Therapist emphasised the importance of being flexible and tailoring the art therapy process to the specific needs of the group and the environment. By adapting to accommodate the needs and readiness of the participants, the Art Therapist noted that this had the impact of slowing the pace of sessions and transitions between activities.

Logistical Challenges, Inclusivity and Accessibility

All the women interviewed mentioned logistical challenges related to transportation, timing of sessions, and scheduling conflicts, particularly for participants with childcare responsibilities or work commitments.

*“I was a bit stressed about the morning school run and I couldn't make it in time anyways, you know, so I tried a few times and it was so much stress and sweat, so I just decided I'd better be late, but in the more calm state … just calm and late… logistics were a bit complicated for me because driving to town again is not an option...So public transport or driving, no winner- either way it would be the same.”* Jan

Suggestions to overcome this include adjusting programme start times and exploring more flexible scheduling. Interviewees were keen to emphasise the value of the programme to them and the desire that other women in their positions could avail of this type of programme in the future.

*“And I would be really happy if this project would be running because I think it can make a huge difference in a broken life, you know, because it gives a really nice light in the grey day and it gives a sense of serenity and catharsis and it's beautiful.”* Jan

Confidentiality

When asked specifically about confidentiality and trust some of the women expressed a sense of unease that confidentiality could not be assured in a group. The women were keen to emphasise the professionalism of the Art Therapist and the staff at SDVS, however there was some apprehension that a group of ordinary people would not have the same high standards.

*“Maybe not the confidentiality because it's a group setting. I will feel confident with [the Art Therapist] because she's professional but people like me. For me I would not share a secret story … you never trust someone next to you if the first person she meets or the first friend she meets she's going to share your story … [but] I definitely feel safe to share my story with a professional.”* Diana

That said, all of the women expressed their happiness with the group dynamic and it appears that trusting and potentially enduring relationships have been created.

*“I was a bit nervous going into a group. You don't know who knows your WhatsApp... all that kind of stuff. But it's been wonderful, the women have been wonderful and you know we've all kind of been through similar [experiences].”*Aileen

### Programme Planning and Implementation

##### Referral and Recruitment Process

It was originally envisaged that the women who had done the drop-in sessions at Refuge would form the recruitment base for the closed art therapy group in the Gallery. After each drop-in session the Art Therapist asked each participant if they would like to take part in the group at the Gallery. All the participants agreed and provided contact telephone numbers. When recruitment for the closed group began, the Art Therapist could not get through to any of the women. It is not uncommon for DV survivors to change their contact details in order to break contact with former partners or spouses, however the project team were surprised that none of the phone numbers that had been provided, in some cases mere weeks earlier, were operational. As a result, most of the women who participated in the closed art therapy group, were recruited via their key worker or another trusted DV support worker. This process worked very well and in retrospect is an effective and efficient model for recruitment to such groups.

One SDVS staff member raised the careful consideration that needs to be given to referrals, ensuring that only women who were emotionally ready for such engagement were selected. For this reason, the CPD is critical for staff to gain a common and coherent understanding of what art therapy is; their ability to communicate the programme's risks and benefits and assess client suitability.

*“Anyone that I would have referred would have been working with us for a while. And you know that they're ready and they're looking for that support.”* SDVS Staff

##### Understanding of Project

A SDVS staff member noted that external referrals might benefit from prior exposure to the project or art therapy, and this certainly seems to have facilitated recruitment. Of the five women interviewed three had personal experience of art therapy and one had previously met the Art Therapist through a dependent.

Possible language issues and lack of prior experience of art therapy meant that one of the women who took part was not entirely clear about what art therapy was and what was going to happen. She thought that there would be a learning element to the programme, and that she would be taught about painting. Two of the women who had personal experience of art therapy expressed some apprehension about the group setting. However, all the women were enthusiastic about taking part in the programme and open to the opportunity, which is a testament to the trust built between them and their key workers or the Art Therapist.

##### Confidentiality

The importance of formalising privacy and confidentiality protocols was raised by one SDVS manager. Confidentiality is obviously a fundamental tenet underpinning the provision of DV services and therapeutic services. Strict observance of client confidentiality and privacy was followed by the project team and staff in the DV service, however, best practice would dictate having a formal confidentiality protocol agreed and in place for future work.

##### Environment and Space

The Art Therapist raised logistical challenges concerning ensuring privacy and security within the Gallery space and the need for basic amenities like a sign for the door to maintain confidentiality during sessions. The locking of doors for privacy in the Gallery setting, could be perceived as threatening to women who have lived with domestic abuse, and this had to be managed carefully by the Art Therapist. On one occasion, two male maintenance staff accessed the room as part of routine work and suggested that the group continue with their conversation and ignore them as they carried out their work. Obviously this is inappropriate given the highly personal and potentially sensitive nature of the groups’ discussions.

##### Logistics and Supports

The Gallery team organised pre-paid travel cards for the women to enable them to take public transport into the city centre of Dublin where the Gallery is located. This was very much appreciated by the recipients, alleviating a logistical stressor and potential barrier to attending the group therapy sessions. It was noted by some of the women that the process for topping-up the travel cards appeared unnecessarily cumbersome and caused an administrative burden on the Art Therapist that could have been avoided if the cards were filled for the requisite number of journeys or could have been topped-up once, mid-way through the programme.

Lunch vouchers for the restaurant in the Gallery were also provided and the women were able to avail of these to have refreshments after the group therapy sessions if they wished. This was also highly valued as a generous and surprising gesture that also positively impacted the group dynamic:

*“And then you have a choice to go for lunch after and stuff like that, which is really nice… they gave you the Leap card and lunch, things like that. I think that was all lovely.... because it really made us all get to know each other”.* Helen

Likewise, taxis were provided for some of the women who attended the family day. There is significant value in addressing barriers to participation and the Gallery’s efforts in this regard were appreciated by participants and SDVS staff alike.

##### 

##### Timing and Support from Key Workers

For all participants, the “logistics of life”, namely work, children, caring responsibilities and transport had to be managed. These logistics can be even more of an issue for domestic violence survivors. Women have often had to leave their homes and may be living in an unfamiliar area. Several of the women interviewed did not have family supports to help with childcare, school runs or pick-ups; and finding two hours, plus travel time on a weekday morning was challenging for many of the women. That said, Friday was a popular day, coming at the end of the week with less pressure on time.

The network of wraparound supports provided by SDVS for clients to enable them to take part in the projects, has proven invaluable. In one situation a key worker intervened and organised for a crèche to look after a child for an extra hour so that her mother could take part in the art therapy group.

*“... I share my concern with the child support worker at Saoirse. And I told her my concern will be the pick up time [for my daughter] … and then she asks me. If she contacted the crèche manager, would that help? … And the crèche manager spoke to me and I said, yes, it's about art therapy. And she knows my situation. She knows I've been in domestic violence and she knows I flee my home.”* Diana

# Achievement of Programme Objectives

##### Programme Benefits for DV Survivors

As discussed above, the closed art therapy group was met with a high level of positivity by participants. Participants appreciated the opportunity to engage in art therapy sessions held at the Gallery, considering it a privilege.

They found the experience of visiting the Gallery and participating in art therapy enriching and uplifting, contributing positively to their well-being.

The National Gallery was praised for providing a safe, welcoming, and supportive space for participants. Staff at the Gallery were described as kind and accommodating, contributing to a sense of comfort and security.

Participants described the art therapy sessions as cathartic and emotionally relieving, offering a break from daily challenges. Engaging in art-making activities provided a sense of serenity and allowed for self-expression, contributing to healing. The Art Therapist's gentle and understanding approach further fostered a sense of trust and safety within the group.

Finally, the programme facilitated a sense of community and bonding among participants who shared similar experiences of domestic violence. Participants found comfort in being understood by others who could relate to their experiences, fostering empathy, empowerment, and support. The group dynamic provided a unique and invaluable source of connection and understanding for participants.

Overall, the group art therapy programme offered participants a supportive and therapeutic environment to explore their experiences through art, fostering healing, connection, and empowerment.

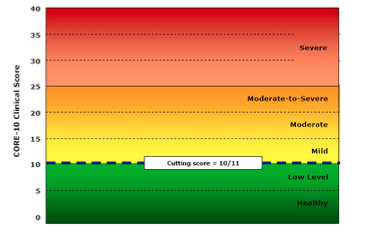
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##### CORE-10 Results

Mental health practitioners are increasingly being encouraged to adopt evidence‐based practices, and the collection of outcome data has become routine in mental health services. The Clinical Outcomes in Routine Evaluation Outcome Measure (CORE‐OM) is a widely used and validated outcome measure that has been adopted by mental health practitioners as a tool to systematically collect data on mental health outcomes among clients and patients. The CORE-10 is a streamlined version of this tool, designed to be used where use of the full 34-item tool is inappropriate or time does not permit. This version has been validated among clinical and non-clinical adult populations and by gender. (O’Reilly et al, 2015)

The CORE-10 includes items measuring symptoms of depression and anxiety, general functioning, relationships, trauma, well-being and risk.

The CORE-10 questionnaire was administered by pen-and-paper at the beginning of each art therapy session. Scores range from 0 to 40 and the measure is problem scored, meaning that the higher the score, the higher the level of psychological distress being reported. A score of 11 or above indicates that the individual is within the clinical range, scores are banded in three roughly equal increments from mild (11-15) to moderate to severe (20-25); a score over 25 indicates the ‘severe’ level.



(Source: Connell & Barkham, 2007)

Using these ranges, conditional formatting was applied to scores as shown in Table 1 below:

| **Client** | **A** | **B** | **C** | **D** | **E** | **F** | **G** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Week 1 | 24 | 10 | 7 | 16 | 20 | 22 | 24 |
| Week 2 | 24 | 13 | 4 | 22 | 16 | 28 |  |
| Week 3 | 26 |  | 0 | 23 |  | 27 | 20 |
| Week 4 | 18 | 12 | 4 | 31 | 30 | 5 |  |
| Week 5 | 14 | 10 |  | 32 |  |  |  |
| Week 6 | 24 |  |  | 29 | 21 |  | 25 |
| Week 7 |  | 11 |  |  |  |  |  |
| Week 8 | 18 |  | 4 | 20 |  | 26 | 20 |
| Week 9 |  |  |  |  | 16 |  |  |
| Week 10 |  | 9 |  | 17 |  | 21 |  |
| **Average** | **21.1** | **10.8** | **3.8** | **23.8** | **20.6** | **21.5** | **22.3** |

The data indicate a high level of psychological distress among the group.

In week 1, five of the seven women recorded scores above the clinical cut-off of 11; four of whom were in the moderate to severe band and one of whom was in the moderate band. Only two of the seven women recorded scores below the clinical cut-off.

Over the ten-week duration of the art therapy, Clients B and C recorded average weekly scores below the cut-off point of 11, and the remaining five averaged scores in the moderate to severe grouping.

Clients showed a wide differential in scores from week to week, with maximum and minimum scores ranging 23 points for Client G to 5 points for Client B.

Connell and Barkham (2007) define reliable change as the “extent to which change falls beyond that likely based on the measurement variability of the measure.”; using the clinical cut-off point of 11 and a reliable change value of 6 recommended, none of the women fulfilled the criteria for reliable improvement from week one to their final week which varied from week seven to week ten.

*Mitigating factors*

It should be noted that none of the women managed to attend all the sessions, the most frequent attendee was present for 8 sessions, the least frequent for 4 sessions with an average of 6 sessions out of 10 attended among the seven participants.

Given the recent trauma of domestic abuse experienced by all the group participants (and for some the ongoing trauma of engagement with the legal system), as well as the high-levels of psychological distress reported by participants, it is unrealistic to expect a relatively short, group intervention such as this to show a clinically significant reduction in post-therapy scores.

##### 

##### Programme Benefits for DV Staff

The two Continuing Professional Development (CPD) sessions led by the Art Therapist for the staff of SDVS (Domestic Violence Service) were met with overwhelmingly positive feedback. Despite initial scepticism and uncertainty about the purpose and format of the CPD, participants found the experience to be enlightening and enriching. This was reinforced by the inspirational nature of the Lavinia Fontana Exhibition, and Fontana’s relevance to their work.

The CPD sessions, conceived of as an information session and “taster” of art therapy, also served as a form of team-building and well-being exercise, providing staff members with valuable opportunities for self-reflection and personal growth. Participants appreciated the therapeutic benefits of art, recognizing its potential for communication and healing for the vulnerable populations with which they work.

Importantly, attending the CPD sessions not only enhanced staff members' understanding of art therapy but also provided them with first-hand experience to better advocate for and support their clients. The sessions also reassured staff about the sensitivity and appropriateness of the art therapy program for vulnerable clients.

The fact that there was a desire to increase the length of the session to maximise the mindfulness aspects of the experience, reinforces the value that was attributed to this session.

Overall, the CPD sessions set out to deepen understanding of the therapeutic benefits of art. This was achieved, along with other secondary but valuable impacts which include enhancing staff well-being, promoting team cohesion and reintroducing an avoidant cohort to the Gallery as a place to visit, recharge and enjoy.

##### Perceptions and Experience of the Gallery Pre and Post Intervention

The Gallery was perceived as inaccessible and distant by many of the participants, from both the professional and DV survivor groups.

*“I’m a Dubliner and I've never even been in the National Gallery. I was disgusted with myself … It's the side of the city that it's in. It's the other side for me, if that makes sense. Well, I look at the work that I do and I look at the communities that I work with … Like you're not gonna get many working class regular everyday folk walking around that side of the city unless you're there for business, government… it's smack bang in the middle of a more affluent area of Dublin city. Growing up as a Dubliner, it wasn't where I was going when I was going into the city, and still isn’t as an adult”* SDVS, Manager

This was particularly true of the Irish participants, the majority of whom had never visited the Gallery as an adult.

*“I've never been into it [the Gallery]. Even on school trips we never went. I think we went to the history one with the animals and stuff like that. But I didn't even know what it [the Gallery] was.”* SDVS Staff

*“I haven't been in it in years… Not as an adult… I knew it was here, I knew there was a gallery and exhibitions but it just wasn't on my radar.”* Aileen

*“Do you know, I'd never been in it and obviously I'm from Dublin so that's shameful. But yeah I'd never been in it before. Obviously I knew it was there but yeah I don't really visit our galleries a lot. Maybe when I go abroad or like to cities and stuff I would, but it's mad that you don't visit the one that you own? Isn't it crazy?... I was blown away when we went in. Like it was brilliant. So yeah I'll definitely be back.”* SDVS Staff

Non-engagement with the Gallery was clearly named as a class issue and the issue of ownership of cultural spaces was raised:

*“ I'm from a working class background and the majority of my class growing up did not go into the Gallery, I was brought to the Gallery and I was very lucky but the majority of my friends growing up would just be like, why would you want to go there? I used to be brought into IMMA and I loved it, and it completely changed the course of my life being brought in there, because I was like I can go in there and feel like this is my space, I can make art and you know maybe one day my art will be on the wall or I'll be in there making art and it gives you that ownership [as a working class person] … you don't have to sound or look a certain way to go into the Gallery.”* Andrea Plunkett, Art Therapist

*“How do I know I'm welcome unless you invite me? … Unless you physically come to my area, come to where I live, come and talk to me where I am and meet me where I am at, and ask me to come in, how do I know I am welcome? Because I've never been asked before. So I do think for a lot of people, the cultural spaces like the Gallery, just for whatever reason, they just don't feel welcome.*” Andrea Plunkett, Art Therapist

However, the engagements with the Gallery during the course of the programme, particularly through the CPD and the closed art therapy, have sparked strong emotional responses and changed perceptions.

*“When I started to learn about the Lavinia Fontana collection and the trail-blazing side of that, that lit me up. I was very emotional even around the awareness and the understanding of Lavinia Fontana’s career and the trail-blazing aspect of it, the role as a feminist that she occupied in the Renaissance times and the powerfulness of that. So when I had that first experience there, it was those competing feelings going on inside me because one, I was frustrated with myself being Dublin born and bred and never having been to the National Art Gallery; and then being exposed to very rich educational feminist feelings and experiences from witnessing and seeing the exhibition.”* Nadine O’Regan, Outreach Manager, SDVS

Participants from both groups, who previously did not consider the Gallery as a place to visit, now view it as welcoming and safe, both for themselves and their families. This shift in perception has led to increased visits to the Gallery.

*“I would never have come in here before and now like even after each session I do find I walk around and have a little gander … it's so lovely”* Helen

One participant has brought her brother and mother to the Gallery, neither of whom had visited before, another woman was planning to bring her mother and daughter.

*“Since the project… I took my two youngest kids and we went to the Gallery, we looked and they went to the creative corner, they drew, and we had a great time just being in the Gallery. So it did prompt me to take kids, finally, after a year, and to do something other than just everyday activities.”*  Jan

Having taken part in the programme, and having been invited in, participants now perceive the Gallery as a special and enriching public space in which they are welcome and to which they will return.

# Summary & Recommendations

Overall, the programme has been extremely positively received by survivors of domestic violence and by the staff in the domestic violence service. For both groups, visiting the Gallery, experiencing its collections and engaging in art therapy has been cathartic, empowering and fostered a sense of community and connection. Participants from both groups have been inspired to revisit the Gallery with new eyes and see it as a resource for themselves and their families.

It must be noted that the Project Team took a flexible and adaptive approach to this project, which has strongly contributed to its success. This is extremely important when working with vulnerable communities and particularly with people who have recent experience of trauma. Having a Project Lead with a background in psychotherapy was a significant advantage to the project. This skill-set provided a bridge between the professional world of the Gallery and the therapeutic world of art therapy and trauma. The Project Lead’s experience also meant that the Gallery team were both aware of and sensitive to the needs of the women as DV survivors and trauma victims. The Art Therapist had previously worked with SDVS and this brought its own advantages, in her knowledge of the organisation and deep understanding of the experiences of DV survivors.

Following is a collation of recommendations and potential improvements to the programme. These can be generalised to other projects, however adaptations may be required depending on the professional experience of the project team, the relationship between the project team and the community partner and other strengths and experience gaps in the organisations involved.

**Best Practice and Recommendations**

*Confidentiality*

Although adherence to strict client confidentiality is a basic tenet of therapy and domestic violence service provision, formal confidentiality protocols between the project team and DV service should be drawn up at project launch.

*Safety Plan*

Similarly, a safety plan should be agreed between the project team and the DV service to ensure that any contact with the women taking part in the programme and members of the project team is appropriate and that the women’s safety and confidentiality is being strictly observed and protected.

As part of the safety plan, basic protocols for interacting with DV survivors should be agreed and put in place. These should be informed by the experts in the DV service and include ensuring consent and that the women are in control and empowered to make decisions in their best interest.

*Recruitment*

In conjunction with the Art Therapist and the DV service, recruitment and referral protocols should be put in place to ensure that no one is recruited who is not ready for art therapy. For example, some parameters for time living away from DV should be put in place. Similarly, people who have been recently bereaved or who are currently undergoing psychotherapy should be filtered out of the group process.

*Communication*

Including a key worker from the women’s refuge on the project team would facilitate communication between the Project Team and the refuge. This person could take responsibility for creating a communication plan about the project and liaising with the project team on timing, schedules and other logistics.

**Art Therapy in the Gallery**

Within the closed art therapy group, the women could co-create a group charter in session 1, outlining the guidelines, expectations of behaviour, and rules for participation in the group. This could help to establish a safe and respectful environment for all members, clarify confidentiality, and participation expectations, and set boundaries for behaviour. This type of charter can be used to foster a common sense of ownership and accountability among the group at the outset, promoting cohesion and trust.

*Best Practice Recommendations*

* Consider building in an introductory session to complete administrative work such as consent forms and enable the group members and the Art Therapist to familiarise themselves with the environment, travel arrangements and other logistics.
* Ensure that the Gallery space is private and there is a barrier or sign for the door to prevent accidental intrusions by other workers, members of the public etc.
* Where possible, address the needs of participants with children or other family responsibilities by offering flexible scheduling options or tailoring the timing of the group to the participants.
* DV service clients’ scheduling constraints could be canvassed by key workers during recruitment to facilitate planning.
* Remove barriers to participation by providing additional support for childcare arrangements, contributions to travel expenses and refreshments.
* Extending program duration is a potential area for improvement to mitigate the vulnerability of the group and the additional time required to acclimatise to novel surroundings and experiences.

**Drop-In Art Therapy in Refuge**

Women in refuge are living with the residual stress of their relationship and the abuse they have suffered, as well as the strain of living in an unfamiliar place away from family and friends, trying to rebuild their lives and process their pain. The drop-in sessions, while ineffective as a recruitment vehicle, provide a light-touch introduction to art therapy, as well as providing a welcome respite from life as a DV survivor.

*Best Practice Recommendations*

* Child workshops are an indispensable element to maximise attendance and enable mums to take part without having to worry about their children’s wellbeing.
* Work with refuge staff to establish optimal time for sessions. Align this with a regular event. This should not be at evenings and weekends for clinical reasons.
* Appoint a staff liaison in Refuge. Work with the project team to develop a communication plan and materials.
* Tailor the interaction to the environment and accommodation. A private space works best.
* Be consistent, inclusive and “hold the space”, it is important to model healthy interpersonal relationships and provide constancy.

**Gallery Community Engagement: Family Events**

In organising these events, it is important to recognise how difficult it is for some DV service users to leave the house and interact with the outside world. This can be the cause of enormous anxiety, which can be compounded by going to a new, unfamiliar and potentially intimidating space like an art gallery with small children who want to behave like small children. However, successfully navigating an event like this can also be positive, empowering and build confidence in attendees.

*Best Practice Recommendations*

* Smaller, more tailored events could ensure a less overwhelming experience for participants.
* While maintaining confidentiality, the community partner could provide a profile of any additional needs of attendees, particularly the children to enable Gallery staff to plan accordingly.
* Where possible, friend pairings could help participants feel more comfortable.

These events are an inclusive and valuable addition to the project, the second event was instigated by the women involved in the closed art therapy group and formed an inclusive and meaningful closure to the process for them.

**CPD Is a Critical Success Factor and Opportunity**

All the referrals came from key workers who had participated in the CPD day and/or had knowledge of art therapy. There is no substitute for first-hand experience to enable people working with vulnerable groups to feel assured that the programme to which they are recommending their clients is worthwhile, appropriate and sensitive to their needs.

Practical suggestions for improvement based on participant feedback include:

* Make the CPD session longer to enhance the well-being aspects for staff working in high-stress environments and with victims of trauma.
* Start with a simple or accessible art activity as an icebreaker to ease apprehension about being judged for “artistic ability”.
* Cap group size at 8-10.
* Follow-up with educational information on the psychotherapeutic value of art therapy, risks and benefits.
* Offer participants a check-in with the Art Therapist post-session in case any latent stress or trauma has been triggered.

There is potential for taster art therapy sessions as well-being / CPD to be offered to other high stress professional cohorts such as people working in medical settings, emergency services, policing and prisons; and indeed workers or volunteers in homeless services, sexual assault services, children’s services, social work etc.

**Conclusion**

In conclusion, the programme's impact on survivors of domestic violence and the staff of domestic violence services has been overwhelmingly positive, fostering catharsis, empowerment, and a sense of community through engagement with art therapy at the Gallery. The flexibility and adaptability of the Project Team, have significantly contributed to this success, bridging the professional and therapeutic aspects of the project.

Moving forward it is recommended to formalise confidentiality protocols and safety plans with the domestic violence service, enhance communication channels through the inclusion of a key worker, and establish clear guidelines for participation within the art therapy groups. Moreover, ensuring privacy and addressing practical concerns such as childcare and scheduling constraints are vital for maximising participation.

The provision of drop-in art therapy sessions at refuges and tailored family events at the Gallery serve as valuable extensions of the programme, offering respite and empowerment opportunities for survivors.

Continuing professional development (CPD) emerges as a critical success factor, with recommendations for enhancing CPD sessions and opportunities for extending the programme to other high-stress professional cohorts, thereby broadening the reach and impact of the Gallery and art therapy in diverse settings.

Given the ad hoc nature of funding for therapeutic interventions within the domestic violence sphere, a multi-annual partnership approach between the Gallery and the community partner could be explored to leverage the work completed to date and embed the benefits of this programme.

In testament to the success of the programme, the Art Therapist reported that the full complement of women who started in the art therapy group remained committed to it until the end, with no drop-offs in participation. The programme was highly valued and positively regarded by everyone who was interviewed, and delivered tangible benefits to survivors of domestic violence, support workers and the Gallery.

### 

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1. Sources: Saoirse Housing Association CLG, Annual Report 2022 and SDVS Strategic Plan 2022-2027 [↑](#footnote-ref-1)