BODY OUTLINE-EMOTION AS EMOTIONAL MANAGEMENT TOOL FOR CHILDREN AND ADOLESCENTS:
A THERAPIST'S PERSPECTIVE

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ABSTRACT

Today's children and adolescents experience various pressures, leading to an increase in mental health problems not only in Malaysia but throughout the world. Methods of managing stress and emotions are divided into positive and negative methods. Note that applying positive methods is important so that this group remains safe and healthy. This qualitative study utilizes a grounded theory approach to explore the emotional management strategies used by children and adolescents from a mental health therapist's perspective. Eighteen mental health therapists were interviewed using semi-structured interviews for 20 cases of children and adolescents who experience mental health issues. Therapists use the body outline-emotion tool, namely "Creative Expressive-Bodily Maps of Emotions" (CE-BME), in psychotherapy sessions. Consequently, the grounded theory analysis establishes a framework for using CE-BME to identify and reshape emotional management strategies for children and adolescents who experience mental health issues. These findings have implications for therapists using CE-BME tools for emotional management as positive coping skills. CE-BME can be a quick, fast, and effective

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tool in helping the young group in intervention and psychoeducational settings and preventing mental health issues so they do not deteriorate further.

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1. INTRODUCTION

Nowadays, mental health problems are experienced by adults and even younger people, namely children, and teenagers, with 10% of children and teenagers suffering from mental health disorders (WHO, 2021). Even in Malaysia itself, the National Health and Morbidity Survey Report; National Health and Morbidity Survey (NHMS) 2017 found that one in five teenagers in Malaysia suffers from depression, two in five suffer from anxiety, and one in ten suffers from stress (Public Health Institute, 2017). Following that, the 2019 NHMS involving children and teenagers aged five to 15 found that 424,000 (7.9%), or one in 13 of these children and teenagers, experienced mental health problems with more symptomatic age groups; 10-15 years old, females and rural. Their main problems are related to interactions with peers (42.9%), behavioral problems (15.9%), emotional problems (8.3%), and hyperactivity problems (2.3%) (National Health Institute, 2019).

When this was further investigated, lasting effects of adverse childhood experiences were found. For example, studies on early childhood experiences and their adverse effects on adult life, Adverse Childhood Experiences (ACEs) have proven that the reduction of early childhood stress and trauma experiences can reduce up to 44.1% of cases of adult depression and other physical health problems (Merrick et al., 2019). For that reason, the need for effective therapy and coping strategies during the challenge phase being passed by children and teenagers is vital to emphasize that the prevention aspect of mental illness can be done earlier. Hence, an alternative approach through

therapy that involves creative elements in psychotherapy will certainly help therapists who effectively treat these children and teenagers (Gladding, 2016; Pearson & Wilson, 2009; Sherman, 2015).

2. REVIEW OF LITERATURE

2.1 Body Outline as an Intervention Tool

Steinhardt (1985) published the first study that reported the use of body outlines in therapy. The author discovered that the variations in the method of body outline drawings resulted from the children who used them when she utilized them in after-school art therapy sessions with children aged 6 to 13. The therapist's attentive involvement and connection with the child-client can improve the patient's capacity for adaptation. In a separate piece of research, Savedra et al. (1989) conducted a descriptive study with a convenience sample of hospitalized children aged 8 to 17 years old to investigate the validity and reliability of markings on a body outline. The findings are interesting because they confirm the validity and reliability of a body outline and its implementation into a multidimensional pediatric pain instrument. The children were asked to draw where their pain was located on an outline of their bodies.

Findings from research conducted by Luzzato et al. (2003) also point to the use of body outline drawing in conjunction with the assistance of an art therapist to treat emotional suffering. The author enlisted the help of seventy people living with adult cancer to fill in the blanks inside and outside the body contour. Patients can collate with colored pastels, markers, or watercolors. Luzzato and colleagues found that patients

benefited from using the body outline in three different areas: pain imaging, sharing emotions, and investigating spirituality. The body outline appears to be a particularly flexible therapeutic intervention since it is abstract and symbolic in nature. However, it must be given within the context of the art therapist's engagement with the client to be effective. It is also possible for it to represent something other than physical agonies, such as spiritual yearnings.

An astonishing effort has been made to trace the bodies of toddlers and teenagers for an exhibition called "Standing Tall," and the show's theme is stress in young people (Berberian, 2017). It culminated in a series of programs to assist youngsters attending public schools in developing adaptive coping abilities. The students participated in group discussions and included powerful body attitudes into their tracings of the human form. In addition, children were allowed to engage in art therapy classes that focused on resiliency and validation as part of an effort implemented across the entire school. However, Williams et al. (2014) observed that individuals who reported higher levels of trait body dissatisfaction also reported higher levels of state dissatisfaction after participating in the body tracing activity. This was the finding from another study that Williams and colleagues conducted. These findings might have repercussions for the use of this approach in the treatment of people suffering from eating disorders and other issues related to mental health.

In a different study, Sachs et al. (2019) studied the association between trait measures of empathy and the self-other distinction during emotional experiences employing map

emotion onto the body. This study included both children and adults. They determined a relationship between cognitive empathy and the degree of overlap between self and others in children aged 8–11 years and adults. Furthermore, they discovered that this relationship relates to empathy development in children and adults. In more recent research, Collings et al. (2021) applied body mapping to analyze mothers' beliefs on connection and the assistance they require to form a bond with their children. During a guided interview, participants are asked to trace a life-size body shape and then embellish it with fabrics, sketches, and photographs to demonstrate their beliefs. The mothers could access memories of child removal that they had previously repressed while developing a representative body. After the body mapping study, researchers discovered signs of traumatic loss appear during interactions with child welfare agencies.

2.2 Body Outline-Emotion as Emotional Management Tool in Intervention

The use of body sketches and emotions specifically started with an early survey study by O'Brien (2007) qualitatively for marking emotions on the body for a sample aged 6-75 years. At this time, the researcher concluded that emotions could be visualized in the body. O'Brien continued mapping emotions in the body with a more systematic study of 21 emotions that are often studied in affective and emotional science on 160 adults (O'Brien et al., 2016). At this time, O'Brien and colleagues concluded that different emotions are felt in the body differently, and researchers support that individual variability exists in the embodiment of emotional experience. On the

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other hand, Nummenmaa et al. (2014) started a large-scale study on 701 adults using the emBODY tool, a body outline tool associated with emotional mapping. The results of marking emotions on the body were entered into computer topography, and his research determined that emotional experiences are related to the sensation map of the body. The researchers support the somatization and embodiment models of emotional processing. Continuing from this, Hietanen et al. (2016), who also employed the emBODY tool, conducted a study on 331 children and teenagers aged 6-17 years and found that children as young as 6 years old can relate statistically different body sensation patterns to emotions.

Correspondingly, the study using the emBODY tool was continued by Torregrosa et al. (2018), who studied a group of 28 schizophrenic patients in a control group study and found that the body and emotional maps of the schizophrenic patient group deviated from the standard normal group. Researchers suggest that this disturbed emotional embodiment contributes to poor and abnormal social functioning that can be targeted for psychosocial interventions in the future. Similarly, Sachs et al. (2019), who also used the emBODY tool on 60 children aged 8-11 years and 60 adults, established a relationship between cognitive empathy between oneself and other individuals for these two groups. Subsequently, Volynets et al. (2020), who applied the emBODY tool to 3954 adults aged 18-90 years from 101 countries, concluded that body sensations associated with emotions are consistent across cultures and genders. There is a universality in emotional experience in the body stronger than cultural and gender differences. In the same year, Lyons et al. (2020) studied 30 medicated, unmedicated, and

control group adults with major depression (MDD) utilizing the embody tool. They concluded that the emotional experience associated with bodily sensations was weaker in the depressed group compared to healthy controls. For now, no qualitative study focuses on the process that helps groups of children and teenagers who experience mental health issues, and this study focuses on this matter.

3. METHODOLOGY

The art tool 'body outline, emotions, and physical health' is a body-emotion sketch tool used in the Ministry of Health (MOH) Malaysia setting since 2013 (Maznah & Ruhana, 2013). This tool uses a sheet of paper with body sketches, crayons, and five simple steps mental health therapists follow for their clients, from children to adults. This tool was then studied at the doctor of philosophy level in 2019, and its use was improved. As a result, it was named CE-BME along with stronger foundations, principles, and theories (Ibrahim & Abdullah, 2022b, 2022a).

4. ANALYSIS

The study participants included MOH mental health therapists who underwent intensive training in November 2020. After that, these 18 therapists conducted intervention sessions with children and adolescents (aged 7 to 19 years) who were referred to them for various mental health issues. A semi-structured online interview session was conducted with this therapist using an interview protocol that 3 experts had evaluated. These therapist participants shared 20 cases of children and teenagers who applied these tools in their

intervention sessions (December to May 2021). Other than that, the study participants recorded, transcribed, and reviewed the results of these interviews. It was then analyzed using the 'grounded theory' analysis method using the help of computerized qualitative data analysis software Atlas Ti. Version 9 of the process or moment helps with coping strategies (Charmaz, 2006; Corbin & Strauss, 2008; Creswell, 2018, Friese, 2016).

5. FINDINGS AND DISCUSSION

The result of the 'grounded theory' analysis of the helping process related to emotional management has found a process framework to identify and reframe coping strategies and interventions for clients by therapists who use these CE-BME tools. There are 67 helpful process codes related to the therapist identifying the style of managing emotions (A) and the remaining 41 codes or themes for the next process (B-F). Table 1 presents the main categories, subcategories, and themes or codes. The emotional management activities of children and teenagers are shown through activity mapping to the 4 emotions (happy, sad, angry, and afraid) that are focused on in the CE-BME application guide.

Table 1. Themes or codes for helping processes related to how to manage emotions using CE-BME

Main Category	Category	Sub Category	Theme/Code
Relating to Therape	Conducting interventions from identified	A. Therapists identify emotional	See emotion management from CE-BME (4)

utic Process	emotional managemen t styles (67)	management styles (26)	Asking for an explanation from the client about the emotional management style (1)
			Identify positive or negative emotional management styles (2)
			Identify the emotional management style that is safe/appropri ate (2)
			Identify negative/uns afe emotional management style (10)
			A deeper understandin g of the client's negative emotional management style (2)

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			Help the client understand the mind for a safer emotional management style (4)
			Client agrees to change behavior (1)
		B. The client tells how to manage emotions (10)	Can tell or emotional management style (10)
		C. Therapists plan interventions from an emotional management style (17)	Indications for specific interventions (2)
			Design the best intervention (3)
			An emotional response is identified (6)
			Focus on positive emotions as a coping mechanism (3)

			Focus on positive emotions as an intervention (3)
		D. Intervention implementation (9)	The intervention is given directly in the first session (5)
			Specific techniques are taught (3)
			Focus on strengthening the client's emotional management style (1)
		E. A new style of emotional management (3)	Client awareness for new emotional management styles (1)
			A new emotional management style is acquired (2)

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		F.Psychoeduc ation for parents (2)	Accurate 'coaching' / psychoeduca tion sessions for the client's parents (2)

Figure 1 illustrates the results of the findings of the helping process relating to emotional management intervention in the psychotherapy process using CE-BME tools with children and adolescents.
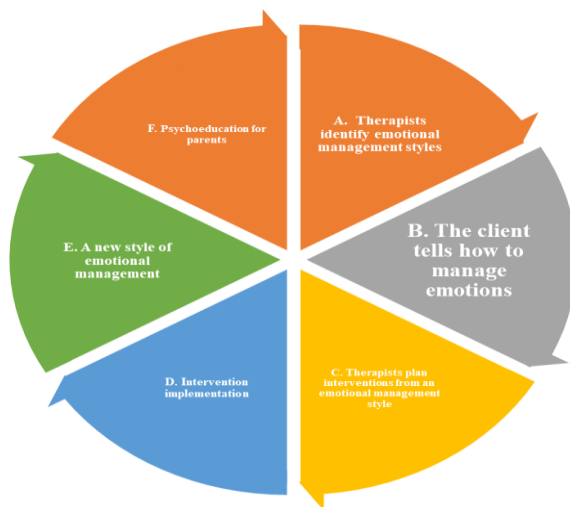

Figure 1. Emotional management process framework identified CE-BME

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There are positive management styles, such as watering trees, playing sports, skipping, and others, and negative or insecure emotional management styles, such as watching horror movies, scolding, kicking, self-injury and others. This unsafe activity is first understood in its context and processed so that it goes through the human emotional processing process (Panksepp, 1998, 2010). It is then helped to be shaped or retrained by therapists according to various psychotherapy approaches so that these children and adolescents acquire positive and safe emotional management skills.

5.1 Body mapping for positive emotion management activities

Figure 2 demonstrates the location of body parts and activities resulting from positive emotion management style strategies (reconstructed) for these children and adolescents.
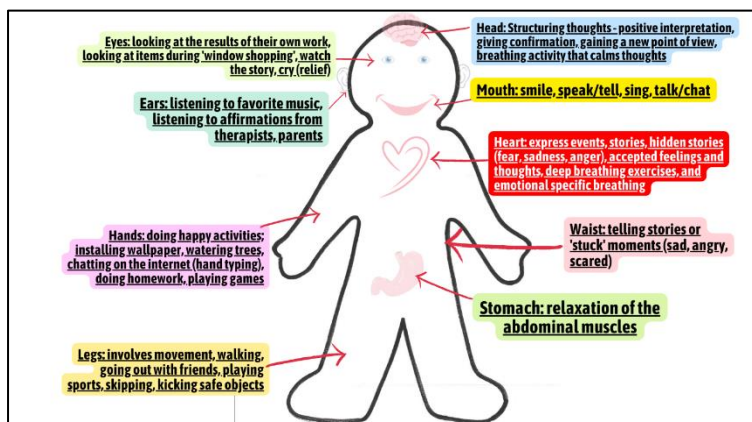

Figure 2. Mapping positive coping activities by body location.

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The cooperation of two parties (client and therapist) completes the strategy of the change process in each case. Examples of happiness include listening to a song on earphones, hand-watering trees, spending time (whole body) with the father, and happiness in the eyes when seeing handiwork results. The same body location becomes the same emotional place for the client's main issue. For example, mapping happy in the head means not scratching the head. At the same time, it also happens when you are afraid and shy, which gives the effect of a wound because you often pull out your hair when stressed. Hence, the main strategy for intervention is to process negative emotions and form a new positive emotion management strategy. At the end of the process, reshaping unsafe activities into safe activities has given new skills to these children and adolescents in producing a positive emotional management style for the future.

6. CONCLUSION

CE-BME in the process of child and adolescent psychotherapy has helped produce a framework for identifying emotional management strategies and reshaping emotional management activities to be positive and safer for this group. As a result, the use of CE-BME for emotional management skills can be expanded to the prevention level in schools, homes, and communities so that more people benefit from it and mental health issues do not worsen.

REFERENCES

Berberian, M. (2017). Standing Tall: Students Showcase Resiliency Through Body Tracings (Standing Tall: la résilience en vitrine dans les tracés corporels d'étudiants). *Canadian Art Therapy Association Journal*, *30*(2), 88–93. https://doi.org/10.1080/08322473.2017.1375734

Charmaz, K. (2003). Qualitative interviewing and grounded theory analysis. In En J. F. Gubrium & J. S. Holstein (Eds.) (Ed.), *Handbook of interview research: context and method.* (Issue February, pp. 675–694). https://doi.org/10.4135/9781452218403.n25

Charmaz, Kathy. (2006). *Constructing grounded theory : a practical guide through qualitative analysis*. Sage Publications.

Collings, S., Wright, A. C., & Spencer, M. (2021). Telling visual stories of loss and hope: body mapping with mothers about contact after child removal. *Qualitative Research*, 1–20. https://doi.org/10.1177/14687941211004218

Corbin, J., & Strauss, A. (2008). *Basics of Qualitative Research (3rd ed.): Techniques and Procedures for Developing Grounded Theory*. SAGE Publications, Inc. https://doi.org/10.4135/9781452230153

Creswell, J. W. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches, Fifth Edition*. SAGE Publications, Inc.

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Friese, S. (2016). *CAQDAS and Grounded Theory Analysis MMG Working Paper 16-07 Max-Planck- Institut zur Erforschung multireligiöser*. 32. www.mmg.mpg.deinfo@mmg.mpg.de

Gladding, S. T. (2016). *Creative in Counseling: Fifth Edition*. American Counseling Association.

Hietanen, J. K., Glerean, E., Hari, R., & Nummenmaa, L. (2016). Bodily maps of emotions across child development. *Developmental Science*, *19*(6), 1111–1118. https://doi.org/10.1111/desc.12389

Luzzatto, Paola, Sereno, V., & Capps, R. (2003). A communication tool for cancer patients with pain: the art therapy technique of the body outline. *Palliative & Supportive Care*, *1*, 135–142.

Lyons, N., Strasser, A., Beitz, B., Teismann, T., Ostermann, T., Anderle, L., & Michalak, J. (2020). Bodily Maps of Emotion in Major Depressive Disorder. *Cognitive Therapy and Research*, 0123456789. https://doi.org/10.1007/s10608-020-10195-0

National Health Institute KKM. (2019). National Health and Morbidity Survey (NHMS) 2019: NCDs - Non-Communicable Diseases: Risk Factors and other Health Problems. In *Institute for Public Health, National Institutes of Health (NIH), Ministry of Health Malaysia* (Vol. 1). http://www.iku.gov.my/nhms-2019

National Health Institute KKM. (2017). National Health & Morbidity Survey 2017. In *Institute for Public Health*,

National Institutes of Health, Ministry of Health Malaysia, Kuala Lumpur: Vol. IV. http://iku.moh.gov.my/index.php/research-eng/list-of-research-eng/iku-eng/nhms-eng/nhms- 2015

Maznah Ibrahim & Azizah Abdullah. (2022). A preliminary qualitative study on helpful processes of *creative expressive - bodily maps of emotions* in psychotherapy with children and adolescents, Person-Centered & Experiential Psychotherapies. https://doi.org/10.1080/14779757.2022.2138774

Maznah Ibrahim & Azizah Abdullah. (2022b). Helpful Effects of Creative Expressive-Bodily Maps of Emotions in Psychotherapy with Children and Adolescents: a Preliminary Qualitative Study. *International Journal of Education, Psychology and Counseling, 7*(46), 384–396. https://doi.org/10.35631/ijepc.746029

Merrick, M. T., Ford, D. C., Ports, K. A., Guinn, A. S., Chen, J., Klevens, J., Metzler, M., Jones, C. M., Simon, T. R., Daniel, V. M., Ottley, P., & Mercy, J. A. (2019). *Vital Signs: Estimated Proportion of Adult Health Problems Attributable to Adverse Childhood Experiences and Implications for Prevention — 25 States, 2015–2017* (Vol. 68, Issue 44).

Nummenmaa, L., Glerean, E., Hari, R., & Hietanen, J. K. (2014). Bodily maps of emotions. *Proceedings of the National Academy of Sciences of the United States of America*. https://doi.org/10.1073/pnas.1321664111

O'Brien, O. (2007). *Emotionally Vague: A research project about emotion, sensation and feeling.* http://www.emotionallyvague.com/

O'Brien, O., Oosterwijk, S., & Barrett, L. F. (2016). Where do people feel emotions in their body? A quantitative implementation of the Emotionally Vague project. *Proceedings - D and E 2016: 10th International Conference on Design and Emotion - Celebration and Contemplation*, 547–552.

Panksepp, J. (1998). Affective Neuroscience: The Foundations of Human and Animal Emotions. In *Oxford University Press*. Oxford University Press, Inc. https://doi.org/10.1176/appi.ajp.159.10.1805

Panksepp, J. (2010). Affective neuroscience of the emotional BrainMind: evolutionary perspectives and implications for understanding depression. *Dialogues in Clinical Neuroscience*, *12*(4), 533–545. https://doi.org/DOI: 10.31887/DCNS.2010.12.4/jpanksepp

Pearson, M., & Wilson, H. (2009). *Using Expressive Arts to Work with Mind, Body and Emotions: Theory and Practice.* Jessica Kingsley Publishers.

Sachs, M. E., Kaplan, J., & Habibi, A. (2019). Echoing the emotions of others: empathy is related to how adults and children map emotion onto the body. *Cognition and Emotion*, *0*(0), 1–16. https://doi.org/10.1080/02699931.2019.1591938

Savedra, M., Tesler, M. D., Holzemer, W. L., Wilkie, D. J., & Ward, J. A. (1989). Pain location: validity and reliability of body outline markings of Body Outline Markings by Hospitalized Children and Adolescents. *Research in Nursing & Health*, *12*, 307–314. https://doi.org/https://doi.org/10.1002/nur.4770120506

Sherman, L. (2015). *Skills in Counselling & Psychotherapy with Children & Young People*. SAGE Publications Ltd.

Stenhardt, L. (1985). Freedom Within Boundaries: *The Arts in Psychotherapy*, *12*, 25–34.

Torregrossa, L. J, Snodgress, M. A, Hong, S. J, Nichols, H. S, Glerean, E., Nummenmaa, L. & Park, S. (2018). Social simulation in virtual reality improves embodiment of emotions in schizophrenia. *Schizophrenia Bulletin*. https://doi.org/http://dx.doi.org/10.1093/schbul/sby015.196

Volynets, S., Glerean, E., & Nummenmaa, L. (2020). Bodily Maps of Emotions Are Culturally Universal. *Emotion*, *20*(7), 112.

Williams, G. A., Hudson, D. L., Whisenhunt, B. L., & Crowther, J. H. (2014). An examination of body tracing among women with high body dissatisfaction. *Body Image*, *11*(4), 346–349. https://doi.org/10.1016/j.bodyim.2014.05.005