

---

## research article

---

# Body, visual arts and healing: a study of the effectiveness of facilitative visual arts interventions with women survivors of intimate partner violence in Kerala

Reena Merin Cherian, [reenamerin.cherian@christuniversity.in](mailto:reenamerin.cherian@christuniversity.in)  
Anna Reshmy N.Y., [anna.reshmy@res.christuniversity.in](mailto:anna.reshmy@res.christuniversity.in)  
CHRIST (Deemed to be University), India

Intimate partner violence (IPV) in a micro-space invites the attention of development practitioners to intervene at the micro-, meso- and macro-level, especially in the case of marginalised women. Here, visual arts therapy is a culturally located instrument used to impact and mobilise individuals in order to construct resilience and deconstruct stress. The article analyses such an intervention and the resultant change in 204 women violated by intimate partner violence. It uses mixed research methods, employing structured interviewing using Depression, Anxiety and Stress Scale and focus group discussions. The findings reveal reduced and milder levels of anxiety, stress and depression among the women after participating in the interventions, with emergent themes including 'fear', 'beatings', 'motivation', 'recovery' and 'healing', and 'mutual aid'. The implications affirm women-centred social work practice.

**Key words** facilitative arts therapy • visual arts • women • violence • expression • healing • resilience • body • women-centred social work

To cite this article: Cherian, R. and N.Y. A. (2023) Body, visual arts and healing: a study of the effectiveness of facilitative visual arts interventions with women survivors of intimate partner violence in Kerala, *Critical and Radical Social Work*, XX(XX): 1–16, DOI: 10.1332/204986021X16844918105641

---

## Background

Intimate partner violence (IPV) continues to be a public health issue according to World Health Organisation (WHO, 2011; 2021; see also [Abramsky et al, 2011](#)). A *Lancet* study relates poverty, lack of education and lack of empowerment to IPV ([Jewkes, 2002](#)). This implies both macro- and micro-level interventions. Mental health is a focal point and a key outcome of empowerment ([Andriani et al, 2022](#)). It is argued that micro-finance, a tool of women's empowerment in the Global South, has a favourable impact on women's health and agency, especially in the household and family space. IPV is an obstacle to women's empowerment and economic well-being, and has led to inequalities for women in psychosocial domains. Studies collected by authors

from Asia and Africa, [Grose et al \(2019\)](#) assert that IPV impels mental health issues among women. The focus of this article is IPV, the impact of which is long-term and intergenerational in some cases, ranging from depression to post-traumatic stress disorders among survivors ([Sinha et al, 2017](#); [George, 2019](#); [Moulding et al, 2021](#)).

[Sunny \(2003\)](#) and [Parthasarathy et al \(2018\)](#) describe the cyclical nature of violence and list numerous psychological and social impacts, including the transgenerational continuance of the trauma ([Volkan, 2001](#)). This calls for action to build resilience and support for women. Psychosocial interventions facilitated through group work are one of the several suitable methods used in this direction. The first phase of the project focussed on designing modules based on felt needs of the groups especially enhancing resilience, introducing calmness, kindling hope and motivating participants through facilitative arts integrated. The module followed the framework of Socio-Emotional Learning (SEL). The second phase included commencement of the sessions and discussion with the participants post the sessions. Through the channel of expressive art facilitation, The Art Outreach Society (TAOS) designed a module of activities based on these issues, which is meant to enhance resilience, introduce calmness, kindle hope and motivate participants intrinsically to achieve tasks following the framework of socio-emotional learning framework (SEL).<sup>1</sup>

## **Women, empowerment and agency**

[Shoostari et al \(2018\)](#) proposed five stages as a pathway to empowerment for women: welfare, access, knowledge, participation and control. [Kayanighalesard and Arsalanbod \(2014\)](#) stated in their study that the empowerment of women is a method for improving their financial, cultural and social standing. They also emphasised the role of education, expanded medical insurance and the creation of household jobs in relation to empowerment. However, it is evident that mental well-being is absent in the narrative, and current models and programmes of empowerment have not brought about major change in the decision-making agency of women ([Jakimow and Kilby, 2006](#)).

## **Violence, mental health, empowerment and women in Kerala**

Self-help groups (SHGs) are viewed as approaches to reaching out to women state-wide through livelihood and economic means. However, this approach to empowerment only focuses on economic well-being, though have been an effective practice in Kerala in terms of outreach, with the Kudumbashree<sup>2</sup> units being an illustration. However, the economic and livelihood lens of conventional SHG programmes has not been able to change the agency of women effectively ([Jakimow and Kilby, 2006](#)), owing to a poor blueprint and the inability to affect power relations in society. Group access, employment, mutual aid, psychosocial well-being and mitigating trauma are as crucial as other indicators of empowerment. According to the National Family Health Survey (NFHS) of 2018, 15 per cent of married women in the state experience spousal violence. In Kerala, the statistics in two areas give prominence to the gaps in women's empowerment: first, the incidence of alcohol-related violence against women in the household; and, second, the case of domestic violence. As per the NFHS-4, 37 per cent of men consume alcohol in Kerala, and while this has decreased from the previous NFHS-3 (at 45 per cent), the impact of alcoholism on domestic violence remains unchanged.

Additionally, during the COVID-19 pandemic, IPV cases were reported to be at an all-time high due to increased alcohol consumption. Through its district-level presence,

the mental health dimension of the Kudumbasree, that is, Snehitha,<sup>3</sup> specifically targets the rights of women and provides counselling services, though accessibility is limited due to the prevalence of stigma related to accessing counselling services (Jaisoorya et al, 2022). In addition, there are several state and voluntary initiatives, especially those run by the Department of Women and Child of the government of Kerala, focusing on securing justice for IPV survivors and providing counselling support for them.

## Details of the project

The project targeted 204 women who had registered cases of domestic violence, were separated from their homes and families, or were suffering abuse by their families. These women reported having psychosocial issues, including anxiety, fear, depression, suicidal tendencies and so on. The majority of the women were from Kochi in Ernakulam District or Kerala in India, lower socio-economic backgrounds, and Dalit and minority groups, and were aged 25 to 60 years. Out of the 204 participants, 67 were residing in government-run institutional care, 23 were single women either staying with their maternal families or staying alone or with children, and ten were married and living with their families. All participants were in the age group of 19–55 years and were from the state of Kerala.

Programme objectives included providing issue-based group counselling and art facilitation to heal, to enhance the resilience and to strengthen the psychological and social well-being of the beneficiaries. From the period of September 2020 to September 2021, each of the 204 participants received an average of 60 sessions. Each session included 50 minutes activity and 30 minutes of narration and sharing by the participants and facilitator. There were 1,480 sessions in total, and 204 participants continued the sessions for one full year, while 16 participants discontinued after several months due to multiple factors. Out of the 1,480 sessions, 567 sessions were held virtually due to the need to maintain physical distancing during the COVID-19 pandemic. The therapeutic team included seven psychologists and one social worker.

## Review of the literature

Literature relating to such major key themes as ‘gender’, ‘women’, ‘gender-based violence’, ‘trauma’, ‘art therapy’, ‘facilitative arts expression’, ‘abuse’ and ‘mutual aid’ was searched for in databases using the Boolean logic of ‘AND’ and ‘OR’. Over 300 research articles were identified as studying the factors, determinants and impact of facilitative arts therapy on the healing of trauma among affected women, out of which 124 were scanned for the relevance of the keywords and close to 50 were thoroughly reviewed based on direct correlation with the themes of the research. The PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycNet and Cochrane Collaboration databases were thoroughly searched to explore the outcomes of the intervention among all contingent groups. Two major thematic areas namely therapeutic art and implications on mental health are discussed in the following.

## Therapeutic art

Art therapy helps to express emotions, thoughts and attitudes more clearly than any other medium; it provides a guided medium for individuals to share their suppressed emotions, which are otherwise painful and disturbing for individuals to express

(Malchiodi, 2002a). She (2002a) asserts that with guided interaction and reflection, artistic expression is capable of resolving emotional issues (McGregor, 1989). Malchiodi (2002a) locates art therapy historically through landmark writings such as *The Discovery of the Art of the Insane* (MacGregor, 1989) and *The Soul's Palette* (Malchiodi, 2002b), which connect theories of psychology and art. Despite the literature indicating the mental health or psychological implications of art therapy, systematic reviews were unable to establish a significant correlation (Van Lith, 2016; Cohen-Yatziv and Regev, 2019) due to a lack of randomised controlled trials (RCTs) and large-sample studies. Qualitative studies and case controls give an insight into the long-term and gradual healing impact of art expression. A study in Italy showed that women's well-being is significantly related to social norms, women's roles in society and, especially, religious culture (Bertocchi and Bozzano, 2019).

Similarly, multiple studies from the Asian and, specifically, Indian contexts indicate the same. Mindfulness-based art therapies have been found to have an effective influence on psychological distress among women in Maharashtra in India (Joshi et al, 2021). Nagarajan (1998) located the *kolams* drawn by women in households to be effective in personal well-being and artistic identity among Asian women in Singapore. Dilwarai and Tripathi (2014) further studied art therapy as a creative expressive process. These assertions indicate the need to realise the psychosocial determinants of empowerment, which is absent in the conventional understanding of the empowerment of women, especially in terms of its conceptualisation in the Global South. It can be discerned that mental health is a crucial determinant of empowerment and results in resilience and well-being, which ripples in multiple directions.

## Implications on mental health

There is ample literature stemming from the behavioural sciences that suggests the implications of IPV on mental health (Coker et al, 2000; Jewkes, 2002; Pico-Alfonso, 2005; Ali and Naylor, 2013). Studies on health implications and art therapy focus on better psychosocial adjustment for women affected by cancer (especially breast cancer), reproductive health issues and mental health issues. The review throws light on literature in the Global South highlighting the direct impact of art therapy on women, violence, trauma and healing, while intervention-based studies are limited.

## Theoretical underpinnings of violence, women and art

Haraway (1985), Butler (1993) and Lepowsky (1994) spoke about women and the body, specifically, that patriarchy influences the construction and perception of the body, which is the object of violence, and through the body, it targets the emotions. However, Dutton (2011) proposes an ecological model to explain IPV, attributing social and environmental factors as contributing towards violence in intimate relationships. This closely aligns with family systems theory but also accounts for macro factors for resorting to violence and acknowledges the role of masculinity, though it does not delve into the impact of violence on survivors. There is research on strengthening protective factors, such as spirituality, social support, community cohesion and ethnic identity, for reinforcing resilience (see Crann and Barata, 2016). Healing and recovery engage with resilience theory. Kaplan's individual resilience is

core in this case, with resilience being primarily defined in terms of the 'presence of protective factors (personal, social, familial, and institutional safety nets)' that enable individuals to resist life stress (Kaplan et al, 1996: 158; see also Kaplan, 2002).

## Methods and materials

The study employs an explanatory research design using mixed methods and involves all the direct participants enrolled in the facilitative arts therapy programme conducted by the TAOS. The study followed a structured interview with a Malayalam-translated version of the Depression, Anxiety and Stress Scale (DASS-21) (Lovibond and Lovibond, 1995) administered to all 204 participants, as well as three focus group discussions (FGDs) for further explication and clarification of the findings of the quantitative study. The DASS-21 has sub-scales for measuring depression, anxiety and stress, and higher scores indicate higher levels of depression, anxiety and stress for respondents. The Pearson correlation value of the Malayalam-translated version of DASS-21 was  $r(204) = .92$  ( $p < .01$ ), which shows the high validity of the tool. The Malayalam-translated version of the instrument has previously been used by Silvy and Vargas (2016), Neelankavil and De Guzman (2020) and Vithya et al (2023). There were pre-tests with 218 participants and a post-test with 204 after 12 participants were excluded due to low attendance in the sessions.

The unit of analysis is each woman who participated in the year-long art therapy sessions. The participants attending all the sessions were included in the study. The interviews were held in Malayalam and transcribed and translated verbatim to English for analysis. The data obtained through DASS-21 and the FGDs were subjected to quantitative and qualitative analysis (thematic analysis), respectively. The FGDs included ten participants each, with a total coverage of 30 participants selected purposively for the study based on responsiveness and ability to respond. Some of the questions that emerged in the FGDs were as follows:

- What were your thoughts before attending the sessions?
- What was the nature of the sessions you attended?
- What are your opinions of the group sessions?
- How do you relate to the art forms?
- What were your experiences while undergoing the process of facilitative arts engagement?
- What were your takeaways from various sessions?

### *Ethical considerations*

The participants were assured of confidentiality, complete debriefing was ensured by the researchers and written informed consent was obtained.

### *Limitations of the study*

The study is limited to the women participants residing in two shelter homes in Ernakulam district of Kerala, and generalisations for wider participants are limited. Also, some of the sessions were held virtually due to the lockdown during COVID-19.

## Demographic details

Most beneficiaries belonged to the age group of 30–65, while there were a substantial number of women in the age band of 25–30 followed by 16–25. Out of 204, 118 were Hindu women, while 45 were Muslim and 41 were Christian; among them, 156 were married and were either separated, divorced or contemplating the same. Only 28 were employed, while others were either dependent on their families or were residing in government-run shelter homes. The analysed sample of  $n = 204$  had mean age of 43.5 years.

## Findings

The data from the [Table 1](#) indicates that almost half of the women suffered from mild or free-floating depression at least once in their lifetime, more than half suffered from mild anxiety, and one quarter suffered from at least a mild level of stress on an everyday basis. The results show a significant decrease in the stress and anxiety levels, and several participants reporting scores within the normal range. Recovery is visible in the mild range rather than the moderate, severe or extreme levels.

## Discussion

The data were coded using the statistical application Statistical Package for the Social Sciences–25 (SPSS–25). Descriptive statistics, such as frequency, percentage, mean and standard deviation, were conducted for demographic details. The data were normally distributed on a Q–Q plot and histogram. Hence, the hypothesis testing was conducted using Analysis of Variance (ANOVA) to check if there is any relationship between total stress scores, total depression scores, total anxiety scores and duration of the art therapy intervention.

An independent sample  $t$ -test was used to check whether there is any difference between the scores for depression, stress and anxiety before and after the art therapy intervention. The significant level was measured at 0.05. The  $p$ -value is found to be significant (at  $p < 0.05$ ) for all three categories post-intervention; while the value is significant for depression and anxiety, it is significantly higher for the stress scores post-intervention. Similar results were demonstrated by [Blomdahl et al \(2022\)](#) for manual phenomenological art-based therapies for patients with depression, where there was a gradual increase observed in the mild cases of depression through the

**Table 1: Performance of participants on DASS-21 before and after therapeutic intervention**

Severity	DASS 21-D-before	DASS 21-D-after	DASS 21-A-before	DASS 21-A-after	DASS-21-S-before	DASS 21-S-after
Normal	90	101	50	64	103	140
Mild	40	30	112	98	61	56
Moderate	41	40	20	20	12	4
Severe	30	30	8	8	16	–
Extremely severe	3	3	4	4	8	4

targeted therapeutic art. The significant change in anxiety and stress levels was visible for both the mild and moderate categories, while in the post-test, the severe and extremely severe categories were not found to increase due to the severity of the symptoms and absence of drug therapy to complement the facilitative arts therapy.

## **Emergent themes from the FGDs**

### *Fear*

The women reported experiencing a high level of anxiety concerning facing the perpetrator, as it instigated memories of violent episodes: the women said that they were 'reliving the trauma' that had previously occurred. This anticipation was reported to have created physical issues among the respondents, including ulcers, increased blood pressure, extensive sweating and lack of sleep. The women reported a lack of sleep due to flashbacks of episodes of violence. Moussion-Esteve (2022) highlights the recurring nature of fear as impacting the well-being of survivors of IPV and their children. The fear of rejection was also outlined by the women before participating in the intervention sessions.

### *Beatings*

Several women reported having been subjected to physical violence, and most women in the category reported having faced beatings regularly. Pain and scars were found to be associated with beating. The former was mentioned in the context of psychological scars and pain, and several women reported crying profusely in the initial days after the physical pain inflicted on them. The beatings represented an array of violence inflicted upon the survivors. Campbell et al (2002) discuss a list of physical consequences of the beatings, including headache, back pain, abdominal pain, pelvic pain and so on, reported in a specific session on the body and pain. A participant represented her body as white and empty, where the white symbolised the absence of any sensation as a result of years of beatings, culminating in numbness and perceived insensitivity to pain.

### *Violation of consent*

Incidence of marital rape was reported by almost every participant, where the nature of violence was always found to be sexually offensive. Married women often reported marital rape by the male partner as part of their expressing anger or disagreement. Several young women also reported that their lovers cajoled or manufactured their consent through making them believe that they would marry them, and under this pretext, were subjugating them for sex. The scars shared by the women as a result of sexual abuse ranged from psychological to physical. A woman reported to have been raped by her partner for the sake of 'teaching her a lesson'. In such cases, the scars are deeper than those of physical violence.

### *Profanities and verbal abuse*

Abusive words were found to be hurled as verbal violence and aggression by perpetrators. The women reported also engaging in verbal violence concerning the

expression of anger and guilt. The women reported that several profanities were sexual in nature and indicated that they were immoral in nature. The women found it difficult to share the profanities, but during a vocal exercise, they shouted them as a symbolic act of directing them towards their violators.

### *Self-doubt*

A 42-year-old participant reported a lack of confidence, self-doubt and low self-worth after she experienced years of domestic abuse from her married spouse, saying: “The continuous criticism from my husband and in-laws has left a deeper impact on me. I don’t feel confident enough to do anything.” The facilitators said that her lack of confidence was changed by taking steps like initiating conversations in the group. The selective abstraction was changed with the help of self-awareness activities. The team reported that she was assertive and vocal about her thoughts, and there was gradual healing and recovery that she experienced as sessions advanced.

### *Grief*

In the case of one respondent, the grief of the death of her children had ‘consumed’ her. She said that over some time, she was able to talk about her grief, though was taking only “small steps at a time” by recollecting her hobby of collecting pieces of fabric, which she used as a coping mechanism. She also said: “Seeking validation became important for me and that was something I did not receive, the therapy sessions provided me that reassurance.” There was an improvement in her decision-making skills and she gained better clarity as to prioritising her needs. This participant was also found to be journaling regularly, as it helped her to stay in touch with her thoughts, and to have initiated an embroidery business for her livelihood. In this content, Riley (1997) highlighted the importance of free line drawing, doodling and journaling as crucial coping strategies.

Messing et al (2015) refer to grief as a common factor among numerous women survivors of IPV; it was shared as a keyword among several participants, who used ‘grief’, ‘feeling heavy’ and ‘missing’ their family, and in some cases, grief was attributed to their perpetrator partners. Grief is seen as an obstacle to forging resilience, but targeting efforts at grief counselling can help in recovery.

### *Expressing and speaking up*

The respondents often referred to a lack of voice because of the lower agency of being a woman. Stemming from the fear of the perpetrator and the fear of rejection from the family, it was found that they were exploring and searching for mediums and safe places where they could speak up. The women attending the art therapy sessions felt that it was a safe space to express and talk through their artwork and post-session narration in a judgment-free arena. It was also viewed as a platform for vicarious learning. The facilitators and all the participants shared that there were a significant number of participants beginning to express their emotions, fears, anxiety, irrational thoughts and trauma. The expressions were simulated through art and moved to verbal communication with ample scaffolding and reassurance from the facilitators. Anger and frustration were common, and recurrent dimensions were



seen across the emotions expressed. Huss (2009) has argued that art therapy provides symbolic self-expression to individuals with diverse mental health issues, which he calls 'intensifying the interpretive voice'. The session creates space for the facilitators to forge resilience through both situational and relational patterns.

### *Assertiveness*

Contreras-Pezzotti et al (2010) are of the view that social balance and the need to balance care for others are the major driving forces behind developing assertiveness. Here, assertiveness is based on the confidence to 'say "no" to violence'. Several women said that the realisation and confidence to say 'no' to abuse and to 'stand up to it' developed after only half the sessions, that is, after six months.

### *Recovery and healing*

The innate resilience involved instigated spiral recovery in terms of both physical and mental trauma. The physical trauma was remediated through recovery and healing. The facilitators and the design of the session were such that they paved the way for resilience and healing. The group format of the session allowed for an understanding of SEL vicariously through social learning. As a participant remarked:

'The activity of pairing and drawing helped me understand that the problems, my list, were similar to my partner's. However, she seemed more confident in resolving the issue; despite support, I was unsure of how to leverage the same. During the activity, I gained trust in myself; my recovery started after the trust I gained.'

The participants were found to have heightened levels of self-awareness during such activities as 'knitting my emotions', which are primary activities in controlling negative behaviours, thoughts and feelings.

In an activity titled 'paint your dream', a 23-year-old participant shared that she dreamt of getting ready to travel with her family in an aeroplane and the residents of the shelter home where the participant resided were found bidding her goodbye. She shared that the dream could be symbolic of her yearning to return home, which is projected through her dream. Several women spoke about recovery as a slow process, but most were enabled to initiate healing. As another woman who experienced family violence shared:

'I have never experienced a stable functioning family, as my parents always used to argue with each other and I never received much love and care from them. The sessions made me let go of the past. It was difficult for me to detach myself from the world I created because of anxiety. Through sessions, I realised I'm strong inside, and now I don't have the fear of people judging me. I'm glad I'm healing.'

The women who were not sharing physical space with their partners reported to be recovering at a faster rate. This 'letting go' was symbolic of healing, especially as concerns forgiveness.

### *Managing emotions*

The self-management component of SEL was very evident in the narratives of the participants towards the end of the project. One of the women shared achieving economic and vocational responsibility, specifically saving money, using resources judiciously and so on. This reflects the improvement in the SEL of the women across all the competencies, especially the aspect of self-management. The sense of responsibility and accountability was forged in the women through participation. In another example of managing emotions, another respondent shared: “Being an orphan, anger was always part of my life, and I was pretty obstinate. The therapy sessions gave me an insight into my personality, and now I have control over my anger. I’m more engaged.”

### *Motivation*

The respondents during the FGDs recollected a session on charting their progress, where they reported that they all made their figures as ‘standing upright’. The aspect of ‘standing upright’ symbolised empowerment and self-confidence, and it was evident in several of the art outputs by the women. The inertia attributed to fear of negative consequences stemming from traumatic experiences was said to be a cause of a lack of motivation. The frequent references to the inability to wake up can be attributed to the same determinant. Here, waking up is an act of gathering the momentum to initiate a new day and related work. As a participant shared:

‘It helped me find my inner capacities, and I started looking into other possibilities. The activities brought me happiness, and they helped me express my thoughts through art. Now, I have a sense of hope and a feeling that I can retrieve all that I had lost in my life.’

There was an overall increased motivation among the participants concerning seeking opportunities to self-care, manage one’s daily tasks, manage relationships and even seek livelihood opportunities for themselves. There was a difference in terms of the intensity of intrinsic motivation. It was found that those living with their family were more receptive to motivational enhancement than those living in shelter homes. This could be determined by the intensity of trauma, support from significant others and so on.

### *Mutual aid*

The activities aimed at forging several components of SEL were held in a group format, and the participants were able to view them as contributing towards sisterhood, support and collective well-being: “She was a stranger when she spoke about how I should be more confident about my looks. Later, we became good friends. I realised she was going through the same issues as I was.” The facilitators reported that the women were found to be meeting even when the sessions were not scheduled. It was evident in this situation that they found support, mutual respect, dignity and happiness in each other’s company, and the traumatic position of each member was diluted by this mutual aid.

### *Gratitude*

A shared feeling of gratitude was also evident among the participants, both towards each other and towards all the support systems that played a role in crisis situations. Peers, distant family members, the police, non-governmental organisation workers, lawyers and mental health workers were listed as support systems by the participants. A 23-year-old abuse victim who initially reported issues of waking up during sleep said that her health had improved during the course of art therapy. The theme of the family and home was depicted by the recurrent symbol of a 'crying eye' found in her narrative and all her art output. As she said:

'My biggest dream is to take care of my family as they have, no one else but me. I want to support them the way they supported me while growing up. I also want to help other people who are in need. The therapy sessions helped me become more focused on my desire and goals in life. I'm glad that I got a platform to discuss the issue of grief that I was struggling with for a few years, as I was not even able to communicate with my family members. I am happy that I finally got a job offer after months of waiting. I know I can face the outside world, especially my workplace, with confidence because of all the lessons I have learned through the art therapy sessions, which boosted my self-esteem. The girl stepping into the sea is symbolic of the anxiety I have while I "return" to the world, but you can see that the girl is happy.'

Here, the respondent was found expressing her desires to the project team while conveying gratitude for her recovery and resilience, which she gathered from different people and circumstances.

### *Implications for social work*

The intervention involving 204 women indicates the need for adoption in mainstream clinical and community practice, as well as the related practice of social work. In the context of working with women, who are associated with a subaltern identity, art provides a judgement-free, open and non-threatening space to speak. Based on the analysis of the data, some implications for practice are as follows:

- Women-centred social work deconstructs gendered roles and power relations. The artistic engagement attempted to provide the women with authority, that is, to reclaim lost 'power' or attain power through the creative space, characterised especially as non-judgemental. Huss (2009), especially through the case of Bedouin women, repeatedly introduces gendered notions that are reinforced in women, which they deconstruct through expressive art. The picture of the police officer that a participant created and pasted near her bed was indicative of the reclaiming of, and aspiration of being in, 'power' and 'control'. This paves the way for the application of art therapy and facilitative artistic expression with marginalised gender groups as a key component of women-centred social work.
- Huss (2009), and Khademi et al (2021) point towards decolonising the practice of interventions with IPV. Huss (2009), through his analogy of

Bedouin women, points towards how the interventions of decolonising perspectives empower individuals and groups. While some techniques are culturally located, such as mandalas, murals and so on, most therapeutic activities conducted by professionals in this context are drawn from Western practices. Although the sessions were engaging, culturally rooted techniques would lead to more involved efforts to empower women. While the narratives used Malayalam, their interpretation and analogy were drawn from Western authors, social workers and clinical practices. Nagarajan (1998) studied the influence of *kolam* art forms in Tamil women's rituals, power and well-being, which are 'ubiquitously creative' art forms emerging from Tamil women's voices. Cole (1996) describes artefacts as culturally located; accordingly, it is important to locate the activities through contextual aspects. Here, translating Bakhtin's neologism, the 'social' person is also a 'speaking' person, for whom the decolonisation of social work practice, especially in women-centred development, is a crucial element.

- Mainstreaming 'allied' therapies in clinical practice is another learning from the intervention, as the practitioner's dilemma and judgement are also seen in global and Indian practice. Rubin (2011) asserts the need for studio spaces in hospitals given the evidence of art-based therapies in all spheres of recovery, not just mental health.

## Conclusion

The article has reviewed an arts-based intervention from the perspective of women facing the trauma of violence and is the outcome of a gestation of thoughts on its effectiveness from the first day of the project. The intervention with 204 women using 'alternative' mediums is an effective tool for helping the victimised women, or the subaltern, to speak. The findings show changes in mild levels of depression, stress and anxiety among the respondents. The art forms and outputs conceived by the women link to folklore, narratives and visual discourses that capture and release the fears and anxiety entrapped in the silence. The study has provided implications for culturally rooted methods and techniques to work with IPV trauma survivors. The learning from such interventions demonstrates the need to include participatory techniques and directs the practitioner to be located in the same cultural and social space as the participants.

## Notes

<sup>1</sup> SEL is understood as a process through which children develop their ability to integrate thinking, feeling and behaviour to succeed at important developmental tasks (Denham, 2018). If implemented appropriately, it has tremendous value for numerous reasons, some of which are outlined later.

<sup>2</sup> Kudumbashree is a programme launched by the government of Kerala in 1997 that targets poverty eradication and the empowerment of women. In Malayalam, Kudumbashree means 'prosperity of the family'. The project has three tiers, spanning neighbourhood development, area development and the widest community development society. The community network spans across the state and was recognised in 2011 by the Ministry of Rural Development of the government of India. The project is aimed at economic empowerment and channels livelihood programmes at all levels by working with the SHG

model inspired by the Grameen Bank, initiated by Mohammad Yunus in Bangladesh in the 1980s (for the State Poverty Eradication Mission, see [Government of Kerala, 2019](#)).<sup>3</sup> Snehitha is a 24-hour gender help desk operated through the Kudumbashree structure. It provides counselling services for women, children and families, and facilitates short-stay homes for women facing atrocities.

### Funding

The author(s) received no financial support for the research, authorship, and/or publication of this article.

### Conflict of interest

The authors declare that there is no conflict of interest.

### References

- Abramsky, T., Watts, C.H., Garcia-Moreno, C., Devries, K., Kiss, L., Ellsberg, M., Jansen, H.A. and Heise, L. (2011) What factors are associated with recent intimate partner violence? Findings from the WHO multi-country study on women's health and domestic violence, *BMC Public Health*, 11(1): 1–17. doi: [10.1186/1471-2458-11-1](#)
- Ali, P.A. and Naylor, P.B. (2013) Intimate partner violence: a narrative review of the biological and psychological explanations for its causation, *Aggression and Violent Behavior*, 18(3): 373–82. doi: [10.1016/j.avb.2013.01.003](#)
- Andriani, L., Lal, S. and Kalam, A.A. (2022) Entrepreneurial activities and women empowerment in rural India between microfinance and social capital, *Strategic Change*, 31(2): 227–37, doi: [10.1002/jsc.2492](#).
- Bertocchi, G. and Bozzano, M. (2019) Origins and implications of family structure across Italian provinces in historical perspective, in C. Diebolt, A. Rijpma, S. Carmichael, S. Dilli and C. Störmer (eds) *Cliometrics of the Family*, Cham: Springer, pp 121–47.
- Blomdahl, C., Guregård, S., Rusner, M. and Wijk, H. (2022) Recovery from depression – a 6-month follow-up of a randomized controlled study of manual-based phenomenological art therapy for persons with depression, *Art Therapy*, 39(1): 13–23. doi: [10.1080/07421656.2021.1922328](#)
- Butler, J. (1993) Poststructuralism and post Marxism, *Diacritics*, 23(4): 3.
- Campbell, J., Jones, A.S., Dienemann, J., Kub, J., Schollenberger, J., O'Campo, P., Gielen, A.C. and Wynne, C. (2002) Intimate partner violence and physical health consequences, *Archives of Internal Medicine*, 162(10): 1157–63. doi: [10.1001/archinte.162.10.1157](#)
- Cohen-Yatziv, L. and Regev, D. (2019) The effectiveness and contribution of art therapy work with children in 2018 – what progress have been made so far? A systematic review, *International Journal of Art Therapy*, 24(3): 100–112, doi: [10.1080/17454832.2019.1574845](#).
- Coker, A.L., Smith, P.H., Bethea, L., King, M.R. and McKeown, R.E. (2000) Physical health consequences of physical and psychological intimate partner violence, *Archives of Family Medicine*, 9(5): 451. doi: [10.1001/archfami.9.5.451](#)
- Contreras-Pezzotti, L.M., Arteaga-Medina, J.E., Fidel Latorre, J., Folino, J.Ó. and Campo-Arias, A. (2010) Association between intimate partner violence and posttraumatic stress disorder: a case-control study, *Revista Colombiana de Psiquiatría*, 39(1): 85–92.

- Cole, M. (1996) Interacting minds in a life-span perspective: a cultural-historical approach to culture and cognitive development, in P.B. Baltes and U.M. Staudinger (eds) *Interactive Minds: Life-span Perspectives on the Social Foundation of Cognition*, Cambridge: Cambridge University Press, pp 59–87.
- Crann, S.E. and Barata, P.C. (2016) The experience of resilience for adult female survivors of intimate partner violence: a phenomenological inquiry, *Violence Against Women*, 22(7): 853–75, doi: [10.1177/1077801215612598](https://doi.org/10.1177/1077801215612598).
- Denham, S. (2018) Keeping SEL developmental: the importance of a developmental lens for fostering and assessing SEL competencies, <https://measuringSEL.casel.org/about/>.
- Dilawari, K. and Tripathi, N. (2014) Art therapy: a creative and expressive process, *Indian Journal of Positive Psychology*, 5(1): 81.
- Dutton, M.A. (2011) *Ecological Model of Battered Women's Experience over Time*, Darby, PA: DIANE Publishing.
- George, Y. (2019) Judith Butler: when killing women isn't a crime, *New York Times*, 10 July, [www.nytimes.com/2019/07/10/opinion/judith-butler-gender.html](https://www.nytimes.com/2019/07/10/opinion/judith-butler-gender.html).
- Government of Kerala (2019) Snehitha gender help desk gets government approval, <https://lsgkerala.gov.in/en/kudumbashree/news/main-aim-center-provide-help-and-support-those-women-and-children-who-are>.
- Grose, R.G., Roof, K.A., Semenza, D.C., Leroux, X. and Yount, K.M. (2019) Mental health, empowerment, and violence against young women in lower-income countries: a review of reviews, *Aggression and Violent Behavior*, 46: 25–36. doi: [10.1016/j.avb.2019.01.007](https://doi.org/10.1016/j.avb.2019.01.007)
- Harraway, D.J. (1985) *Manifest for Cyborgs. Simians, Cyborgs, and Women: The Reinvention of Nature*, New York, NY: The Feminist Press at the City University of New York.
- Huss, E. (2009) A case study of Bedouin women's art in social work. A model of social arts intervention with 'traditional' women negotiating Western cultures, *Development Education*, 28(6): 598–616, doi: [10.1080/02615470903027298](https://doi.org/10.1080/02615470903027298).
- Jaisooriya, T.S. et al. (2022) Framework and overview of a state-wide college mental health program in Kerala, India, *Indian Journal of Psychological Medicine*, doi: [02537176221122407](https://doi.org/10.25371/76221122407).
- Jakimow, T. and Kilby, P. (2006) Empowering women: a critique of the blueprint for self-help groups in India, *Indian Journal of Gender Studies*, 13(3): 375–400, <https://journals.sagepub.com/doi/full/10.1177/02537176221122407>.
- Jewkes, R. (2002) Intimate partner violence: causes and prevention, *The Lancet*, 359(9315): 1423–9, doi: [10.1016/S0140-6736\(02\)08357-5](https://doi.org/10.1016/S0140-6736(02)08357-5).
- Joshi, A.M., Mehta, S.A., Pande, N., Mehta, A.O. and Randhe, K.S. (2021) Effect of Mindfulness-Based Art Therapy (MBAT) on psychological distress and spiritual wellbeing in breast cancer patients undergoing chemotherapy, *Indian Journal of Palliative Care*, 27(4): 552. doi: [10.25259/IJPC\\_133\\_21](https://doi.org/10.25259/IJPC_133_21)
- Kaplan, C.P., Turner, S., Norman, E. and Stillson, K. (1996) Promoting resilience strategies: a modified consultation model, *Children & Schools*, 18(3): 158–68.
- Kaplan, H.B. (2002) Toward an understanding of resilience, in M.D. Glantz and J.L. Johnson (eds) *Resilience and Development*, New York: Springer, pp 17–83.
- Kayanighalesard, S. and Arsalanbod, M.R. (2014) Economic empowerment of women, according to the experience of Japan, paper presented at the National Conference of Women and Rural Development, Ferdowsi University of Mashhad.

- Khademi, F., Rassouli, M., Rafiei, F., Moayedi, S., Torres, M., Marzban, N., Hajiand, E. and Golitaleb, M. (2021) The effect of mandala colouring on anxiety in hospitalized COVID-19 patients: a randomized controlled clinical trial, *International Journal of Mental Health Nursing*, 30: 1437–44, doi: [10.1111/inm.12901](https://doi.org/10.1111/inm.12901).
- Lepowsky, M. (1994) Women, men, and aggression in an egalitarian society, *Sex Roles*, 30(3): 199–211. doi: [10.1007/BF01420990](https://doi.org/10.1007/BF01420990)
- Lovibond, P.F. and Lovibond, S.H. (1995) The structure of negative emotional states: comparison of the Depression Anxiety Stress Scales (DASS) with the Beck Depression and Anxiety Inventories, *Behaviour Research and Therapy*, 33(3): 335–43. doi: [10.1016/0005-7967\(94\)00075-U](https://doi.org/10.1016/0005-7967(94)00075-U)
- MacGregor, J.M. (1989) *The Discovery of the Art of the Insane*, Princeton, NJ: Princeton University Press.
- Malchiodi, C.A. (2002a) Art therapy and the brain, in C.A. Malchiodi (ed) *Handbook of Art Therapy*, Guilford Press, pp 16–24.
- Malchiodi, C.A. (2002b) *The Soul's Palette*, Boulder, CO: Shambhala.
- Messing, J.T., Mohr, R. and Durfee, A. (2015) Intimate partner violence and women's experiences of grief, *Child & Family Social Work*, 20(1): 30–9.
- Moulding, N., Franzway, S., Wendt, S., Zufferey, C. and Chung, D. (2021) Rethinking women's mental health after intimate partner violence, *Violence Against Women*, 27(8): 1064–90, doi: [10.1177%2F1077801220921937](https://doi.org/10.1177%2F1077801220921937).
- Moussion-Esteve, A. (2022) Domestic fear beyond traumatic terror: understanding mothers' everyday experiences of recurring fear in the context of domestic violence, *Emotions and Society*, 4(3): 341–57. doi: [10.1332/263169021X16631506064877](https://doi.org/10.1332/263169021X16631506064877)
- Nagarajan, V.R. (1998) *Hosting the Divine: The Kolam as Ritual, Art and Ecology in Tamil Nadu*, India: University of California, Berkeley.
- Neelankavil, R.J. and De Guzman, R. (2020) Perceived stress as a predictor of depressive symptoms among wives of alcohol dependent persons, *Indian Journal of Health & Wellbeing*, 11 (1–3): 57–61. doi: [10.15614/IJHW.v11i01.13](https://doi.org/10.15614/IJHW.v11i01.13).
- Parthasarathy, S.K., Pal, P., Bhattacharya, S., Nandi, S., Bhatla, N. and Kashyap, A. (2018) *Kudumbashree State Poverty Eradication Mission: A Model Documentation Report on Addressing Intimate Partner Violence (IPV) in India*, New Delhi: ICRW.
- Pico-Alfonso, M.A. (2005) Psychological intimate partner violence: the major predictor of posttraumatic stress disorder in abused women, *Neuroscience & Biobehavioral Reviews*, 29(1): 181–93.
- Radl, D., Vita, M., Gerber, N., Gracely, E.J. and Bradt, J. (2018) The effects of Self-Book© art therapy on cancer-related distress in female cancer patients during active treatment: a randomized controlled trial, *Psycho-Oncology*, 27(9): 2087–95, doi: [10.1002/pon.4758](https://doi.org/10.1002/pon.4758).
- Riley, S. (1997) An art psychotherapy stress reduction group: for therapists dealing with a severely abused client population, *The Arts in Psychotherapy*, 23(5): 407–15. doi: [10.1016/S0197-4556\(96\)00054-8](https://doi.org/10.1016/S0197-4556(96)00054-8)
- Rubin, J.A. (2011) *The Art of Art Therapy: What Every Art Therapist Needs to Know*, London: Routledge.
- Shooshtari, S., Abedi, M.R., Bahrami, M. and Samouei, R. (2018) Empowerment of women and mental health improvement with a preventive approach, *Journal of Education and Health Promotion*, 7: 31, doi: [10.4103/jehp.jehp\\_72\\_17](https://doi.org/10.4103/jehp.jehp_72_17).
- Silvy, J. and Vargas, M.A.S. (2016) Efficacy of positive cognitive intervention program on psychological distress among wives of alcoholics, *Indian Journal of Positive Psychology*, 7(4): 418.

- Sinha, P., Gupta, U., Singh, J. and Srivastava, A. (2017) Structural violence on women: an impediment to women empowerment, *Indian Journal of Community Medicine: Official Publication of Indian Association of Preventive & Social Medicine*, 42(3): 134, doi: [10.4103/ijcm.IJCM\\_276\\_15](https://doi.org/10.4103/ijcm.IJCM_276_15).
- Sunny, C. (2003) Domestic violence against women—report on a situational analysis in Ernakulum district, Kerala, *Social Change*, 33(1): 26–54. doi: [10.1177/004908570303300102](https://doi.org/10.1177/004908570303300102)
- Van Lith, T. (2016) Art therapy in mental health: a systematic review of approaches and practices, *The Arts in Psychotherapy*, 47: 9–22, doi: [10.1016/j.aip.2015.09.003](https://doi.org/10.1016/j.aip.2015.09.003).
- Vithya, V., Neethu, P.S. and Sudarsan, A. (2023) The impact of natural disaster on the mental health of rescue workers, in S.A. Babu (ed) *Fifth World Congress on Disaster Management: Volume IV*, Routledge, pp 455–65.
- Volkan, V.D. (2001) Individuals and societies as ‘perennial mourners’: their linking objects and public memorials, in B. Willock, L.C. Bohm and R.C. Curtis (ed) *On Deaths and Endings*, London: Routledge, pp 54–71.