

Expressive Arts Toolkit Manual

Collection of Toolkit Interventions for Teachers

A collaboration between the University of Memphis School of Social Work students and Dr. Susan Elswick, LCSW.

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2019 - Present

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How is Paint Therapy Delivered?

Painting:

Paint and other mediums are used on a blank canvas or piece of paper to create a unique piece of art.

Crayons/Chalk:

Creating effects using crayons/chalk to layer, blend, or draw memories.

Drawing/Illustrating:

Pens, pencils, or other colored mediums are used on paper to create whatever comes to mind.

Collaging:

Art created using images from magazines, personal pictures or other printed media to express emotions.

Founding Objects:

Using an object that has been found and creating it into an art piece using various craft materials.



Therapeutic Painting With a Twist

Painting For Prevention

The event will allow you to express yourself through paint! Clients can describe those undesirable feelings through paint that they otherwise wouldn't be able to discuss verbally.



The Benefits of Paint Therapy

There are several benefits associated with Paint Therapy:

- Assists clients in communicating their emotions nonverbally.
- Instills clients with self-appreciation, self-respect, and self-esteem.
- Encourages clients to build trust in a safe and inclusive environment.
- Assists clients in changing their perspectives and future outlook.

What is Paint Therapy?

Paint Therapy combines human development and psychological theories with visual arts to promote mental and emotional health.

Furthermore, Paint Therapy also promotes creativity and encourages clients to express themselves using a variety of art techniques and mediums.

Paint Therapy is used for a variety of age groups ranging from children and adolescents to adults with varying needs and abilities.



Movie Club 🎬

Susan Elswick

This intervention is a great way to assist clients with describing and processing their feelings and emotions in a less threatening manner. Through Created scripts, acting, and film making the client is able to use the movie characters as a metaphor for life and events causing them stress.

Materials Needed:

Camera

Paper

Pens

Set Materials and Costumes

Music

Computer



How To Do The Technique:

For this intervention, the client will be asked to identify a pressing issue in their current life. Once the issue is identified, the client will be asked to create a movie that would portray the feelings and emotions of this event. The clients are asked to create a movie theme, script, characters, costumes, etc. The client can also assign roles to others to complete this activity. The client will be the producer and the videographer. At the end of the movie development, everyone has an opportunity to view the finished product and the video can be shown in live screen and red carpet format.

Suggestions for Adapting the Technique:

This could be adapted in a manner that every individual client brings in a portion of the video. The collective group comes up with a movie idea, and each individual member creates a section of the movie in their own perspective. The end result is a compilation of all the videos spliced together that results in one story or message.

Trauma Diary Activities

Daphne McKee

Description:

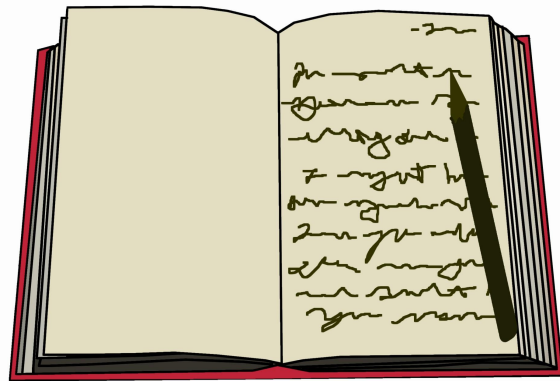
This intervention is a way that people, especially young people, who are not willing or able to communicate their trauma histories to adults, can record and make sense of their experiences in a way that;

- Makes sense to them,
- Moves at their own pace of comfort,
- Helps them develop communication skills and personal expression,
- Helps themes to easily see and understand how much they have progressed or regressed in therapy,
- A counselor or social worker can easily adapt to their individual needs, and

- Kids can share with new social workers or counselors as needed, so that they do not have to re-explain and relive these issues to new staff in environments that potentially have high staff turnover.

Materials Needed:

- Blank journal or pad of paper without lines
- Writing supplies
- Drawing supplies



How To Do The Intervention:

A kid receives a blank journal in which to record their trauma histories. Either in sessions or on their own, the kid records traumatic incidents that have warranted the therapeutic intervention. A counselor or social worker provides a few guiding questions, including but not limited to:

1. What happened?
2. How has this incident or situation affected your life today?
3. How much of this incident could you control, and how much of it was outside of your control? (For youth who have experienced traumatic incidents that others incorrectly blamed them for, or for youth who have difficulty understanding the consequences of their actions. The counselor or social worker would have to be extremely careful with this question and adapt it accordingly.)
4. What can you learn from this incident? (If adults, peers, or other trusted people did not help the kid at the time of the traumatic incident, the kid might be interested in exploring what they might do as an adult or a peer for another kid in the same situation. This requires maturity and the kid's own desire to explore this question.)

Over time, youth can add details to these accounts as they gain a better understanding of these questions. They can also organize incidents into chapters based on chronology or by topic in order to explore how incidents relate to one another.

How to Modify This Intervention For Kids With Special Needs:

- Youth who are less verbal (especially while revisiting traumatic incidents) or who have learning disabilities for writing can start with drawing pictures or making paintings describing their feelings at the time of the incident. Over time, the counselor or social worker would ideally help them to add written details as they progress.
- Youth may be disclosing information protected by HIPPA which would hinder their getting a free and appropriate public education if other teachers or peers knew. The school social worker would have to be careful with this document, and might offer to lock it in a drawer.

Data Collection Methods For Monitoring Progress:

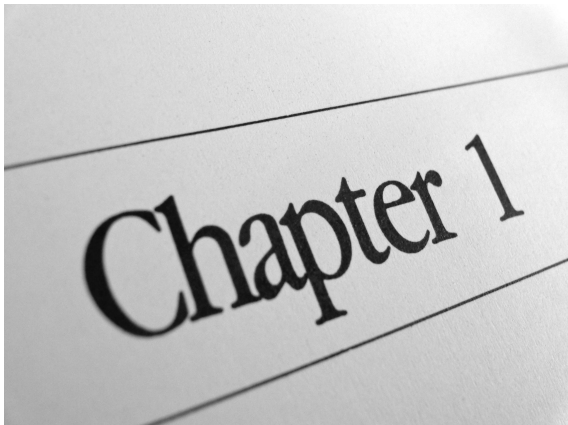
- Use measurement tools such as Children's Depression Inventory, Generalized Anxiety Disorder 7-item scale, using clickers to count incidence of disruptive or emotionally aggrieved behaviors in class, or other tools such as pre-tests, mid-interventions tests, and post-tests.
- Use the school's archival data on attendance, suspensions, tardiness, law enforcement calls, etc.



“Chapters”

Daphne McKee

Description:



This intervention is to improve emotional regulation, situational awareness, and empathy skills. This intervention is geared specifically towards children who struggle with getting in verbal and/or physical fights. However, it can be adapted for people of various ages who need to reflect

upon a particular incident and mine it for understanding. This activity was implemented with third and fourth graders who were frequently in trouble. It was found that many of these students did not understand what behaviors they were in trouble for. This activity was productive because they gained clarity on exactly what they were doing and exactly where they could have acted differently.

Materials Needed:

- Paper or Whiteboard
- Crayons or Markers

How to Implement This Intervention:

In the immediate aftermath of an argument or fight, the clinician says to the child, “Tell me what happened.” The child typically spills a tangle of words about what another person did. Rather than verbally demand, “But what did YOU DO?”, the clinician can prod the child to break the incident down into “chapters.” The clinician could ask questions like, “What exactly did he say? And what happened before that? What exactly happened before that? What were the words you used then?” Over the course of a conversation, the clinician helps the child to identify “Chapter 1”, “Chapter 2”, etc. of the fight, argument, or other incident. These “chapters” are typically 1-2 sentences. The next step is to draw small arrows next to each chapter

that go up, go down, or stay level in order to identify if the situation was escalating, de-escalating, or neither at each step.

(If the clinician and the child have time, the clinician can prod the child to identify how each person in this situation felt during each chapter. The child can then draw a simple facial expression for each chapter.)

Once all of the chapters are on paper, *then* the child (with the clinician's help) can more easily point to where the situation began to get out of control, where the child could have used their coping skills, where their peers could have used coping skills, etc.

How to Adapt This Activity:

For students whose reading skills are still elementary enough that it slows down the activity, the child can use stick figures or just jot down a few words for notes.

Students on the autism spectrum might need to break their stories down into more chapters with more exhaustive detail in order to understand their situations.

Students with language barriers can do this activity with the help of a staff member or peer who translates the sections. Students with ADHD/ADD can take breaks or use fidget spinners, etc. as necessary through the activity.

Collecting Data:

The social worker can evaluate this intervention in the immediate moment with an individual student by observing the student's behavior when they return to class. Do they immediately get back into an argument? How do they get along with the other students or staff involved in the earlier conflict? Are they able to engage with the class? There are a lot of extenuating factors affecting these outcomes, but the social worker should still collect qualitative data on the immediate effects of the individual's behavior.

If the social worker does this activity regularly with a student in sessions, the social workers can evaluate the intervention through archival data. This data includes the frequency of suspensions, student's referrals to behavioral staff/law enforcement, etc. The social worker should establish a baseline for these types of occurrences. Identify a control group of students, and compare the results to the baseline established before the use of this intervention.

“Who Am I?” Identity Workshop

Ebony James

Intervention Details:

The “Who Am I?” Identity Workshop will be a half-day intervention program during the school day, with the purpose of helping students gain an understanding of their identity and identity expression. Students will engage in self-exploratory activities to gain insight into their own identity. During this workshop, students will learn about their multiple identities as an individual (age, gender, religion/spirituality, socioeconomic status, race/ethnicity, and sexual orientation) and their identity in a group. They will explore their interests, strengths, qualities, learning styles, and how to introduce themselves. There will be several hands-on activities throughout the duration of the workshop for students to get involved and learn more about their individual and social identity.

Materials:

- Paper
- Pens/Pencils
- Crayons/Markers/Colored Pencils
- Chart Paper
- Music
- Laptop/Desktop Computer

- Activity Handouts

Handouts & Other Information

Needed:

- The Feeling Wheel
- Student Interest Inventory
- Strengths & Qualities Worksheet
- Would You Rather Activity

Method:

The workshop will be held by grade level. Several sessions per grade level may be needed based on the number of students per grade.

Staff & Workshop Introduction (10 Min)

First, introductions will be made of the workshop staff and other important and supportive personnel. Students will be given the purpose of the workshop and

asked to think about what identity means to them. We will have 3-5 students share about what identity means to them and this will serve as the ice breaker.

Student Pre-Introductions (10 Min)

Students will then be asked to get in groups of 4-8 (based on grade level) and introduce themselves to the other group members. We will then share some of the responses people provided during their introductions. What are some similarities and differences that the groups heard? Students will be given 1 minute each to give their introduction. Next, the activities will begin.

Pre-Activity

Students will be provided with several handouts in a folder that they can keep. The handouts will be used throughout the workshop to assist them in the activities. Students will be provided time before activities to complete certain handouts.

Activity 1 (20 Min): Describe Yourself

In activity 1, each student will be provided with chart paper and coloring materials to use to describe themselves. Using words, pictures, etc., students can describe who they are and what they represent. There will be examples around the room to assist the students who do not know where to begin.

Activity 2 (20 Min): Group/Social Identity

The students will hear a 5-10 minute presentation on what group identity is and what that looks like. They will then play a game called 4 corners. There will be 4 corners of the room sectioned off. The presenter will call out different things about a group and if students identify with that group they will leave the center of the room and move to the corner they identify with. The students must choose the corner they identify with the most. Students will also complete a worksheet to identify which groups they belong to.

Activity 3 (20 Min): Life Map

Students will be responsible for completing a life map. They can begin from when they were born to important events in their life, and they will be responsible for

ending the life map with a future goal. For example, middle schoolers can put, “Upon middle school promotion, I would like to attend _____ High School and take AP classes.” A high schooler may say, “After graduation, I would like to go to the military,” or “I would like to attend _____ University and receive a Biology degree.” Life maps will be pre-designed for individuals who may require assistance or who need extended time. Students will be encouraged to display their maps around the room and share, if willing.

Activity 5 (45 Min): Post Introductions a.k.a. “The Elevator Pitch”

The whole group, after all of the activities are complete, will learn about the Elevator Pitch. Then they will have an opportunity to create their own and introduce themselves once more using the skills and information they have gained from the workshop.

Close-Out & Dismissal (10 Min)

Adaptations/Modifications/Accommodations:

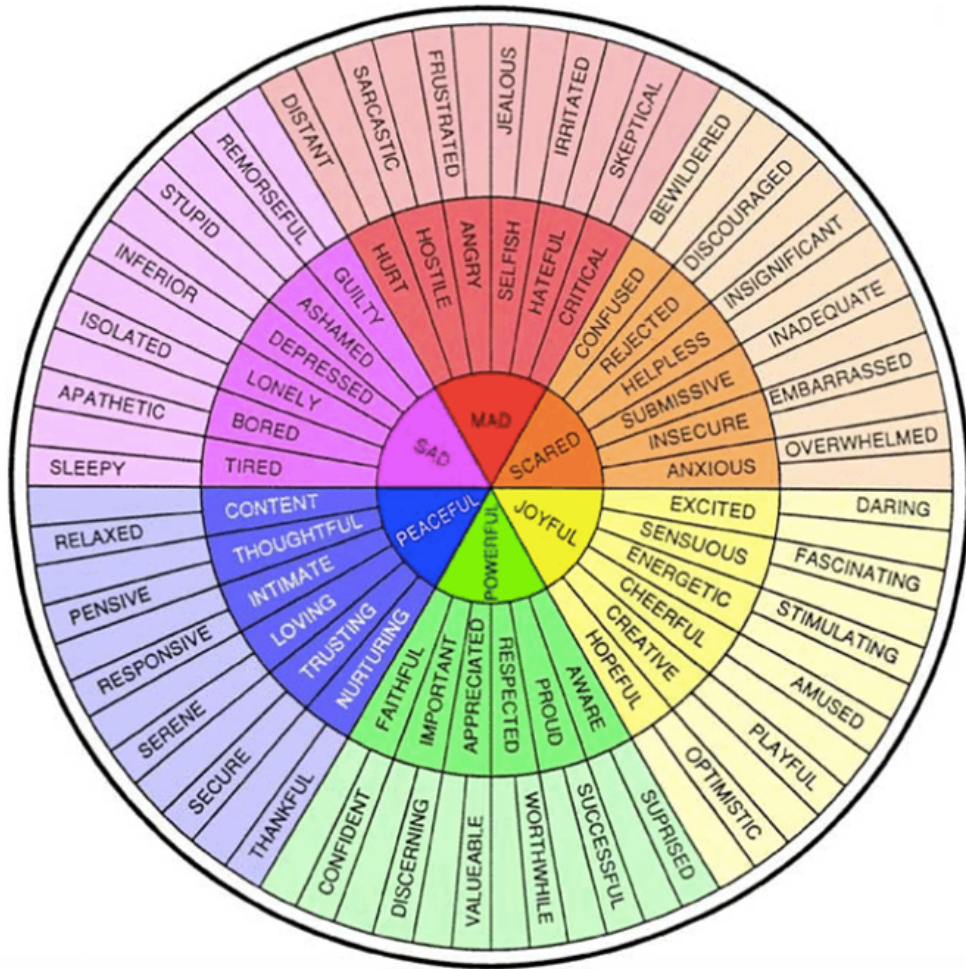
The intervention can be adapted to students with special needs or other populations by providing the following modifications and accommodations:

- Extended Time for Activities
- Pre-Made Resources
- Prompting Questions
- Hands-On Activities/Movement
- Color Coded Documents
- The Use of Technology
- Peer Helper

There will also be individuals walking around to help monitor, guide, and assist students as needed.

The Feeling Wheel

The Feeling Wheel is to help you pick an adjective to accurately describe your feelings. For example, if you are feeling happy or joyful, you will look at the colors in yellow to find an adjective that may more accurately describe your feelings.



Student Interest Inventory

Name:

Birthdate:

I was born in _____(City), _____(State), _____(Country).

Parent(s)/Guardian(s) Name:

Cell Number:

Work Number:

Parent Email:

Sports:

My favorite sport to watch is:

My favorite sport to play is:

At my school, I play:

Arts:

My favorite type of art to create is:

I play this instrument:

Free Time:

My favorite things to do on the weekends are:

My favorite things to do after school are:

Entertainment:

My favorite television show is:

My favorite movie is:

My favorite type of music is:

General:

The thing I like most about myself is:

The thing I like least about myself is:

The thing I do best is:

The thing I do the worst is:

Family and Home:

I have these types of pets:

I have _____ brothers and _____ sisters.

I am the (oldest, middle, youngest).
(Circle one)

I usually go to bed at this time:

I have these chores to do at home:

I work this many hours per week at a job:

Homework:

I like to do homework: Yes No

I like to eat when I study: Yes No

I like to listen to music when I study: Yes No

Background noise bothers me when I study: Yes No

Classroom:

These two rules are important to me in a classroom:

1.

2.

School:

I like to read on my own: Yes No

My favorite book is:

My favorite subject is:

My least favorite subject is:

I need to be told to stay on task (often, sometimes, or never).

I prefer working (with a partner, in small groups, or by myself).

I work harder when I know I will be graded: Yes No

I am comfortable asking for help when I need it: Yes No

I pay attention best when I (sit up front, sit in the back, it doesn't matter).

When I grow up, I want to be:

Overall, I like school: Yes No

Learning Style Inventory

Circle two numbers that best describe you:

1. I LIKE words. I am sensitive to sounds, structures, meanings, and functions of words. I enjoy storytelling, writing, reading, jokes, puns, and riddles.
2. I LIKE numbers. I can easily pick up on numerical patterns. I can easily complete calculations in my head. I like step-by-step instructions.
3. I LIKE images or pictures. I sometimes daydream and I have artistic, designer, or inventive qualities.
4. I LIKE music. I appreciate musical expressions such as rhythm and melody. Music can make me animated or calm me.
5. I LIKE to be physical and hands on. I am good at athletics.
6. I LIKE to be around people. I like to teach others and can read other people's moods, temperaments, and motivations.
7. I LIKE solitary activities. I understand my feelings and I am self-motivated and strong willed.
8. I LIKE nature. I can pick up on patterns in nature. I enjoy being outdoors. I like studying scientific topics.

I learn best by (hearing the information, seeing information, or doing activities with my hands). (Circle One)

Strengths and Qualities Worksheet

Activites	Very Good	Good	Not So Good
Playing Sports			
Gardening			
Making Friends			
Remembering Things			
Math			
Playing a Musical Instrument			
Being Responsible			
Learning New Things			
Talking to People			
Working on Machines			
Cooking			
Listening to Others			
Being Able to Work as Part of a Team			
Following Directions			
Being Friendly			
Speaking in Front of People			
Working Without Supervision			
Designing Things			
Working With Animals			
Photography			
Running/ Jogging			

Would You Rather Activity

Sit with a partner. Each partner should answer. Try to explain why.

1. Would you rather eat cake, ice cream, or a piece of chocolate right now?

Sample answer... "I would rather have ice cream now because it is hot outside and I just like ice cream better than cake and chocolate. I'd want chocolate ice cream. What about you? What would you rather have?"
2. Would you rather live in a big city or in a small town?
3. Would you rather spend a year in Japan, Switzerland, or the USA?
4. Would you rather take a vacation in South America or Africa?
5. Would you rather be invisible whenever you wanted or have the ability to fly?
6. Would you rather have coffee, tea, or juice at the moment?
7. Would you rather take a course in Chinese, Swahili, Italian, or Hindi?
8. Would you rather know Japanese, Spanish, or German?
9. What would you rather be doing right now (than sitting here in this workshop)?

Crazy Schedule, Sane You!

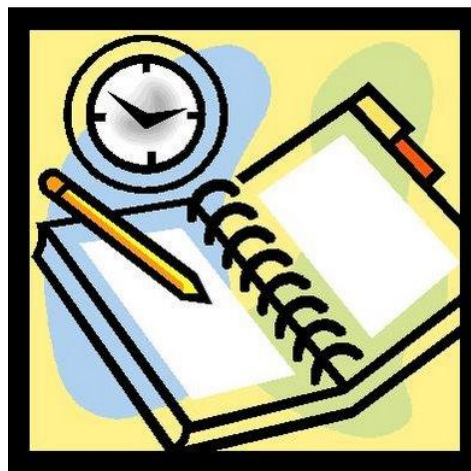
Jasmine S. King

Description of the Intervention:

This particular intervention has been designed for persons who experience anxiety and mood fluctuations on a daily basis due to schedules or routines that may have a hectic, rapid, fast paced, or overwhelming amount of activity. This intervention is beneficial to clients for the purpose of completion, self-reflection, reassurance, and self-appreciation. It allows clients to see their progress, completion, or how they could improve the use of their time or even decrease some activity. The twelve pictures of the client are added as a highlighter and reminder to self that though you have experienced the many tasks, events, and activities this month, you can still smile because YOU completed them. In conclusion, the client can carry on into the next month of activities on a positive and prosperous level.

Materials Needed:

- Calendar/Planner
- Writing Utensils; Preferably a Pen
- Highlighters/Pens of Multiple Colors
- Camera
- Printer
- 12 Pictures of You; Alone and Smiling
- Small Stickers



How to Use the Intervention or Technique:

Every time you get a new task or assignment, write the due date or the date it will occur along with the time in your calendar or planner on that particular slot. At the beginning of each month, take and insert a picture of you, alone and smiling. Place that picture at the beginning of the next month in your calendar or planner. The smile that helped you through last month will also assist you through the next month.

Suggestions or Ways to Adapt The Intervention to Students With Special Needs/Other Populations:

- Search resources or persons that can assist you with writing if you are unable to write or see.
- Use your phone for voice recognition into your phone calendar.
- Decorate your planner.
- Use multiple colored utensils to identify a specific task, factor, or duty.
- Place your calendar or planner in a designated or private place for your everyday access.

Flat Game

Tamika

This intervention is a great way to interact with your peers. Flat intervention will help with their teamwork skills by secretly communicating with each other when they have four matching cards.

Materials:

- A Deck of Cards
- A Table
- Chairs

Description of the Technique:

For this intervention, each team will have choose a nonverbal signal to use when

they both have four matching cards. Teams will sit across from each other so the other teammate will be able to see the signal. Each member will be dealt four playing cards and there will be four dealt on the table face up so each player can swap one card out. If no swaps are made during each deal, the cards will be put away and no one will be able to use them anymore. Whenever a team calls “FLAT” their partner should have four matching cards and the team will get a point.

Suggestions for Adapting the Technique:

This could be adapted in a manner that every student interacts with each other and learns to work together as a team. Secretly communicating, giving each other nonverbal signals, is a great way to gain teamwork skills.



to

Guided Meditation

Alexa Tracy

Description

This intervention is for emotionally disturbed children or students with behavioral issues. It also works great for calming a classroom before a big activity. Guided meditation helps students to become empowered, learn mindfulness, and stay in-tune with their body, thoughts, and feelings. Through guided meditation, students will learn how to channel peace whenever they are feeling stressed in their environment.

Materials Needed:

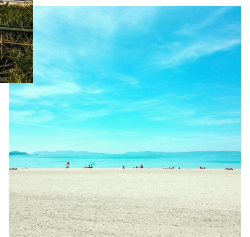
- A Meditation Script
- Calming Music
- Yoga Mats or Carpet (Optional)



How to do the Technique:

To begin, turn the lights in the classroom off. Have your children lay on the floor or sit in a comfortable position. Turn on your choice of meditation music or nature sounds. State the following sentences slowly and calmly. The following is an example of a script:

1. Relax your body. Take a deep breath in through your nose and out through your mouth. Take another deep breath in, and let it out.
2. When you are ready, I want you to picture your favorite place that makes you feel calm. This could be your room, the beach, a quiet forest, or anywhere that makes you feel peaceful. Take in the air with another deep breath and let it out.



3. Use your imagination to look at your surroundings. What do you see? What do you hear? Who are you with? Answer these questions in your mind.
4. Place your hand on your heart. How does your heart feel in your special place? Wouldn't it be nice if you could feel this way all of the time? Well, you can!
5. Place your hands on your belly. I want you to breathe in all the goodness of your special place. Your belly should expand like a balloon. And release your balloon by breathing out of your mouth. Watch your balloon float away.
6. I want you to tense up your body, from head to toe. Slowly release all of your muscles, one by one.
7. Take a last look around your favorite place. Know that you can come back anytime you feel sad, lonely, or stressed.
8. Make sure all of your muscles are relaxed. Finally, take one last deep and long breath.
9. When you are ready, slowly open your eyes and return to your classroom.

Suggestions for Adapting the Technique:

This could be adapted in a lot of different ways. Social workers can make different themes up for guided meditation, such as a trip to your own spot on the moon or an underwater adventure. It can be modified by intensity based on age and developmental stage. There are also many websites and podcasts that can help a therapist get started. One podcast to try is "Peace Out - Relaxation and Mindfulness Stories for Kids". You can also find a lot of useful content on YouTube by typing in "Guided Meditation for Children".

Beads For Healing

Mary Elizabeth Hearn

The intervention used for this project is a great activity to be implemented with children who experience anxiety, depression, emotional problems, and behavioral issues as a result of experiencing one or more traumatic events in his/her lifetime. This intervention works to assist children in discovering effective and healthy coping skills, as well as their personal strengths. Another goal of this intervention is to help children alter their negative and maladaptive thoughts about themselves that resulted from the trauma they experienced. By developing appropriate coping skills and focusing on individual strengths, children will have the ability to begin to see themselves in a positive light and as survivors of trauma. Building individualized and effective coping skills will ultimately work to decrease a child's behavioral and emotional outbursts when faced with a trauma reminder. The group is used for children 11 to 15 years of age. The ideal group number is 6-8.

Materials Needed:

- Yarn
- Colorful Beads
- Scissors
- Journal
- Pen

Description of How to do the Technique:

This intervention will take place in a group setting with six to eight students. Each student will be given a long piece of yarn that will eventually be made into a necklace. The long string of yarn represents the most significant trauma experienced by each individual student. The social worker will then ask the students to each identify a traumatic experience that has had the most significant impact on his/her life. After the students have identified a traumatic event, the social worker will ask them to write about their trauma experience in their journal. When writing in their journals, students will describe the trauma event they

experienced as well as negative beliefs about themselves that developed as a result of the adverse experience. After the students are finished writing in their journals, the social worker will encourage the students to share with the group what they have written about the experience and the negative thoughts they hold about themselves due to the trauma. The social worker will give the students the option to not share with the group if they do not feel comfortable speaking about their traumatic experience.

The social worker will next provide the students colorful beads that represent coping/relaxation skills as well as individual strengths. Students will use beads to identify skills, activities, and techniques that help reduce high levels of arousal and emotional distress when coming into contact with a trauma reminder or memory. Students will also use the beads to identify their personal strengths. Each bead represents one coping/relaxation skill or one personal strength. Common coping/relaxation skills entail deep breathing exercises, muscle relaxation, exercising, drawing, imagery, meditation, and journaling. Common strengths students might identify with are courageous, strong, kind, honest, determined, resilient, smart, and creative. Each student will choose a different color bead for each strength and coping/relaxation skill. Students write in their journal the color bead they chose to associate with a specific individualized strength or coping/relaxation skill. Once the students associate a color bead with a strength or coping/relaxation skill, the students will place the bead on their string and begin making their necklace.

After the students complete their necklace, the social worker will ask each student to share with the group the strength and coping/relaxation skill associated with each color bead. Students will have the opportunity to take their necklaces home and wear them as a reminder of their strengths and effective coping/relaxation skills. By addressing the experienced trauma and associated maladaptive thoughts with the group, students can begin to alter their thoughts to be positive and see themselves as survivors of trauma. By identifying individual strengths, the children are able to feel empowered and resilient.

Suggestions for Adapting the Technique with Special Needs Population:

This intervention can be adapted to be beneficial for students with special needs. For the students' safety, the social worker would not provide beads to the students in case a child attempts to swallow them. Instead, the social worker would have the students draw a long string in their journal representing the traumatic event that

has had the largest impact on them. The students are encouraged to write in their journals about the traumatic event and share their story with the group. The students will draw beads on their string within the journal representing individual strengths they possess and coping/relaxation skills they enjoy using when facing a memory of the trauma. The students will be encouraged to share the strengths or coping/relaxation skills associated with each bead to the group. Because the students with special needs are not making a necklace they can wear, the social worker will give the students a large piece of white paper and ask the students to draw a picture of themselves with their necklaces on. The social worker will give the students these drawings so that the students can look at it and be reminded of their strengths and coping/relaxation skills. The ideal number of children involved in this group is 3-5.

Materials Needed for Adaptation with Special Needs Population:

- Journal
- Crayons
- Large white sheet of paper
- Pencil

Measuring Techniques:

In order to determine the level of effectiveness of this intervention, the students' classroom teachers will be given a child behavior rating scale in order to see if the intervention has improved the students' emotional and behavioral problems. The scale measures a child's behavior daily and ranges from 1 (no instances of behavioral or emotional issues) to 5 (five or more behavioral or emotional outburst). Before the intervention is implemented, the teachers will need to use the child behavior scale for a week in order to determine a child's baseline behavior. The classroom teachers will measure all students' behaviors daily for two weeks after the intervention has been completed. The social worker will take the baseline data and compare the results against the data that is collected for two weeks after the intervention is implemented.

Child Behavior Chart For Teacher

Child's Name:

Date:	Amount of Child's Behavior/ Emotional Outburst Per Day Before Intervention (Circle One)	Amount of Child's Behavior/ Emotional Outburst Per Day After Intervention (Circle One)
Monday	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts
Tuesday	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts
Wednesday	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts
Thursday	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts
Friday	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts	1: None 2: 1 Emotional Outburst 3: 2-3 Emotional Outbursts 4: 4 Emotional Outbursts 5: 5+ Emotional Outbursts

Feeling in Color

Shannon Hudson

This intervention is an artistic way of assisting clients in thinking about the complexity of their feelings and how they might impact the experience in the classroom. Through labeling individual feelings with color, then creating mosaics from these colors, the client will be mapping their complex inner worlds in order to gain clarity; therefore, this exercise is a valuable tool in teaching the client how to accommodate multiple emotions at once. The overall goal of this intervention is to increase the felt sense in the body.

Materials Needed:

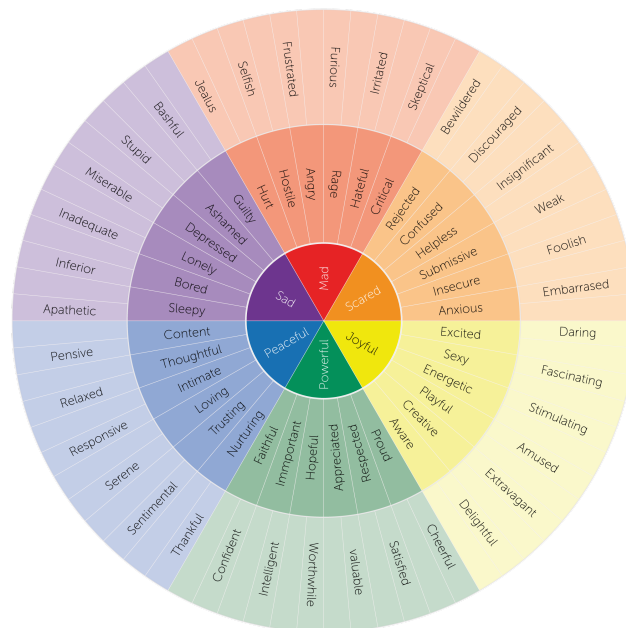
- Colored Tissue Paper in a Wide Range of Colors
- A Journal
- Mod Podge or Another Decoupage
- A Paint Brush

Description of How to do The

Technique:

To start, the client will make a feelings key on the first page of their journal.

The client will begin by listing the emotions they are familiar with, followed by assigning a color to each. They will tear a small swatch from each tissue paper that coordinates and glue it under the emotion. It might be helpful to begin the body of this exercise with a few deep breaths. Once settled, they will be asked to think through their day and to identify any obvious emotions that arise. The client will be encouraged to write about their experience, big or small, or to simply write the name of the most glaring feeling(s) they experienced that day. Paint the decoupage on the blank journal page. Tear the paper and place it on the page, representing



however much of the feeling they may have felt. Paint one coat of decoupage on top of the tissue paper and let dry.

Suggestions For Adapting The Technique:

If the client is unable to produce feelings or is unable to communicate them, the intervention could be adapted to still include the client within the somatic nature of the activity. The client could simply pick his favorite colors and create without a plan.

How to Track Progress:

The increased or decreased skill in communicating feelings would be evidenced over time in the ebbs and flows of what is being created throughout the journal.

Intervention to End Student Hunger

Nedra Stratton

Description:

This intervention will serve to provide students access to food who exhibit signs of hunger at school. This grant or school fundraiser funded program will distribute a selection of healthy food options to children, free of charge, who show effects from hunger during the school day. This problem affects children who may not be able to concentrate in the classroom. Effects of hunger are shown by students who complain of illness, who act out in class, or who fall asleep in the classroom. Sometimes children arrive late to school and miss the breakfast period before the cafeteria closes. Furthermore, in schools where there is not a free lunch program, some children do not have the funds to pay for breakfast or lunch. There may also be times that some children do not have sufficient options/portions for lunch and may leave the lunch room still hungry. Very often, children experience hunger at the end of the school day from having an early lunch period. All of the issues may lead to the child disengaging from classroom instruction. Hungry children do not learn as well as children who are well nourished.

Materials Needed:

- Mini Refrigerator (Optional)
- Fresh Fruit/Fruit Cups
- Bottles Water
- Ultra High-Temperature Pasteurized Milk (non refrigerated)
- Pretzels/Healthy Chips
- Granola Bars/Cereal Bars
- Yogurt/Cheese
- Crackers



- Organic Non Perishable Meals
- Logbook

Description of How To Do Technique:

Administrator/Teachers: Inform faculty that there is a food pantry located in the social workers office. Brief them on the necessity of the food pantry. Educate teachers on what to look for in students in their classrooms who may be displaying signs related to hunger. Establish a policy that if the student arrives at school late and has not had breakfast, they need to go to the social workers office for a quick breakfast alternative.

Parent/Family: Have a school-wide meeting with parents, educate them on the effects that hunger has on their children in school. Inform them of the school's practices regarding hungry children. Comfort their reservations by explaining that this program is for their child's benefit and does not reflect on their parenting. Allow the parents to opt-out if they prefer their child not participate. Advise parents/guardians that if they opt-out and their child comes to school hungry on a regular basis, there will be a meeting to discuss hunger-related issues affecting their child.

Students: When a child displays signs of hunger, send them to the school social workers office. Allow them to choose 2-3 items for nourishment. Designate a place for the child to complete their meal. When finished, send the child to class with an excuse note.

Signs of Hunger:

- Students say that they have not eaten today.
- Students complain of a stomach ache.
- Students complain of a headache.
- Students cannot focus or concentrate.
- Students act out in class (anger, sadness, irritability, withdrawal).
- Students appear tired or display low energy.

Suggestions for Adapting the Technique:

This can be a school-wide program for all children rather than a problem-focused program for some children. Making it a school-wide program takes the attention away from the children who are always in the social worker's office for food. It makes the child's personal issues less obvious to other student's awareness, which may be embarrassing for some students. In the case of a school-wide program, the school can employ a morning and evening snack session to keep their students from experiencing hunger during the school day.

Recordkeeping:

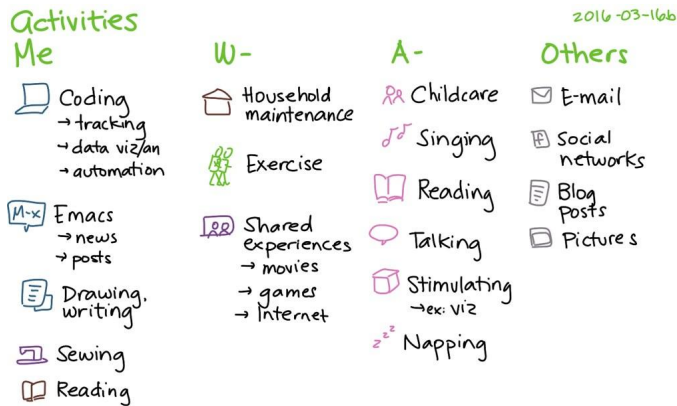
Keep a log of every child who receives items. Maintain an inventory. Re-order food as needed. Keep an expenditure log for reporting and auditing.

Data Collection/Evaluation:

Use the data from recordkeeping regarding student participation. Follow-up with teachers about the behavioral changes in the students who have accessed the program. This will be conducted through teacher observation and interaction with the student(s). Ask if they have noticed any changes in the student(s) since the implementation of the program (positive/negative). Consider changes in actual behavioral tendencies in the classroom after having access to the meals. Also use the students' grades to determine if there is a change in classroom performance and outcomes after accessing the program. Record findings and keep an on-going history of the findings. Report findings and updates to Administration and Parents, annually at a minimum.

Activity Hunting

Tyler Johnson



This intervention is a great way to help clients connect with others through similar hobbies, activity likings and interesting conversation that will help them get through a possible depression stage either during family separation, personal doubts or academic struggles.

Through providing lists of sports they are interested in, performing arts that they enjoy, arts and crafts, collections and common favorites they may have. The client is able to use the new friends they will make to help them have fun and enjoy an environment that will help them cope with their depression.

Materials Needed:

- Survey
- Music
- Timer
- Colored Bands
- Sports Equipment
- Art Supplies
- Performance Art Equipment and Materials

Description of How to do Technique:

For this intervention the client will be asked to pick a colored wrist band to wear along with filling out a survey to bring to their assorted group. The survey will ask ten questions about what kinds of activities they enjoy, favorite sport team, and hobbies, etc. They will then read each survey out loud with their group members. Based on the survey they will find someone or a group of people who have similar

interests. They will have ten minutes to enjoy anything that is provided or may use that time to just talk and get to know one another. After the time is up they will proceed to a different color group to find another partner or group of kids that hold the same interest. They will proceed to switch around for a total of three times. At the end of the intervention, everyone will have the opportunity to exchange personal information so they can stay in contact, and this is when we encourage them to plan future arrangements to meet up and spend time with their new friends.

Suggestions for Adapting the Technique:

This could be adapted in a manner that every individual can bring one thing that they believe represents relaxation or something fun. As a group, they will be able to comment on things that might seem interesting to them. The end result is finding friends who share the same interests and finding connections.

Links That Make Me

Paula Hughes

This intervention is a great way for young clients to identify all of the positive attributes the client has. This will assist the client in building self-worth and self-esteem within themselves.

Materials Needed:

- Strips of Paper (recommend various colors)
- Glue Stick
- A Marker



Description of How to do the Technique:

For this intervention, the client will be asked to identify all the positive things he/she can think of about himself/herself. For every feature listed, write it on a strip of paper. Then link the strips of paper together to make a chain. Once the chain is complete, let the client tell you about their links. When completed, the chain can be hung around the room to remind the client of all the good things about himself/herself.

Suggestions for Adapting the Technique:

This could be adapted in a manner that several clients can work together to tell the positive attributes of the group. The collective group works together to form a single chain to hang around the room. This would still provide the same message, just on a bigger scale.

Additional Information:

Allow clients to include anything that appeals to the client. For example, physical abilities, personality traits, and personal values. You should be able to measure the success of the intervention with the client by the success of the chain that he/she made.

Let's Relax!

Alia D. Mitchell

This intervention is a great way to assist clients with easing tension, calming worries, and decreasing edginess. Relaxation is a good technique that allows those that have experienced previous traumas to free their minds and focus on themselves rather than other stressors. This activity is targeted for teenagers (age 13-18 years old) and can be completed either in the home or in the presence of the therapist/trained professional.



Materials Needed:

- Comfortable Room (with carpet or yoga mat)
- Paper
- Pens
- Clay (at least two per person)
- Music
- Chairs

Description of How to do Technique:

For this intervention, the client will be asked to sit comfortably in their chair with their arms at their sides and their feet planted on the floor. While this is occurring, the therapist will have soft music playing in the background to assist with comfort. The client will close their eyes or look down at the ground while you do this exercise. The client will place a ball of clay in their right hand and will squeeze the ball of clay as hard as they can. While the client is squeezing, they will feel how tight the muscles of their hands and arms are. The client will count to five as they squeeze, then drop the ball of clay and let their hands hang loose. After this, the client will feel the difference in the muscles of their hands and arm when they are relaxed. The client will repeat to themselves, "My hands are relaxed." The client will

do the same thing with their left hand. This can also be done with all the parts of your body one at a time or all at the same time (the therapist can assist with this). Make sure it is based on comfort for the client and try not to forget to include all of their muscle groups (arms, feet, legs, stomach, back, chest, shoulders, and face).

Suggestions for Adapting the Technique:

After this is completed, the client will take a piece of paper and fold it in half. On the left side of the paper, the client will draw a photo of how they visualize themselves looking when they are tense, on edge, or stressed. On the right side of the folded paper, the client will draw themselves on how they visualize them looking when they are relaxed and stress free. To complete this assignment, the client will be allowed 5-10 minutes. After this is completed, the therapist or trained professional will discuss the photos with the client.

This assignment can also be completed in the home. It is best that the therapist or trained professional thoroughly explains the exercise with the parent/guardian to ensure that they are aware of why this is important and what benefits can come from it.

The Emotional Popsicle

Jasmine M Hill

For this intervention activity, students will be given popsicle sticks that will vary in colors upon coloring. Each colored popsicle stick stands for a different emotion that can be displayed physically. This will help students control their behavior inside or outside of the classroom.

Materials Needed:

- 1 Bag of Popsicle Sticks
- Scissors
- Pens
- Markers
- Crayons
- Multi-Colored Construction Paper



Description of Intervention:

For this intervention activity, students will be given five popsicle sticks that will vary in color, one sheet of construction paper to make the share of a popsicle, one pen, and their choice of crayons or markers. Each colored popsicle stands for a different behavior or emotion that can be displayed physically. The students will write coping skills on the back of the popsicle. The popsicle will indicate to the teacher that the child is having issues while also providing helpful coping tips on how to change their emotion or behavior. This will help students learn to control and identify their negative or positive behavior inside or outside the classroom. The popsicle stick description will go as follows:

1. Every **RED** popsicle stick reminds the teacher that you are angry during class.
2. Every **GREEN** popsicle stick shows the teacher that you are practicing self-control and in a green mood.

3. Every **ORANGE** popsicle stick tells the teacher that you are frustrated, and it is becoming difficult to practice self-control and you are becoming heated.
4. Every **YELLOW** popsicle stick tells the teacher you are emotional. (sad, jealous, grief, etc.)
5. Every **BROWN** popsicle stick tells the teacher you prefer to be excluded from the class or activity.

Suggestions for Adapting the Technique:

This intervention can be used by any student. Each student can design their own popsicle sticks and track their own progress. Each student can share their negative or positive reactions. The end results can give each student a description of how to practice and maintain self-control inside or outside the classroom. Teachers should be notified of the 5 assorted colors students will display. This will assist the teacher with solving conflicts before they get out of hand.

Additional Information:

Progress will be reported through the conduct system of the classroom. The colors of the popsicles are also the colors that educators use to indicate conduct.

E-Green, S-Yellow, N-Orange, and U-Red. Conduct is recorded daily, so progress can be shown weekly.

No Place For Bullying

Latonya Harris

This intervention is a great way to help children realize what bullying looks like and how to take the proper steps to stop, walk, and talk. It also shows the student that they are fully supported by different professionals within the school. This play is created and directed by students and professionals. The goal is that this play is sown into the mindset of children experiencing bullying and to cause them to act. This is a non-harmful and play therapy way through bibliotherapy and stage play of helping children know that if they experience bullying that there is a way to prevent or stop it all together. Through created scripts, acting, and film, the students learn ways to combat bullying.



Materials Needed:

- Camera
- Playground Settings
- Music
- Lighting
- Book Related to Bullying (Bibliotherapy)

Description of How to Do Technique:

For this intervention, there will be a teacher, nurse, school worker, or even student reading the narrative from the book related to bullying. The intervention will be the stop, talk, and walk method. The setting will resemble either a playground or a classroom setting. A teacher will record the play for use for assignments in the future. A bright camera will be used to highlight the characters in the stage play. In addition, music will play to make the play alive and project the mood of the child.

The chosen reader will read through the book while the children play out the scene. This kind of stage play will take several practices to perfect.

Suggestions for Adapting the Technique:

The children chosen to be in the play will be those who are already friends or have positive relationships with one another. The process of choosing will be very careful as not to pair students who have experienced bullying from one another. This could be adapted in a manner that every individual client brings in a portion of a video. The collective group comes up with a movie idea, and each individual member creates a section of the movie in their own perspective. The end result is a compilation of all the videos spliced together that result in one story or message.

Kindness Ornaments

Laura McCormick

These kindness ornaments were originally created as an intervention called Kindness Hearts, by Carol Miller. This intervention is a wonderful way to encourage a small group to maintain positivity in their lives and to lift up their peers in positive ways as well. Students are able to express encouraging words to their peers, while receiving the same in return. This helps to build group rapport, and it may allow students to see themselves in a different, more positive light.

Materials Needed:

- Cardstock (any desired color)
- Notebook Paper
- Pens or Pencils
- Sharpies
- Small Brads
- Scissors
- Hole Punch
- Ribbon or Yarn



Steps for Intervention:

Ensure students are working in small groups, around 4-6 students (this intervention can work with as few as 2, but the students would simply complete the positive attribute sheet for each other). Facilitators can begin by discussing the importance of having a positive view of oneself, as well as helping others to think of themselves in that way. Each student should write their names on the top of their scrap paper, then pass the paper to the student on their right. That person will write one positive attribute about that student. The papers continue around the table until they make it back to the owner. The students will then write a few positive thoughts about themselves on their paper. After each student has around 6-8 items, it's time to create their ornament. Students will take their cardstock and cut

it into 6-8, 8-inch strips. Next, they will write each positive thought onto a paper strip. Directions on how to assemble the ornament are detailed here:

https://www.craftideas.info/html/delicate_tree_ornament.html

Suggestions for Adapting the Technique:

This intervention can easily be adapted to fit a variety of needs. The positive thoughts can be combined onto a small card that can be given to a student to keep for when they need a confidence boost. Another option, if the group has a chalkboard or whiteboard available, is to have each student stand or sit in front of the board, and have each peer come up and write their positive thoughts around the person. It can serve as a visual of the positivity that surrounds each student, and it can be a very powerful activity.

If this intervention is being used over the course of a few meetings, facilitators may track students' self esteem using the Rosenberg Self-Esteem Scale (questions and instruction below).

Rosenberg Self-Esteem Scale

Instructions:

Below is a list of statements dealing with your general feelings about yourself.

Please indicate how strongly you agree or disagree with each statement.

1. On the whole, I am satisfied with myself.

Strongly Agree	Agree	Disagree	Strongly Disagree
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2. At times I think I am no good at all.

Strongly Agree	Agree	Disagree	Strongly Disagree
----------------	-------	----------	-------------------

3. I feel that I have a number of good qualities.

Strongly Agree	Agree	Disagree	Strongly Disagree
----------------	-------	----------	-------------------

4. I am able to do things as well as most other people.

Strongly Agree	Agree	Disagree	Strongly Disagree
----------------	-------	----------	-------------------

5. I feel I do not have much to be proud of.

Strongly Agree	Agree	Disagree	Strongly Disagree
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6. I certainly feel useless at times.

Strongly Agree	Agree	Disagree	Strongly Disagree
----------------	-------	----------	-------------------

Self-Report Measure for Love and Compassion Research:

Self Esteem

7. I feel that I'm a person of worth, at least on an equal plane with others.

Strongly Agree	Agree	Disagree	Strongly Disagree
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8. I wish I could have more respect for myself.

Strongly Agree	Agree	Disagree	Strongly Disagree
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9. All in all, I am inclined to feel that I am a failure.

Strongly Agree	Agree	Disagree	Strongly Disagree
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10. I take a positive attitude toward myself.

Strongly Agree	Agree	Disagree	Strongly Disagree
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Scoring:

Items 2, 5, 6, 8, and 9 are reverse scored. Sum scores for all ten items.

Keep scores on a continuous scale. Higher scores indicate higher self-esteem.

- Strongly Disagree - 1 point
- Disagree - 2 points
- Agree - 3 points
- Strongly Agree - 4 points

Everybody Loves Puppets Intervention

Susan Elswick

This intervention helps clients to role play resolving conflict, discuss difficult emotions, and reflect on their core values in relation to their situation. The client picks a base puppet doll and assembles it to resemble themselves. They create a puppet in the same way for the person with whom they are trying to resolve conflict or process difficult thoughts, feelings, and conversations. Through crafting, storytelling, and narrating, clients are able to narrate future interactions in which they will face and overcome adversity.

Materials Needed:

- Base Puppet Doll (Head to Toe)
- Pipe Cleaners
- Googly Eyeballs
- Yarn
- Felt Fabric
- Wool
- Shoe Box
- Hot Glue Gun
- Paper Towel Holders
- Popsicle Sticks
- Tape
- Markers
- Larger Mirror or Picture Frame

How to Use This Intervention:

Clients who have expressed discontent in interpersonal relationships, obstacles in resolving conflict, and hesitation in naming their strengths and needs may benefit from the Everybody Loves Puppets! Intervention. Clients will begin by picking a base puppet, with only the body structure and skin color already intact. The client will then construct the puppet to make it look like themselves. The client will pick materials based on a table, ranging from fabric to construct clothes, to yarn, pipe cleaners, or markers to create the hair. The client will use their imagination to bring the puppet to life, remembering and accentuating their strengths and a positive frame of self. Next, the client will use the remaining materials to create a depiction of the person or feeling with which they are experiencing difficulty. The client will

then use the mirror or clear picture frame to serve as the stage for this intervention. The client will write a script for their characters or act with improvisation through a scene. The client acts out the scenarios bringing them the most stress, adapting, and creating positive coping strategies to overcome the obstacle.

Suggestions for Adapting the Intervention:

The intervention could be adapted for those with different physical or mental needs by adjusting the requirements of creating the puppet. For example, one who may require an extended period of time to create a puppet from scratch or have trouble working with their hands could use a premade puppet to act out a scenario or role play a heavy emotion. Finger puppets could also be used for those with movement limitations. However, the intervention works best when the puppets reflect the client. Therefore, the client should at least add a touch of themselves to the puppet they use, even if the crafting is narrated through the client and constructed by someone else.

Data Collection Methods For Monitoring Progress:

Data will be collected by the therapist at pre and post-intervention. The pre-intervention assessment will be conducted at least a day prior to the intervention, assessing the client's perception of relationships with others, with self, as well as how they overcome situations of stress and adversity. The post-intervention assessment will allow the client and therapist to acknowledge the improved perception of relationships and coping skills. The assessments conducted will be part of the Comprehensive Development assessment. Improvements upwards of 2% in the social development and emotional development subparts will indicate success in using the Everybody Loves Puppets! Intervention.

Communication Rap Battle

Marissa Brauer

This intervention is a fun, interactive group intervention that assists clients with comprehending the four types of communication. Through this creative writing task, the clients will be able to demonstrate their understanding on a specific type of communication. This intervention promotes healthy communication skills and increased self-awareness for the teenage clients.

Materials Needed:

- Paper
- Pens
- Dry Erase Marker OR Markers
- Dry Erase Board OR Poster Paper

Description of How to do Technique:

For this intervention the clients will be asked to identify the four communication types. The group will work together to define the four types of communication; passive, aggressive, passive-aggression, and assertive. The facilitator will ask the clients to self-identify with what communication type they use most often. The facilitator will write specific definitions for each communication type on a dry erase board or poster paper.

The clients are broken into four groups and assigned one communication type. The groups will write a poem, song or rap about the communication type that they have been assigned. They are asked to portray appropriate, matching body language while presenting their final work. After fifteen minutes, the entire group will come back together and each group will have an opportunity to present their work to their peers.

To gauge progress, the facilitator will lead a reflection after their presentations. They will be asked if they still identify with the same communication type that they

had previously identified with. They will also be asked about how they think it feels to interact with people who display each communication type.

For further data collection, communication styles can be discussed for 2-3 more group therapy sessions. An evaluation can be conducted about the individuals' understanding of the topic at Group Session 1 and Group Session 3.

Adaptation Suggestions:

This activity can be altered for students with special needs by changing the assignment to drawing a picture to describe the communication type OR finding a book/toy that they have that may demonstrate that communication type as well. If there is still a concern, the facilitator could take on the role as the presenter, singing/dancing/rapping about the communication types.

Class Pass Intervention

Casey Falk

Description of Intervention:

A class pass is used when a student is disrupting class due to struggling to complete an activity in class. In the counseling world this is also known as an exit and wait plan. The student is allowed to break from the task to collect themselves for a specific amount of time before returning to participate in class. This involves very specific boundaries created by the teacher such as how many passes to create and how long the student will be allowed to have a break. Something else that teachers may need to take into consideration is the behavior being shown and if there should be additional support provided by another teacher or administrator. Fighting and bullying are behaviors that should be handled in a different manner.



Materials Needed:

- Class Passes
- Poster With Class Pass Rules Listed
- Rewards Menu

Step By Step Method:

At the beginning of the semester, the teacher will explain the Class Pass to the students. The teacher will also educate the students around how to recognize when they need to request a Class Pass. This involves helping students understand when they feel like they may lose control and focus in class. When the student feels like they may disrupt class, the student should ask for a Class Pass. There will be specific activities that the student can do within the class to take a break from the lesson that the rest of the class is working on. Some activities could include doing

specific work on the computer or reading time. The Class Pass will only be for 10-12 minutes. Once the student returns to the lesson and successfully proves that he/she is no longer disruptive the student will be rewarded. The teacher can reward the student immediately by allowing them to pick something for the rewards menu. The teacher can also wait until the end of class to ensure that the lesson is not interrupted again. The teacher should be sure to praise the student for taking responsibility for their behavior.

Suggestions For Adapting The Technique:

There are many ways that this intervention can be adapted. The teacher can introduce other ways that a student can get a Class Pass without the student actually asking. Many students struggle with communicating their needs in class because they feel embarrassed. This can lead to more disruptive behavior. Teachers can work with the students to develop different ways to signal that the student is struggling, for example, the student could do a “thumbs-down” to alert the teacher that they need a Class Pass. The pass would only be used when necessary and would need to be monitored to ensure that the Class Pass is not being used as a crutch or to encourage avoidant behavior.

Additional Information:

Progress can be monitored with a log format sheet kept with the daily lesson plan. The teacher can keep track of what student requested the Class Pass and what they chose to do during their break. The teacher can also track the student’s behavior and how well they transition back to the lesson. This can be done with the assistance of the school social worker with RTI software.

Balloon Game

Hannah Mangrum

This intervention is designed for students who struggle with social anxiety, low self-esteem, extreme nervousness, and other forms of anxiety. The student will replace the negative thought/trigger with a positive thought to help decrease anxiety. The goal of the intervention is to increase positive thoughts, stop negative thoughts, and decrease feelings of anxiety that restrict the student from partaking in certain activities.

- Population: Students between the ages of 10-15 who struggle with anxiety, low self-esteem, social anxiety, and nervousness.
- Number of Students: 4-6

Materials Needed:

- Balloons
- Positive thoughts Paper Slips
- Negative Thoughts Paper Slips
- Pen/Pencil/Markers/Crayons/Colored Pencils
- Optional: Safety Pin or Scissors for Popping Balloons
- Optional: Helium



Description of How to do Technique:

For this intervention, each child will be given 5 balloons with smiley faces on them and 5 balloons with sad faces on them. Each child will also be given 5 slips of paper that read “happy thought” and 5 slips of paper that read “nervous thought”. Each student will also be given writing utensils. The students will be asked to take their 5 pieces of paper that read “nervous thought” and write/draw something that makes them nervous or gives them anxiety (These situations should not be ones in which the child is in danger). Example situations might include: “Walking into a

classroom”, “Going to school”, “My hair not looking good at school”, “Being made fun of in class”, “Other kids laughing at me”, and “Other kids not talking to me when I talk to them”. After the students have finished writing or drawing their “nervous thoughts”, they will put one paper slip into each balloon with a sad face. The students will set these balloons to the side and begin working on the next 5 pieces of papers. On these 5 strips the students will write/draw 5 things or situations that make them happy or would make their bad situation better. Example situations might include: “Making a new friend”, “Someone complimenting my hair”, “ Being asked to sit with people at lunch”, “Telling other kids a joke and they laugh with me. Not at me”, and “Going to school and having a good day.” These strips of paper will be placed into each happy balloon. The social worker will then assist the students in blowing up each balloon. This can be done with helium or just air. Once the balloons are blown up, students will go around the room and share one of their sad balloons followed by their happy balloon thoughts. Once they share their happy balloon, they will either release or pop their sad balloon. The students will go around the circle until all sad balloons are popped or released and only happy balloons are left.

Purpose:

This exercise is designed to teach the students that they can change their negative thoughts to positive thoughts. The act of popping or releasing their sad balloon signifies they can let go of their sad/anxious thoughts. They are replacing those thoughts with their happy/positive thoughts. This should help the students learn about thought stopping.

Suggestions for Adapting This Technique:

- This activity could be overwhelming to certain students with special needs such as those diagnosed with Autism Spectrum Disorder due to sensitivity to sound. It is important to use the balloon release instead of pop for these individuals.

- Another possible adaptation for those with special needs is lowering the number of balloons involved. For example, if children within the group are easily distracted, the social worker could use 1-2 balloons instead of 5.
- Another adaptation to this intervention could be eliminating the use of balloons if the students are not able to complete the activity with the balloons. Students could rip up the nervous thought pieces of paper instead of putting it into a balloon. This should still give the student the feeling of letting go of the nervous thought.

Measuring Technique:

Students will use self monitoring on the anxiety measure shown below. Students will discuss what being anxious or nervous means for them. This discussion will include what happens to them when they get anxious/nervous. The group will then discuss the 1-10 nervous scale. 1 is very nervous, 5 is somewhat nervous, and 10 is not nervous. The student will rate their nervousness before releasing their nervous thought balloon. The student will rate their nervousness after the release of their balloon while discussing their happy thoughts. Then the student will be asked to rate their nervousness while actually in their nervous thought situation during the week. The student will be instructed to try and stop their nervous thought during the week and replace it with their happy thought. The social worker will use this data to evaluate if this intervention is effective.

Anxiety Measure

1-Very Nervous

5-Somewhat Nervous

10-Not Nervous

Date:	Before Releasing:	After Releasing:	During Situation:

I Too Can Be A Superhero

Dominique Lloyd

This intervention will be used to help young children who have been diagnosed with ADHD learn how to regulate themselves and regain focus during hyperactive moments. This will also give the child an outlet to express themselves to the best of their ability. This intervention was designed to create a less threatening environment for children to be able to express themselves and what they are feeling.

Materials Needed:

- Paper
- Markers
- Face Paint
- Costumes
- Camera

Description of How to do The Technique:

For this intervention, a child diagnosed with ADHD will be asked to identify a time where they struggled to focus and/or calm themselves down. Once the child is able to identify a time, the child will be asked to present how they felt through acting their feelings out to the best of their ability. Once the child is done acting out their feelings, the child then will be given the opportunity to dress in a costume similar to their favorite superhero. Once dressed as the superhero of their choice, the child will then be asked how they feel their favorite superhero would handle the situation of helping them calm themselves down. The child will be given the opportunity to act out the reaction they feel their superhero would have and the actions the superhero would take.



Suggestions For Adapting The Technique:

This could be adapted in a manner that the child is able to use this technique in his/her home with the help of his/her parents. The parents can record the technique taking place and bring the video in for viewing.

Creative Writing

George Taylor

Using this intervention will allow the students to be able to express themselves in an acceptable way, without disrupting class, or harming other students. Through creative writing, the students will be able to express themselves, write about their feelings, or write about what is bothering them, rather than acting it out.

Materials Needed:

- Pen/Pencil
- Paper

Description of How to do The

Technique:

For this intervention, the student will be asked to pick an issue at home or at school that has been bothering them.

The student will then write a fictional story about how the main character resolved these issues in an appropriate manner. The student can base the story in any setting they would like. At the end, the student will read their story and explain how they can relate that to their issue.

Suggestions For Adapting The Technique:

This activity could be done in groups, perhaps with the individuals that are having the issue. They would be asked to each write their own resolution, and then collaborate on the rest of the story. The stories will then be put together to form a complete story. Each student will read their story, or their section of the story.



Juggling Act

Clara Walz

This activity focuses on experiential learning which is learning by doing. This activity teaches patience, team work, memory, multi-tasking, time management, alertness, and more. Once the activity is complete, the group processes how this is related to their own life experiences.

Materials Needed:

- 1-10 Balls of Any Shape or Size.
(the amount of balls used is up to the leader's discretion).
- Chairs

Description:

Students will make a circle (roughly arm's length apart). The leader will start

with one ball. The person to pass the ball must pass it to someone who has not had the ball yet (Remind the students that they must remember who they received the ball from and who they passed it to). This will continue until all passes have been completed. The last pass goes back to the first passer. This will be the order of the passes. The leader will then start again with one ball. If the group messes up, they must start over. Once one ball is successful, you can add another ball. You may end up with up to as many balls the group is able (you may also challenge the group and go backwards).

After the activity is over (up to the leader's discretion dependent on time, frustration levels, or success) pull up some chairs or have a seat on the floor and discuss the following questions.

1. What was the experience like for you?
2. What was the hardest part of the activity?
3. What frustrated you?



4. What made you happy?
5. What are some things in life you struggle to juggle?
6. What helped you (or the group) be successful?
7. What caused you (or the group) to struggle?
8. How did you work as a team?

Suggestions for Adapting the Technique:

This activity could use as many balls as able. I suggest using balls of different shapes and sizes for extra challenge and fun. You may sit on the ground and roll the balls if needed or have students sit in chairs. You may ask questions or as little questions as you want. With group processing you want to guide the students and allow them to do most of the talking.

Let's Talk About It

“Healing Club”

Hanif Akinyemi

This powerful intervention is an awesome way to guide children to talk about their traumatic experiences in a safe, fun, and dynamic way through facilitated dialogues, music, dance/movement, visual arts, creative writing, spoken word/poetry, drama (acting), and mindfulness. In addition, they will receive group support, psychoeducation on trauma and how to talk about their adverse childhood experiences, and learn positive coping skills. This intervention is committed to increasing awareness about trauma and recognizing the importance of involving youth in efforts to help them heal as well as how to prevent traumas. We will share information with the youth, but also listen to the youth express their thoughts, feelings, and perceptions about trauma and potential solutions. In support of the intervention, teaching artists who specialize in the arts can be used to help facilitate conversation with the youth. The youth will “create” products such as songs, poems, dances, visual images, stories, and skits that reflect their views and experiences with trauma. With this intervention, we hope to bring to light the youths' understanding of trauma and the impact of trauma on their lives. Most importantly, this intervention is geared toward leaving a lasting impression that arts and hobbies can prove to be a viable solution to enhancing the lives of youth suffering from trauma.

Materials Needed:

- Flip Charts
- Assorted Colors of Markers, Crayons, Colored Pencils, or Water Based Paint
- Talking Piece
- Music Speakers
- Pens
- Sticky Notes
- Paper
- Acting Props (optional)

- Legal Pads
- Sketch Books
- Computer/Laptop
- Projector and Screen
- Light Refreshments
- Water

Description of How to do the Intervention:

Through the use of self-reporting the facilitator will identify children who have experienced one or more adverse childhood experiences or witnessed violence. Once these children have been identified each session will begin with introductions and a check-in to promote mindfulness and group togetherness. The check-in is geared toward getting baseline data each session on the youths beginning emotional and mental state. After the check-in there will be a presentation of some sort such as a video or performance by a teaching artist. This presentation will share information on trauma, warning signs of PTSD, how/why trauma occurs and positive coping skills. The presentation will also, specifically express how trauma affects physical and mental health, family, relationships, and other areas of functioning. Following the presentation, the youth will share their reactions to the presentation through guided discussion. During the discussion the talking piece is always used to designate who's talking. After the discussion the youth will break into small groups or work as individuals to create “artistic” products. Each session will have an art theme such as music, dance/movement, visual arts, creative writing, spoken word/poetry, drama(acting). Based on the particular art themes of each session the youth will create songs, poems, dances, visual images, stories, and skits that reflect their views and experiences on trauma. The mental health professional and the teaching artist will help the youth with their creations but promote autonomy. After the creation period is over the youth will reconvene to share their creations with the group. Additional time for reflection and a check-out will be provided at the end of each session. The check-out is geared toward allowing the youth to self-report how each session has impacted them.

Intervention Group Size: 10-15 Youths

Age Range: 10 years old-18 years old

Duration of Intervention: 10 Weeks

Duration of Each Weekly Session: 60-90 Minutes

Suggestions for Adapting the Intervention:

This intervention is very dynamic which allows it to be adapted to become culturally responsive for youth coming from diverse ethnic backgrounds. The facilitator can use art, dance, music, and stories related to the youth's native culture. It's also adaptable because it can be used in a school setting or after-school programming. It is also a low-cost intervention and can be provided in the community or in a school setting.

Additional Information:

When assessing to identify specific youth for the intervention use self-reporting and a life events checklist for the children. This will give you baseline data on any children that report witnessing or experiencing a traumatic event. Assessment of post-traumatic symptoms using self-reporting will need to be done prior to the intervention, at week 5 of the intervention, and during the week 10 session. A decrease in symptoms means that it was a successful intervention. In addition, week 10 will also be a culminating celebration session. Family and friends should be invited and the youth should be encouraged to share their favorite artistic creation from the intervention.

Tool Kit For Positive Behavior

Doris Scott

This intervention is a good way to relax and help the student think of positive ways of handling negative behavior. It allows the class to also have a small time out with music. It is a type of therapy that the group can participate in. The music involves choosing different types of music and then discussing why this song or music makes you happy or feel better. Each student can choose different songs until the thirty-minute period ends. With this exercise, the students are learning a technique that can be used if they are stressed or may have a problem at home. In addition to the music, the students can write down a song that they want to listen to and one person chooses that song out of the box of all the students. This idea gives the students something to look forward to the next time and it teaches them patience. In the end, the students choose the song they liked best to win.

Materials Needed:

- Cell Phone/iPod For Music
- Pencil
- Paper
- Toy For Gift

Description of Music Therapy:

This intervention would consist of students that may have behavior issues or have ADHD or just need a different way of relaxing before they continue to work on their classroom assignments. Once a week this would be an exercise that the students could look forward to with the hopes that this would improve their productivity in the classroom. The students chosen would be from the school teachers and the counselors. Many of the students will begin to look forward to this non-traditional learning. Each student eventually will have a chance to pick from the box to choose the song they want to listen to. Afterwards, all students will vote for the winner for that day.

Suggestions for Adapting the Technique:

With the collaboration of the teacher, counselor, principal, and social worker, this is a program that can be chosen to be used. After being chosen, we can get feedback from other professionals to see if the program could be implemented school-wide. The results are that it will capture the minds of children and help them relax and work with other students. Therefore, the negative behavior will be eliminated. The students will learn an alternative way to deal with negative behavior.

Data Collection of Progress:

The number of students that are involved in the start of the intervention compared to the number of improvements in the students since starting the music therapy. Also, students tell others that they get excited about being involved in music therapy. The school will provide the measure of how the improvements are going in the end.

Cognitive Behavioral Therapy Intervention for Children who Suffer from Bullying

Danielle Burton

Description of the Intervention:

This intervention will be aimed at children who have suffered from bullying. Children who suffer from bullying can have multiple reactions, like depression, anxiety, isolation, rejection from peers, and thoughts of suicide. Cognitive Behavior Therapy is an approach and through CBT children will learn healthy ways to cope with their emotions.

Materials Needed:

- Olweus Bully/Victim Questionnaire
- Billings and Mouse's Coping Strategies Scale
- CBT Worksheet Packet
- Client Pamphlets



Step by Step Method for Replication:

Children will have CBT three times a week, over a three- month period and a pretest/posttest will be administered to see how effective the intervention is. Each session will be used to target behaviors that occur because of bullying. Through repetition children will be taught to replace negative thoughts and emotions with positive thoughts and emotions, with the use of optimism. In the second session children will work on verbal and communication skills. In the third session confidence will be restored with the children through role play. Overwhelming stressful situations will be altered through softening techniques. Each week over the three-month period these techniques will increase in consistency.

Suggestions for Adapting the Technique:

CBT should be applied by the child's level of cognitive development. This could be done by non-cognitive techniques like the development of relaxation techniques, the intervention would be changed to accommodate each child and other populations.

Data Collection Methods for Monitoring Progress:

Symptom records would be used to monitor coping behaviors over time. CBT activity diaries are another resource to monitor progress, as well as daily monitoring forms that could be used by teachers and parents.

Let's Taco 'Bout Feelings

Taco Tuesday Make & Tell

Latrice Wright

Every youth occasionally feels sad or has a “low” day, but when that youth is experiencing depression, it can interfere with their daily life activities. Additionally, adolescents coping with depressive moods are reluctant to share how they are really feeling. Learning to identify and express feelings in a positive way helps adolescents develop the skills they need to manage them effectively.

Intervention:

This intervention is a great way to encourage adolescent clients to talk about their feelings and emotions in a socializing and therapeutic group setting. Through various toppings labeled to represent different feelings and emotions, the client can add items or leave items off that represent how they are feeling or describe stressors they have endured since the last meeting.



Materials Needed:

- Taco Shells
- Meat
- Cheese
- Taco Sauce
- Lettuce
- Tomatoes
- Olives
- Sour Cream
- Jalapenos
- Plates/Bowls

Technique:

For this intervention, each taco ingredient represents a different emotion or stressor. At the initial group meeting, the participants will collectively discuss and decide what mood each core ingredient will represent. At the beginning of each



group meeting, the clients will be asked to prepare his/her taco based on their recent feelings or moods. Then in group discussion, the clients will be asked to describe their tacos or taco salad. In describing their food, the clients would share why they chose their items and how it related to their feelings and emotions. The client can explain why they left off particular ingredients if it represented a significant emotion they didn't experience but desired to discuss.

Clients can bring additional toppings to represent new feelings, emotions, and stressor not symbolized by the core ingredients. For example, if the client had a rough and/or stressful week, the client could bring chunky salsa and add it as a representation of that specific emotion or stressor. If the client had a gloomy or depressive week, the client could bring guacamole and explain why he/she included that ingredient. If the client had a great meal, he/she could bring rice or beans to represent the accomplishments. This socialization sparks creativity and encourages the client to find meaning in identifying his/her emotions.

Each participant will be encouraged to at least fix one representation of his/her true feelings discussion even if he/she does not desire to "Eat Their Feelings"! At the end of the group session, that client's creation and leftovers will be donated to a homeless shelter. Giving back to the community is an excellent way to promote positivity and boost morale.

Adaptation:

For a healthier variation, this intervention could be adapted in a manner that the group could use various fruits and create a Fruit Feeling Salad. Just as the various taco ingredients, the assorted fruit items will represent different feelings and emotions. For smaller children, My Ice Cream is Screaming.

Different flavors of ice cream and a variety of toppings could be used to symbolize various feelings and emotions. In both alternatives, the concept and techniques remain the same.

Additional Assessment:

The Hamilton Depression Rating Scale (HAM-D):

Prior to each group session, each participant would be asked to complete The Hamilton Depression Rating Scale (HAM-D). HAM-D is a multidimensional scale designed to assess the severity of a patient's level of depression before, during and after treatment. This assessment tool is needed to monitor the youth's reported depressive moods to track and determine whether or not additional resources or interventions are needed.

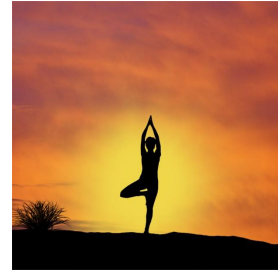
Yoga Club

Hannah DeRouen

This intervention provides clients with an opportunity to decompress their thoughts and emotions at the end of each school day. It teaches controlled breathing and other relaxation techniques that can help students process their day and leave feeling calm and clear minded.

Materials Needed:

- Yoga Mat/Towel/Blanket
- Music
- Comfortable Clothes
- Lamp



Description of How to Do the Technique:

This intervention would be used in groups. It would be held at the end of the school day, Monday through Thursday, and last 1 hour. Students who felt comfortable sharing would individually describe one stressful or negative thing about their day. After hearing about everyone's struggles, they would pick a mat or blanket and find a place to begin yoga. The therapist will turn on the lamp(s) and turn off the overhead lights to ensure a more relaxing ambience. The therapist would turn on relaxing music and then proceed to lead the group in a series of beginner level yoga poses that are meant for stress relief. While stretching their bodies, the therapist will encourage controlled breathing and will instruct the group to let go of their stress and negativity for the day. The therapist will use a strength-based approach of motivational interviewing to help inspire the group to be empowered moving forward in their day. When the class is coming to an end they will lay on their backs in "corpse pose" and focus solely on their breathing as a final relaxing moment. When they feel ready, they will be allowed to leave quietly at their own pace.

Suggestions for Adapting the Technique:

This is a very simple and adaptable technique. For students with a mental or physical handicap all poses can be modified to fit their capabilities and willingness. This class would not be mandatory so any students who may not feel comfortable would not be pressured to attend. A change of clothes is optional as some students in low income areas may not be able to accommodate.

Yoga Class

Held Monday - Thursday after school from 3:30-4:30 P.M. for all students who want to participate.

Please Bring:

- This handout
- A mat, towel, or blanket
- A change of clothes if you would like to be more comfortable

Use this scale to rate how you feel before and after class each day!



0 = No Stress At All

5 = Average Amount of Stress

10 = Overwhelmed With Stress

	Before Class	After Class
Monday:		
Tuesday:		
Wednesday:		
Thursday:		

Give this handout to your instructor at the end of the class on Thursday!

Tree of Life

Kache' Brooks

This intervention allows students to be able to pinpoint their needs and values to create a better understanding of themselves and the world around them. This will create an appreciation of differences and simultaneously breed better conflict resolution skills and empathy. Through determining what values and needs resonate most with them and explaining why, it will allow a space to be introspective and self-aware.

Materials Needed:

- Needs/Value Sheet
- Pens
- Small Poster Board
- Markers

Description of How to Do Technique:

Each participant will receive a needs/value sheet that includes about 50 words. Students will be asked to select 10 words that resonate/speak to them (ones they think are important). After they select 10, they will be asked to narrow it down to their top 5 words that they feel are needed for them to be successful or thrive. After those top 5 words are selected, they will be given a poster board. On the poster board, participants will explain what each need/value means to them and how that can be adequately shown. Participants will share what their needs and values are, and also share why those are needs for them.

Suggestions for Adapting the Technique:

This could be adapted by participants drawing pictures or explaining examples of each need/value. This would allow participants to be more expressive in a visual manner. The end result could be a collage of what it would look like to have all of the needs in his/her life to be successful.



Empathy Maps

DeAnn Smallwood

Empathy maps are used to help teachers and clinicians gain an understanding of students' insights and perspective. Empathy maps are also used to build self-awareness and help students connect their words, thoughts, and feelings to their experiences in efforts to build different strategies to more effectively deal with these situations. This activity can be used for specific or hypothetical situations.

Materials Needed:

- Empathy Maps
- Art Supplies
- Feelings Chart



Description of How to Utilize Intervention:

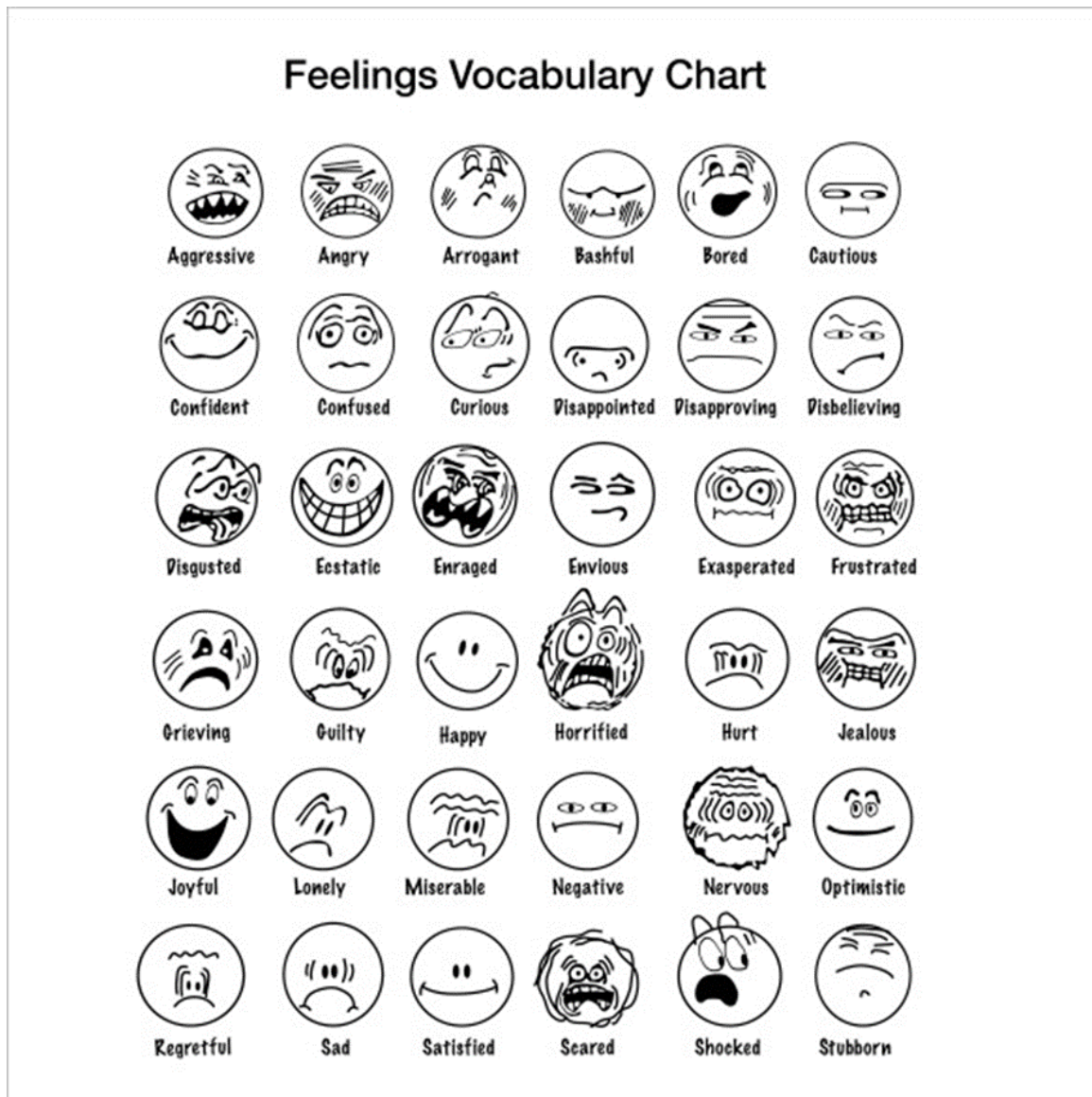
In order to use this intervention, the students need to identify a situation that they feel they need help finding more effective coping strategies. If the student does not have a particular situation, the clinician should have hypothetical situations the student might experience to use for the intervention to encourage proactivity versus reactivity.

Once the client has chosen a situation, they will list the feelings and thoughts they had associated with that situation and the words they used in response. Once these are listed, the client and clinician will brainstorm healthy and effective ways to better address the situation. The client can also list the actions they took as a result of the situation, as well as the actions and coping strategies they will use next time.

Suggestions for Adapting the Intervention:

For students that struggle to write or verbalize their feelings and reactions, they can have the option to illustrate the “feel” and “do” sections of the map. The clinician can also have cut out emojis in addition to the feelings chart to help

students identify their feelings if they're struggling. In order to better support the student and teacher relationship, the clinician can invite the teacher to participate in the activity, if the student is comfortable.



My Roots

LaBrenda Thomas

The purpose of this intervention is to assist clients with identifying and processing how their past experiences affect the behaviors they display. Clients will use an illustration of a tree to identify their “roots” (past experiences, trauma), their “trunk” (feelings that stemmed from those individual experiences), their “leaves” (the behaviors and/or actions displayed in response to their experiences and emotions).

Materials Needed:

- Flip Chart Paper or White Board
- Dry Erase Markers

Description of How to Do the Technique:

For this intervention, the therapist will draw a picture of a tree with visible roots. Therapist will explain to the client that the tree drawn represents them as an individual. The therapist will describe the roots of the tree as the events the client has experienced such as traumatic events. The trunk of the tree represents the feelings and emotions that stemmed from the identified event(s). The leaves of the tree represent the behaviors or actions that are driven by the identified emotions. Clients will fill in the parts of their tree from the root up. Once complete, the client will process with the therapist. At the end of this intervention, clients will be able to identify the “root” of their behaviors. After processing the tree, client and therapist will work through the identified events at later sessions in efforts to minimize or improve the targeted behaviors.

Suggestions for Adapting the Technique:

This could be adapted by providing examples of various events to help the client think of them and help the client complete their tree by actively talking through it with the client. The technique could also be used for those who may struggle with thinking about their events first. Instead, they can think of the behaviors that are

affecting their relationships with others and allow them to work their way down the tree.



Imagination Therapy

MarQueshia Bowles

Imagination Therapy is based on using the imagination and stepping outside of the body. Clients who will use imagination therapy will step outside of their body and view situations from another point of view. The client and counselor will replay scenarios and look at situations from many different points of views.

Materials Needed:

None

Description of How to Do the Technique:

For this intervention, the counselor will seek out the different situations occurring in the client life. The counselor will be sure to allow the client to choose the situations they want to address so that all issues that are important and imperative to the client are addressed. The counselor will take the lead of beginning the imagination therapy. The counselor will ask open-ended questions so that the client has to answer questions and keep the conversation and therapy going. The counselor will allow the client to go as far as they want with looking into situations from how others may have perceived them. Once other points of view have been seen, the counselor will bring everything full circle. The counselor will then have the client talk out how they felt and how they now perceive things.

Suggestions for Adapting the Technique:

Ways to adapt the intervention to students with special needs or other populations is to make sure the approach is easy to understand to the student and they have the ability to understand the concept.

Monitoring:

I would assess how much of another point of view the client can understand and see. I would then assess how much of others' points of view they understand after therapy is over. I will be sure to allow therapy to take place over the course of a few weeks and assess at the beginning and ending.

Mindfulness Art: I Am Here

DeAnn Smallwood

Mindfulness Art is an activity used to ground students and connect them to their emotions in the moment in order to decrease stress or overwhelming emotions. The grounding portion of the activity helps students become present, and the art portion allows students to illustrate their emotions in any way they would like. This activity offers students a creative way to express their emotions and become comfortable sharing them with others.

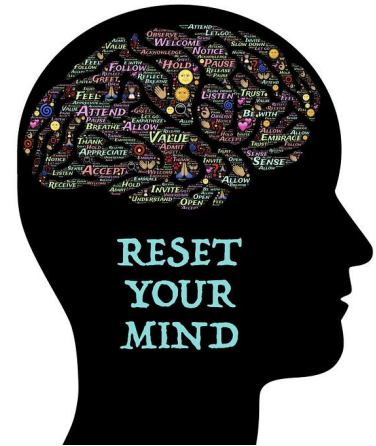
Materials Needed:

- Cardstock/Plain White Paper
- Pencils/Markers/Watercolors/Colored Pencils

Description of How to Do the Technique:

Grounding Activity: To begin, students will need a piece of plain card stock paper. Instruct students to place one hand on the paper and press it into the surface. Prompt students to notice where on their hand they notice pressure and how the paper feels under the hand. Then have them slowly open and close their fingers to feel their fingers glide over the paper. Next, have students trace their hands with a pencil. As they trace, encourage them to notice how the pencil feels along their fingers. After they trace, have students continued to lightly press their hands into the paper while prompting them with questions and instructions: “Notice how your hand feels connected to the surface”, “What emotion are you feeling right now in this moment?” “Where in your body do you feel that emotion?” “Can you connect this area to your hand?”

Art Activity: Once students are aware of their emotions, they will begin to draw inside their outlined hands on the paper. This section does not require much prompting, but does instruct students to design the inside of the hand to show their emotions. It does not matter how students decide to design their hands. Once



students are finished, allow them time to discuss their design with peers, if in a group setting, or allow the student time to discuss with the clinician. Discussion is not required, but it may be a good exercise for students in verbally expressing their emotions.

Suggestions for Adapting the Technique:

For students that struggle to create a design for their hand, clinicians can offer a feelings and color correspondence option. In order to do this, the clinician can assign ten colors to ten different emotions, then prompt the students to choose which emotions they relate to the most. Once students have those emotions, they will use the corresponding colors to fill in their hand in sections with sizes based on how frequently they experience each emotion.

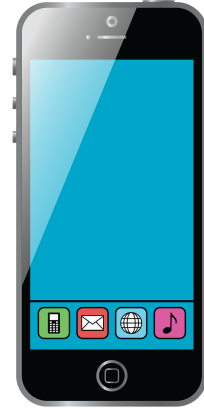
Tracking Progress/Effectiveness:

Clinicians can track the usefulness of this activity by having students complete a feelings check-in before and after the activity. The check-in will include a section to discuss how the activity did or did not help the student. The check-in can be verbal or written dependent upon the age of the student.

Text Support

Terica Carouthers

This is an intervention designed to help assist clients with processing their feelings and emotions in a safe and discreet manner. Clients will be able to express their feelings and emotions through an app that will be available to talk to a live person 24 hours a day and 7 days a week. Through this app a person can text “support” to 1-800-SUPPORT (1-800-787-7678) and a live agent will be available to talk to them to process their feelings and emotions during a difficult moment in their lives. Furthermore, if a person is experiencing suicidal or homicidal ideations, the live agent will contact the local police department and mental health crisis agency for the caller and deescalate the caller until local help arrives to provide the caller further assistance. This app will change the way people especially adolescents feel about expressing their emotions, due to living in a digital world clients may feel more secure in texting or writing out their feelings instead of talking to someone over the phone and with this newly designed app it will make a significant change to the statistics in seeking help through this intervention.



Materials Needed:

- Text Enabled Cell Phone
- Licensed Professionals Who Have Been Trained In “Crisis Intervention Training”
- 24/7

Description of How to Do the Technique:

For this intervention the client can text “support” to 1-800-SUPPORT and a live agent will text the client back during the process. The agent will identify the reason the client is texting and help to walk the client through processing their feelings

and emotions during a difficult time. If the client expresses during the texting, he or she is experiencing suicidal or homicidal thoughts, then the agent will contact the local police or mental health crisis agency to assist the patient and get them further assistance.

Suggestions for Adapting the Technique:

This app could be adapted in a manner that every person will have access to it through the computer as well in case someone does not have a text enabled cell phone. The next addition would be a website through the computer where you can send a message for support and a live agent responds the same way as through a cell phone and can help the client express their feelings and emotions during a difficult time. The ending result will be a client having access to help potentially life threatening through a text enabled cell phone or through a computer in their time of need.

The Collage of Many Emotions

Gia Douglas

Sometimes communicating one's emotion can be very challenging when one does not know how to communicate that feeling or manage it. This intervention will assist clients with understanding their emotional intelligence.

Materials Needed:

- Camera
- Scissors
- Construction Paper
- Computer
- Photo Papers
- Poster Boards



Description of How to Do the Technique:

The clients will be given twenty-five (25) detailed descriptions of different emotions. They will identify and describe that emotion from their perspective and will take a photo displaying that emotion. The clients will work together to choose the best description of the emotions and assemble a collage of their photos. An example has been attached.

Suggestions for Adapting the Technique:

This could be adapted in many different styles. Instead of creating collages, clients can use the photos to play games such as, match that emotion and describe a scenario that fits that particular emotion or use the pictures to determine how they are feeling when they are having a hard time verbalizing their emotions.

Data Collection Method:

The ultimate goal is for the clients to be able to communicate their emotions before acting inappropriately. Data collection will be used to show a decrease in outburst and an increase in communicating feelings.

Reach for the Stars Wristband

Laura Pulley

This intervention is a great way to help students practice self-monitoring and serves as a tangible reminder to help children remain on task throughout the day, even as they move to different locations within the school. This intervention can be used for a variety of different issues or negative behaviors that occur in the school setting such as blurting out, remaining off task, wandering around the classroom, etc.

Materials Needed:

- Paper Tyvek Wristbands
- Star Stickers
- Prizes



Description of How to Do the Technique:

Once a behavior or issue is identified that the teacher, school social worker, and student would like to see decrease, the intervention can begin. The student will be given a wristband to wear throughout the school day for a period of one week. The child will receive a star sticker after each activity block (such as math, science, reading, art, gym, etc.) if they did not present the behavior that they are trying to decrease. Once the child receives a certain number of stickers, they will be able to choose a prize out of the prize box.

Suggestions for Adapting the Technique:

There are several ways in which this intervention can be adapted. Along with using the star stickers, the school social worker can also order different colored wristbands. Once a child reaches a certain color wristband, they may no longer need to have sessions with school social workers and it can symbolize graduating from the school social worker. The school social worker can also modify how many stars it takes to receive a prize or how long the wristband will be worn.

Additional Information:

Weekly progress can be monitored by using a graph to track the number of stars the child received at the end of the week. If the intervention is effective, there should be a large improvement in the amount of times the student exhibits the negative behavior throughout the day. Below is an example of a chart that can be used to track progress. The chart below was received from

<https://www.allbusinesstemplates.com/template/MTDFD/printable-weekly-behavior-chart-sample/>

Alternate Outcomes (AO) Club

Andrea Wilson

This intervention is a great way to help clients to develop alternate ways of handling stressful situations with the end outcome in mind. It allows teammates to build on a situation and provide different viewpoints of how an issue can be handled within the agency, so he or she can use it in real life. This intervention was developed from the art therapy technique of the squiggle game which is a non-directive approach. With the squiggle game, the child draws a squiggle on paper then the facilitator picks up where the child leaves off by squiggling a little more. The child then begins again, and then the facilitator draws. This continues until the drawing is done. Facilitator then asks the child if he or she sees something in the picture. In this intervention, small groups bring something that they struggle with i.e. anger, anxiety, socializing, fear. One issue will be addressed on a biweekly basis. The issue will be mentioned with a scenario (real or fictional) Through created scripts, role play, and video viewing the client is able to use the practice as a model for life and events causing them to act out.

Materials Needed:

- Computer
- Books
- Activity Sheets
- Small Materials (markers, paper, toys, et.)

Description of How to Do the Technique:

For this intervention the clients will be asked to identify stressful things or things that create social anxiety in their lives. After identifying these issues, they will be written down on paper and placed within the stressors jar. Every two weeks, a client will be allowed to reach within the jar and pull out a pressing issue. The client (or facilitator) will read from the paper then be allowed to view a video or read a book on that issue. This should not last longer than 5 minutes. The clients are then

asked to take turns acting out different ways in which the issue can be fixed, so there is an alternate outcome to what the person who has experienced the issue usually gets. Each client will build on one another's visual representation. Sometimes the scenarios will be completely made up from an activity sheet, video, or book. Other times it will be pulled directly from the stressor jar. The client will be able to see the issue from a variety of viewpoints. At the end of the alternate endings everyone has an opportunity to discuss the finished solution and the steps leading up to solving the issue.

Suggestions for Adapting the Technique:

This could be adapted in a manner that every individual client picks a social issue faced. The collective group comes up with a role play scenario, and each individual member reenacts a solution to the issue in their own perspective. The result is a compilation of alternate outcomes to an issue that results in one message.

Page by Page

Rebekah Raines

This intervention is a great way for students/clients to verbalize their emotions and discuss possible traumatic events in ways that allow them to feel empowered.

Children and adolescents often struggle to find the correct vocabulary to express themselves and will often shut down if they feel uncomfortable in how they are being asked to express themselves. Through art (visual, auditory, etc.), each client will be able to use the medium they most feel comfortable with, thereby, decreasing or eliminating the stress that prevents them from processing feelings.

Materials Needed (for creating a book):

- Typing Paper/Construction Paper
- Pens/Pencils/Markers/Crayons/Paint
- Glue/Tape/Stapler
- Magazines
- Photos From Home (optional)

Materials Needed (for creating a PowerPoint):

- Dedicated Access to a Computer
- Knowledge of Basic Computer Skills

Description of How to Do the Technique:

For this intervention, the client will be asked to identify the most problematic issue in their life (i.e. a specific event, day, person, time in life, etc.). Once this has been chosen, the client will be given the option of how they would like to express this issue (through a book or PowerPoint). The client will then be asked to make each page different in terms of how the issue has affected their life by using the materials provided (i.e. drawing, cutting out pictures from magazines, bringing photos from home, using clip art, or whatever is needed). For example, one page might focus on how the issue has affected their social life while another page focuses on how the issue has affected their school life. Another way to complete this exercise would be to have each page different in terms of what happened. For example, one page could show how one aspect of the event (i.e. if the problem was

a specific day, one page could show them feeling rushed in the morning, then the next page could show how they felt making a mistake during a class presentation, and so on). At the end, the client will present the finished product to the provider that has been helping them to work on it to increase their comfortability in communicating their feelings/emotions. The goal would be for the client to discuss this so often (throughout the process and afterwards) that the client's negative identified emotion would decrease/be eliminated and/or they would find more comfort in talking to those in their lives about how they feel.

Suggestions for Adapting the Technique:

This activity could be adapted to allow more clients to use it by including more auditory aspects (such as allowing clients to bring in songs to explain the different areas of how they were impacted) in order to include those clients that have visual impairments. For clients that usually require more active engagement (i.e. younger clients, or those with ADHD), you could do the following:

Using a soccer ball, the provider would write in each white hexagon an aspect of the problematic event (i.e. splitting time between two houses after parents' divorce, eating lunch by themselves after having a fight with a friend, parents getting upset with them for getting an F on a test, etc.). Going outside, the therapist would then throw the ball to the client and whichever hexagon is facing the client once they catch it, the client then must describe, in as much detail as possible, how they were impacted by what is written in that space. Optional: Therapist and client could spend the time the client is describing the event by throwing the ball back and forth or going for a walk). While this is not necessarily a visual activity, it does help to reach clients in a medium that works for them: physical activity.

If you are working with clients that are too young to have a complete knowledge of emotions or who may be on the Autism Spectrum, it might be helpful to include extra resources given how they may struggle with expressing themselves adequately. This could include using emotion charts or teaming up with a therapist that uses ABA (Applied Behavioral Analysis) (if a client has access to this). Whether or not the client approves of this inclusion, and no matter which medium is being

used, the exercise will most likely need to be adapted to allow the client the space to express themselves given their developmental level.

Monitoring Progress:

In order to ensure the effectiveness of the activity, it would be helpful to do pre- and post-tests. One's professional judgment is needed to determine what works best in terms of assessing effectiveness of the activity and the client's developmental level with understanding and completing the assessment. That being said, a couple of scales that might be helpful to use could be the PHQ-9 (Patient Health Questionnaire) (http://www.cqaimh.org/pdf/tool_phq9.pdf) or the SCARED (Screen for Child Anxiety Related Disorders) screening (<http://www.midss.org/content/screen-child-anxiety-related-disorders-scared>).

If you want to include a wider range of input from that child's life, you could also use the Vanderbilt Assessment

(https://www.nichq.org/sites/default/files/resource-file/NICHQ_Vanderbilt_Assessment_Scales.pdf) so that teachers and parents/guardians could have input.

Based on the results of the post-test and how it compares to the pre-test, the therapist would then determine if a different intervention would be helpful (i.e. referral to an outside provider, or maybe repeating the exercise using a different stressful event to help with repetition of using positive skills).

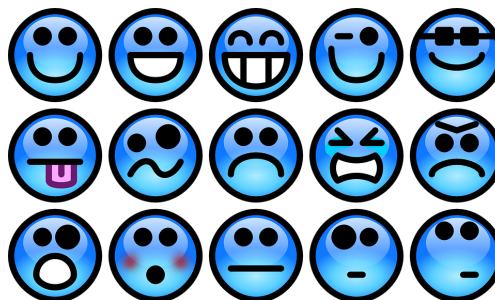
Bean Bag Feelings Toss

Robbie Eilert

Bean Bag Feelings Toss is a game that a social worker, counselor, teacher, etc., can play with children to help them learn about emotions, feelings, and appropriate responses to those feelings. Can be played individually or in small groups.

Materials Needed:

- Large Space on the Floor (4x4 Grid)
- Beanbags
- Feelings Faces
- Scissors
- Tape



How to Play:

Cut apart the feelings faces, and laminate if desired. Tape them to the floor.

Each player will take their bean bags and toss them onto the appropriate face to answer the questions.

Questions can vary.

Ex: “How are you feeling today?”

“What face do you make when you’re mad?” “What face do you think I make when I’m sad?” “Use your beanbag to find the silly face”, or “Use your beanbag to find the happy face”.

Extra Notes:

At the beginning of each session, the first question can always be “How are you feeling today?”, and the facilitator can track each child’s progress with how they are feeling at the beginning of each session. Sessions can then focus on all the emotions, or individual emotions, with the facilitator and the children talking about each emotion in depth and how it’s ok to feel each emotion but it’s not ok to act out in anger, sadness, etc.

If beanbags aren’t available, small stuffed animals can be used instead.

Evaluation:

Facilitator can track progress with sticker charts, documentation, etc.

If meeting in weekly sessions, the facilitator can have the parents/caregivers document the progress each day and report it back to the facilitator.

Modifications:

Faces can be taped/attached to a board or wall, and children can point to them.

Stuffed animals can be attached to the end of a yardstick, and children who can't bend over or get on the floor can use the sticks to touch their faces.

For younger children, or non-verbal children, the facilitator can lessen the number of faces for them to choose from.

For children who have violent tendencies and throwing or tossing usually leads to other consequences, touching the faces on the wall would work better.

Major and Minor Problem-Solving Game

Antonya May

This intervention is designed to help children identify differences between major and minor problems and learn when they need help from adults to solve a problem. The children will learn problem solving skills by playing a board game that identifies major or minor problems that they may encounter at school or in the community. This intervention also is a good way to get children to develop manners and coping skills when handling problems.

Materials Needed:

- Two Dice
- 4-5 Game Pieces
- Deck of Cards Listing 10 Minor Problems
- Deck of Cards Listing 10 Major Problems
- Cardstock to Make Board Game With at Least 20 Slots

Objective:

The teacher will introduce the game telling a social story about major and minor problems and then going over the rules and definition of a major problem and minor problem.

- Major problem is a problem that the student is unable to resolve on their own and needs an adult to help solve.

Example: when someone is causing harm to the body by scratching, punching, biting, pulling. a dangerous situation such as a fire, accident which can cause harm or death, and when a student is scared or worried something bad will happen to himself or another person.

- Minor problem is a problem that can be handled by the student. Does not cause any hurt or harm.

Example: someone will not play with students, makes a mean face, or not listening or following instructions, does not take turns, takes students pencil, skips students in line.

The children will also learn ways to handle minor problems

3 ways to handle minor problems are to

- Ask individual nicely to leave alone or to stop
- Ignore by not responding back
- Walk or move away

General Directions:

3-5 students can play this game at a time. To begin the game students will pick a number 1-10 the student that picks the highest number will get to go first the remaining students will take turns based on numbers. Students then roll dice and move a number of spaces on the dice. The student is only able to move the game piece if they answer the question on the card they pull correctly. The student that reaches the end first wins the game.

The teacher will make a deck of cards listing real scenarios that any student may encounter. The student must identify whether the scenario is a major or minor problem and tell how they would solve the problem in order to move the game piece.

Age Requirements for Game:

This game can be played by all ages. The adult facilitating the game needs to be creative and use age appropriate materials for all ages. And make sure to modify it for children with special needs. For example: smaller kids and children with special needs may respond better with pictures which show the problem acted out Find pictures showing a child kicking or making a mean face at another child.

Method for Monitoring Progress:

The winner of the game will be given an option to pick a prize from the treasure chest. All students will be given a small prize like an eraser or a sticker for

participation in the game and answering their questions. By earning an incentive, the children may be motivated to participate. At the end of the game the teacher will give a review on minor and major problems giving each participant an opportunity to answer questions.

My Artistic Point of View

Jenika Buckhalter

This intervention is designed to help tell a story, describe a point of view, or express feelings. Clients will use their artistic abilities to create a picture that relates to a specific topic or event to help convey their point of view. The purpose of the intervention is to empower the client to effectively express their thoughts.

Materials Needed:

- Paper
- Markers
- Paint
- Paint Brushes
- Water
- Paper Towels
- Crayons
- Pencils
- Stickers
- Stencils

Description of How to Do the Technique:

For this intervention the client will be given a scenario, a topic, or an emotion. The client will then be told to draw or paint what comes to mind when they think of the topic or event. After the client has finished their art, they will be asked to describe their painting and how it relates to the subject. In doing so, the client will be able to express their thoughts in a safe environment and gain confidence in their way of thinking.



Adaptive Techniques:

This intervention may also be used in a group setting. A topic can still be given, but clients may be placed in groups and have to create an image that represents the group. This would be a great way to build relationships and point out similarities within strained relationships. The group will then be asked to explain how the image was created and why.

This intervention can also be adapted to include music. A client can choose from a list of songs and draw or paint their thoughts about how the song makes them feel. This may be a great adaptation for clients who connect to music more than art. A cd player, computer, or phone will need to be added to the material list for this adaptation.

Monitoring Progress:

Progress can be monitored by reviewing the same topics after 6 weeks of intervention to see if feelings or point of view has improved.

Paint Club

Kiera Lanier

The intervention is for clients within the ages 13-17 to express themselves by processing their feelings and thoughts through art. Through painting, it allows the clients to make art by expressing the traumatic events that they are going through in their life.

Materials Needed:

- Paint
- Brushes
- Canvas
- Easel



Description of How to Do the Technique:

For this intervention, the client will identify a current issue that they are dealing with in their life. Once the current issue is identified, the client will then paint a picture to describe the issue that is currently going on in their life. Once the painting is done, then the client will describe the group the painting they painted and explain the problem. All clients in the group will go in a circle and show their painting and speak on what they painted. If the client feels comfortable, we will hang the paintings up. Doing the paintings symbolized them taking one step towards expressing their feelings.

Suggestions for Adapting the Technique:

This could be adapted in a manner that every individual client brings in their painting. The collective groups come up with if they want to put their paintings up to show what they have created. If the groups decide on putting their paintings up, they will be put up to show the first step of expressing their feelings through art instead of an inappropriate way.

M-Modeling A-And I-Identifying N-Needs

MAIN-Reading Intervention

Bianca Weatherspoon

Description of Intervention:

This reading intervention will help students with comprehending what was read, how to reread for understanding and how to use details to identify the main idea of a text.

Materials Needed:

- Textbook of Subject Area

Steps to Complete:

First the educator will model how a main idea can grow out of one or two paragraphs. Secondly, the educator should describe how the overall main idea of the text read can be captured by looking for details around the main idea. Ex. Pics or Bold words. Finally, the educator will ask the students to identify what they think the main idea is and what text features support their answer.



Suggestions for Adapting the Technique:

If a student is having difficulty working independently, the educator should work with that student one on one. Educators should also try different texts to see if that approach would be of assistance to the student getting the concept then moving back to the original text.

Monitoring Progress:

This intervention can be monitored by the Educator keeping a tally of the number of main ideas each student was able to identify. The educator could also provide an incentive for the student(s) who has the most tallies by the end of the month.

Heroes in Crisis

Neil Boggan

Description:

This trauma-focused activity for high school students uses DC Comics' nine-part miniseries entitled *Heroes in Crisis* (2018-2019, written by Tom King, <https://www.readdc.com/Heroes-in-Crisis-2018/comics-series/121796?ref=c2Vhc mNoL2luZGV4L2Rlc2t0b3Avc2xpZGVyTG lzdC9zZXJpZXNTbGlkZXI>) to discuss how we cope with harmful life events. The comic centers around events at Sanctuary, which is a secret and confidential superhero mental health hospital created by Superman, Wonder Woman, and Batman. It is a safe place where heroes can be vulnerable. This activity employs a digital copy of this story arc as well as activities, such as, a “connection booth” where students leave written messages for themselves to connect with their emotions, a “create your own comic” where students can create their own stories, and “behind the mask” where students can create their own mask and explain what it is meant to hide.

Materials Needed:

- A Digital Copy of *Heroes in Crisis*
- A Laptop/Tablet
- A projector and Projector Screen
- Colored Pencils/Pens
- Blank White Paper
- Scissors
- Stickers
- String
- Pre-drawn Masks for Cutting Out

How to Do the Technique:

The comic is rated 15+ and does contain violent imagery, so the school social worker (SSW) should be very selective about which panels are displayed to

students. The SSW will show various panels of the comic and then give some examples of harmful life events that one might encounter, especially from a student's current situation in life. Then, the SSW invites students to respond through their choices of activities such as those listed in the "Description" section at the top of this page. Next, the SSW asks the students to share what they have written or created. Lastly, the SSW emphasizes the need for regularly finding safe outlets for the emotions that come with harmful life events and making his/her availability as a safe outlet known.

Suggestions for Adapting the Technique:

For those students who may have difficulty expressing their emotions verbally or through writing, a worksheet with feeling words/feeling expression faces (<https://do2learn.com/activities/SocialSkills/EmotionCheckIn-Checkout/index.html>) may be utilized by the student who may point to or circle words/faces in order to communicate his/her feelings. For those who might have dexterity issues with their hands, the SSW may pre-cut out masks and utilize pre-cut out figures for the student to create his/her own comic book. Allowing students to choose among various activities potentially allows them to choose those activities that they are able to accomplish most independently with minimal adult intervention.

Additional Resources:

The SSW could distribute to the students emotional check-in sheets, such as those found at <https://do2learn.com/activities/SocialSkills/EmotionCheckIn-Checkout/index.html>, which include pictures of facial expressions with descriptive words as well as differentiated lists of emotional words depending on the reading level of the student. The SSW could use these check-in sheets as daily data points for tracking students' emotional states. In addition, the SSW could have parents and teachers fill them out as it pertains to the student as other sources of data. Furthermore, the ssw could distribute lined-paper journal pages (<https://www.printablepaper.net/preview/journal>) that students can write on and return the entries to the ssw as often as they see the ssw. Lastly, the SSW can also utilize school data, such as, unexcused absences, disciplinary measures, grades, and tardies to get a more holistic picture of the student's well-being.

Student Investigation Team (SIT)

Latonia Edwards

Description of Intervention:

The intervention targets cyber bullying and can be implemented during bully prevention month (October). Through student lead interviews, mediation and reconciliation students will increase awareness of the harm and consequences of cyberbullying.

Materials Needed:

- Interview Form
- Voice Recorder
- Badges
- Paper
- Pens/Pencils
- Cyber Bullying Resource Manual
- FBA/BIP Checklist

How to Use Intervention:

- SSW & SC will disseminate information schoolwide on cyber bullying and provide 30-minute videos to be shown during specific classes.
- SSW & SC will recruit student investigators to be trained on interview questions/techniques and facilitating group mediation/student reconciliation. SIT will review cyber bullying resources.
- SSW and/or SC will assign screened cyberbullying reports to SIT to begin investigation.
- SIT will conduct interviews with all participants using interview form (based on Functional Behavioral Assessment/ABC format).
- After completing interviews of incidents with all participants, at least three SIT members will review interview documents and recordings and work with SSW/SC to determine interventions.

- SIs will lead mediation/reconciliation with all parties (SSW or SC present) and finalize intervention plans. After all participants have signed intervention plans the SSW and/or SC will monitor compliance using a modified version of the FBA/BIP checklist.

Suggestion for Adapting the Technique:

- SIT will role play conducting the interview and practice completing interview form as part of the initial training.
- SSW/SC can provide SIT with document templates illustrating how to complete the interview form.
- SSW/SC can assign teams (two students) matching skill levels and breaking down tasks.
- The mediation/reconciliation is a three-team process, SSW/SC can assign team members according to strengths/needs.

Student Investigation Team Interview Form

Student Name:

Date of Interview:

SIT Interviewer:

Description of Behavior:

Date and Time (the incident occurred):	Activity (what was going on when the behavior occurred):	Antecedent (what happened right before to trigger the situation):	Behavior (what did the behavior look like):	Consequences (what happened after the behavior):

Follow Up Questions:

1. How would you describe yourself in the incident, victim or offender?
2. What would you like to see happen to resolve the matter?
3. What are you willing to do to resolve the matter?
4. Are you willing to participate in group mediation with the SIT facilitating?

Movement Connections

Eslie Djemmal

Movement Connections is an intervention that allows for any age group of children to use movement as a form of expression. The idea of expression focuses on the release of feelings and emotions that may be difficult for a child to express verbally. This intervention values the mind-body connection which is helpful when working on non-verbal expression.

Materials Needed:

- Safe Place With Lots of Space
- Closed-Toed Shoes
- Comfortable Clothing
- Twinkly Lights
- Scarves
- Music

Description of How to Do the Technique:

This intervention can be done in both a client-centered or group approach, the steps are the same. First the client will be asked to close their eyes while lying in supine position on the floor and examine their body through each major muscle group. This process is done through contracting and releasing each of these muscles. Once the “examination” is complete the client will be asked to imagine that they are in their “happy place” throughout the rest of this process. Music will then start to increase in volume and vary in genre. With the eyes either closed or opened the facilitator will suggest different speeds and intensities of the movement from the client. This activity creates a sense of release for the client. Towards the end of the session the client will move through a “cool down” (lights go off and twinkly lights turn on) and go back to their starting position on the ground with eyes closed and the facilitator will begin a short guided meditation to accept and process what the body went through.

Suggestions for Adapting the Technique:

For other populations of students who are participating in this event such as students with special needs, the structure of the intervention can be modified to create more freedom or structure depending on the population. More freedom would include more improvisation as the main activity while more structure includes creating time for the student to choreograph a solo based on structured motifs.

Additional Information:

Before the intervention the facilitator or specialist would need to take some notes for themselves as each session will include a different movement-based activity determined by the client's needs. The assessment tools I would provide would be a Life Events Checklist as well as the behavioral assessment BASC-2. Throughout the intervention it is good to observe the client's behaviors and a possible shift in expression. There are no specific ways to take notes while monitoring the progress.

Attitude of Gratitude Tree

Rachel Palermo

This intervention is an excellent visual way to show students how being grateful for what you have can change your attitude. If children and families focus on the positive things in their life instead of the negative, overall sadness levels go down and happiness levels go up. This activity should instill hope, promote positive thinking, and decrease negative thoughts and feelings of anxiety.

Population of Students to Use This Intervention: Depression, Anxiety, Grief

Ideal Number of Students Involved: 15-30

Materials Needed:

- Bulletin Board
- Markers
- Colored Leaves Cut Out of Paper
- Laminated Bare Tree Trunk and Branches
- Tape
- Composition Books



Descriptions of How to Do the Technique:

For this intervention the group of students will be given a paper cut out of a leaf. The students will be asked to take a moment to write on their leaf one to three things for which they are grateful. Once the students have completed this task, the social worker will point out the bare tree trunk and branches on the bulletin board and ask the students to raise their hands and describe the tree. Typically answers: sad, bare, cold, winter, etc. The social worker will then ask the students to paste their “gratitude” leaves on the bare tree with tape provided. After students have finished doing this task, the social worker will ask again for the students to describe the tree. Typical answers: full, colorful, happy, big. The social worker will connect how the gratitude leaves enhanced the tree and made it full, just how when we are thankful for what we have in our lives and notice them, our lives are full. If we do

not practice this on a regular basis, our lives will start to look like the bare tree. However, if we get in the habit of noticing what we are grateful for, our lives will look like the full tree. The social worker will then ask the students which tree they would rather be. Typical answer: tree with the gratitude leaves. Social Worker should leave this bulletin board up for several weeks so students can be reminded of the message.

Take Away/Skill Set:

Teach students about gratitude journals and provide a small composition notebook to each child to use for this purpose. Encourage students to write down 5 things you are thankful for each day Ex- food, clothes, friends, family, teachers.

To conclude the activity, the social worker will ask: How are you going to show those around you that you are thankful for them? Discuss the importance of that.

Suggestions for Adapting the Technique:

This could be adapted in a manner that each student receives a blank coloring sheet with a bare tree trunk and branches. The social worker will instruct the students to describe the blank tree. Then, students will draw their own leaves for the tree and write things they are thankful for in the leaves. The social worker will instruct the students to describe the new tree decorated with leaves and words of gratitude to convey the message.

Ideal Number of Students Involved: 5-10

Measuring Technique:

Have students use a self-monitoring technique through their composition notebooks. After every week of writing down 3 things they are thankful for per day, the students will rate their happiness level from 1-10. 1= very sad 10= very happy. The social worker will use this data to evaluate the effectiveness of the intervention.

What Would You Do?

Jermellody Seaton

This intervention is a great way to assist clients (7-10-year olds) with describing and processing their feelings and emotions in a less threatening manner. Through drawings and talking it out, clients are able to come up with effective ways and ideas to solve problems in life that may be causing them stress.



Materials Needed:

- Construction Paper
- Colored Pencils
- Colored Markers
- Crayons
- A List of Problems That 7-10 Year Old Children May Face at School
- Music

Description of How to Do the Technique:

For this intervention the client will be asked to identify a pressing issue in their current life. Once the issue is identified the client will be asked to draw or write about a problem in each individual life on the construction paper. When all are finished, their drawings will be collected. Taking turns, each client will pick a drawing (not their own) and describe the picture drawn on the paper. The group will work together and come up with “what would you do” ways to solve the problem. The client will explain how they may have solved problems similar to this in their personal lives. This way the client knows that they are not alone. The client who picks out a drawing will draw or write possible solutions on the back of the construction paper. If they choose, they can take the drawings with them for reference in the future.

Suggestions for Adapting the Technique:

This could be adapted in a manner that every individual client brings in a portion of a video. The collective group comes up with different ways to solve problems.

There is no right or wrong way. The most important thing is that there is more than one way to solve problems in a less threatening way and they are not alone in finding positive solutions to understanding their feelings and dealing with emotions. The first scenario will consist of the “bad” way to handle a problem. The second scenario will consist of the “good” way to handle a problem. Each client will have the opportunity to complete both scenarios. The end result is looking at both scenarios, recognizing the problem and coming up with a solution to the problem.

Write and Rhyme Program

Arielle F. Brown

The ‘Write and Rhyme Program’ is a short-time program to be implemented in a group therapy setting, to assist clients with describing and processing their emotions in a fun, healthy manner. Students are given the opportunity to process their feelings and perceptions of life that may trigger negative emotions or behaviors through creating poetry, painting, or a new song. This intervention has a primary goal of decreasing negative behaviors in students while increasing their creative expression; self-awareness; and communication skills.

Materials Needed:

- Paper
- 12x12 or 16x16 Canvases
- Pens
- Music
- Computer

Description of Implementation:

Since the music is instrumental, this intervention is more abstract and uses imagination and close listening. Students are provided with coloring/writing utensils and informed that there are no “correct” ways to go about this exercise. Students are asked to be quiet and respectful throughout the exercise. This intervention is to be implemented in a group therapy setting. The timeframe that should be allotted to this is 60-90 minutes per day, once per week. The intervention will be administered for the duration of a school semester to allot for appropriate time for data collection.

The “Write and Rhyme Program” is to be administered to a group of 10-15 students per program administrator. This would assure that students would have the appropriate amount of support as needed to process whatever emotions present themselves during creation/ processing time.

Each session should follow a similar structure and timeline, to assure that enough time is provided for starting exercises, the prompt, creation time, and de-briefing at the conclusion. Consider choosing instrumental songs that have a variety of

mainstream/popular music and more subtle, calming music that capture patients' attention. Students are provided with coloring/writing utensils and informed that there are no "correct" ways to go about this exercise. Students are asked to be quiet and respectful throughout the exercise. Time should be allotted towards the end of each session for processing and any questions. The steps will be implemented as follows:

1. Starting exercises, opening with 5-10 minutes of activities aiming to de-stress. Take into consideration the adolescent's ability to concentrate when determining the length of the relaxation exercise (examples listed below):
 - a. Deep breathing exercises
 - b. Meditative sitting and silence
 - c. Brief verbal check-ins
2. Introduce the experience by preparing the adolescent physically and emotionally about what is going to happen. A prompt will be administered for the students, as a theme or point of thought/inspiration. Recommended prompts can be based on the facilitator or administrator of the intervention. It is best to provide an open-prompt: a statement or work without much structure which will allow students to take their own interpretation.
3. A suggested allotted time that students should be allowed to paint, write, or create would be 40-45 minutes. The students have the opportunity to explore their issues, express feelings, and improve and display verbal skills through a write-your-own-lyrics painting, or poetry exercise.
4. Students will be provided a notification through the last 15 minutes to start the process to conclude the creation time.
5. Debrief session (10 minutes- 15 minutes): The students will have an opportunity to share the products of their work in group therapy or with the school social worker in a solo session. Students will have the opportunity to deal with difficulties in a way that acknowledges where they are and how they process things.
6. Over the next few weeks, students will be asked to select a different medium to use each session. This will allow the students to explore various modes of creativity and processing their feelings. It will also provide more exposure to them with mediums and methods of communication.

Suggestions for Adapting the Technique:

Adaptations for the intervention exist within the music that is selected to be played during the “creation time”. The selection of the music should take into consideration the students developmental or sensory needs (e.g. special needs students may require minimal or low sounds to mitigate existing sensory concerns). If music is removed, it may require a more extensive prompt for guidance. Intervention effectiveness should be evaluated by recording or tracking the amount of behavioral reports of students in each group. Behavioral reports will be collected from the student’s instructors on a weekly basis. By the end of the school semester, results should be compared to the baseline number of behavioral reports of these groups of students in the prior semester.

Song/Youtube Links:

Blues Instrumental: <https://youtu.be/vVjWs3fPajk>

Blues Instrumental 2: <https://youtu.be/F7QCDAiSoms>

George Gershwin, “Rhapsody in Blue”:

<https://www.youtube.com/watch?v=eFHdRkeEnpM>

Just the Way You Are - Bruno Mars (Piano/Cello Cover):

<https://youtu.be/rIBRcQdzWQs>

Monica, “So Gone”: <https://youtu.be/JrYAczlAqwU>

Erykah Badu, “Next Lifetime”: <https://youtu.be/HAPr6iUBAsw>

Thomas Newman, “Define Dancing”:

<https://www.youtube.com/watch?v=2aL5SxX58lM>

Erykah Badu, On & On (Instrumental):

<https://www.youtube.com/watch?v=Cfjj9t8BTQI>

Childish Gambino - Redbone (Instrumental): <https://youtu.be/xiCZcqbxqM>

Ed Sheeran - Photograph (Piano/Cello Cover): <https://youtu.be/DpjO44jJ4Mc>

Bitter Sweet Symphony - The Verve - Stringsplace String Quartet:

<https://youtu.be/Ktl3dpO4GaY>

“Write and Rhyme” Evaluations Report

Date/Week#:

Student Name:	#DR	Student Name:	#DR

Total Student Report For Week #:

Weekly Observations Summary:

Therapeutic Painting

Arlishia Irby

This intervention is a great way for clients to cope with their current situation and the things that they have going on in their lives. Through therapeutic painting the client can become in tune with their feelings and describe them through paint.

Oftentimes it may be difficult for clients to verbally describe their stressors.

Painting is a way that they can draw out their feelings to be later described versus them having to verbally describe them without feeling like no one understands where they're coming from.

Materials Needed:

- Paint
- Paint Brushes
- Canvas or Paper Plates

Descriptions of How to Do the

Technique:

For this intervention the client would be asked to describe the most current stressor that they feel is

hindering them from achieving their current goals. The client will paint images and describe the feelings, emotions, and triggers that they feel while developing the image. The client will also describe how the image makes them feel... happy, sad, scared, alone, etc. This intervention will be used as a technique to encourage the client to begin comfortably expressing their feelings in an untraditional way versus meeting in an office setting and stretching out on the couch. It may be difficult for clients to start talking and describing their feelings. Therefore, painting out their feelings will help decrease the anxiety that a client may be feeling in order to make their session more effective.

Suggestions for Adapting the Technique:



Clients will be asked to begin drawing on the canvas to describe what they're currently feeling. During each session they may pick up where they left off or add a new image if a new stressor arises. The main purpose would be for the client to try and focus on completing the first image before creating a new one because it may be overwhelming and difficult for a client to try and tackle more than one trigger at a time. Each time that the client adds on to the image, a complete canvas will reflect how the client was able to battle their unwanted stressors and successfully work through them. A completed canvas at the end of the session results in successful progress of identifying and working through a stressor.

Life Panorama

April Welch

Adapted From: Narrative Exposure Therapy and Trauma-Focused Cognitive Behavioral Therapy

The Life Panorama is a visual representation of an individual's life experiences. Utilizing a long piece of paper, or several papers taped or glued together, the client will draw a timeline of their life including relevant photographs, drawings, newspaper clippings, or other items that can be attached to the paper. This activity is intended to allow the individual to see each experience, including both the highs and lows, as one event, place in time, or piece in the whole panorama of their life. The Life Panorama also instills hope by creating goals and planning for the future. Additionally, the Life Panorama provides the opportunity for individuals to share their stories with others and learn to identify and label emotions as they learn that each person experiences life events that produce a wide range of emotions.

The idea of the Life Panorama is a combination of adaptations of the Lifeline created in Narrative Exposure Therapy (NET) and the Trauma Narrative created in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Both NET and TF-CBT are effective interventions for individuals experiencing symptoms of Post-Traumatic Stress Disorder (PTSD) or other distress resulting from exposure to traumatic events. NET is particularly effective with refugee populations or others who have experienced violence due to war or societal unrest and has been studied more extensively overseas than in the United States (American Psychological Association, 2017; Fazel et al., 2020; Peltonen & Kangaslampi, 2019; Robjant & Fazel, 2010). During this intervention, clients create a Lifeline using a rope stretched into a line with rocks, flowers, candles, and other objects used to signify important life events thus telling the client's life story. After the completion of the Lifeline activity, the Lifeline is disassembled. In TF-CBT, clients complete a Trauma

Narrative, often in the form of a book, to tell the story of a personal traumatic event within the context of their life (Deblinger et al, 1999; Deblinger et al., 2011; Rivera, 2012).

The Life Panorama differs from the NET Lifeline in that the individual chooses the image or visual representation of each life event and is a tangible object the client can keep. The Life Panorama also differs from the Trauma Narrative in that the Life Panorama allows for exploration of a wide range of life events including multiple traumatic events if desired. The Life Panorama would be a useful tool for clients who do not have access to or meet the screening criteria for NET or TF-CBT. The Life Panorama could be utilized to help individuals process a wide array of life experiences from moving, changing schools, or the loss of a pet to Adverse Childhood Experiences such as community violence, abuse, or neglect. By addressing these traumatic or distressing events and allowing the client to process the impact of these events on their lives, clients should experience an improved quality of life and may experience improved relationships with family members, classmates, and teachers.

Materials Needed:

- Roll of Paper
- Glue/Tape
- Markers/Paint/Crayons/Colored Pencils
- Stencils/Stickers/Photographs/Newspaper Clippings (optional)

Creation of Life Panorama:

Step 1: Explain the rationale for creating the Life Panorama. Discuss how, over the course of one's life, many events transpire. Some of these events are positive and create pleasant emotions, some events are neutral, and some experiences are negative resulting in unpleasant emotions. Show images of photographs explaining how a photograph captures an image of a particular person, place, or thing while

panoramas provide an even larger, wider view of the whole allowing one to see the “big picture.”

Step 2: Either collaboratively or individually, have the student create an overview of the events that should be included on their Panorama beginning with their birth. List out these events as well as ideas of how to represent the event on the Panorama. This may require the individual to gather items such as photographs, newspaper clippings, etc. to add to the Panorama.

Additionally, create several future goals for different points in time (examples include graduate high school, graduate from college, buy a car, become an astronaut, travel the world, have a house on the beach, win the Nobel Peace Prize, etc.). These goals may be easily accomplished or require much work and dedication.

Step 3: Provide the client with a long piece of paper (or several papers that can be taped together to create a long piece of paper). Allow the client to plan out where each life event should occur on the Panorama and fill in the details of the Panorama using provided supplies (markers, crayons, paint, die-cuts, stickers, etc.) as well as any personal items they have provided. Ensure that the individual leaves a dotted line at the end of their timeline to signify that some parts of our future are unknown. The Panorama may take several sessions to complete.

Step 4: Allow time for each person to share their Panorama in the group or with the therapist or parent. After sharing, each client may take their Life Panorama home. This step should be optional according to the comfort level of the individual.

Suggestions for Adapting the Technique:

The developmental stage of the child will inform how much assistance will be required to complete the Life Panorama. Younger children or students with disabilities will benefit from the use of stickers, paper die-cuts, or photographs to represent or enhance their drawings of life experiences and will likely need

assistance labeling each event. Older students may wish to draw or paint their Life Panorama in addition to utilizing provided or personal items.

Additionally, the therapist should understand the cultural context of the client and operate from a trauma-informed perspective. A basic understanding of trauma theory may be beneficial as well as the understanding that each person processes traumatic events differently. Clients that show a high level of distress may benefit from a referral to more intensive therapeutic interventions and may not benefit from completing the activity. Furthermore, clients should not be discouraged from adding traumatic events to their Life Panorama, but should not go into great detail of these events when sharing their Life Panorama with the group (i.e. stating that abuse occurred vs. sharing specific details of the abuse).

Data Collection Methods:

To determine the effectiveness of this activity, each client completed a depression inventory before beginning the intervention and upon completion of the intervention. The assessment utilized should be tailored to the developmental age of the client. For elementary students, the Center for Epidemiologic Studies Depression Scale (CES-D) can be administered and the Beck Depression Inventory (BDI) can be administered for middle and high school students. Additionally, when measuring outcomes, consider the presenting problem of the client or the focus of the group. Other measurements such as the Generalized Anxiety Disorder-7 (GAD-7) scale can be used to collect data and measure outcomes.

Art/Drawing Club

Ethel L. Brown

Oftentimes it is difficult to get children to talk, especially younger children. In using this intervention children will have a space to speak freely without being judged or coached on what to say. Furthermore, a child will be free to express their emotions without feeling like they have to suppress them. According to Stuckey and Nobel (2010) “art helps people express experiences that are too difficult to put into words” (Stuckey & Nobel, 2010). The pictures that the children draw will help the social worker understand what a child is experiencing when they cannot bring themselves to say it. Art/drawing therapy has been used in a number of settings.

Materials Needed:

- Paper
- Construction Paper
- Markers/Crayons/Pens/Pencils/Finger Paint
- Canvases

Descriptions of How to Do the Technique:

For this intervention the client will be asked to draw a picture to try to explain a traumatic event they have experienced.

STEP 1: The client will be instructed to express their fear or issue by free drawing or painting.

STEP 2: Once the drawing or painting is finished the client will be asked to describe their painting or drawing (if comfortable).

STEP 3: The social worker will listen and help the client process their drawing.

STEP 4: If warranted the social worker will refer clients to outside agencies.

Suggestions for Adapting the Technique:

This technique can be used individually or in a group setting. Each client would be asked to express their feelings through drawing or painting. If the trauma is too severe, then an individual session is suggested. We do not want to cause more

trauma to our clients. If the client feels better being in a group of people who have experienced the same trauma, then they may be able to express their feelings better. Clients who share the same trauma process things differently and can learn from each other. Age appropriate groups would be formed with special attention to be given to clients with special needs. Be careful not to give ideas letting them draw from their own feelings.

Data Collection Process:

For data collection, I would provide students with a questionnaire over several subsequent sessions with different students. The scores would then be tallied up to ensure that the intervention is working with individual clients. If the intervention is proven to be successful, it can then be implemented into the therapy sessions.

Art Therapy Questionnaire

1. Did you feel safe when you entered your session?
 - a. Yes
 - b. No
 - c. Maybe
2. Did the surroundings make you feel safe?
 - a. Yes
 - b. No
 - c. Maybe
3. Did you feel safe discussing your drawing?
 - a. Yes
 - b. No
 - c. Maybe
4. Did you feel forced to discuss your drawing?
 - a. Yes
 - b. No
 - c. Maybe
5. Did your counselor make you feel safe?
 - a. Yes
 - b. No
 - c. Maybe
6. Would you recommend this club to a friend?
 - a. Yes
 - b. No
 - c. Maybe

Visual Journaling

Janequa Jackson

The expressive arts took-it intervention is a technique called visual journaling. Visual journaling can be simply compared to the saying of having an art diary that contains drawings, words, or even magazine pictures. The intentions of this intervention are to assist clients with giving them a way to express their feelings and experiences from their past and to make light to the ones in the future. Many people tend to struggle with putting their emotions out on the table, especially children and adolescents. This intervention is a way of putting those feelings and thoughts out on paper through imagery. The practice of visual journaling has been utilized in therapy for helping with self-care, self-regulation, stress reduction, trauma, depression, and more. This intervention can be used either individually or used as group work.

Materials Needed:

- Journal/Sketchbook/Notebook
- Pens/Markers/Crayons/Pencils
- Magazines
- Safety Scissors
- Tape
- Glue Sticks

Description of How to Do the Technique:

For this intervention the client will be asked about instances that are either a present issue or a past issue that is affecting them in their current life.

Step 1: Clients will need to identify the problem in their life, such as stressors or pressing instances that are hindering their development.

Step 2: Once the issue is identified, the client will be asked to open their journal and put the images of the stressor on paper using drawings, paintings, or magazine cut

outs. At this step, the client will be in complete control of putting their emotions out in their journal.

Step 3: The client will then share the imagery of their feelings for the day and discuss in detail what the images are reading as it relates to their issue.

Step 4: After sharing, the group will then provide feedback before the therapist input his/her thoughts on the visual that is presented. This is meant to show the client that others have similar stories and to show them that they are not alone. It helps to build social interactions and it helps with developing healthy coping skills to help learn new ways of communicating.

Suggestions for Adapting the Technique:

This intervention can be adapted to any child of any age. It can also be designed to help children who suffer from disabilities and mental health issues. This intervention is built for a group and can be used individually if needed. It will work great with either setting. Individually, the client will still take the required steps and instead of feedback from the group, the client will only get feedback from the therapist. The end result will always present the effectiveness of building character, interpersonal skills, and learning to manage stressors. Children with disabilities and mental health diagnoses, the intervention can be adapted by including their parents and showing them the ins and outs of how clients feel or how they communicate best.

Data Collection Processes:

The visual journal will be tracked through a pre- and post-test to determine what level of stress or depression the client is dealing with. It is meant to show us the changes in their artistic expressions from week to week and month to month. To track this process, the Beck Depression Inventory (BDI) questionnaire will be used for rating the client's depression level before the start of treatment, as well as at the end of treatment. Additional assessments can be used as it relates to the client's presenting issues.

Photo Justice

Anna Crutcher

Intervention:

Photo Justice is an intervention that was developed from the PEAR Institute with Harvard University. It is an intervention designed for middle and high schoolers to be able to process their feelings, particularly in areas in which they felt like they have been faced with injustices. This intervention allows for students to give their feelings a voice, and it encourages them to be creative and think outside of the box. The goal of the intervention is to work with students who are struggling with anxiety, sadness, attention problems, etc. and provide them with targeted activities that will support and encourage them to learn and grow. It is a strength-based intervention, so it works to focus on the resiliency of each student and nurturing positive relationships both with peers and adults.

In each session, the group will begin by looking through a series of photos that will be provided from the leaders of the group. These photos can be anything from someone swinging on a swing, to someone in a jail cell, to someone that is sitting on a bench. Then the group will freely discuss what they think is the context of this photo. After, the group leaders will provide the students with a list of specific tasks. For example, one task might be “take a picture of something that makes you happy.” Then, the group allows some time for the students to walk around and take pictures of what they think best fits each task. At the end, the group will come back together and discuss their photos. As the group continues, group members will decide a topic that they would like to make a project on. For the final few sessions, the group will work together to come up with what they want their project to look like, for example, an art gallery. Once they have decided what they will do for their project, they will each select their own photos that they would like to use and talk about the way that it expresses whatever topic the group has chosen.

Materials Needed:

- Camera



- Instructions/Task Sheet
- Pre-Test
- Post Test
- Classroom/Meeting Space
- Paper
- Pen

Step-by-Step Method:

Step 1: Meet with the group, get proper consent forms, have members complete Photo Justice Pre-Test, and discuss with group members what they hope to get out of the group. The group should go over confidentiality, and then allow members to share what they think the norms/rules of the group should be.

Step 2: Once there is a group of students that have expressed interest in the intervention, group leaders should discuss with the group when is the best time and day to meet in order to ensure regular attendance from each member.

Step 3: Group leaders will present the group with 10 photos. They will allow the group members to discuss what they think the context of the photo was or ways that they can apply what is happening in the photos to what is going on in their lives.

Step 4: Group leaders will provide each student with a Task List. The group leaders will come up with the amount of time that students are allowed to go take the photos for each task on the list. Group leaders will ensure that each student is back in the meeting space by the agreed upon time.

Step 5: Group leaders will facilitate a discussion between group members about the photos that they have taken and why the students believe the photo they have taken matches the task.

Step 6: Group leaders will encourage group members to come up with a topic for the final group presentation. Group members will decide on a topic and what they want the final presentation to look like. Encourage members to be creative!

Step 7: Group members will work on the Final Presentation and present it to the school, or whatever organization is running this intervention!

Suggestions for Adapting the Technique:

One way to adapt the group to be more inclusive to students with special needs is to restrict the tasks to be only taken of items that are in the classroom. This way students who are not able to move around as freely are still able to participate in the group. Another way is to have each student within the group come up with a different role for what they will be doing to work on the Final Presentation. This way, the role can be catered to the needs of the student, and each student is able to easily complete what they need to do.

Data Collection Process:

The data from this intervention will be collected through a series of pre and post-tests. Each student will complete the same survey before and after the intervention. Example tests are included below.

Pre-Test and Post Test

Name:

Date:

Age:

Gender:

0 = Never

1 = Almost Never

2 = Sometimes

3 = Fairly Often

4 = Very Often

1. I have someone in my life that I can turn to when I am feeling upset/angry.	0	1	2	3	4
2. I get frustrated when something does not go my way.	0	1	2	3	4
3. I have one or more friends that I know that I can trust.	0	1	2	3	4
4. I talk about my problems when I am feeling angry/upset.	0	1	2	3	4

Past, Present, and Future Self Portraits Intervention

Brendan Hanover

Description of the Intervention:

The Past, Present, and Future Self Portraits Intervention should be used to assist the client in separating their self-identity from their previous trauma and to improve their self-esteem and overall well-being. This intervention should be implemented after a child has been seen by the school counselor or school social worker for a minimum of three weeks. The intervention is done individually and takes four sessions. During the first session, the child will draw themselves in the past with a focus on their past trauma (that was discussed in the previous sessions). During the second session, the child will draw a standard self portrait with a focus on their current emotions and self-identity. During the third session, the child will draw a transformational self portrait focusing who they want to be and how they want to be seen. In the fourth and last session, the child will view all three self portraits together for the first time. This will allow them to see their own evolution as well as what is possible for their future.

Materials Needed:

- Paper
- Pencils
- Erasers
- Sharpener
- Colored Pencils/Crayons/Markers

How to Implement the Intervention:

For this intervention the child will be asked to reflect on past trauma or negative experiences, their current mental state, and how they want to be in the future. They will then be asked to draw themselves in each phase (past, present, & future).
STEP 1: Have the child reflect on past trauma or negative experiences, and then have them draw a self portrait based on those experiences.

STEP 2: Have the child reflect on their current mental state and coping, and then have them draw a self portrait based on their current state.

STEP 3: Have the child reflect on where and how they want to be in the future, and then have them draw a self portrait based on their hopes and dreams for themselves.

STEP 4: Line up the three self portraits, and discuss with the child how they evolved from the past to the future. Help them realize that their current state is not permanent, and brainstorm with them on ways to get them to this imagined future self.

Suggestions for Adapting the Intervention:

For younger children that have trouble understanding the past, present, and future concept, one could have the client draw self portraits of themselves expressing different emotions or doing different activities that they do and do not enjoy. This will change the discussion around the portraits, but it should still allow for a discussion about past trauma, self-esteem, and ways to improve self-identity.

To make sure the activity is inclusive, it is also important to make sure the children have access to a large spectrum of colors and coloring tools (crayons, colored pencils, markers etc.). This will ensure that the child can create portraits that they can truly identify with, and it will help them feel safer and more represented.

Data Collection Process:

To assess if the Past, Present, and Future Self Portrait Intervention invokes an increase in self-esteem and/or decrease in depression in the child, a pre and post assessment can be given before and after the intervention. Depending on the age and presenting problem, either assessment may be useful in identifying if the intervention was successful. The 6-ITEM Kutcher Adolescent Depression Scale: KADS is intended for high school age students, while the Rosenberg Self-Esteem Scale could be used at all ages.

Feelings Postcard

Kameron Bullard

This expressive intervention provides clients an outlet to processing and expressing their feelings and emotions in a manner that allows creativity to flow. The feelings postcard allows the client to illustrate their feelings through art depictions on one side and on the other side allows the client to express their feelings in words if they choose to do so. This intervention employs the development of emotional literacy through expressive arts therapy.

Materials Needed:

- Postcards
- Crayons
- Markers
- Colored Pencils

Description of How to Do the Technique:

For this intervention the client will be asked to identify a stressor in their current life.

STEP 1: Clients will need to identify a current stressor, a need, or something that is hindering them.

STEP 2: Once the stressor is identified the client will then be presented with the postcard and given the instructions of drawing how they feel on the blank side of the postcard.

STEP 3: Once the client has depicted their stressor through drawing on the blank side of the postcard, then instruct the client to express their feelings through words on the lined side of the postcard. This can be done by the client just writing words that come to mind or writing out the explanation of the drawing.

STEP 4: Give the client the safe space to explain what their drawing is and the expression they wrote.

Suggestions for Adapting the Technique:

This technique could be adapted to be used in a group setting. The group would be provided with a postcard and collectively describe a stressor they are all experiencing. The group would then each contribute to the drawing on the blank side and come up with words or a description of what the drawing expresses for them.

This technique could also be adapted to be used with different population groups, such as clients who have specific sensory needs and would prefer to paint, glue different objects onto the postcard, or apply stickers.

Data Collection Purposes:

For this technique, a Session Evaluation Questionnaire (SEQ) will be administered following the conclusion of the session. The SEQ can be used for both individual and group sessions. It is used to determine the mood and emotions associated with the session. This particular questionnaire was created and developed by William B. Stiles of the Psychology Department at Miami University (Ohio).

Session Evaluation Questionnaire

Name:

Date:

Please circle the appropriate number to show how you feel about this session.

This session was:

Bad	1	2	3	4	5	6	7	Good
Difficult	1	2	3	4	5	6	7	Easy
Valuable	1	2	3	4	5	6	7	Worthless
Shallow	1	2	3	4	5	6	7	Deep
Relaxed	1	2	3	4	5	6	7	Tense
Unpleasant	1	2	3	4	5	6	7	Pleasant
Full	1	2	3	4	5	6	7	Empty
Weak	1	2	3	4	5	6	7	Powerful
Special	1	2	3	4	5	6	7	Ordinary
Rough	1	2	3	4	5	6	7	Smooth
Comfortable	1	2	3	4	5	6	7	Uncomfortable

Shake It Out

Kristy L. Pedrero

This intervention is a great way for children to learn to regulate their emotions and express themselves in a healthier way. Through created dance movements, this approach offers body-based, clinical interventions for kids who present with symptoms of emotional dysregulation, struggle with emotional experience, and/or find it difficult to self-regulate emotionally. Dance therapy help children accomplish positive body image, improve self- concept and self-esteem, reduce stress, anxiety, depression, decrease chronic pain, increase communication skills and encourage a sense of well-being.

Materials Needed:

- Positive Music
- An Open, Safe Area
- Dance Scarves
- Dance Parachute
- Musical Instrument

Description of How to Do the Technique:

For this intervention the client will be asked to process their feelings, thoughts and emotions through dance expression.

STEP 1: Put on positive music. Please make sure that you are in a safe open environment.

STEP 2: Start with a warmup.

STEP 3: Encourage your client to explore new forms of movement to encourage growth.

STEP 4: Encourage your client to dance with expression and emotion of what they are feeling.

STEP 5: As the social worker, I encourage you to mirror the client's movements, to express to the client you are understanding how they are feeling. Ask questions, use MI and CBT if needed.

STEP 6: Assist the client in developing a better awareness of the client's body through movement.

STEP 7: Close with a cool down, discuss what occurred, experience or feelings expressed. Help the client connect their nonverbal expression experience with words.

Suggestions for Adapting the Technique:

This intervention is not meant to look the same, within each session. The intervention does need to be structured and a non-directive approach needs to be taken. This intervention can be used individually or with a group.

Data Collection Processes:

Youth will be administered a pre and post assessment. The Perceived Stress Scale for Children (PSS-C) is an assessment in which identifies a child's stress-related anxiety disorders. With the completion of the assessment, decreased stress related anxiety disorders should be expected. Additional measures can be used based on clients needs.

Art Club

Bailey Dempsey

This intervention is a great way to help clients, mainly children and adolescents, in a school setting with expressing and discussing their feelings and emotions in a safe and creative way. Through drawing, painting, pottery, and photography, the child will be able to create a piece of art that expresses their specific situation and feeling. This intervention is based on expressive arts programming that uses specific art works at the child's choice. Many children who experience trauma are unable to voice or even know themselves what is happening and what they are feeling. The child can choose their medium to use and express themselves. Then, with guided help from a counselor or clinician, the child can begin to understand their emotions, behaviors, and life events in a more vulnerable and open way. Art can also bring out themes of one's life into the open. This is also a way for the child to make decisions and choices and have control over those decisions and choices. It will teach them good self-reflection and coping skills, while also boosting positive morale and self-understanding.

Materials Needed:

- Colored Pencils
- Paint
- Paint Brushes
- Paper
- Clay
- Potter's Wheel
- Pottery Tools
- Camera
- Printer
- Music Player/Speaker



Description of How To Do Technique:

For this intervention the client will be asked to identify a pressing issue and/or feeling they are currently undergoing.

STEP 1: Clients must identify a need, event, feeling, or stressor in their life at the moment for the focus.

STEP 2: Once the specific issue or feeling is identified the client will be asked which art form they would like to utilize. The client is asked to choose colors and shapes they feel most accurately expresses their feelings. The client has the power to choose where they would like to go from here. The only direction is to express the situation or feeling as they perceive it.

STEP 3: Once the client has completed the artwork, it will be reviewed by the clinician. The client will talk through each person or object in their artwork and they chose that specific piece or color.

STEP 4: When the client feels comfortable and the clinician has talked over the piece with the client, the client can choose to display this piece for the rest of those in the art club to see. Positive comments can be left by other students in the art club.

Suggestions for Adapting the Technique:

This could be adapted to a group project instead of an individual assignment-The group can be instructed to work on one project together with each person having a specific role. There may be a theme presented to the group. The group must work together in unison to bring each of their experiences and feelings together as one. Another adaptation could be forming a more specific group with a number of kiddos who want to participate. This could be a drawing group or dance group, for example.

Data Collection Processes:

For this assignment, a pre and post questionnaire assessing the students' levels of stress should be utilized. This means the same assessment should be used before beginning an art club and after being in an art club. The questions should not

change or be altered in any way for accurate measurements and tracking. A good tool to use would be the PSS, or perceived stress scale by Sheldon Cohen. There has been proven validity with this scale. It has also been regularly used with children and adolescents. The questions are easy to read, understand, and answer. In order to know if the intervention is beneficial, there should be a decrease in the child's stress levels after the intervention as compared to before the intervention. Other measures can be chosen and utilized based on the specific clients' needs. Needs may include school issues, bullying, depression, anxiety, social anxiety, and things of this sort. change or be altered in any way for accurate measurements and tracking.

Cartoon/Comic Creations

Tiana Vos

The Cartoon/Comic Creations intervention is an innovative approach using externalization to support clients who have a difficult time discussing situations in their life. This intervention targets youth between 6 and 18 years of age with anxiety, depression, or trauma. The client's experiences can be overwhelming and can be mentally consuming. Externalizing experiences and creating cartoons or comics can physically put a box around those experiences to put them on a shelf and separate from the person. Aside from externalization, this intervention also uses narrative therapy. Narrative therapy concentrates on the client's stories – the internalized beliefs based on their interactions with familial, societal, and cultural influences throughout their lifetime. The current intervention focuses on expressive arts programming that applies drawing and illustration in a non-threatening behavior. The purpose of Cartoon/Comic Creations is for clients to illustrate traumas or convey information. Sometimes it can be difficult for children to be open about personal matters. When children can express themselves, as seen in many expressive art therapies, the physical depiction of an internal incidence can initiate conversations. Cartoons and comics provide a safe environment, and there are no consequences from the client's actions. Through the integration of art and cognitive-behavioral therapies (CBT) can provide clients the chance to convey and learn abilities through linguistic, visual, and tactile patterns to reduce maladaptive cognitions. Combining CBT with art incorporates imagery and creative representation to formulate thoughts. When creating cartoons or comic strips as art therapy, it becomes a method of artistic expression of one's inner view. It also allows children to intensely examine their abstract and complex encounters, emotions, thoughts, and behaviors.

Materials Needed:

- Paper with defined boxes

- Pens
- Pencils
- Markers
- Crayons
- Colored pencils

Description of How To Do Technique:

For this intervention, the client will be asked to establish a difficult situation in their life.

STEP 1: Clients must identify existing distress, struggling with mental health, or battling success in life.

STEP 2: Ensure a continuous safe environment for the client.

STEP 3: Ask the client to reflect on a specific event or time they faced an obstacle.

This could refer to a general point in time, for example, their childhood or a traumatic event. After the obstacle is identified, ask the client to construct a cartoon or comic strip that is based on that experience. Ask the client to illustrate all the emotions, transcript, and the environment for that incident. The main character should be a representation of the client or the client themselves. The client should not be expected to complete this activity in one session.

STEP 4: Once the cartoon or comic is complete, the client will explain each frame to the clinician. Following the explanation, the clinician will determine if the client needs additional support or interventions.

STEP 5: The client can decide to take home their cartoon or comic or keep it in their file.

Suggestions for Adapting the Technique:

The Cartoon/Comic Creation could utilize story prompts to initiate the process for a quiet or shy client. However, it is crucial clients can implement freedom and self-control throughout the process. Another accommodation for clients with significant anxiety to draw outside with sidewalk chalk. Sidewalks have lines that

section off each block, like in a cartoon and comic strip. Once the client is done drawing their experience and explaining their emotions and thought process, they can throw water balloons or splash water on each block to wash away the negative feeling.

The Cartoon/Comic Creation intends to provide a safe environment for the client. The client should be leading the art therapy experience, and the client and clinician relationship should be natural. If a client is tactilely sensitive, do not force or physically make the client use new material. Pressuring a client into an unfamiliar material could communicate they have no control over their environment, and it is not a safe space.

The room the intervention takes place in should be a space where the client understands they are free to express themselves. Intervention sessions should be in the same room to create consistency. From art supplies to furniture, even the smells should remain the same for each session. Applying room consistency for a client with disabilities will provide security in the environment and a sense of control. If a client uses a wheelchair, give adequate space for them to move around with ease.

Clinicians should understand the fundamentals of art therapy, like color psychology and line quality. It is crucial to distinguish that colors represent something different. For example, red may express anger, extreme feelings, or passion. Line quality can demonstrate various emotions. For instance, jagged lines may relate to a lot of energy, rage, or irritation.

Be aware of ethics regarding client art. For instance, it is common for individuals who are not trained art therapists to put client's art on the wall, while art therapists consider it to be a private clinical discussion and the client either takes the artwork home or keeps it in the client's file. It should not be up for public view. Another example could be if a client enters a room full of art, they may have the expectation their art will be on display, which may be problematic. Displaying client art could

generate a misleading standard of the Cartoon and Comic Intervention. It may make clients reluctant to try because of an art ability insecurity.

Data Collection Processes:

The pre and post scales will depend on each client's situation and reason for the intervention. One suggestion for a client seeking assistance for anxiety, Vos Children's Anxiety Scale is a new scale to measure child anxiety. The clinician should see a decrease in anxiety proceeding with the intervention. A suggested pre and post scale for depression is Depression Self-Rating Scale for Children to assess depressive symptoms. In comparison to the pre and post scale, there should be a decrease of symptoms seen following the intervention.

The Child and Adolescent Trauma Screen (CATS) – Youth Report is a two-part self-assessment for measuring trauma. Completion of part one only needs to be done before the intervention, while part two is a pre and post-evaluation.

Rainbow Stones

Tara Mills Deer

Intervention Details:

Students on the Autism Spectrum can experience an array of challenges throughout the course of a school day. One of the more stressful situations for children may be the need to transition between classroom, activities, or instructors. Autistic children often have a difficult time shifting their focus from one area of instruction to another and may not respond to nonverbal prompts or indirect language. In addition, some autistic children can easily become overwhelmed by a shift in activity or environment, and their resulting behaviors may be difficult for educators and aids to manage.



A transition item, such as a rainbow stone, can help students navigate their distress by serving as a familiar source of comfort. Children can be encouraged to keep their rainbow stone in their pocket, backpack, or desk and rely on it when needed. Artistic interventions can be a creative way to equip students with a strategy for emotional regulation. The concept of an emotional anchor stems from practices found in Mindfulness Based Stress Reduction, which focuses on techniques for managing attention, stress, mood and anxiety. A rainbow stone is beneficial because its creation serves as a therapeutic outlet and its ongoing presence can be an emotional support during times of stress or situations in which children may be forced to make necessary transitions. A rainbow stone activity is flexible and can take many forms in order to meet individual student needs.

Materials Needed:

- Stones

- Acrylic Paint
- Paintbrushes

Step-by-Step Method:

Step 1: Allow each student to choose their own stone in an unrushed manner.

Children may want to consider/touch the stones before making their selection. It is important to be patient during the selection process and provide recognition or praise for their selection.

Step 2: Direct students to select their own paint color and brush size.

Step 3: Allow the children to paint their stones with the colors and designs of their choice. There is no right or wrong way to make a rainbow stone, this is the student's opportunity to create a stone to serve an individual purpose.

Step 4: Give students the option of showing their rainbow stones to the class. Some students may want to explain their stones to the class while others may not. If students are interested in sharing, give them the opportunity to explain their projects.

Suggestions for Adapting the Technique:

Fortunately, the rainbow stones intervention can be adapted to fit a variety of age groups, capabilities, and settings. Children of all ages can create rainbow stones. Small children may need larger brushes and more supervision than older students. Older children will be able to make more complex designs so having a variety of brush sizes may be helpful. In working with students who struggle with manual dexterity, sponges may be easier to hold than brushes. In addition, this intervention can take place outdoors, on the floor, or at a table if a child is unable to sit on the floor. Autistic children may be very focused on their activity, so ensuring that they are not rushed will create a more meaningful experience. Finally, the rainbow stones project can take place in a traditional classroom setting or can be offered to students who are homeschooled.

Data Collections & Methods for Monitoring Progress:

School staff should track data and monitor student progress in order to ensure that interventions are effective. The first step is to identify the behaviors that the team wishes to modify. For a student struggling with transitions within the school day, these behaviors can include hitting teachers, hitting students, kicking, yelling, spitting, crying, elopement, biting, scratching and other self-injurious or disruptive behaviors. The Behavioral Data Sheet allows staff to specify the behavior, indicate the number of incidents, outline which interventions, if any, are being implemented, and track the pre and post intervention data for a period of ten days. The student's support team can then review this data to make modifications to the intervention as needed.

Expressive Journal

Emily Franks

This intervention allows clients to express how they feel and what is on their mind through journaling. Throughout this journaling intervention, the client will be able to work through and cope with some of their stress, anxiety, depression, aggression, trauma and build resilience while becoming more comfortable with self-reflection, becoming more self-aware, and being able to express themselves creatively. This intervention is based on visual journaling and expressive writing in therapy practice combined.

Materials needed:

- Sketchbook or composition notebook
- Pencil or pen
- Markers
- Paint
- Colored paper
- Various art supplies

How To Use This Intervention:

For this intervention the client will have issues that they may have problems discussing verbally.

STEP 1: The therapist will have a discussion with the client and determine if they need a different outlet of expressing how they feel than verbally.

STEP 2: Once the client has expressed that they would like to try a different method of expression, the client will complete a pretest.

STEP 3: The therapist will then provide the client with a sketchbook or notebook to use as their expression journal.

STEP 3: The therapist will discuss and create a goal with the client of how often that they will be adding entries to this journal, frequency can vary based upon the

client (example: 5 days of the week with 10 minutes of free writing/creating without stopping or worrying about mistakes, could vary each week).

STEP 4: The therapist will allow the client to personalize the front of their journal using whatever art medium they would like i.e. markers, paint, colored pencils, magazine clippings, stickers, etc.

STEP 4: The client will create entries in the journal regarding what is going through their head at the time and to reflect upon skills they are learning in therapy. The client will attempt to create these entries in the frequency and manner that was agreed upon with the therapist, using their choice of writing or art expression.

When creating entries, the client can create an expressive writing entry, or they can use whatever art medium they choose in their entries to express their thoughts and feelings. Incorporating words into those visual arts entries is also encouraged.

STEP 5: Each therapy session, the client will share their previous week's entries with the therapist, if they are comfortable, discuss if they met their goal of frequency and free writing/creating time, and talk about their goal (or topic, if desired) for entries for the next week.

STEP 6: At the end of the time working on this intervention, the therapist and client can discuss the experience and the client can complete the post-test.

Suggested Adaptations:

This intervention could be altered in a few ways. It could be altered for younger individuals so that only the visual arts component is included, without the expressive writing. In addition, for individuals with disabilities who may have difficulty writing, use of technology could be implemented to do a digital journal.

Monitoring Process:

For this intervention, a pre and posttest monitors the student's anxiety and depression, however, other measures can be used based upon the specific issues that the student may be facing. With the implementation of this intervention we would hope to see lower scores throughout this assessment.

Friends on Hand

Katie Zelaya

This intervention is a great way to guide clients with past childhood trauma, with processing their feelings and emotions in a positive manner. Through a guided script, two puppets (one on each hand), and imagination, the client can use the puppets as a reflection of their past. This reflection will help guide the conversation between puppets and address any issues that arise and need to be discussed and worked through further. This intervention is based on expressive arts programming that uses puppetry in practice.

Materials:

- Pens/pencils
- Paper
- Set of puppets (3 sets in total, so child has options to select from)
- Background prop for, “puppet show”
- Chairs
- Session room



Intervention Procedural Steps:

For this intervention, the client will be asked to identify an on-going issue in their life. Since the client is a child, a simple the reflection question could go as follows, “What is something that makes you very sad”.

Step 1: Clients should identify something that makes them sad/uncomfortable.

Step 2: Once the issue is identified, the “puppet show” will be explained. Explaining that the puppets will be used to represent the people in the client’s life. One puppet being the client and the other puppet being someone else.

Step 3: The client will be asked to use the puppets to act out a time when he/she felt sad/uncomfortable. The client will think about the feelings that he/she felt and to try to portray those feelings/emotions throughout the “puppet show”

Step 4: Once the client is finished. The client will then be asked to do the same thing with the puppets but instead of acting out the same situation that made him/her sad, the client will be asked to act out how he/she would like the situation to change to make him/her happy.

Step 5: At the end of the session, the client and therapist will have the opportunity to discuss the sad/uncomfortable show vs. the happy show and specify the important details for both.

Intervention Adaptations:

This intervention could easily be adapted: instead of puppets, the client can draw a picture of the events. First, by drawing the situation that occurred that made him/her sad and then on that same drawing, revising it however necessary to make the client happy about the situation. This could be adapted for a younger child. This could also be adapted for a child with disabilities impacting their speech or mobile abilities.

Our Glass

Cody Keller

This intervention focuses on imaginative play in a therapeutic fashion, as well as utilizes the sensory benefit of sand and organization to determine different coping techniques that can help solve past hurt barriers. The stimulation of imaginative play helps a child actively come up with potential solutions for their trauma while utilizing sand as a tool for the play and a deterrent from overstimulation from reliving past trauma. This is not to be used until past trauma has been identified and rapport has been built between the therapist and client. This intervention is also to be utilized in elementary school aged children.

Materials Needed:

- Glass bowl (alternatively plastic for safety)
- Bag of reusable soft sand
- 6 differently colored figurines

Description of How to Do Technique:

For this intervention, there should be rapport built with the therapist as well as previous trauma identified.

STEP 1: Have the child assign a form of trauma to a specific colored figure (at least one, but more than one if preferred)

STEP 2: Have the child place the colored figure into the bowl after determining which is the most problematic in their eyes.

STEP 3: Pour bag of clean, soft sand in the child's hands while they are placed over the figure in the bowl.

STEP 4: Encourage the child to think of a coping strategy or hobby, either learned or an idea of one, that would help with the trauma selected. Every time the child selects a strategy, have them open their fingers for 5 seconds to let some sand fall onto the figurine and allow brief reflection on the identified strategy.

STEP 5: Once the figurine is buried in the sand, reflect upon which coping strategies would benefit the child most.

Suggestions for adapting this technique:

As stated previously, this session should be conducted with a client once enough rapport has been gained, and a specific trauma history is completed, as this is to focus upon the trauma that the client has barriers built against.

In this intervention, a glass bowl full of basic figurines of different colors are presented to the child along with a bag of soft sand. The child is tasked firstly with assigning an instance of trauma to each color figurine. This would be a good time to discuss object relations and why the child would choose a specific color to correlate with the past trauma.

After assigning colors, have the child decide which instance of trauma they would like to focus on, and place the corresponding figure in the bowl. The child will pour a bag of sand into one hand and hold it over the figurine, but you can encourage some play with the sand prior to focusing on the coping strategies. The child will then list a beneficial coping strategy or hobby that helps combat any triggered trauma from their past. For every strategy listed, the child is to slightly open their fingers to allow sand to pass through and on to the figure for 5 seconds (similar to an Hourglass, hence the name) and continue this process until the figurine representing the trauma is covered entirely in the sand, which stands for their coping techniques combatting their trauma.

Lead discussions over which technique or hobby would be utilized in a role play session if desired, but a simple review and summarization of the selected strategies would suffice. At the end of the discussion, another optional activity would be assigning the client to act upon the coping strategies between sessions to better evaluate their effectiveness.

Data Collection Processes:

This addition to the trauma tool kit does not have a specific scale for assessment due to the rapid variability between the client's case details, coping strategies as well as the client's own formulated goals to reach self-efficacy. Due to this, a simple review of the child's feelings of fulfillment in each session when this activity is utilized in comparison to sessions that do not include this activity would be sufficient. To fulfill this, the Session Rating Scale (or SRS) will be utilized to gauge the effectiveness of resolving past trauma.

The SRS was developed by Dr. Scott D. Miller to work as a brief assessment to determine a client's feelings towards the session in efforts to identify working components in a person-by-person case. To enact this, a copy of an SRS will be given in each session while gathering rapport with the client. The same action will be taken when the activity is utilized and again when the following sessions take place. After gathering enough to enact an ABA design data chart, the efficiency of this assessment will be analyzed. Attached is a brief SRS tool for reference to showcase the simplistic questions and offering a spectrum of ratings for the client to choose from.

Clay Feelings Intervention

Lillie Redpath

Description:

This intervention is a great way to assist students with understanding their emotions better and helping the thoughts to not seem so daunting. Through clay as an intervention art therapy tool, students are able to use creativity and shape and show intrusive and unhealthy thoughts, and in turn, deal with them in a tangible way. The purpose of this intervention is to help students feel less helpless with intrusive and repeating thoughts. The goal of this intervention is to give students good coping skills that they can use on their own when dealing with unhealthy thought patterns. Objectives include the student having required materials, the student understanding the activity, and the student being able to replicate the activity on their own. This intervention is based on research done on the success of art therapy with students along with the research on cognitive behavioral therapy and the addressing of automatic thoughts.

Materials Needed:

- Clay or Play-doh
- Paper
- Pens

Description of How to Do Technique:

STEP 1: Give students required materials and allow them to free play with the play-doh for a few minutes (5 or 10).

STEP 2: Allow the student to take time to write down negative or reoccurring thoughts they have on a piece of paper. These could include fears, self-beliefs, past hurt.

STEP 3: Ask the student to create with the play-doh what they feel like these thoughts may look like to them, no rules or grading.

STEP 4: Discuss with the student the power of thoughts and how we have the control to acknowledge our thoughts and dismiss them as well.

STEP 5: The student will then be allowed to crush and play-doh and dismiss the negative thought.

STEP 6: The student will then take 5 or 10 more minutes of free play to make something new, fun, or funny out of what was previously a negative one.

Suggestions for Adapting the Technique:

The intervention could be adapted to continue along with the progress the student is making week to week. The first week could include the discussion of the acknowledgment and discussion of thoughts. The next week could dive into a deeper discussion of how our thoughts affect our feelings, and the following week could be the connection between our feelings and our actions. The intervention could progress as the student may feel compelled to create different things with the clay as the weeks go on. The goal would then grow as the student's capability to grasp the concept grows. For students with special needs, the intervention could be simplified to feelings as opposed to thoughts. As one student may want to create a house because that is where he feels unsafe, students with specific needs may want to create simple shapes that make them feel happy, sad, etc. The intervention in and of itself is pretty basic and can work for many different populations and across differences.

Data Collection Handouts and Processes:

One handout that will be included is a simple explanation of the connection between our thoughts and feelings that is explained in cognitive behavioral therapy. The pre and post-test data that will be collected is the Beck Inventory Scale. This is a scale that will help to see if the intervention is appropriate to help the student deal with feelings of anxiety.

Trauma Jar

Regan Murray

Introduction:

This trauma jar intervention is heavily based in Narrative Exposure Therapy (NET) and Art Therapy frameworks. This intervention utilizes a creative approach to better allow the client to process the traumatic event(s) and visualize both positive and negative changes the client has experienced. The trauma jar is similar to the LifeLine used in Narrative Exposure Therapy. The jar will be utilized after the client has completed a trauma narrative. After completing the narrative, the therapist and client will utilize the jar to create a tangible representation of the client's experiences, emotions, and progress. The purpose of this intervention is to serve as a way to facilitate a conversation with the client about their trauma and aid them in processing the experience by utilizing NET techniques in a creative format. The goals and objectives include assisting the client in reframing the traumatic experience, visualizing the client's increased awareness of coping skills, and providing a tangible object to remind the client of their progress and the experiences they have overcome.

Materials Needed:

- Empty jar
- Ribbons (several colors)
- Marbles (several colors)
- Beads (several colors)
- Rocks or stones

Method:

Step 1: The therapist will provide psychoeducation about Narrative Exposure Therapy, Art Therapy, and the impacts trauma has on the body and brain. The therapist will explain the trauma jar intervention and obtain consent. The therapist should also discuss avoidance as a factor that maintains PTSD symptoms. The

therapist should also conduct an assessment of PTSD symptoms for monitoring purposes.

Step 2: This step may take several sessions. The main objective of the therapist in this step is to aid the client in creating a trauma narrative surrounding events the client has experienced. Throughout this process, the therapist should aid the client in identifying hot (sensory information, emotions, cognitions, physiological feeling) and cold (facts, context) memories. The therapist must also work to confront avoidance during the creation of the trauma narrative. The therapist may also work with the client to develop coping skills and grounding techniques.

Step 3: In this step, the therapist and client should review the completed trauma narrative. The therapist should be prepared with all necessary materials, including pieces of pre-cut ribbon in each color. This narrative should be used as a template for the trauma jar.

Step 3A: The client will place rocks in the jar to represent the traumatic experiences discussed in the trauma narrative.

Step 3B: The therapist will work with the client to identify key emotions related to the traumatic event as well as emotions the client is currently experiencing such as shame, guilt, fear, sadness, acceptance, peace, happiness, etc. and associate these feelings with a specific color of ribbon. The client will place various amounts of each color of ribbon depending on how strongly the emotion is felt.

Step 3C: The therapist will facilitate a conversation about coping strategies the client has developed and associate these with different colored marbles to be placed in the jar.

Step 3D: The therapist will facilitate a conversation with the client about any positive changes the client has experienced as well as their hopes for the future. The client will associate these experiences with beads and place them into the jar. The client and therapist should discuss any progress or aspirations in detail as the client is filling the jar.

Step 4: The therapist will administer an assessment of PTSD symptoms to monitor progress. The therapist and client will discuss continuation of services or discharge.

Adaptations:

For therapists who provide services in areas with less resources, adaptations can be made to make the intervention more affordable. Instead of using ribbons, the therapist can cut pieces of computer paper and use markers, crayons, or colored pencils to represent different emotions. The therapist can also recycle jars from their home or office to avoid having to purchase a jar. The therapist could also create a box out of paper if a jar is not readily available. The therapist can choose to simplify the steps by cutting out certain items such as items that represent hot and cold memories, or make the jar more complex by adding additional items to represent positive experiences since the traumatic event depending on the client's age and intellectual ability. If the therapist does not have access to any of the required materials, the client and therapist could create a computer simulated version of the trauma jar on Microsoft Word or a similar program. This intervention can also be adjusted to focus on symptoms such as depression or anxiety even if a client does not have a trauma history.

Monitoring Client Progress:

As previously stated, a pre- and post-assessment to measure the client's PTSD symptoms should be completed using the Child PTSD Symptom Scale (CPSS).

Promoting Self-Care

Amanda Summey

Self-care has long been pushed aside in a society that is known for rewarding the busy and exhaustion is seen as a status sign. Research continues to show that self-care and mindfulness are beneficial for children, adolescents, and adults alike. The goal of this intervention is to complete a self-care goal once a day. Research shows that once a person starts with self-care, they can focus more, have better grades, and feel better overall. Meeting one goal a day for 30 days sets the pace.

Materials Needed:

- Construction paper
- Glue
- Markers/crayons
- Printable calendars
- Scissors
- Computer and/or smartphone

Description of How To Do

Technique:

Step 1: Give

students/clients the paper, glue, markers, etc. For younger children, give pre-printed items. Ask them to fill in what they consider self-care items on each day. Allow them to come up with their own ideas or lead by some examples to get them started. Challenge them to use things they have not used before.

Step 2: Use the calendar over the next month to lead group/individual therapy as a guide.

Step 3: Ask students/clients to complete a survey through their phone or computer.

Step 4: Review data and adjust accordingly.



Suggestions for Adapting the Technique:

For younger children, use pre-printed self-care items and let students cut and glue onto pre-printed calendars. Older children could use an app on their phone, hand write, or type on calendars. This could be a short session before class, an after-school club, or even an intervention for students in disciplinary outs, like ISS or detention. The same examples could be printed in different languages as well, in order to include children whose first language is not English.

SuperMask

Ashlie Seibers

Adapted From:

This intervention is adapted from the TF-CBT model and introduces the addition of masks into the therapeutic process. This small addition is a great way for children process feelings and emotions and are grounded in trauma theory. Utilizing masks allows the child to process trauma narratives in a less threatening way by having control over how they tell the story and who is telling the story.

Materials Needed:

- Crayons/Colored Pencils
- Paper/Construction Paper
- String
- Scissors
- Hole Punch



Description of How to do the Technique:

For this intervention the child/clinician will need to identify a trauma memory for the child to process.

STEP 1: The child will take two sheets of paper and draw a self-portrait on one piece of paper and their favorite superhero on the other piece of paper. The child will make a mask out of each piece of paper by cutting out eye holes, a nose hole, mouth hole, and added string around each side.

STEP 2: At the beginning of each session, the child will be asked which mask they would like to wear it to process their trauma memory.

STEP 3: The child will utilize the self-portrait mask to tell their trauma memories in first person and their superhero mask to tell their trauma memories in third person.

STEP 4: While wearing their superhero mask the clinician is able to help guide the child into reframing their thought processes. The clinician can help guide the child through this intervention by verbally prompting them to switch masks if one or the other seems to be overwhelming the child's ability to process.

Suggestions for Adapting the Technique:

This technique could be adapted for older children by replacing a superhero with the "strongest person" they know. It could be adapted for children with disabilities by having the clinician assist with drawing/assembling the masks. For children with sensory processing disorders it could be adapted by having the children point to the mask without placing it over their face.

Data Collection Process:

This intervention will be tracked by utilizing a trauma symptom scoring scale to be completed monthly to determine if the intervention is effective. We should see a decrease in trauma symptom scoring at the resolution of the intervention.

Create Your Own Balance Scale

Morgan Scott

This intervention can serve as a way for students to become more self-aware by identifying causes of their distress versus contentment in a simple, creative way. Through the creation of their own balance scale, students will practice motivational enhancement by weighing out pros and cons, as well as communicating to themselves and their partners the way they scale aspects of their life. Creative art therapy can be practiced through a plethora of mediums. The objective of art therapy in school is to facilitate alternative ways for students to express and understand their emotions. As Art Therapist Marygrace Berberian, LCSW shares “Art therapy can help students organize the chaos of their internal worlds and their often less than favorable realities. The symbolic images that are generated allow students a capacity to express feelings and ideas regarding psychological conflicts and life experiences that are too emotionally loaded for verbal communication.”

Materials Needed:

- Coat hangers (wire or plastic)
- 2 plastic cups
- 5 small and 5 medium/large (10 total) of one of the following: Stones (small and medium) or marbles (regular and shooters) or dimes and quarters
- String
- Tape
- Pens/Markers



Description of How to do Technique:

Step one: Have students break up into small groups of 2-5 students.

Step two: Have students draw a two-column space on their paper with the left column representing things distress, cons, unhappiness and the right-side column representing contentment, happiness, pros.

Step three: Ask students to wait to share any info written down and begin to create their balance scale by taking one hanger, tying one string on both the left and right sides, label cups with pro and con (or whatever verbiage student chooses) attach an open cup to each side.

Step four: Ask the students to take turns hanging and demonstrating their list to their small group by choosing one item represented by one stone (small or medium) depending on how big the factor is in their life. Go through the whole list and see how their scale balances.

Example: I might choose a med/large stone to represent a con/distress of losing a loved one and a medium stone to represent excitement about a new friend as a pro/contentment.

This practice of creating your own balance scale helps teach purposeful action, self-awareness of distress vs. contentment/happiness and motivational enhancement.

Suggestions for Adapting the Technique:

This could be adapted by making it a class creation which would require less individual instruction and less materials. Having this be a group project led by the teacher might be a better option for students with special needs. All students could contribute, verbally, written or selected from options, one pro and one con on scrap paper, noting how they scale the importance (small-med-large) and the instructor could gather all input place into a bowl and randomly withdraw and then proceed to discuss the feedback while adding the representing stone to the designated cup on the scales.

Data Collection Processes:

For art therapy in schools, including this project of creative art therapy, the use of the Expressive Therapies Continuum (ETC) provides a theoretical model for art-based assessment for art therapy. There are three levels involved in ETC: Kinesthetic/Sensory, Perceptual/Affective, and Cognitive/Symbolic. These three

levels are intended to reflect various functions and structures of the brain. Using this the ETC can help an art therapist determine how a student is processing information through the different levels of ETC.

Social Stories

Victoria Sumrell

This intervention is helpful in teaching social skills to children that lack it. A social story is a description of different social situations that include the social cues and different appropriate responses. This intervention is based on different social situations that students can find themselves in.

Materials Needed:

- Markers
- Pens
- Color Pencils
- Construction Paper
- Large flash cards

Description of How to Do Technique:

STEP 1: The child will make social stories specific to the social skills that they need to work on. The child will work with their teacher in order to make these.

STEP 2: The child will use direct instruction; following the social stories that were made.

STEP 3: Once step 2 is accomplished, the child will move onto using a role play scenario with their teacher using what they learned from the previous step.

STEP 4: Once step 3 is accomplished, the child will be observed using what they had learned previously. The teacher will observe the child in a social environment to see if they will use the social skills they have learned.

Suggestions for Adapting the Technique:

This can be adapted to each individual child depending on the social situations they find themselves in more. This can also be adapted depending on the age of the child when using these cards. The individual students will help their teacher in making these cards. The end result would be the teacher using these cards with each

individual student and helping them to understand social cues and how to act in social situations.

Data Collection Process:

For this assignment, an assessment of progression will be used in order to determine where the student began and ends using social stories. We should see an increase in students using social skills that they learned from using social stories. A student would first use direct instruction such as looking at the pictures and reading the story. Once a student gets a hold of that it would move towards role playing with the teacher. The teacher would use guided practice and then move onto observation. The teacher would observe the student interacting with a peer using the skill.

Self-Affirmation Collage

Allison Larsen

Self-affirmations can be described as positive, influencing awareness of one's self. Studies below can confirm that using self-affirmations can not only decrease stress and anxiety, but they can also increase self-awareness and confidence.

Purpose: Using the self-affirmation theory, this intervention can be used to increase positivity as a coping skill and transform a student's baseline from negative to positive.

Goal: To increase self-awareness, self-confidence, and positivity.

Objective: Use positive affirmations to increase self-awareness, self-confidence, and positivity.

Materials Needed:

- Poster board
- Multi-color construction paper
- Magazines
- Scissors
- Markers
- Glue

Description:

STEP 1: Students should be asked to describe themselves in 5 words.

STEP 2: Each student will need a poster board and access to the rest of the materials.

STEP 3: Students should use the magazines and scissors to cut out positive words that describe themselves, future goals, or pictures of things that make them happy.

STEP 4: Students will then decorate their poster board by gluing the images they cut out.

STEP 5: Students will then share their collages and explain what the words or pictures mean to them.

Suggestions for adaptations:

Instructor could bring in pre-cut words/ phrases/ images.

If magazines and scissors are not attainable, students could write words/ phrases on the poster board and draw things that make them happy.

Data Collection Processes:

I have included the Perceived Stress Scale to calculate a current baseline of the student's stress level. Upon completion of the program, the PSS score would ideally decrease.

New Growth

Kandra Preston

My intervention is an art therapy activity. The purpose of this intervention is to allow the client to reflect on his or her problems and possibilities in an alternative way because some clients are more productive through art than traditional talk therapy. The goal of the intervention is to explore and celebrate strengths and invite the idea of ability to change. The objectives of the intervention are to explore life's purpose and meaning, allow the client to recognize what they actually feel compared to what they share with others to open up healthy communication and boundaries, and to allow the client to realize how they truly feel and that these feelings are always acceptable. This intervention is grounded in the PERMA theory. This theory has the building blocks of Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment. PERMA is a type of Positive Psychology. The goal of this theory is to understand happiness and it was designed by Martin Seligman.

Needed materials:

- Small, plastic flower pots
- Potting soil
- Spade
- Easy, fast growing seeds
- School glue
- Magazine/newspaper clippings
- Sharpies
- Pretty decorations to glue on (jewels, glitter glue, etc.)
- Scissors

Step-by-Step Directions:

Step 1: Set up a table with flowerpots, school glue, decorations, magazines/newspaper clippings, scissors, and sharpies before the clients enter the room.

Step 2: Have a discussion with the clients about self-view and world view. Talk about how everyone shows the world what they want them to see and that there are certain things people keep to themselves. Ask why people hide things from the world and get the clients responses.

Step 3: Tell the clients they are going to do an activity based on the discussion and ask each client to get a flowerpot from the table.

Step 4: Explain to the clients that you want them to use the rest of the supplies on the table to decorate their flowerpots. Explain that they are to decorate the outside of the pot with how they think the world sees them. They are to decorate the inside of the pot with how they see themselves (inner self). Tell the clients to go pick out what they want to use to decorate their flowerpot.

Step 5: Give the clients time to decorate their pots. This normally takes 20-30 minutes.

Step 6: Give clients an opportunity to explain what their flowerpot means to them. Ask them what is on the outside and then what is on the inside. Ask them what this means to them.

Step 7: Get out the soil and seeds. Ask each client to come up one at a time to receive soil and seeds. Fill each client's flowerpot with soil and give them 3-5 seeds to stick into the soil. Ask the client to go water their soil if water is available.

Step 8: Talk to the clients about how new growth will grow out of the inside of the pot if it is watered and put in sunlight. Relate this to the client's life. Discuss how the clients can have new growth in their lives if they take care of themselves, work their program, process through their trauma in therapy, etc. You can pick one of these options or discuss more than one if it applies. Inform them that they can change any of the views they put on the pot that they do not like.

Step 9: Ask the client to place their flowerpot in their window and water it whenever the soil gets dry.

Suggestions for Adapting the Technique:

If you implement this intervention in a residential facility, you can help the clients transplant their flowers into the ground outside in an allocated spot when they become too big for their pots.

If you implement this project with special needs and/or small children, you may want to add or replace the newspaper clippings, scissors, and magazines with paint and paintbrushes. If you use paint you will also need cups, water, and paper towels. You may also want to simplify the language when explaining how to decorate the pot. Ask them to use words and/or paintings/drawings to describe what they think about themselves inside the pot. Have a discussion about what this means and help them come up with examples. They can even just paint themselves inside the pot if they want. Ask them to decorate the outside of the pot with paintings, drawings, or words of how other people see them. Again, help them come up with examples (i.e. sister, brother, little big, a reader, a hunter, youtuber, video gamer, etc.). Also simplify the initial discussion and explain that sometimes how we see ourselves and how others see us can be different and explain how we want to talk about that today. At the end, explain how if they take care of themselves and do what they are supposed to do (bathe, do their homework, follow the rules, clean up after themselves, etc.) they can grow up to be anything they want, just like the flower grows from the seeds to become a flower because it is watered and taken care of.

After completing this intervention, it is important to hand out a reflective writing post-test handout for the client to fill out and return before leaving asking these questions:

1. Describe the inside and outside of your flowerpot. How are they similar?
How are they different?
2. How does the outside and the inside of the flowerpot relate to each other?
3. What have you learned about yourself from this project?

Painted Through Feelings

Katherine Barber

Intervention:

This intervention is meant to allow students to express or release unwanted feelings they may have bottled up through expressive art. Students will be able to choose colors that they feel represent their current unwanted feeling and put them on a canvas anyway they want. Students will then cover up the unwanted colors they placed on a canvas with colors they also picked that represent happiness and calming and will paint that over the colors already on the canvas. By the end of the intervention students should feel better after letting go of their feelings and visibly see the art they created.

Materials Needed:

- Paint
- Canvas
- Portable speaker or a way to play music
- Paint Brushes
- Room for painting
- Cleaning up materials
- Paint Aprons
- Music from different genres and decade that is age appropriate for children

Steps for Intervention:

Step 1: The student will pick four colors out of all the paint that is in a bin. The student will pick two colors that represent unwanted feelings (anger, depression, anxiety, etc.), and then two colors that represent happiness or calm.

Step 2: The student will pick out music that has been preapproved that they would like to listen to while they paint.

Step 3: Students will then get set up with their canvas and paint brushes and get ready to start the intervention.

Step 4: The student will close their eyes as the music is playing and will be asked to spend 2 – 5 minutes painting the canvas anyway he wants (still eyes closed) with the unwanted feeling colors. The students will be asked to think about things happening in their life they are not happy about or feel unsafe about.

Step 5: The students will then open their eyes and begin to paint over the paint on the canvas already from the unwanted feelings. While the students are painting, they are asked to think about things that make them happy and they can paint anyway they want.

Step 6: The students will then be asked to clean up their paint and brushes and have a talk out session about what they painted and how they felt. Students will be asked to share what they want to share about what they were thinking about their unwanted feelings. Students will then share what they thought about when they painted with their happy colors.

Once the canvas is dried students can take the painting home to have or they will be asked if they can hang in the school somewhere. Also, the music that the students pick will play throughout the whole time of painting.

Suggestions for Adapting the Intervention:

If students are unable to hear the music that is supposed to be playing during the intervention, a calming video or possibly a wind machine that can represent some type of calming setting for the student to ensure that there is a calming area for them to paint. Also, if paint is not an option students can use crayons, stickers, or even markers. The key is to have the student put their feelings on the canvas and cover them up with good things that make a beautiful piece of work. Also, if music is not available playing white noise and or calming sounds from YouTube or a phone could be another option to create a calming area.

Data Collection Processes:

To collect data on this intervention the students will have a pretest and a posttest after their session to analyze the effect of the intervention on their emotions. I have

created the following assessment that would gather the data. The goal is to show children a way to work through unwanted emotions and that they are in a better state after the class than they were before.

Painted Through Feelings Pretest

Please answer the following questions using the following scale:

1 = No, 2 = Sometimes, 3 = Yes

1. I have feelings (depression, anxiety, anger, etc.) that I do not know how to handle.
2. I can tell when I am starting to feel upset.
3. I have activities or coping skills that I know to use when I get upset.

Painted Through Feelings Posttest

Please answer the following questions using the following scale:

1 = No, 2 = Sometimes, 3 = Yes

1. I felt like I was able to let go of unwanted feelings when I painted.
2. I feel I can use this class as a way to work through my unwanted feelings.
3. I feel better after class than I did before.

Play Therapy

Samantha DiPeri

This intervention is a great way to assist clients with describing and processing their feelings and emotions in a playful way. Play therapy allows children to express their feelings better, gain new skills, and reduce certain behavior. Through a variety of play therapy activities, the client can express their feelings and emotions with the social worker. Play therapy is meant to help someone solve problems, work with their emotions/feelings, relationships, etc. Some of the most challenging problems a child faces are worked on through play therapy. Children can develop coping skills to help them with the specific difficulties they are facing. All ages benefit from play therapy, but more targeted for ages 3-12. Although the child works on play therapy with the social worker, it can also be worked on at home. When families work together it allows one to heal faster, which creates a better relationship. The social worker will communicate with the parent regularly to evaluate the progress.

Materials Needed

- Paper
- 2 figurines
- Dice
- Music



Description of How To Do Technique:

For this intervention, the client will be asked to share when they felt a certain feeling and explain the situation.

STEP 1: Client will roll the dice and move their figure to the spot, and then read what the spot says.

STEP 2: Once the statement has been read, the client will respond and explain the answer in more detail.

STEP 3: After the client responds with their answer, the clinician will discuss that all feelings are okay and talk with the client about coping skills.

STEP 4: The client and clinician will work together to create a list of helpful coping skills that the client can use.

Suggestions for Adapting the Technique:

This could be adapted for students with special needs by changing the questions/statements if they are having a difficult time responding to the feelings/emotions. Additionally, this could be adapted into a group discussion and allow the students to discuss among themselves. Once they talk in groups, the clinician can have a whole group discussion to discuss different ways to deal with big emotions or feelings.

Music For All: Music Therapy Sessions

Destiny Rae Riggins

Intervention:

The CBT-Music Therapy group will be a 12-week design, once weekly intervention. The purpose of this intervention is to aid in alleviation of symptoms of anxiety, aggression, and depression in students in an educational setting, utilizing a trauma-informed lens. The goal of this intervention is to provide cognitive behavioral education and techniques to students who are experiencing symptoms of depression, anxiety, or aggressive behaviors. There are three primary objectives of this intervention in order to achieve the goal and purpose of the intervention. The first objective is for students/group members to be able to identify the emotions that they are feeling and to understand what each emotion means. The second objective is for students/group members to be able to identify and list their triggers for the negative emotions that they are feeling. The third objective is for students/group members to be able to utilize self-identified coping mechanisms to use in times where their symptoms are occurring.

Materials Needed:

- iPad or tablet device
- Apps for iPad/tablet: Apple music, spa music, insight timer, garage band, iSequences, etc.
- Bluetooth speaker
- Visual and/or written schedule
- Instruments (piano, drumsticks, guitar, etc)
- Pens
- Paper
- Whiteboard
- Markers

How To Use The Intervention:

For this intervention, students will be required to identify their emotions, triggers to their emotions, and coping strategies. The group will last 45 minutes and will alternate between CBT education and music therapy. Group members will be able to identify their emotions and process what triggers these emotions. Group members will be able to identify a coping skill that would be useful to them.

Step 1: Students will be asked to identify the emotion they are feeling in one to two (1-2) words and write it down on the white board. (5 minutes)

Step 2: The facilitator will utilize Cognitive Behavioral Therapy to explain thought patterns or situations that cause a certain emotion. (5 minutes)

Step 3: As a group, the students will sing two (2) songs that are relevant to the emotion that is most prevalent on said day. Facilitator may play instruments or music to go along with songs. (10 minutes)

Step 4: Facilitator will discuss coping strategies for emotions and will have students write down one (1) coping strategy of their choosing on the white board that they would be able/willing to use. (10 minutes)

Step 5: Alternating each week, the group will now spend 10 minutes practicing mindfulness by closing their eyes and focusing on their breathing with meditative music playing (or) the group will now spend 10 minutes creating their own rhythm using drumsticks or other hand instruments. The facilitator will begin, and each student/group member will join in along with their own beat until all members are playing (drumsticks can be used on the floor or on the ground if outside).

Step 6: Wrap-up will include having each student write their current emotion on the white board and giving a 'homework assignment' of having each member write a verse about their emotions before the next group or give specific handouts of coping skills or other relevant skills to practice. (5 minutes)

Suggested Adaptations to Meet All Needs:

Adaptations for this group would include different age ranges in separate groups, such as ages 6-12 and ages 13-18 being in different groups. Specifically, students

that have developmental or cognitive difficulties may be adapted into a different age group to better assist their developmental level. In severe scenarios, the facilitator may utilize a student aid or co-facilitator to better assist severe behaviors or needs of a student(s).

Adaptations for this group in context of culture would be incorporating music/songs from various cultures and origin each week. Specifically, the students will have a variety of genres, meditations, etc. throughout the music therapy sessions.

Data Collection Process:

In the music therapy intervention, a pre and post assessment on student/group members' levels of depression and anxiety will be conducted utilizing the PHQ-9 depression scale and the GAD-7 anxiety scale. The PHQ-9 Depression Scale and GAD-7 Scale that is to be used is attached below.

In the initial and discharge of treatment, assignments will be issued to evaluate objectives being met, such as the ability to identify emotions, triggers/stressors, and coping skills. There is an attached example of a handout given below.

Students/group members progress will be monitored throughout the sessions by implementing students to identify their emotions at the beginning and finishing of each treatment group.

Trauma Collage

Megan Cochran

Description:

Using art to process trauma can help the client to feel relaxed and provides a different outlet for the client to express their emotions they may struggle to verbalize. Art allows them to express these emotions in a different way which can make them easier to process. In this activity, the client will be choosing items to place in their collage that represent their emotions related to their trauma. For this, social workers can use this activity as an ice-breaker to gauge where the client is emotionally and mentally regarding their traumatic experiences.

There is still a need for research regarding trauma treatment using art therapy, but from the research that has been completed, the results are positive. Art therapy has also shown positive outcomes when used for depression, anxiety, and other mental disorders as well. According to one source, 30% of those suffering with PTSD do not show positive results from evidence-based treatment such as Trauma-Focused Cognitive Behavioral Therapy or Eye Movement Desensitization and Reprocessing. This means alternative treatments should continue to be researched and tested for outcome and feasibility.

Materials Needed:

- Old magazines, newspapers, and/or books
- Card stock (multiple colors)
- Glue sticks
- Scissors (safety and adult)
- Markers/Pens

Step-by-Step Method:

Step 1: Discuss the meaning of trauma and the emotions that can be involved related to trauma. Explain that it's important for the client to feel as if they are in a

safe place when processing trauma. If at any point, the activity becomes too much, it can be stopped.

Step 2: Have the client select a piece of card stock based on color.

Step 3: Provide the client with markers/pens, scissors, glue stick, and magazines/newspaper/books.

Step 4: Encourage the client to choose at least 10 items from the available magazines, newspapers, or books provided to add to their collage.

Step 5: While the client is working on the collage, the provider can carry on conversation, play music, etc. Read the situation.

Step 6: Ask the client to write a word or short phrase they relate to each item on the collage.

Step 7: Once the collage is complete, have the client explain what each item represents regarding their trauma.

Step 8: When finished, ask the client how they feel at that moment. This helps gauge the client's emotional state when discussing the trauma.

Step 9: Be sure to ask if the client has any questions, thoughts, or concerns regarding the activity.

Adaptations:

- Use appropriate scissors (safety or adult) depending on the age group you are working with
- Adapt the activity for other issues or problems not trauma related (depression, anxiety, anger, etc.)
- Allow the client to draw items for the collage
- For clients who cannot read or write, the provider will assist.
- Adjust the number of items chosen for the collage according to time, development level, etc.

Let's Take a Road Trip (Projective Storytelling Technique)

Cameisha Mallory

This projective storytelling technique has been used to assist clients with feelings of grief, loss, abandonment and will also, “evoke the unresolved issues and feelings that these children bear as a heavy load each day of their lives,” (Crenshaw, 2005). When children suffer the loss of a loved one, or other forms of grief, it can be hard, in the beginning, for some to express their thoughts and feelings by simply speaking with a clinician. Therefore, through expressive arts therapy, such as storytelling, the child is able to articulate their feelings in a way that is “normal” for them. Research has shown that, “A significant portion of young children will find this very hard to do in words, but can make use of the clinical tools described herein to express their feelings in ways that are natural for them,” (Crenshaw, 2005). For instance, with this intervention, the client could express themselves by drawing a car (or whatever form of transportation the client and clinician chooses to take the journey in), creating a story, and making a story book. In this intervention, the “road trip” is a metaphor for the journey through life. The client will be in charge of all details of the road trip. For instance, the client decides what the car looks like, who will drive the car, who they want to bring with them, where the trip leads, how they felt the trip’s outcome was, etc.

Material Needed:

- Construction Paper
- Crayons
- Colored pencils
- Markers
- Pencils
- Magazines
- Scissors
- Glue

- Stapler

Description of how to do technique:

Projective storytelling techniques are a great way to understand the thoughts and feelings of children and adolescents that may be suffering from grief. This intervention will allow the client to use the “road trip” to express their “life journey” and important events of it. This intervention allows clients to also discuss difficulties on the road trip. This will act as a metaphor of the difficulties they have faced in their life. Storytelling allows clients to express their feelings of the loss of a loved one and discuss how they feel this has impacted their life. This intervention has been shown to help children who may have Childhood Traumatic Grief (CTG). Step one: Clinicians will begin by asking clients to imagine they were going on a road trip.

Step 2: The clinician will instruct client to think about the following questions:

- What type of car will you drive? (is it small or big, does it go fast or slow, is it expensive or more moderately priced)
- What will you bring with you on the road trip?
- How reliable is your car? (will it get you through to the end of the trip, does it break down)
- Who will drive the car? (this will help better understand how they feel about how much control they feel they have at this moment)
- Will your car be able to withstand bad weather? How confident are you that your car will make it to the end?
- Who else will accompany you on the road trip?
- Who will be left behind?
- Will there be any stops along the way?
- Will there be issues that hinders the road trip?
- Where will the road trip end?

Step 3: Once the clinician has asked the above questions, the client will then be instructed to begin to draw the car they would like to have for their trip, along with everything and everyone else they would like to bring with them.

Step 4: Read the following to client:

Now that you have begun to think about your road trip, I want you to pretend that you are headed out of town, and you are packing the car getting ready to head out. Think about what is needed for the trip, what would you bring with you? How many people will you bring with you? Will there be anyone there that has traveled before? What is needed to prepare for flat tires, traffic, bad weather? Now I want you to close your eyes and take three deep breaths so you can relax. Now think about the road trip and all the exciting things that you will be able to do with those who you choose to come with you. Think about the difficulties of your road trip and how you will overcome them.

Step 5: The clinician will then tell the client to create a story about the road trip. (remind the client to give the story a beginning, middle and end)

Step 6: Client will make a story book depicting their road trip story using needed materials discussed above and present it to the clinician.

Step 7: Follow-Up to the Story

The clinician will ask the following questions:

1. What is the name of the story?
2. How do you feel about the road trip?
3. Did the road trip make you happy or sad? Why?
4. Would you take a different route next time?
5. What is something we can learn from the road trip
6. Do you feel like your road trip friends helped you through the road trip?

Discussion:

This intervention should evoke feelings in the child that will allow the child and clinician to begin discussing the feelings they have regarding the loss of someone

close. While writing their story, the child makes the decision of who is left behind and what their “life journey” looks like to them. With the loss of a loved one, children can be scared and not know what the rest of life holds for them. The metaphors in the storytelling technique will act as insight to their thoughts and feelings.

Suggestions for adapting the Technique:

This projective storytelling technique could be adapted for children and adolescents dealing with other traumatic events in their life. Clinicians can do this by changing the type of “journey or trip” as well as by asking a different set of questions that could help evoke the emotions, thoughts, and feelings of the child. This intervention could also be adapted for those with different mental disorders such as PTSD due to traumatic events that have occurred in their life. The intervention that I adapted mine from is usually used for ages 9-12, however by adjusting the story, and questions to make them appropriate for an older developmental stage can occur. This technique can also be adapted for group therapy work for children and adolescents dealing with grief.

Data Collection Processes:

For data collection, clients will take a pre and post Traumatic Grief inventory. This inventory has been known to assess, “traumatic grief which involves a cluster of symptoms, such as emotional numbing, re-experiencing and avoidance, which are similar too but not the same as the symptoms of post-traumatic stress disorder – PTSD,” (Prigerson, Shear et al. 1999). There are other measures that a clinician can take based on the needs that are shown by the client. An example of additional measure is: The Modified version of the Adult Inventory of Complicated Grief-Revised.

Kinetic Sand Therapy Activity

Meg Roberts

This intervention will help clients with posttraumatic stress disorder, by allowing them to express their thoughts and emotions nonverbally. Clients will create a three-dimensional picture in the sand with play toy materials. The client may use any play material that they desire to use. The client is invited to place the play materials into the sand, moving any of the objects and sand until they feel it is right. This will allow the invisible to become visible. The client may be able to see their fears and troubles from the past that have traumatized them inside and it will allow them to look this fear straight on.

Materials Needed:

- Kinetic Sand (Different colors, amounts)
- Box or small table
- Plastic play materials (Such as animals, houses, people, trees, flowers, etc.)
- Water



Description of How to Do Technique:

Step One: Advise clients to gather any materials that they would like.

Step Two: Instruct client to put play materials anywhere on the table/box with the sand. They may put the play materials on the sides, in the middle, on the edges.

Step Three: Client is free to construct the scene exactly how they wish. Suggest the client make a picture in the sand.

Suggestions for Adapting the Technique:

The idea behind this therapy is that if the therapist has created a supportive environment, the client can use the sand play to work out and even solve issues on their own account. For this reason, this activity could be adapted for an individual setting or a group setting with multiple participants.

Data Collection Processes:

For this assignment, a pre and post assessment on client's level of stress using the Post Traumatic Stress Disorder Checklist for civilians (PCL-C) can be administered. If sandplay therapy has worked, we will see a decrease in the severity score on the PCL-C. A score of 45 to 85 is high severity, 30 to 44 is moderate to moderately high severity, and 17 to 29 is some PTSD symptoms.

F.I.T. Families

Allison Durham

Description:

F.I.T. Families is a whole family intervention designed to promote healthy eating habits, prevent obesity, and foster positive family relationships. The F.I.T. acronym stands for Fun, Intentional, and Trust. The overall goal of the program is to create an intentional space where families can have fun exercising together, enjoy a nutritious meal together and improve parent child relationships. The program runs for 12 weeks with one session per week. The program can be held at a local community center, church, school, etc. Families will meet once a week for 2 hours in the evening. Each meeting will start with a group exercise class and conclude with a healthy family meal. See research below for more information about the benefits of regular family meals and working out together as a family.

Materials Needed:

- Food & Drinks
- Exercise equipment (optional)
- Chairs & Tables
- Plates, Napkins, Cups, Silverware
- Conversation Cards
- Pen & Paper (optional)

Program Description:

Step 1: Families will gather for the first meeting and the program leader will explain the goal of the program and what families can expect each week. The goal is to foster fun, intentional and trusting relationships between all family members by engaging in physical activity and sharing healthy family meals together.

Step 2: Each meeting will start with a group wide exercise class that runs 30-45 mins. The exercise class can be any type of physical activity that is fun and gets

families moving. The group leader can run the exercise portion of the meeting or have an outside organization come in.

Step 3: After the exercise class, families will gather for family dinner. The food will be provided by an outside agency like the Nashville Food Project or similar local organization. The only requirement concerning the food is that it must be healthy and nutritious. Group leaders will serve the families in a cafeteria style line. Families are encouraged to sit together as a unit and age appropriate conversation starters will be provided. Families are encouraged to engage in conversation as a family unit. See examples of conversation starters below.

Step 4: After dinner, families will be given a group conversation topic to discuss. Topics will vary depending on the group but possible examples are included below (all examples are from thefamilydinnerproject.org/conversation):

- If you were a teacher and could teach your students anything at all, what would you teach them?
- Name 3 things that are fun for you.
- Tell us about 2 things that you are grateful for today?
- If you could create a new tradition for our family, what would it be?
- How do you know when you can trust another person?
- What is the greatest song ever written?
- What are the qualities of a good friend?

Step 5: At the end of the group, have families pick a healthy meal that they plan to cook together before the next group. If this is not a realistic goal for your group members, have each family pick something that they will do together as a family before the next group. Some examples are listed below:

- Go on a family walk
- Have 1 family meal together (does not have to be home cooked)
- Have a family game night
- Do something active together as a family

- Attend a cultural event together or religious service (if applicable)
- Have a family movie night

Step 6: Families are encouraged to share their family goal with the entire group (if they feel comfortable) and the group is dismissed.

Intervention Adaptations:

Culture is an extremely important part of family. Giving immigrant parents an opportunity to share parts of their culture with their children is extremely important. Doing research on the different cultures of your group members is important when planning F.I.T. Families. Cultural food preferences will need to be taken into consideration along with cultural family dynamics. You may need to reach out to a local restaurant to provide culturally relevant food for the families. Questions and activities will need to be specifically tailored to meet the cultural needs of your group members.

Socioeconomic status is also important to consider when planning groups. What are the family's financial means? Do they struggle with food insecurity? If so, maybe you send each family home with the ingredients to cook a culturally relevant dish. Do they have the time and money to buy and prepare healthy meals? If not, you need to consider what goals would be realistic and helpful to the family. Do they know how to cook? If not, consider holding a family cooking class one week. What hours do they work? You will need to plan a group at a time that works for the family's schedules. The answer to these questions will help inform how you run your group. The most important part of F.I.T. Families are designing a group that meets the needs of your group members.

It is also important to consider the abilities of all group members when planning the exercise portion of the group. How much physical activity are group members able to engage in? Can you plan walking/running activities or do you need to plan activities where someone can sit in a chair and throw a ball or do chair yoga stretches? Once again, knowing your group members is key to planning and running a successful group.

Name That Feeling

Kendra Rutherford

Overview:

Music therapy is an evidence-based intervention that helps people to improve their mental health and can help treat symptoms of depression such as anxiety and insomnia. Some of the benefits of music therapy especially for children is that it builds self-esteem and confidence as well as shows them other forms of communication as well as self-expression (Craig, 2021). Music therapy comes in various forms like singing, dancing, listening to music, writing songs, and discussing music. (Wong, 2021). Music therapy is grounded in multiple interventions such as behavioral therapy, humanistic therapy, and psychodynamic therapy.

In behavioral therapy, music can play a valuable role in the relaxation process which in return helps the client to reach a relaxed state when anxiety-producing stimuli are present (Wheeler, 1981). Another intervention that is intertwined with music therapy, is humanistic therapy, specifically Gestalt therapy. Gestalt therapy theorized that humans attempt to regulate themselves and we have an inherent drive towards the need for satisfaction (Wheeler, 1981.). The Gestalt approach increases the awareness of the presenting problem and music will facilitate this awareness and help resolve the problems interfering with the client's ability to experience self (Wheeler, 1981.)

With “Name that Feeling”, students will learn how to recognize the sound of music as a prompt for different emotions.

Materials Needed:

- Music Playlist With a Sad Song, a Relaxing Song, an Upbeat Song, a Fast Song, and an Angry Song.
- Paper
- Coloring Pencils and Crayons
- Speakers

Instructions:

Give the students construction paper and have them retrieve their coloring utensils.

Tell the students that they are going to draw what the music feels like.

Ask your students to come up with examples of how music makes them feel: “Does an upbeat song make you feel happy or sad?”

Suggestions for Adapting the Technique:

This activity can be easily adapted to use in individual or group therapy sessions since the activity itself isn’t affected by the number of participants. As for the appropriateness of this activity for students with disabilities, the “Name That Feeling” activity is something that those students could engage in as well. Studies have shown that children with Autism Spectrum Disorder experience the same benefits as students with ASD and encouraged music therapy is used as an intervention tool for ASD children.

Additional Handouts/Information

In order to track the progress of the students, a child-friendly questionnaire was created using pictures so that children could easily understand.

Songwriting Club

Hallye Anglin

Songwriting Club will give clients an opportunity to create a meaningful piece of art specific to them in order to challenge negative thoughts and assumptions, build resilience and process emotions. This is a strengths-based, culturally responsive intervention meant to meet clients where they are developmentally and mentally. This intervention largely pulls from the Contextual Resilience Model that focuses on protective factors and resources available to clients (Myers-Coffman et al, 2020 & Fairchild & McFerran, 2019). Music plays an important role in many lives; songwriting can give children and adolescents a different and healthy way to express themselves and reflect on their experiences.

Materials Needed:

- Notebooks
- Pens/Pencils
- SoundTrap (free for educators/students)
- Computers/tablets



Instructions:

Step 1: Rapport building and icebreakers; begin each session with a percussive and breathing based grounding exercise (such as belly breathing with background music).

Step 2: Clients will share a meaningful song and describe how it makes them feel, what it means to them.

Step 3: Clients and facilitators will collaborate to write a song about a chosen subject.

Step 4: Clients will identify a personal problem and goal to focus on.

Step 5: Clients will engage in psychoeducation about reframing thoughts and challenging negative thoughts.

Step 6: Clients will begin the songwriting process, sharing along the way to give and receive feedback and process emotions.

Step 7: Sharing finished song and reflections.

Suggestions for Adapting the Technique:

This intervention can be adapted based on developmental stages by doing two collaborative songs as opposed to having clients create their own songs after the initial collaborative song. This would allow clients to work together and receive more assistance from the facilitator if necessary. For this adaptation, the group would determine a main idea for the song and a common goal. Clients can write songs in their native language and utilize computer assisted language to complete a song that is meaningful to them.

Progress Monitoring

Clients will complete the Rosenberg Self-Esteem Scale before the intervention, after the fourth session of the intervention, and at the end of the intervention to determine if the intervention has increased positive feelings and thinking. The goal is to see an increase in their scores. Additional measures may be included depending on client needs and goals.

Body of Emotion

This intervention can help clients discuss and learn how our bodies react when we have a specific emotion that is hard to cope with, so that individuals can detect the signs and triggers, and take measures to begin to cope in a healthy way. This activity was adapted from the book “104 Activities that build: Self esteem, teamwork, communication, anger management, self-discovery, & coping skills.” by Alanna Jones. The original activity is “Body of Anger” but adjusted to address all emotions. The book discusses how different ways participating in games is therapeutic by helping build relationships, help you feel better emotionally and physically, and getting involved with other people (Jones, 1998). Using games and activities as an alternative therapy tool can help clients grow emotionally into a better person and help individuals look at their problems they’re dealing with in a different perspective (Jones, 1998).

Materials needed:

- Markers/paint that can be used on fabric
- A life size doll/mannequin
- White t-shirt that can be written on
- Pants that can be written on

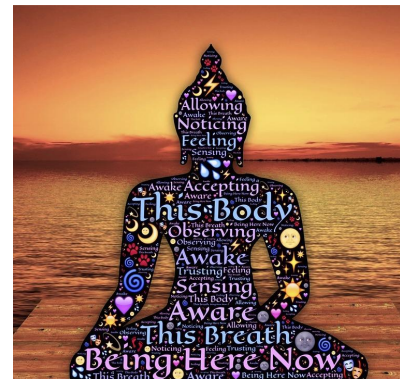
Description of How to do technique:

Step 1: Dress the mannequin in white t-shirt and pants.

Step 2: Ask clients to think of all the distinct ways their bodies react when they feel an emotion they have trouble coping with (sad, fear, anger, worry etc.)

Step 3: Have the client write down on the mannequin the emotion triggers of the body with markers where they apply. (For example: “rapid breathing” could be written on the chest to represent lungs).

Step 4: after the client is finished writing on the mannequin, the client will then discuss what they wrote with the therapist.



Suggestions for Adapting the technique:

If the client was blind or visually impaired the activity could be adapted to them by: verbally and thoroughly explaining the directions. If the client is visually impaired using a magnifying glass could help. If the client is blind, then let them use their hands to feel the different parts of the mannequin and being there to help them for assistance. Writing/ typing out what the client wants to say and being able to stick it on the mannequin may be able to assist them as well. This could be done in a group activity as well as individually.

Data collection methods:

Using the discussion prompts that the book provided as pre and post assessments would be a good way to collect data for the activity. The questions are as follows:

- How do you cope?
- Do you notice the different ways your body reacts when you have a strong emotion?
- Why do you think our bodies react like they do?
- How can you use your body signals to help you cope with your emotions you struggle with?

Your Time Yoga With Interpretive Dancing

Kelsey Cardin

This intervention creates a space for clients and students to recognize they are in control of their emotions while giving them the time to practice mindfulness within the typical school day. By providing a time for guided and non-guided movements and meditation prompts, students are able to recognize common emotions such as anger, frustration, sadness, disappointment, and more that may be causing stress resulting in poor relationships, slacking grades, and inadequate emotional response. This intervention is based on expressive arts programming that uses theater and acting in practice.

Materials Needed:

- Classroom or Open Space for Students
- Yoga Mats
- Music
- TV (optional)
- Music Speaker
- Computer (optional)



Description of How to Do the Technique:

For this intervention the students/clients will be instructed to consider their most difficult emotions of the week.

STEP 1: Students/clients must acknowledge their most stressful event or emotion that has been troubling them this week with peers if desired and comfortable.

STEP 2: Once the emotion or event has been identified students/clients will take their place on their mat for guided yoga from the social worker. This will approximately take place for 15 minutes. Since students have identified an emotion or event that is stressful, guided yoga will be utilized to reflect on this event or feeling.

STEP 3: Once guided yoga has been completed, each member of the group will have the opportunity to perform an interpretive dance of their emotion/event chosen or the emotion of overcoming their identified feeling. *Voluntary*

STEP 4: The social worker will provide each participant with the opportunity of up to 2 minutes of interpretive dance.

STEP 4: After yoga and interpretive dancing is complete, the group of students/clients will come back together to discuss how issues were overcome this week, praise and offer support to peers, and discuss current levels of stress.

Suggestions for Adapting the Technique:

If I adapted this technique, I think I may give my group preparation considerations for the following week, request their music interests to incorporate that into interpretive dancing, allow for ample time to build vulnerability, and provide my clients with emotional vocabulary before beginning deeper conversations to enhance the discussion around feelings. Another concept may be to have a group interpretive dance. For students with disabilities, interpretative dancing and yoga could be replaced by art, poetry, or singing.

Data Collection Processes:

Like the example of the PSS, I have created a pre/post test to monitor clients' overall feelings of their emotional regulation. This pre/post test will monitor mood fluctuations within the time of attendance and the next session (week). *Post test will be slightly altered.

Assessment

The questions in this assessment will help identify stress, mood fluctuations, and emotional regulation in the last week. In each case, you will be asked to rate how often for the item.

Name:

Date:

	0 = Never	1 = Rarely	2 = Sometimes	3 = Often	4 = Always
In the past week, how often have you felt stressed?					
In the past week, how often have you felt calm and/or relaxed?					
In the past week, have you felt like you are in control of your emotions?					
In the past week, do you think the skills you've learned in yoga have helped you to regulate your emotions?					
In the past week, have you reflected on stressful events or feelings?					

Circle of Relationships

Rebecca Smith

This intervention is a great way to assist a client in identifying and communicating how relationships impact lives through drawing. This assignment has a client draw a picture that represents different feelings they have about relationships or actions within relationships. Drawing allows the client to process and think about how the relationship plays a role in the client's life. 5 questions are asked which include, In box 1, draw a picture of the one thing you like doing the most with other people; In box 2, draw a picture of something you dislike doing with other people, but must do anyway; In box 3, draw something you have always wanted to do with another person; In box 4, draw a picture of the most important people in your life.

Materials Needed:

- Paper/Worksheet
- Markers
- Coloring Pencils/Utensils

Description of How to Do the Technique:

For this intervention the client is to answer each question by drawing a picture to represent the relationship-based question. Words cannot be used in the drawings.

Step 1: The client is to receive the 5 questions and draw in each space provided

Step 2: Once completed the client is to present each drawing and discuss how the drawings are represented in his or her life.

The drawings do not have to be perfect stick figures! The client will present each question in the appropriate setting. The clinician is able to ask further questions for clarification. If appropriate other peers can provide support or feedback once the client has completed his presentation.

Suggestions for adaptations:

This project can be either in a group setting or one-on-one however the clinician sees fit. Other mediums can be used like a white board, painting, and others. The

utensils used should be age appropriate. It is important that the client has the space to discuss the drawings.

Data Collection Processes:

For this assignment, a pre and post assessment would be provided to the student to complete. The assessment asks questions to assess his willingness/ need for support and relationships.

Circle of Relationships

Step 1: Draw a circle and separate it into 4 sections with a smaller circle in the middle.

Step 2: Draw a picture of the one thing you like doing the most with other people in the first section.

Step 3: Draw a picture of something you dislike doing with other people but must do anyway in the second section.

Step 4: Draw something you have always wanted to do with another person in the third section.

Step 5: Draw a picture of the most important people in your life in the fourth section.

Step 6: Draw a picture that represents your feelings towards other people right now in the center circle.

0 = Never, 1 = Almost Never, 2 = Sometimes, 3 = Fairly Often, 4 = Very Often

Please write the number that corresponds to your answer in the box next to the question.	
In the past month, have you felt safe enough to ask for help?	
In the past month, have you communicated your feelings to a friend?	
In the past month, have you communicated your feelings to a family member?	
In the past month, have you communicated your feelings to a trusted adult?	
In the past month, have you done an activity that you enjoy?	
In the past month, have you accomplished a task that you do not enjoy?	

Tipping the Scale

Jon Hobbs

The Tipping the Scale intervention is an evidence-based intervention that students of all ages can benefit from. It combines relationship building as well as causes the student to critically think about their own feelings. It addresses emotions in a way that is constructive and supports their autonomy, as prioritized in the NASW Code of Ethics. This activity is also great at considering personal privacy and reserve, while accurately identifying emotions the student is experiencing at any given time.

The purpose of this intervention is to help students regulate their emotions more effectively. Another goal is for students to recognize the responsibility they have to respond positively when negative feelings arise. It can also provide clinicians, parents, and teachers with information regarding what the student may be experiencing in their life.



This intervention can be utilized at the beginning, middle, or end of the treatment phases. The evidence-based practice that is cognitive behavior therapy (CBT) is being widely recognized as a groundbreaking intervention strategy. Self-regulation of emotions has already been identified as a highly promising intervention strategy (Murray, 2022). It promotes development among the students' broad wellbeing and carries other immediate benefits of recognition (Murray, 2022). This intervention strategy develops a student's behavioral regulation as well as other cognitive and emotional regulation techniques.

Index cards will have positive and negative emotions printed on them; or may contain situational or relational cues. Some cards may bring a family member to light in conversation, inquiring how that student feels about them. Situational cues can range from significant dates, holidays, and other family events. Many factors

will play into the role each interaction has between the student and social worker as well. Trauma-focused communication is a necessity due to unexpected trauma being potentially uncovered. Being patient and taking as much time as the student needs can help build trust and show them that you care about their experience. If a student identifies with a negative emotion that is over the score of five, then additional follow-ups to define those emotions more clearly is necessary. They will be encouraged to use their own words to describe in greater detail their experiences surrounding the identified emotion.

Materials Needed:

- Construction Paper
- Index Cards
- Pen/Pencil

How to Use Intervention:

Step 1: On the construction paper, write a scale from 1 to 10. Communicate with the student that this will be used to identify intensity of specific emotions.

Step 2: On the index cards, have students write emotions/situations/relationships with family members. Anything that is affecting the student and them feel it is necessary to write down.

Step 3: Next, have the student place the emotion on the scale. This is a crucial step where the student has the opportunity to be vulnerable without communicating specific details that may be uncomfortable to discuss.

Step 4: Invite the student to tell you more about each emotion, triggers, negative coping skills, and positive coping skills. Make sure to communicate with a trauma-informed lens at this stage due to the sensitivity of some subjects, and to protect the vulnerability of the student.

Adaptations to Intervention:

Precautions can be taken to ensure that the student's best interests are in mind, no matter their status or background. For any student who has difficulty reading the

index cards and correlating them with an emotion, we can offer a simplified version. Identifying more basic emotions like being happy or sad and playing those out in charade form. This can make the student feel engaged as well as provide them with another avenue to receive aid. Other special needs can be met by this intervention with a great amount of patience. Growth can still come from emotions being acted out at any capacity which is why expressing emotions out loud can be beneficial. This intervention is intended to be used with all age groups and cultural contexts. Adaptations can also come from a group setting where multiple individuals are engaged in expressing emotions about each other. With regulation there can be immeasurable healing that can come from forgiveness and being vulnerable with other students.

Data Collection Methods:

For this assignment, I have implemented a pre and post data collection assessment. This data represents the progression of a student's personal values materializing in a way that motivates them to be better every day. At first, looking at the pre test results we can see that the student is generally uninterested in answering the questions altogether. After this intervention, however, this intervention strategy has allowed students to see how they respond to their environment.

“Click In, Click Out”

Amanda J. Walker

This intervention is to be used in school aged children to help with deciphering feelings and emotions that they may not be able to articulate themselves. It is based on the theory of expressive arts of photography mixed with the study of the check in-check out intervention program. With this intervention, the child involved will meet with the interventionist at the beginning of the school day. Through taking pictures of objects in the room or outside (“clicking” in), the child will talk about their feelings based on what they are taking pictures of. Is everything black and dark? Red and angry? Bright and sunny? The student will then “click out” with the interventionist at the end of the day by taking more pictures, to see how the imagery of their feelings have changed. The hope is that focusing on their feelings and focusing on the visual art therapy of photography, that it will give the student something to focus on and be excited for that will deescalate the negative classroom behaviors they are showing.

Materials Needed:

- Polaroid Camera (Preferred); Digital if Polaroid is Unavailable.
- Weekly Feelings Chart
- Clothespins Glued on Feelings Chart
- Behavioral Check In/Out Scale
Assessment for Teachers

Description of How to Do Intervention

Technique:

For this intervention, the student will be asked to talk about their feelings at the beginning and end of each day of school.



STEP 1: Student meets with interventionist at the beginning of the school day and takes 5 minutes to take instant polaroid pictures of something around the room or outside that represents what they are feeling to the best of their ability.

STEP 2: Student hangs up picture under morning clip-chart for the day and talks about what the picture means to them to the interventionist.

STEP 3: The student & interventionist talk about the student goals for the day.

STEP 4: When the student goes to class, the classroom teacher will be given a daily behavioral assessment to fill out on the child throughout the day.

STEP 5: The student will bring the teacher's behavioral assessment to the interventionist at the end of the school day.

STEP 6: Students will take 5 minutes to take instant polaroid pictures around the room or outside that represents what they are feeling to the best of their ability.

STEP 7: Student hangs up picture next to their morning picture on clip-chart for the day and talks about what the picture means to them.

STEP 8: The interventionist and student will compare the pictures from the morning and afternoon and talk about how/why they may have changed. They will then compare with the scale that the teacher sent with the student and see how they compare and discuss similarities/discrepancies.

Suggestions for Adjusting the Technique:

You could use a digital camera for the photos if a polaroid camera isn't available for the student. If the interventionist is able to print out the digital photograph, it would be better and easier to have tangible and physical photos. The main goal is to give the student the ability to understand their feelings through pictures and give them an activity, such as photography, that they can grow to love and appreciate through daily repetition. This technique can be used with students of all ages, gaining more in depth photographs with the older students. For those who may have a disability that affects their ability to hold the camera or move around to objects effectively, the interventionist may take pictures for the student of what

they are pointing out to them. They can focus on the details of the photograph and their feelings when the polaroid is printed.

Data Collection Processes:

For this assignment, a daily behavior assessment will be provided by the student's teacher that gives their perception on the student's behavior and emotions throughout the day. The hope is that the daily photographs with the interventionist will minimize negative classroom behaviors by no less than 20% at the end of the intervention time. Intervention will be assessed at the 6 week, 10 week, and 15 week marks to see effectiveness before continuing onto the next half of the school year.

Behavior Clip Chart

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning Photograph	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>
Stated Feelings					
Afternoon Photograph	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>	<i>(Place Photo Here)</i>
Stated Feelings					

Click In, Click Out Behavior Assessment

Name:

Weekly Date:

Teacher:

Week (Circle One): 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

(3 - On Target, Great Behavior; 2 - Needed to be Reminded, Average Behavior; 1 - Needs Work, Below Target)

	Mon.	Tues.	Wed.	Thurs.	Fri.	Comments
Respectful to teachers and classmates						
On task and using time appropriately						
Staying in seat, following directions						
Able to express feelings to teacher instead of storming or exploding verbally during class						
Optimistic and positive attitude observed						

Grief Ornament

Destiny Huling

This activity is a great way to assist grieving clients of all ages by helping them describe and process their feelings and emotions in a less threatening way. Through the steps of this activity, it invites the client to share thoughts, feelings, and memories of someone who has passed away. This activity allows the client space to process hard feelings while being able to be creative by creating a memorable ornament that they can keep forever. This activity provides a safe space for grieving children to express emotions tied to grief, allows a safe opportunity to ask questions and explore their identity beyond grief. This intervention is inspired by the effectiveness of creative arts therapy with individuals experiencing grief and loss.

Materials Needed:

- 6 Different Colors of Ribbon
- Transparent Plastic Ornaments That Can be Opened
- Strips of Colored Paper
- Paper Plates
- Shiny Supplies such as Glitter, Beads, Snowflakes, etc.
- Markers, Pens, or Colored Pencils



Step-by-Step Instructions:

For this activity, the client will need to identify who the person is that they have lost

Step 1: Choose at least 6 different colored ribbon and cut them into 5-inch segments

Step 2: Talk with the client about different emotions they feel when talking/thinking about the person they have lost. Make a list of the emotions/feelings they have identified. This provides space for the client to vent through the built-up emotions revolving around grief.

Step 3: As you talk through the emotions, write them down on the paper plates and assign a ribbon color to represent them. Place the assigned color ribbon segments onto the properly labeled plates.

Step 4: Lay out the shiny supplies that were chosen on a paper plate labeled memories.

Step 5: Allow the client space to reminisce and talk through memories.

Step 6: Allow the client to write down anything on the strips of paper. This could be a message for the person, something they wished they would have told them, this could be a picture drawn for the person or simply the person's name. This allows creativity from the client to personalize this activity. This can be something they talk through or keep to themselves. This step can be altered for each client.

Step 7: Start by putting all the colored ribbons in the ornament and acknowledging the feelings attached to each color. Next, add the shiny materials (memories) and the strip(s) of paper. Allow the client to share as much or as little as they are comfortable with when adding these materials to the ornament.

Step 8: Seal the ornament closed.

Suggestions for Adapting the Technique:

This intervention can be adapted in many ways for all age groups. This activity can be made simpler by reducing the number of colors/emotions to talk through for younger children. This activity can be altered to explore feelings and emotions more in depth with older children. This activity could be easily incorporated into CBT with older kids who may be using CBT as an intervention. This activity can also be adapted to a group project for a specific group of adolescents experiencing grief. This activity could be adapted for foster children who may feel like they have lost their biological parents and or family even though they are still alive. This activity could also be used for clients who are struggling to express their emotions or feelings as this provides a safe way for the therapist and client to talk through them in a noninvasive way.

Data Collection Processes:

For this assignment a pre and post mood and feelings questionnaire can be utilized to gain insight on how this activity altered the student's mood and feelings. We should see a positive improvement in mood and or feelings after working through this activity. This can be used to gain insight on how this grief activity affected the client. Additional measures can be used based on client circumstances and needs (depression scale, anxiety scales, etc). This questionnaire can be altered to best fit the client and environment.

Environmental Arts Club

Erin Ingram

This intervention is appropriate for all ages, is highly accessible, and can help relieve stress, improve concentration and problem-solving skills, and increase physical health (Oh et al., 2020). The benefits of nature-based therapies and art therapies are well-documented and include both psychological and physiological factors (Bessone, 2019). This type of intervention is especially beneficial to individuals who are experiencing or have experienced grief or trauma, as it has been proven to ease symptoms of anxiety and depression (Heginworth & Nash, 2019). Another benefit of art therapy is that it allows for non-verbal expression of memories and feelings associated with post-traumatic stress (Schouten et al., 2014). Using art and nature together therapeutically increases overall well-being, while encouraging sustainability and good stewardship of the earth through environmental education and creative reuse. This methodology is used locally by Turnip Green Creative Reuse, a Nashville nonprofit that partners with Metro Nashville Public Schools to provide school clubs and aftercare. This programming includes science experiments, art projects, and education on creative reuse (Turnip Green Creative Reuse).



Materials Needed:

Environmental art can be created with a variety of elements and is customizable to the needs, interests, and surroundings of the participants. Here are a few examples of materials that may be used for projects:

- Leaves, sticks, rocks, shells, flowers (anything found in nature)
- Plastic bottles, cardboard, bread ties (anything recyclable)
- Paint, pencils, paper (any art supplies available)

Step-by-Step Process:

STEP 1: Group leader will create a calendar for weekly after-school sessions; each session should be approximately one hour in length and include a short lesson or reading on a topic and a related art activity, as well as space and time for participants to regulate and process difficult emotions (this is especially important for students who have experienced trauma or have cognitive or developmental disabilities). Here are a few example sessions intended for the elementary age level, which may be adapted for older or younger age groups and ability levels as needed (Staaake, 2021):

- a reading about nature accompanied by a project creating leaf-print bookmarks
- a lesson on self-image accompanied by “self-portraits” made of tree bark, flowers, etc.
- a field trip/reading/lesson on animal dwellings accompanied by creating miniature houses with rocks, sticks, and other objects found in nature
- a lesson on recycling with an activity and/or art project using recycled materials

STEP 2: Going through the proper channels within the school, the group leader should set up the club and extend a survey to gauge interest in classes and create separate groups for different age levels if possible.

STEP 4: Once group members are selected and the group is established, they should administer the Perceived Stress Scale - Children (PSS-C) to participants to gauge pre-intervention levels of various stress-related symptoms.

STEP 3: The group leader may ask participants to bring in supplies such as recyclables or items from outside each week or gather the items beforehand and bring them in for the group (weather and space permitting, the leader could start the session by taking the group outside to gather the materials they will need).

STEP 5: At the end of each session, students may bring home their project and should be encouraged to share what they have learned with their families.

STEP 6: At the end of the program, the group leader should re-administer the PSS-C to determine what, if any, outcomes on stress symptoms the group activities had.

Special Needs Adaptations:

Lessons and projects can be tailored to the developmental and cognitive levels of each group. If there is a high need for an increase in social-emotional learning, those lessons may be incorporated into sessions as well (examples could include mindfulness and nature-themed breathing exercises). If an after-school program is not an option, this process would also be suitable for an art class, free community event, or virtual series. The length and number of activities may be adjusted as needed, and participants may use materials they find around their own yards and houses, community centers, or other locations if activities take place outside of the classroom.

Data Collection and Handouts:

The Perceived Stress Scale - Children (PSS-C) should be administered at the beginning of the first session and at the conclusion of the program. Any decrease in stress symptoms and/or increase in coping abilities are measured of success for the intervention. Additionally, participants' grades and behavior reports may be assessed to gather more information and build a case for the continuation (and potentially, funding) of the program.

Movement Therapy Group

Evangeline Watanabe

The intervention:

This movement therapy group will take place once a week directly after school for elementary aged children. Children will be referred from teachers and the school counselors based on possible exposure to traumatic events. The process will mirror that of the “Supporting Students Exposed to Trauma” program from the Center for Resiliency, Hope, and Wellness in the way it initiates screening. Once we have identified a specific event that the child and parent want to focus on, the child will be invited into the group. Ideally the group will not be more than 5-7 students in order to enable significant time for reflection and one on one work within the group. Each week we will focus on expressing an emotion we feel through dance. We will do that through individual dance and then choose an emotion to mirror with partners. At the end of each session, we will play the song “Freedom” by Jon Batiste and focus on releasing the emotions. We will do this through group movement and deep breathing. It is through channeling their emotions in their body and choosing how they are expressed that the children can experience greater regulation and relief as they realize that they do not have to be controlled by the emotion itself. The regularity of the end song and the group activity will provide consistency and ritual for the children which in and of itself can be reassuring and de-stressing.

Description of How to Do Technique:

Step 1: Identify with child and parent specific events or patterns of traumatic events that are causing stress or depression. In an intake interview have the child take the Child PTSD Symptom Scale for DSM-5. Go over the results with the participant and parent. Identify a group of children to participate. Ideally, they will be similar in age. Set a time to meet on a weekly basis.

Step 2: Invite the children to participate. Ask them to find a spot in the room that feels safe to them. Explain that whatever is said or experienced in group- stays in group. Have everyone go around and share their name and have an “icebreaker” question.

Step 3: Have each child identify an emotion that comes up when they think of the traumatic event or stressors. Play background music and ask them to demonstrate that feeling through movement.

Step 4: After doing individual dancing, then ask each child to partner up with another. Ask one child to begin by expressing those same feelings again through movement. Ask their partner to mirror or mimic their actions. Reverse the process. Have them discuss what feeling they thought the other was trying to express.

Step 5: Ask each student to come back together. If they are willing, have them hold hands or scarves to connect everyone together. Initially have them move into the center of the circle together and back out while breathing in and out. The song “Freedom” can then be played. Encourage the children to focus on releasing the emotions that they focused on today by freely moving around the room.

Step 6: At the end of each session, allow if any child needs to discuss something that came up to have a few minutes. If it is determined further counseling is needed, set a follow up to have them meet with the school counselor or social worker individually.

Suggestions for how to adapt technique:

This technique could be adapted for larger groups. There would be less one on one discussion but there could still be beneficial group work through communal movement. If someone is living with a physical disability that makes mobility difficult they could also do any of the actions from a seated position. If someone has been diagnosed with autism or has sensory sensitivities and the music or movement is too overwhelming, it is possible to include the use of headphones and/or have them facing a wall in a corner to reduce the stimuli.

Data Collection process:

We will conduct pretests and posttests prior to treatment and after treatment. The measurement tool that will be used is Child PTSD Symptom Scale for DSM-5 (CPSS-5). This measure was created by Edna B. Foa & Sandy Capaldi. We will use the self-report scale.

Moving and Grooving

Sara Fox

Moving and Grooving is an intervention developed for elementary age students who have been identified as experiencing abuse at the hands of someone close to them. This intervention will be a great way for young children to express their feelings when they have found it difficult to voice their feelings. Moving and Grooving has been adapted from Dance and Movement therapies. This intervention will allow for students to express themselves by using body movement or/and props to express their feelings.

Materials Needed:

- Scarves
- Music

Directions:

Step 1: Instruct children to stand up and pick a scarf from basket

Step 2: Instruct the children that when the music starts, they will start free dancing with their scarves.

Step 3: Instruct children to stop where and how they are when the music stops.

Step 4: Bring children into a circle to dance with their scarves for the last song.

Step 5: Have a time of reflection asking questions such as:

- A. Was the activity difficult, why or why not?
- B. Was it hard to stop when the music stopped?
- C. What was your favorite part of the activity and least favorite?
- D. Anything you would change about the activity?

Suggestion for Adapting Intervention:

One adaptation that could be utilized is using different genres of music to encompass all cultures of students participating in the group. Another adaptation would be for children with disabilities who may not be able to reflect at the end of the session. Instead of utilizing reflection to track progress, utilize observations of

behaviors of these students. Dance and movement can be utilized to assist children with disabilities emotion regulate by giving them an alternative way to express emotions.

Data Collection Process:

The following child trauma screening will be used as a pre and post questionnaire for the intervention to determine where children are before treatment and after.

The assessment can be found by going to the link:

<http://www.psid.org.au/Assets/Files/Child-Trauma-Screening-Questionnaire-for-children.pdf>

Collage Art Therapy for LGBTQIA+ Youth

This intervention is designed to give LGBTQIA+ youth a way to explore their sexual orientation, gender identity and gender expression in a safe and creative way. It can open channels for discussion at the completion of the activity or during a future session. Art therapy is an evidence-based practice used with many populations and can be done in an individual session or in a group. If done in an individual session I encourage the therapist or counselor to take part in the collage process as well creating their own collage alongside the client.

Materials needed:

- Poster board or cardboard/paperboard (can be recycled cereal/product boxes) approximately 8in x 11in (1 per client)
- Body outline template (see attached, 1 per client)
- Multiple magazines, catalogs, ads, other media
- Scrapbook patterned and textured papers for cutting or tearing
- Optional: Printed clip art, quotes (applicable to age and interests of clients)
- Scissors (1 pair per client)
- Glue sticks (1 per client)
- Markers and pens



Prior to session:

Print and cut out body outline templates, 1 per client and ensure the media you choose have a wide variety of images, words and well represent a wide range of race, gender, ethnicity, socioeconomic status, etc.

Description of the Process:

1. Provide the previously gathered materials for the collage process. Depending on the size of the group one may have to have several piles of materials

spread out across a table or room. Hand out scissors, glue sticks, backing boards and printed body templates to each participant.

2. Explain that the participants are to create a representation of themselves using the printed and cut out body template. Explain that they can create the collage in any manner they wish using any of the provided materials. Remind participants that the collage is personal to them and does not need to be shared with anyone and that there is no right or wrong way to create the representation.
3. Encourage the participants to spend a few moments thinking about how to represent themselves. Ask them to think of feelings, colors, words, hobbies, style, etc. that they feel describe themselves.
4. Depending on the age of clients one might want to show a completed example or two of a collage using the body template.
5. Let the participants know what the time frame for the project is (approximately 15 minutes should be provided). Let them know that they will have an opportunity to share their collage at the end with the group if they wish.
6. Give participants a warning as the end time is approaching approximately 5 minutes before they need to be done.
7. Offer the space for participants to share their collage with others in the room if a group or with you if in an individual session. Remind the group about confidentiality and any group agreements (one person talking at a time, clapping, or snapping to acknowledge, supportive language, etc.) before sharing begins.

Adaptations:

If working with younger children or people who may not have dexterity to use scissors on their own one could precut a variety of images from magazines and offer the opportunity to tear items that could be glued onto the template. In some

circumstances one may need to sit next to a participant and have the participant direct the therapist/counselor as to where to place the pieces on the collage.

If working with particularly traumatized individuals, you may want to have them make an open-ended collage on blank paper and not use the body template as it could be triggering to focus so directly on the image of the body.

Data Collection:

A variety of assessment tools could be used as pre and post-test measures before and after this exercise depending on your client group. A self-esteem measure is included below but one may also consider using a sense of self scale (SOSS) or other life satisfaction scale or anxiety measure depending on the age and issues of the clients you are working with.

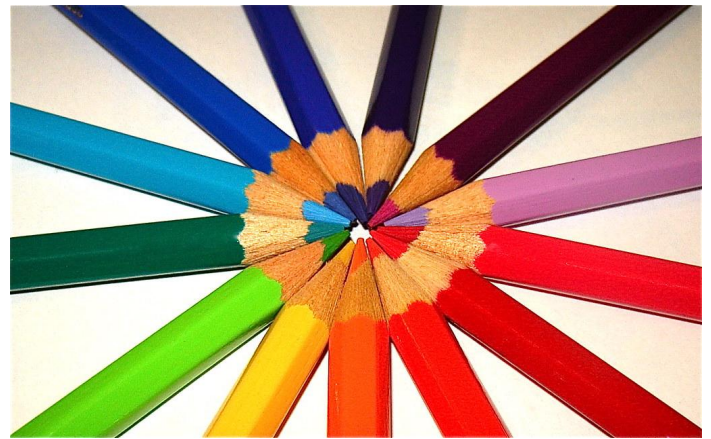
Color My World

Hilary Faulkner

This intervention is highly effective in assisting children as well as adults through the process of self-exploration, coping with various disabilities, and management of emotions. Through expressive coloring and using colors to express moods, you are allowing individuals to express their inner artist, reduce stress, and bring a sense of peace and calmness. This intervention is centered around expressing feelings through colors.

Materials Needed:

- Large & small sheets of paper
- Colored pencils
- Crayons
- Specific coloring sheets
- Small boxes



Description of how to do technique:

For this intervention, the child will be asked to talk about memories they have of the person that died.

STEP 1: Children will be asked to name one memory they have of the person they lost and to draw and color a small picture of them.

STEP 2: They will then name three more memories they have of the deceased person.

STEP 3: They will then draw and color pictures of each memory.

STEP 4: These memories will be placed in a small box, and they are asked to choose a color they feel describes their feelings and color the box with that color.

Suggestions for adapting the technique:

This could be a group project where every child pulls out a piece of paper from their box. They are asked to describe the memory. They could also talk about

other's memories and how it could relate to them. The end result should be a compilation of all the memories they have of the person that died.

Data collection processes:

A pre and post-test measuring the child's stress levels will be given to see how this activity affects their stress. The child's stress level should decrease after being able to express themselves.

Art Therapy

Bethany Lahmon

Intervention:

Purpose: The purpose of this intervention is to allow participants to express and process their thoughts and feelings through art. This is done in a non-threatening manner.

Goal: The goal is for participants to feel safe. Furthermore, this intervention will allow creativity to help heal trauma. Participants will look at what their life might look like without any stress, negativity, problems, etc. and will be able to express their feelings through art.

Objectives: This intervention is based on variations of art therapy activities that are implemented frequently. When creativity is used during trauma-care, it allows a separate part of the brain to understand trauma. Incorporating various parts of the brain can result in less stress, anxiety, and boost the overall mood of individuals.

Materials Needed:

- Plain white paper
- Pens
- Colorful writing utensils (crayons or colored pencils are preferred—colored markers can be used if they are the only thing available—each participant should receive red, orange, yellow, green, blue, purple, pink, black, gray, and brown colors)
- Computer or phone to complete surveys
- A space for participant(s) to draw (if desks or tables are not available, provide each participant with a clipboard)



- Optional: Calming music (classical or calm instrumental)

With adapted technique ONLY:

- Colored watercolor paint (one 8 colored case per participant)

How to Implement Intervention:

For this intervention, participants will be asked to answer the “Miracle Question” (i.e. imagine the world and your life with no problems, trauma, issues, negativity, etc.) through the use of art therapy.

STEP 1: Participant(s) must first take a survey

(<https://freeonlinesurveys.com/s/QWCiHmw8>) before the intervention begins in order to track mood, thoughts, feelings, emotions, etc.

STEP 2: Participant(s) will be asked the “Miracle Question.” This allows them to think of the freedom of what life might look like without their current stressors, problems, etc.

STEP 3: Once participant(s) have a clear visual of their version of the “Miracle Question,” they will be asked to express their thoughts and feelings through art.

STEP 4: Participant(s) will be asked to draw what they are feeling. More specifically, they will be asked to incorporate music into their drawing. This might look like writing down a song that they feel best describes their “Miracle” or this might look like using a specific color to express different emotions (i.e. the color purple represents classical music and classical music represents a sense of peace). STEP 4 is all about interpretation. Thus, participants are able to draw and incorporate whatever colors and music into their art that they think best fits their thoughts and feelings.

STEP 5: Participant(s) will have the opportunity to share their pieces with others if they are in a group setting. If this is implemented in an individual setting, then the individual may choose to share their art with the clinician.

STEP 6: Participant(s) will complete the survey

(<https://freeonlinesurveys.com/s/QWCiHmw8>) a second time in order to track the

change in responses (i.e. does the participant(s) feel more positive after completing the intervention?).

Ways to Adapt Intervention This intervention:

This intervention is age appropriate for all ages. It could be adapted depending on the age in which it is implemented. For example, younger children will be less detailed in their drawing. This intervention can also be implemented in a group setting as well as an individual setting. During a group setting, there will be an opportunity to share responses with each other. It can also be modified for those with special needs and those who need extra help. This intervention can also be adapted by using paint instead of crayons, colored pencils, or colored markers. Lastly, it is optional to play music while participants are completing their art intervention. I would recommend calming music (classical or calm instrumental).

Data Collection:

I have created a survey that participants will take both before and after the intervention. The survey will monitor the progress and change of each individual who participates in the intervention. There are three sections of the survey that include:

1. Demographics
 - a. This section of the survey asks each participant for their basic demographic information. Demographic information include the following:
 - i. Gender Identity
 - ii. Age
 - iii. Ethnicity
 - iv. Education
 - v. Type of Employment
 - vi. Marital Status
2. Trauma

- a. This section of the survey addresses trauma of the participant.
Questions included are the following:
 - i. On a scale, how would you rate your level of trauma?
 - ii. What type(s) of trauma have you been affected by? (Choose all that apply)
 - iii. Do you have a mental health diagnosis?
 - iv. How long have you been seeking treatment for your trauma?
- 3. Activity
 - a. These are scale-based questions that will be looked at to see the change of each participant's mood, thoughts, feelings, emotions, etc. The goal is that through these questions, an increase of positive feelings will be expressed by participants after doing the intervention through the second taking of the survey. Results of the first and second taking of the survey will be compared and noted. Results should conclude a decrease of negative self-thoughts, etc. The following questions are included in this section:
 - i. How would you rate your ability to relax?
 - ii. How would you rate your self-expression?
 - iii. How would you rate your frustration tolerance?
 - iv. How would you rate your feelings of grief and loss?
 - v. How would you rate your emotional regulation?
 - vi. How would you rate your trauma processing?
 - vii. How would you rate your connection with others?
 - viii. How would you rate your personal insight?
 - ix. How would you rate your resiliency?
 - x. How would you rate your quality of life?
 - xi. How would you rate your sense of self?
 - xii. How would you rate your ability to trust others?

- xiii. How would you rate your independence?
- xiv. How would you rate your current mental health?
- xv. Any other questions/feedback

The link to the survey is as follows:

<https://freeonlinesurveys.com/s/QWCiHmw8>

It should also be noted that the survey I created encompasses and was inspired by an academic article, discussing art therapy and the importance of evaluation. The article includes a study that provides evidence of how evaluations can serve as foundational evidence for art therapy. Findings of the study demonstrate that art therapy has resulted in both short term and long term positive outcomes (Kaimal et al., 2019).

Additional Handouts and Information:

The following resource is not my own, but can be used to better understand art therapy and the intervention that I have created:

<https://docs.fntn.ca/VC12761/Handouts/Art%20therapy%20Pp.pdf> (McGinnis, n.d.)

Situation Creation

Melia Cobbs

Materials Needed:

- Puppets
- Physical bodies (for acting)
- Private location (for confidentiality)

Description of How to Complete

Technique:

For this intervention, the client (s) will act out different scenarios using themselves or puppets to effectively express their emotions and handle real life situations.



Step 1: Client (s) will identify or create a real-life situation that they want to discuss and work through. This situation could be a situation causing stress, anxiety, PTSD, relationship problems, etc.

Step 2: After the situation has been chosen the leader of the intervention will give the client (s) a period of time to put together the skit.

Step 3: The client (s) will create their skit using themselves or puppets and present it to the rest of the group in a private area that if personal information is shared it is confidential.

Step 4: After presenting to the group, the other clients and leader of the intervention can provide feedback on the skit.

Suggestions for Adapting the Technique:

This intervention can be adapted by using it in an individual therapy session or in a group setting. The intervention could also be adapted by the materials used

depending on age. Puppets may be more appropriate for younger ages; however, teenagers and adults may prefer acting with their bodies.

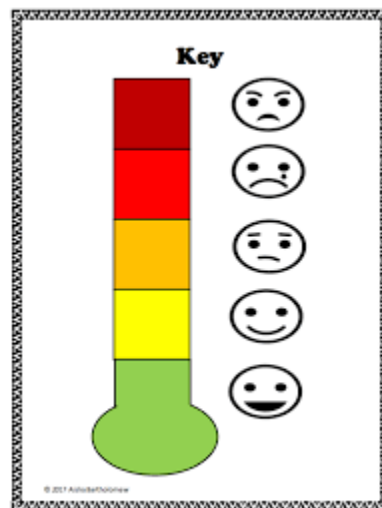
Data Collection Process:

For this assignment, a pre and posttest can be completed using the Generalized Anxiety Disorder (GAD-7) Scale to measure the client (s) level of anxiety before and after completion of the intervention. Results following the intervention should show decreased anxiety rates. These scales can be adapted for client (s) as needed such as using the Patient Health Questionnaire (PHQ-9), Perceived Stress Scale (PSS), etc.

Emotional Literacy and Regulation Activities

Hannah Estes

Social-emotional learning (SEL) can be broken down into five key competencies: (1) self-awareness, (2) self-management, (3) social awareness, (4) responsible decision-making, and (5) relationship skills (2022). This intervention activity focuses on the first two competencies of SEL. In February and March of 2018, the Minnesota Department of Education defined each of these competencies. Self-awareness is “the ability to accurately recognize one’s emotions and thoughts and their influence on behavior (2018) Self-management is “the ability to regulate one’s emotions, thoughts, and behaviors effectively in different situations” (2018). By identifying emotions and practicing regulation activities, students will be developing their self-awareness and self-management skills.



Materials Needed:

- Activity Printouts
- Indicators (e.g., stickers, clothespins, etc.)
- Optional teacher/adult: laminator
- Optional for older students: pencils, crayons, markers, etc.

Step-By-Step Instructions:

[Optional Step 1: Teacher/adult will print and laminate one handout for every student. This is recommended when using stickers as indicators so that the handouts can be reused.]

Step 1: Give each student one handout and indicator.

Step 2: Students will name their primary emotion and place their indicator on the corresponding area within the Emotional Thermometer.

Step 3: Teacher/adult will demonstrate two regulation activities each time the Emotional Thermometer is utilized. The students will repeat the activity.

Step 4: After completing two regulation activities, students will return to their Emotional Thermometer and, if applicable, will move their indicator to their updated emotion.

Step 5: Throughout the day, encourage students to silently check their Emotional Thermometer. When appropriate, allow the students to use a regulation activity on their own.

Suggestions for Adapting the Technique:

For younger students, limiting the number of regulation activities in the green box may be more beneficial. If students have not yet learned to read proficiently, emphasize symbols and icons in the place of words.

For older students, offer additional regulation activities. This will allow the students to feel a greater sense of control. Additionally, older students may enjoy creating their own Emotional Thermometer more than having the handout. Encourage students to draw their own representation for their emotions.

Data Collection Processes:

This intervention has a built-in measurement through the students' use of the Emotional Thermometer. The pre-assessment takes place at the start of the intervention with the students indicating their emotional state. Next, the regulation activities take place. The post-assessment takes place at the conclusion of the regulation activities with the students indicating their updated emotional state. We should see most, if not all, students move their indicators closer to the green zones labeled "calm" and "happy."

Womb Drumming

Deandrea Miller

The intervention I have chosen is a very simple, but effective one. It is based on Dr. Stephen Porges Polyvagal theory. In my trauma theory class, I learned much about trauma response and the Vagus nerve. If we can learn to calm our Vagus nerve, we can calm/reset our trauma response. There are several different ways to do this. The exercise I have chosen to use and adapt for a classroom activity is drumming. For this exercise, I have chosen to name it womb drumming as the purpose is to recreate the sound of the mother's heartbeat while in the womb.

This activity is set up to be used in a classroom setting but could easily be used with either a small group or with individual students. It is also described for an elementary or middle school setting but could easily be adapted to use at an older age level.

Materials Needed:

- One Small Drum Per Student

Directions:

Step 1: Give each student a drum to use.

Step 2: Instruct the student to drum to the same beat that you drum to.

Step 3: Start drumming.

You will need to start off slow and let the students get the concept of "beating to the same beat". After a few tries, you will speed it up and beat to the recommended level of 60 beats per minute. It may be a little chaotic at first, but they will catch on to the beat and the comfort of the rhythm.

Suggestions for Adapting the Technique:

The only population that would need adaptations are the children that either do not have limbs or do not have use of their arms/hands; the students could hit the drum



with their feet. If holding the drum still to do this is an issue, then the students could tap their feet to the floor and it would basically have the same effect. Even students who are hearing impaired can feel the sound waves and rhythm of the beat. They would need to sit closer to the teacher to feel the correct rhythm so as not to get confused as the students are learning.

You could also allow the students to decorate their drums if they wanted to individualize them or let them change them up during the session to allow them to feel the different vibrations from the different instruments. This would depend on the age level and size of your classroom.

PRE AND POST TESTING:

A handout is attached to this to be given to students at both the beginning of each class and then again at the end of class. This is to serve 2 purposes. Initially, one would like to see the student's anxiety level go down some immediately after completing the exercise but do not expect that it will stay down. One should expect that it will return to the higher level at the beginning of the next session. However, after repeated sessions, one would like to see the beginning numbers start to go down as well to show marked improvement in the student's overall functioning. This Pre and Post test is a simple format for elementary age children. It can easily be added to or adjusted for older students, or even left as is and be a simple measuring tool.

Pre- and Post Test

1 = Never, 2 = A Little Bit, 3 = Some/Somewhat, 4 = Yes, 5 = Very Much So

Place the number that correlates with your answer in the box next to the question.	
1. Do you feel scared?	
2. Are you nervous/anxious?	
3. Do you feel safe?	
4. Are you worried?	
5. Do you feel happy?	
6. Do you feel sad?	