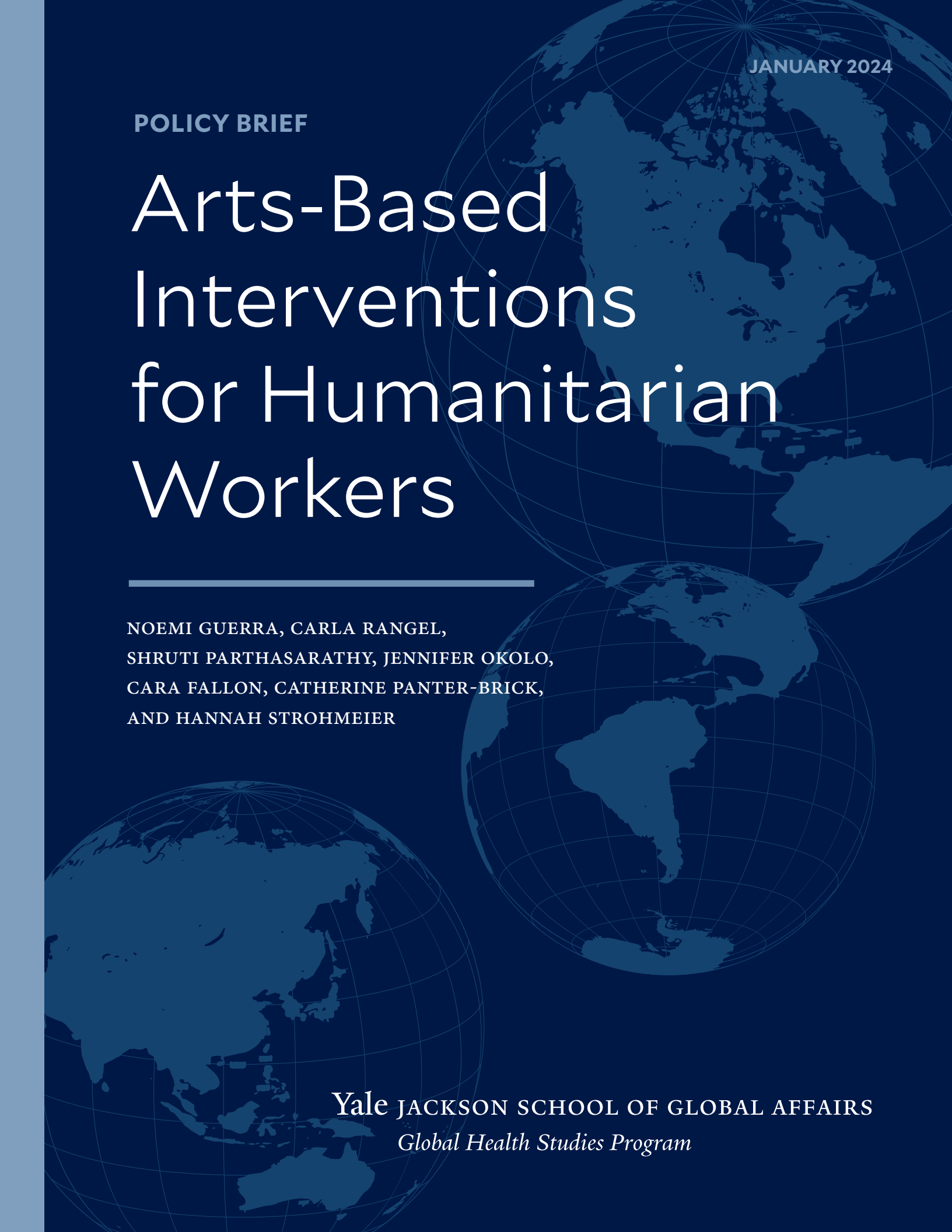




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POLICY BRIEF

Arts-Based Interventions for Humanitarian Workers

NOEMI GUERRA, CARLA RANGEL,
SHRUTI PARTHASARATHY, JENNIFER OKOLO,
CARA FALLON, CATHERINE PANTER-BRICK,
AND HANNAH STROHMEIER

Yale JACKSON SCHOOL OF GLOBAL AFFAIRS
Global Health Studies Program

EXECUTIVE SUMMARY

- Humanitarian work is marked by the exposure to chronic stressors, such as long working hours, separation from loved ones, and safety challenges, resulting in an increased risk of developing mental health problems like anxiety, depression, post-traumatic stress disorder (PTSD), and burnout among workers.
- Existing organizational staff support services, including individual psychotherapy, often fall short in addressing the multi-faceted nature of stressors and trauma humanitarian workers are experiencing.
- Case studies demonstrate that arts-based interventions offer a versatile, cost-efficient, and culturally adaptable approach to enhance the emotional, social, and mental well-being of humanitarian workers.



OVERVIEW

Humanitarian workers are exposed to chronic stressors, such as long working hours, separation from family and friends, and safety challenges at the workplace, which places them at a heightened risk of developing common mental health problems such as anxiety, depression, PTSD, and burnout. Typically, psychosocial interventions targeting humanitarian workers aim to prevent the development of mental health problems and promote well-being. Despite humanitarian organizations' responsibility to care for their workers, current support options are insufficient and underutilized. To fill this gap, arts-based interventions can be utilized as they have been shown

to increase the psychosocial well-being of care workers through culturally competent and widely adaptable ways. This policy brief lays out the potential arts-based interventions have to improve the psychosocial well-being of humanitarian workers, explains the emotional healing art provides, and offers case studies of arts-based interventions in humanitarian and humanitarian-like settings. Based on this research, we have developed five policy recommendations that can help guide humanitarian organizations toward the effective integration of arts-based interventions into their staff support portfolios.

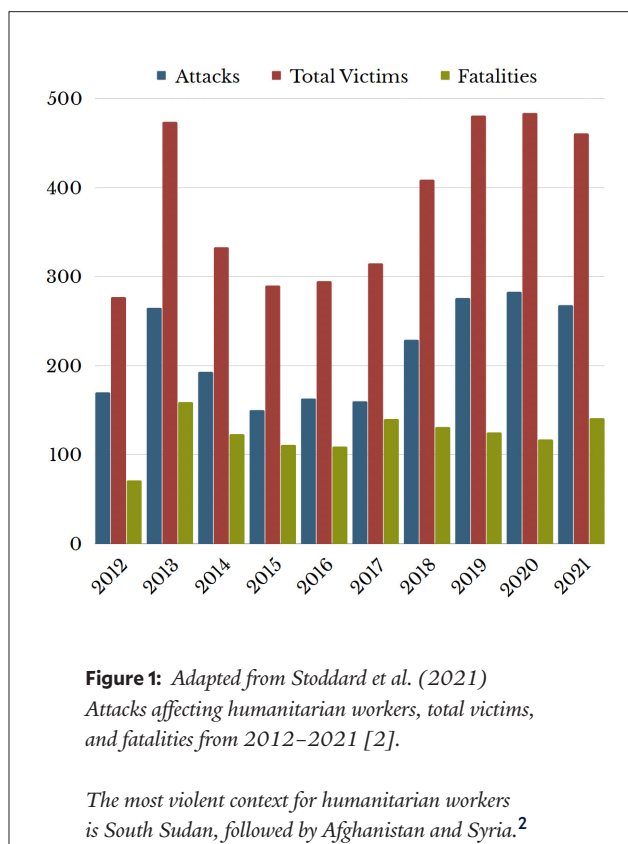
BACKGROUND

Humanitarian Work

Global humanitarian needs are at record levels with 360 million people worldwide needing humanitarian assistance.¹ The humanitarian workforce is tasked with providing aid in various crises to meet these rising needs. Humanitarian workers are frequently exposed to dangerous situations such as violent attacks which are on the rise [see figure 1].^{2,3} Exposure to chronic stress and traumatic events can adversely affect the mental health and well-being of humanitarian workers.^{2,3} Beyond witnessing traumatic events, humanitarian workers undergo daily stressors including heavy workloads, travel difficulties, gender-based discrimination, and sexual violence that lead to adverse psychological symptoms such as anxiety, depression, PTSD or burnout.^{3,4} In these high-stress environments, many humanitarian workers turn to maladaptive coping strategies such as alcohol consumption to reduce their stress. Compromised well-being and poor mental health can adversely affect the personal lives of humanitarian workers while simultaneously disrupting team cohesion and organizational functioning.³ When employees are stressed, they have higher illness rates, higher absence rates, higher turnover, and are less effective in carrying out their duties than non-stressed employees.³ Due to the stressful nature of their environments, swift attention must be paid to the mental health and psychological well-being of humanitarian workers.

Organizational Staff Support

Over the 21st century, greater attention has been paid to the mental health challenges humanitarian workers experience. To address this concern, academic research and the Inter-Agency Standing Committee – which is the highest-level humanitarian coordination forum of the United Nations system – have developed concrete guidelines for organizations seeking to modify their internal policies and provide psychosocial support to their workers.³ Despite these resources, organizational staff support is still widely seen to be underfunded and insufficient on the one hand and underutilized on the other. This situation suggests limited dedication from donors and organizations to allocate financial resources to formal support services and implies a concerning gap between the diverse needs of staff and the interventions available to them. For example, a common resource provided is individual psychosocial treatments are not specifically designed



for social trauma and may not be acceptable within collectivist cultures.⁴ Additionally, psychosocial support may differ between crisis and non-crisis settings as local psychologists may not be able to deliver services in unstable environments. Stigma against utilizing mental health services is still a pervasive issue and prevents workers from accessing the support they need due to fears of judgment or lost work opportunities.³ Due to the complex psychological challenges humanitarian workers experience, there is a need for additional, cost-effective, and culturally sensitive staff support services.⁵

History of Art as an Intervention

Art across human history has been heavily connected to health. Paleolithic instances of sculptures, music, dance, and theater served as expressions of shamanistic healing rituals tens of thousands of years ago. Though shamanistic health was replaced by monastic health in the Middle Ages, the intricate tie between physical health, spiritual health, and art as a mediator between the two remained.⁶ During the 20th century, various branches of arts in health interventions started to surface, establishing themselves in different nations and evolving into prominent areas of engagement such as arts therapies, arts-based learning, and specialized programs that we know today.⁶

**THE ARTS CAN BE A
POWERFUL ALLY IN OUR
QUEST TO IMPROVE HEALTH
FOR ALL**

**-DR TEDROS ADHANOM GHEBREYESUS,
WHO DIRECTOR-GENERAL**

Benefits of Art

Arts-based interventions for mental health incorporate various forms of artistic expression to promote emotional well-being, self-discovery, and healing. Amongst others, these approaches include painting, drawing, music, writing, poetry, or dancing. Arts-based activities offer a plethora of ways to support the physical, emotional, and mental well-being of humanitarian workers. Research has consistently shown that understanding emotions and communication are the most common change processes resulting from creative therapy.⁴ There are a variety of ways in which this occurs. Engaging in artistic activities serves as a therapeutic outlet, providing a safe space for workers to reflect and meaningfully process their emotions.

This emotional processing occurs as participants extract their emotions from their bodies and hearts into their art. Consistent engagement with emotional exploration then leads to the normalization of emotional expression, which serves as an important tool to combat the stigma associated with emotional reactions to trauma in humanitarian organizations. In an effort to discern emotions and process problems, creative strategies encourage communal conversations, thoughtful dialogue, and bonding over shared experiences of stress and trauma.

Inclusivity of Art

Art, as a universal experience, can engage a wide range of people. Framing arts-based interventions neutrally, emphasizing aspects that foster team cohesion and leadership skills, may bolster participation—notably from groups that have reservations about engaging in formal mental health support. The 2019 WHO synthesis report on the role of arts in improving health and well-being found that the arts foster prosocial behavior, a shared sense of success, group motivation, and a collective identity.⁷ Engagement with the arts helps to develop the empathy and psychosocial skills critical for conflict resolution, including between ethnic groups.⁸ Based on these findings, art has the potential to promote cultural understanding and strengthen team dynamics among diverse humanitarian workers.⁹



Case Studies

Methodology

There is very limited quantitative and qualitative data available on arts-based interventions in humanitarian settings. However, arts-based interventions have been applied in other occupational settings, such as medical settings with nurses and physicians. Medical workers face similar challenges to humanitarian workers such as high workloads and an increased risk of developing anxiety, depression, PTSD or burnout due to their work.⁴ Therefore, some of our case studies bridge results from the medical to the humanitarian sector.



ZENTANGLE ART

Healthcare Workers / Taiwan

Background: Zentangle art, conceived in the early 2000s as a form of meditative free expression, utilizes a deliberate, one-stroke-at-a-time approach to induce a meditative state.



Target population: Forty rural healthcare workers in Pingtung County, Taiwan. Much like humanitarian work, rural healthcare work is characterized by inconsistent resources and heavy workloads that create high-stress and exhausting environments.

Intervention: This case study examined the effects of using a Zentangle art intervention on workplace spirituality and self-efficacy reports. Workplace spirituality is defined as a workplace that recognizes that employees have a rich inner life that is nourished by meaningful community work, and it is heavily tied to the well-being of an individual, organization, and society as a whole.¹⁰ A 4-hour Zentangle workshop led by a certified Zentangle instructor was conducted. After the workshop, participants were handed portable Zentangle art supplies that they could use to draw anytime and anywhere after the workshop concluded.

Results: The results of this study indicate that Zentangle art activities can reduce participants' stress, increase their self-efficacy, and improve workplace spirituality.¹⁰

Takeaways: The results of this study underscore the employment of art as a highly adaptable and highly accessible tool for the improvement of individual and community well-being.

CREATIVE ARTS THERAPY

Humanitarian Workers / Cambodia

Background: In Cambodia, there have been decades of conflict and violent trauma that humanitarian workers and citizens of Cambodia have faced. Cambodian humanitarian workers express high degrees of stress and secondary trauma due to their work.¹¹



Target population: A company called Ragamuffin International partnered with 10 local and international non-governmental organizations operating in Cambodia to improve the well-being of their humanitarian workers.

Intervention: Ragamuffin's team combined their creative, holistic, and culturally sensitive methods into different ceremonies and rituals for workers. In groups, creative image-making allowed the participants to express and extract their emotions from their bodies onto paper. Further reflection allowed them to process these images, their shock, and their grief.

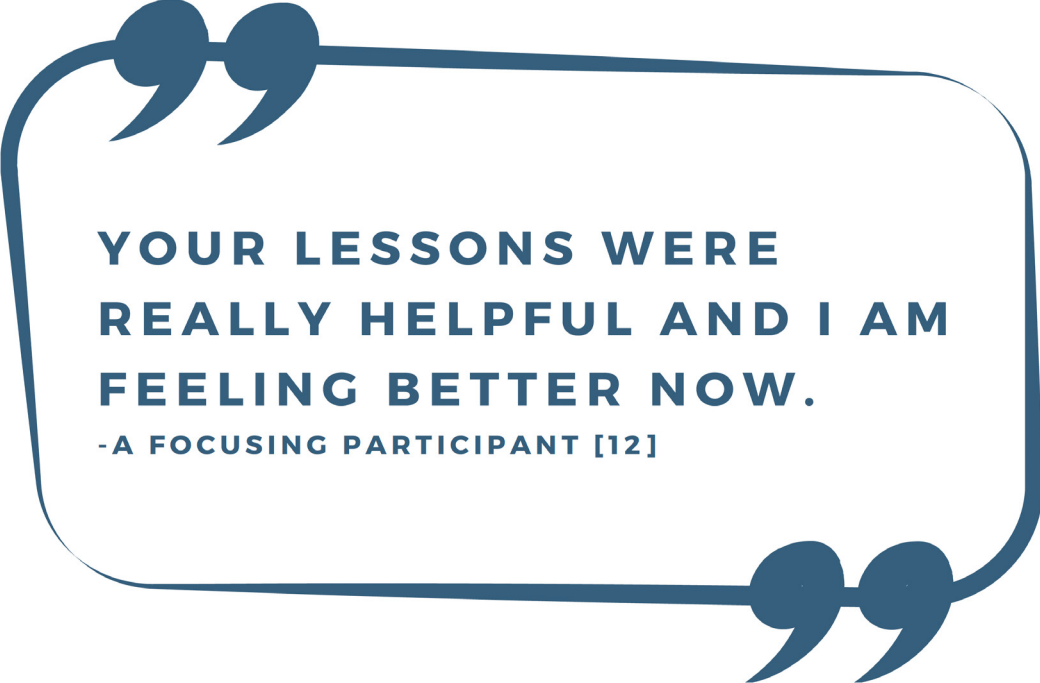
Results: Participants felt they were able to share memories, debrief, reflect, and discharge the emotional impact of the crisis at hand.

Takeaways: Creative art therapy techniques can address the emotional needs of humanitarian workers. In terms of logistics, the implementation of art interventions can be based on partnerships and for longevity, should be integrated into an organization's policy, structure, and programming.

FOCUSING PROJECT

Humanitarian Workers / Afghanistan

Background: Witnessing and experiencing over 30 years of mass-scale war and violence, the people in the country of Afghanistan have suffered from a vast amount of stress-induced illnesses, specifically depression, PTSD, heart disease, hypertension, diabetes, and more.^{12,13}



**YOUR LESSONS WERE
REALLY HELPFUL AND I AM
FEELING BETTER NOW.**
-A FOCUSING PARTICIPANT [12]

Target population: Humanitarian workers and community members in Afghanistan, in both rural and urban areas. In the past 5 years, over 17,000 individuals have participated in the Focusing training program.¹²

Intervention: The Islam Focusing Project of Afghanistan emphasizes the artistic practice of focusing. Taught by trained teachers, participants utilize different methods of art, specifically poetry, to focus and reflect on their emotions. Through these exercises, participants foster social connections with others and help increase their well-being. All materials are written and presented in locally recognized languages, which increases the accessibility of resources.¹²

Results: Many participants reported that focusing and engaging with the intervention helped them listen to their inner self, describe their broader worry for their people in Afghanistan, and navigate their agency amid long-term conflicts.

Takeaways: The artistic practice of focusing, a natural human process, can be a low-cost tool to effectively increase certain aspects of psychosocial well-being.

LIMITATIONS & CONCLUSIONS

Limitations

Despite the great benefits the arts provide to mental health, some limitations need to be acknowledged when integrating arts-based interventions into staff support policies. Successful navigation of the obstacles will maximize the effectiveness of arts-based interventions.

In order to ensure that all participants feel confident to engage in the artistic process which might require stepping out of their comfort zone, is it important to contract well-trained facilitators.

In terms of data collection, implementing a streamlined qualitative and quantitative approach will aid in assessing effectiveness across studies.

Arts-based interventions should augment, not replace, formal psychosocial treatments to avoid inadvertently exacerbating trauma.

A “do no harm” approach is paramount, urging cautious implementation to prevent potential psychological harm when addressing past traumas. Balancing innovation with a vigilant, ethical approach ensures the positive impact of arts-based interventions in mental health policy.

Conclusions

Present-day humanitarian work is shaped by a variety of stressors. Consequently, mental health problems and compromised well-being are widespread among humanitarian workers. To help bolster occupational well-being, psychosocial interventions that have the potential to enhance healing, wellness, and resilience are needed. Evidence from similar occupational groups, such as healthcare workers, suggests that arts-based interventions may be an effective tool to increase the well-being of humanitarian workers as is summarized in Figure 2. This policy brief also highlights five critical recommendations, alongside potential limitations, to guide the research and development of arts-based interventions.

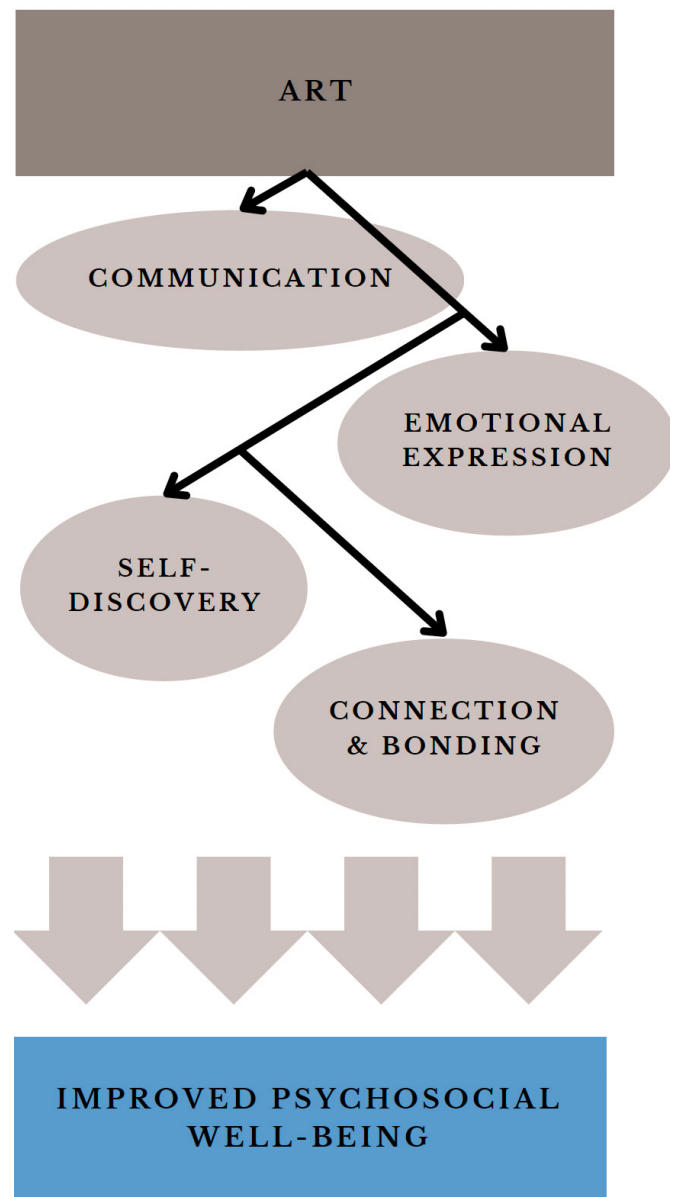


Figure 2: An integrative model demonstrating the aspects of art that promote psychosocial well-being

POLICY RECOMMENDATIONS

Reduce Barriers to Participate in Arts-Based Interventions

Arts-based interventions should be tailored to the specific challenges and needs of the workers and their organization to maximise benefits.

Considerations of religious practices, gender and social norms, and team dynamics should guide arts-based intervention design. Program designers must consider the social context for seamless cultural alignment.

To ensure that participation is not burdensome, implementation of interventions should be cognizant of time barriers, cultural norms, worker safety, and financial budgets.

Integrate Arts-Based Interventions Into Organizations' Staff Support Portfolios

Arts-based interventions should be integrated into the operations and policies of humanitarian organizations. This includes financial budget allocation, forming partnerships with local artists and art therapy professionals and organizations, or within-organization innovation to incorporate arts interventions.

Ensure Arts-Based Interventions Occur in an Appropriate Art Space Led by an Experienced Instructor

Arts-based interventions should take place in a suitable environment with an experienced instructor capable of creating a safe space for creative exploration and expression where participants can leave behind professional roles.

Ensure Arts-Based Interventions Target Individual but also Organizational Healing to Foster Workplace Cohesion and Connectedness

Chronic stress and traumatic events can affect an entire team. Integrate arts-based interventions into organizations' staff support portfolios to benefit individual professionals, while also promoting workplace cohesion and connectedness.³

Conduct More Research on Arts in the Humanitarian Sector

To ensure the long-term viability of arts-based approaches, organizations should conduct qualitative and quantitative research, including longitudinal studies, on arts-based interventions. The study results will provide valuable insights to refine these interventions for the future, ensuring long-term efficacy and sustainability.

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