

Abstract
Domestic violence or Intimate Partner Violence (IPV) is known as the cause of psychological disorders in victims, perpetrators and their children. Previous studies point out that negative effects of domestic violence negatively influence the development of children and adolescence. Most studies focused on victims and perpetrators. However, there is minimal data focusing on the development of psychological disorders in adolescence exposed to domestic violence. Based on a previous survey, the Depression Anxiety Stress Scale (DASS-21) (Lovibond & Lovibond, 1995) was used to obtain an overview of symptoms on 50 participants aged 15-19 exposed to domestic violence. Seventeen participants (34%) obtained scores which fit into the moderate, mild and normal category, while 33 participants (66%) obtained severe and extremely severe scores on the anxiety scale. Based on this finding, the current study further explored anxiety experienced by ‘Only Child’ adolescents exposed to domestic violence. Furthermore, this study uses art therapy intervention to reduce anxiety scores of adolescents exposed to domestic violence. The participant for this intervention are selected upon meeting the criteria of being an Only Child adolescent with divorced parents due to domestic violence.

Keyword: Domestic violence, Anxiety, Only Child, Adolescent
**Introduction**

Marriage is an emotional and legal bond between two people committed to various aspects in their lives (Olson & DeFrain, 2003). Marriage allows social support which increases psychological wellbeing (Soulsby and Bennett, 2015). Many people then choose to be married due to these benefits of marriage. Despite the main purpose and benefit of marriages, data shows increasing rates of divorce each year. Data from the Indonesian religious court shows 245,548 cases of domestic violence which end in divorce (BBC Indonesia, 2017). Meanwhile, out of 1,022 cases that were brought to the Indonesian national commission on violence against women there were 903 cases of domestic violence.

Johnson and Leone (2000) explained that women victim of domestic violence live through negative effects such as physical scars, physical disabilities and psychological problems, such as trauma, stress, depression and low self-esteem. The negative effects of domestic violence does not stop in women victims but may also impact the mental health of the victim’s child. Hooker et all (2016) wrote that women victims have poor ability to take care of their child, some with bad relationships toward the child. As a result, there is a lack of fulfilment in children, increase of the need for attention from the mother, and mental health disturbances (Chen, Broday & Miller, 2017). In addition, children and teens who are exposed to domestic violence also has higher risk of mental health problems (Hamby, Finkelhor & Turner, 2014). They are more likely to show behavioural problems (Nielsen, 2017) and have higher tendency of growing up to be a perpetrator or victim of domestic violence (Onanubi, Olumide & Owoaje, 2017).

In terms of psychosocial development, teens need their parents’ support as they are looking for their self-identity (Papalia, Olds & Feldman, 2009). Changes in physical, emotional and identity became stress factors that may be present in family relationship. However, conflicting family relations and violence impact teens in physical and mental health (Chen, Broday & Miller, 2017). Out of all the characteristic of children and teens, only children are known to be more rigid in family relations. When compared to other children with siblings, the only child has higher score in neurosis, depression, dependency in interpersonal relations, anxiety and stress (Liu, Munakata & Onuoha, 2005). The only child’s rigidity in psychological health is affected by the only child’s relation with their parents (Mancillas, 2006).

On a previous survey, the researcher used Depression Anxiety Stress Scale-21 (DASS-21; Lovibond & Lovibond, 1995) to gain a better understanding in mental health issues faced by teens who are exposed to domestic violence. The result showed that out of 50 participants (age 15-19), the highest score was found in anxiety symptoms; 17 participants (34%) were categorized with moderate, mild and normal symptoms, while 33 participants (66%) were categorized with severe and extremely severe symptoms. This paper focuses on the deeper value and perspective of an anxious teenager exposed to domestic violence. The researcher help the teenager to explore, transform and grow using art as medium for therapy. Art therapy is used as a tool to diagnose clients, yet at the same time it is a medium to help clients understand themselves (Ganim, 1999).
Research Methodology

Participant

The participant (AU) is a 19 years old only child who is currently studying for her bachelor’s degree. Her parents got divorced when she was in fifth grade due to domestic violence (verbal abuse and threats) and love affair. After the divorce, AU lived in different places, between her mother’s, father’s and grandparent’s house. In 8th grade, AU’s father remarried, while her mother started living with a boyfriend. AU never believed that her parent’s relationships with their new partners would last forever. As she grew, she developed anxiety over small arguments she heard and felt burdened with the “only child’s duty” of having to take care of both her mother and father in the future. The thought of being stuck in a verbally abusive family causes her to lock herself inside her room with physical anxiety symptoms. AU distracted herself from anxiety by listening to ocean waves recordings, keeping the anxiety to herself, getting easily irritated with her boyfriend, and losing interest in developing herself as well as having a meaningful social relationship.

Procedure

Altogether, ten sessions were conducted with a duration of 60-180 minutes per session. After the initial contact on the first session, a semi structured interview were conducted on AU’s family background, domestic violence experienced, parents’ divorce, personal anxiety and interest. On the second session, AU was given a set of pre-test and introduced to art therapy. Psychological tools included in the pre-test set were the Depression Anxiety Stress Scale (DASS-21), the State Trait Anxiety Scale (STAI) and projective tests (Draw-A-Person test, Draw-A-Tree test and House-Tree-Person test). Following the pre-test, sessions 3-9 were art therapy sessions. After AU displayed a non-resolving avoidant behaviour toward her anxiety on the third session, sessions 4-6 were focused on bringing back AU’s behaviour and emotions on reality. Afterward, sessions 6-9 were focused on transformation and healing. The researcher used Ganin’s (1999) framework which consists of different stages focusing on expressing emotion through imagery, healing the mind, healing the body, transformation of the spirit and healing others. All art therapy sessions were summarized with inquiry and conversations regarding AU’s symbolic drawings and emotions. On the last session, AU was given a set of post-test and were shown all her drawings. Termination was conducted after psychoeducation and interview.

Results and Discussion

Ever since the beginning of rapport, AU seemed to be unsure of what she wants. She contacted and deleted her messages several times prior to meeting the researcher for the first time. However, she was committed in coming to the sessions and never missed an appointment nor arrived late for the meetings. Throughout the sessions, AU came with a clean feminine look, natural makeup and wavy hair-do. At the beginning of the sessions, AU seemed to be very quiet. Her answers were short facts, she didn’t give a lot of explanations and often use the words “I don’t know” to answer questions about personal thoughts and feelings. Between the third and fourth session, AU came up with questions and stories without being asked. While working on her drawings, AU stopped several times, talked about her unsatisfied feelings and then continued on
her work until she felt satisfied. As she gradually took more time in her drawings, she displayed changes in motivation and daily activities.

The second session was the pre-test and introduction to art therapy. During introduction of art therapy, AU was asked to make a scribble, write down her negative emotion, draw her negative emotion and express her anxiety in a symbol. In figure 1, AU used colours to express her negative emotion. She used red to describe anger and black to describe negative behaviour. She then explained gossiping and complaining as two negative behaviours she disliked about her grandmother and mother. She added that she was worried that she’ll grow up to have such traits.

![Figure 1: Expressing emotion through image](image1.png)

In figure 2, AU was asked to draw a symbol of her anxiety. She used yellow, black and dark blue paints to draw the clothes she wore when she overheard her grandmother and mother talked about her future and being her mother’s only hope. She explained having anxiety in thoughts of her responsibility as the only child and having to live with both of her parents again. She then drew a face emoticon as a symbol of how she felt about the thought of living together with both of her parents in the future.

![Figure 2: Expressing anxiety](image2.png)

During and after session three, AU started giving longer answers during inquiry and sharing longer stories in the beginning and/or ending of the session. In figure 3, AU was asked to draw her emotions when she felt anxious. She then drew different
colours as representation of different thoughts and feelings which she felt when she is anxious. AU mentioned feeling nervous, scared and angry. After drawing and explaining her drawing, AU was then asked to transform it to more acceptable feelings. She then drew ocean waves as a representation of the sound she likes to hear whenever she tried to comfort herself. On the same session, AU was also asked to draw and transform the symbol of her anxiety. AU drew a face emoticon and added a smiley face emoticon in the right lower side of the paper. Both drawings showed a kind of ignorance and an avoiding behaviour in handling her own anxiety. During inquiry AU commented that her strategy in handling her own anxiety was ineffective.

![Figure 3: Transforming negative emotion](image)

As AU displayed a lack of effort and an avoiding behaviour toward her problems on the previous two sessions, session four, five and six were focused on reality drawings. First, AU was asked to draw another scribbling with her eyes closed. AU drew two kinds of scribbling pictures and described anxious emotion as she drew both pictures, which she described as drawings of angpao and ocean. She then asked to redraw the two drawings in detail which she took longer time to do. She then said that she thinks it’s a better picture yet still weren’t very satisfied with it. Figure 4 is described as a calming ocean waves.

![Figure 4: Drawing an interest](image)

In the fourth session, AU was asked to draw an ocean view, an object and an animal. In figure 5, AU was asked to find and copy a photo of the ocean while the researcher accompanied AU in drawing ocean waves. AU and the researcher used different
papers, paint tools and palette. During session four, AU started to copy the researcher in using palette and mixing her own colours. She then continued to explore different colour mixtures on the other drawings on her own. Figure 5 shows AU’s drawing of fishes in the ocean with little waves rolling toward the beach. AU mentioned not feeling completely satisfied with the picture, but the calm ocean waves drawing was closer to what AU imagined on previous sessions.

In figure 6, AU was asked to draw any object in the room. AU took out her own make-up items and drew her two favourite colour lipsticks. The colours were made by mixing different colours in the palette and AU used a different size brush for the first time. As a background, AU drew a small table which she said she wasn’t satisfied about. The researcher helped AU by asking if there is anything AU would like to add to make the drawing more satisfying. She added drawings, stopped, and were asked the same questions three times until she finally said she was satisfied. The same pattern of stopping, feeling unsatisfied, and adding more details after being asked by the researcher occurred for the remaining art therapy sessions. This pattern indicates how AU has a tendency of not using her true skills and needing external support to motivate her. During the inquiry in session four, AU talked about her interest and lack of motivation in joining activities related to her interest.

On the sixth session, AU was asked to draw a landscape and a self-portrait. In figure 7, she asked to find any landscape picture from her phone. She choose to draw a
beach and waves in detail. She used a gradation of colours and mixed her own colours. During inquiry, she mentioned feeling relaxed as she imagined listening to the sound of waves and feeling the waves touch her feet. AU then drew a drawing of herself by looking at one of her photos. The drawing shows a picture of her sitting while leaning on the back of her bed. She also drew her dog and a doll she got from her boyfriend. She described her self-portrait drawing as her feeling unsure, not knowing where else to go and feeling not wanting to stay home due to the arguments and negative conversations she could hear from her room.

![Figure 7: Resilience in reality drawing](image)

As AU’s drawings were becoming more realistic, the researcher resumed to the planned art therapy sessions. AU was asked to draw symbols of her anxiety. In figure 8 She drew a stickman, a set of clothes and her boyfriend’s face, each representing her anxiety about her body image, being stuck with both parents and losing her only person. When asked to transform her drawing, AU added her boyfriend’s body, a stick, and fire. She explained the picture she drew as a picture of her boyfriend burning her main anxiety for her. AU was asked if she was satisfied with the picture and said that she was unhappy with the image she made of herself. She then covered the image by adding her dog. AU also added a burning stick and a new image of herself. However, during inquiry she realized that she was not doing anything as her boyfriend and her dog tried to burn her anxiety for her. She then asked to add extra drawings and drew a fire and a stick on her image as a symbol of her responding toward her anxiety together with her close others. At the end of the session, AU mentioned feeling very satisfied.
On the seventh session, AU was asked to draw her emotions when she felt anxious. In figure 9, AU drew some red and black zig zags as a representation of her anxious feelings. She then transformed it by adding and covering the black zig zag with different colours. She described her drawing as a picture of confetti. AU was asked if she was satisfied with the picture and she decided to add music notes. She then stopped and mentioned her unsatisfaction with it, the researcher then asked if she would like to add anything else on the drawing. AU then added different kinds of food before she said she was satisfied. During inquiry, AU described the whole picture as a concert festival. She mentioned feeling happy as she remembered enjoying the fun event.

In figure 10, AU was asked to draw pain in her body. She paused for a time until she asked if she could search for an image on her phone. AU then drew an image of a heart by mixing the colours and adding the shape of each part bit by bit. During the inquiry session, AU talked about her physical anxiety symptoms. She described a faster uncomfortable heart beat which she felt each time she heard people fought or argue.
In figure 11, AU was asked to draw a symbol of her needs. She described her need as the ‘need to escape’. Later, she added money, clothes and her dog as things she needs. AU didn’t draw any background as she didn’t know where to go. In further discussion, she shows awareness of not being able to escape and shared some optional activities she might want to spend time on.

On the eight session, AU came with different thoughts of what she needs. She was asked to draw her needs which she then describe in figure 12 as a drawing of her talking to her parents. During the inquiry, AU showed understanding of the importance of talking about her anxiety. In addition to the drawing, she also drew a picture of the biceps muscle as a symbol of the strength and courage that she needs to be able to talk to her parents. However, AU displayed limited ideas on ways to get the courage she needs.
During the last art therapy session, AU was asked to draw her healthy, happy self. In figure 13 she first drew a face and a muscle, which are symbols of a stress free, strong and courageous self. AU was asked if she was satisfied with her picture and said that she wasn’t happy with the location of her drawing. AU then added faces of people she helped in the future to balance the whole drawing. She explained how she wants to help improve other people’s well-being by helping them out of their problems and finding their own happiness. She again mentioned feeling unsatisfied with the result and decided to add confetti. She associated the confetti drawing as the winning stage of a game.

AU’s art therapy drawings displayed her grieving stages of anger, denial, sadness, bargaining and acceptance. The way she worked on her drawings showed slow progression and need of encouragement. During the last few inquiries, she concluded about communication as the key of resolving her anxieties. She added that having courage is a strength she needs in order for her to communicate. However, at the end of the sessions, her DASS-21 and STAI’s pre-test and post-test scores remained in the same category and showed almost no differences. Meanwhile, her projective pre-test and post-test showed differences in detail and size. Based on her inquiry sessions, researcher concluded that art therapy helped AU express and understand her own emotions. Knowing herself pushed her to be motivated in finding her own interest, which is shown in her behaviour and projective post-test. However, AU’s awareness
of her needs were not proven in action yet as she needed more time and external support. Another possible uncontrollable factor would be continual exposure to her parents conflicting marriage and relationship to their current partners.

**Conclusion**

Based on this case study, the impact of exposure in domestic violence on children shows real physical symptoms of anxiety. As an only child who was exposed to domestic violence, the idea of being the only person obligated to take care of both parents and relive the past scenes of domestic violence in the future could trigger an anxious stimulus. This case study also stresses the possibility that an only child may need more time and external support in dealing with the grief of divorced parents. In using art therapy for decreasing the anxiety score of an only child, future researchers must be aware of post-divorce families in teenage participants. Continuous trigger at home during therapy sessions might affect the results of the therapy. Furthermore, personal differences in the speed and style of working process should also be accounted for.
References


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