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Wellbeing Webinars



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Where Creativity Meets Care: Strengthening Child and Youth Mental Health through the Arts

Presenters: Sofia Casas (UNHCR)
Glory Lueong (RuWCED Cameroon)
Samson Ndegwa & Sammuel Thiong'o (Afrocure) &
Marine Burdel (Artolution)
Chiara Manavella & Silvia De Faveri (RED NOSES International)

Moderators: Felicity Brown (UNICEF)
Marie Dahl (The MHPSS Collaborative)
Anneloes Koehorst (UNICEF)



Agenda

- Introduction
- Case example 1: *Brushstrokes of healing* - RuWCED Cameroon
- Case example 2: *Using the arts in response to an emergency* - Artolution & AfroCure & Medair, Kenya
- Case example 3: *Learning from Lesvos: Artistic Practice, Impact Evaluation, and Team Preparedness* - RED NOSES International, Greece
- Q & A
- Coffee chat





Introduction

Sofia Casas, UNHCR

Reflection Moment



Take a brief pause and recall a moment when the **arts**—a song, image, performance, story, poem, or creative act—**supported, soothed, moved, or inspired you.**

What was it about that experience that made a difference for you? How did you feel?

The Arts & Wellbeing – What The Evidence Shows

- **Activate the whole brain:**
Arts engage emotional, memory, sensory–motor, and social networks that underpin mental health.
- **Regulate stress & the body:**
Creative engagement lowers stress responses and supports cardiovascular and immune functioning.
- **Support emotion & meaning:**
Arts offer safe ways to express, process, regulate, and reframe difficult experiences when words are not enough.
- **Build social connection & belonging:**
Shared creative activity strengthens relationships, social cohesion, and inclusion—key protective factors for mental health.
- **Evidence across the life course:**
Thousands of studies show that arts engagement supports prevention, promotion, and treatment outcomes across mental and physical health.



A close-up photograph of a young child, likely of African descent, smiling and holding up their right hand towards the camera. The child's hand and forearm are covered in various colors of paint, including yellow, red, and blue. The background is blurred, showing an outdoor setting with greenery and a building.

Key Terms in Arts & MHPSS

- **Arts / Creative Practices**

Cultural and expressive activities present in all communities—music, dance, visual arts, theatre, storytelling, writing, crafts, rituals.

 - **They naturally support wellbeing**, identity, and social connection, even when not designed as MHPSS.
- **Unstructured Arts Activities**

Open, flexible creative opportunities (e.g., free drawing, drumming, open movement).

 - They **offer enjoyment, expression, agency, and social connection**, and can have psychosocial benefits.
 - They are *not necessarily intentionally structured* with specific MHPSS objectives or facilitation processes.
- **Arts-Based MHPSS Interventions**

Structured group activities using the arts with **explicit psychosocial goals** (e.g., emotional regulation, coping, meaning-making, resilience, social connection).

 - Involve planned sessions, trained facilitation, safety considerations, and supervision.
 - Delivered at community and focused levels of the MHPSS pyramid.
- **Arts Therapies (Creative Arts Therapies)**

Clinical therapeutic disciplines (art therapy, music therapy, drama therapy, dance/movement therapy) delivered by **licensed mental health professionals**.

 - Used to assess, treat, and support mental health conditions within therapeutic relationships.

Who Can Provide Arts-Based MHPSS?

Expertise of creative personnel in relation to complexity of creative activity

Complexity of creative activity and participant need	Expertise of art practitioners and art professionals			
	Community or professional artists without community engagement experience	Participatory arts practitioners with group and community engagement experience, supported by psycho-social support workers	Artists with group facilitation experience in health, mental health, or social care with Mental Health First Aid or trauma-informed care training	Creative or expressive arts therapists with formal training and certification
	Performances and simple uplifting activities. Little to no discussion of crisis context or personal issues.	✓		
	Participatory arts with social engagement. general conversations may arise, but no direct discussion of crisis situation.		✓	
	Community art projects focused on coping with crisis situations, typically post-crisis or in ongoing stable contexts.		✓	
	Professional therapy involving arts for mental illness or trauma. Projects where the crisis and resulting trauma are addressed directly			✓

Artists & Cultural Practitioners:

Lead **arts/creative practices** and **unstructured arts activities**.
Bring cultural knowledge, creativity, identity, and connection.
Not clinical providers.

Trained Facilitators: (artists, educators, youth leaders, community practitioners, social workers etc.)
With training and supervision, deliver **structured arts-based MHPSS interventions**.

Support emotional expression, relationship-building, regulation, and resilience.

Creative Arts Therapists:

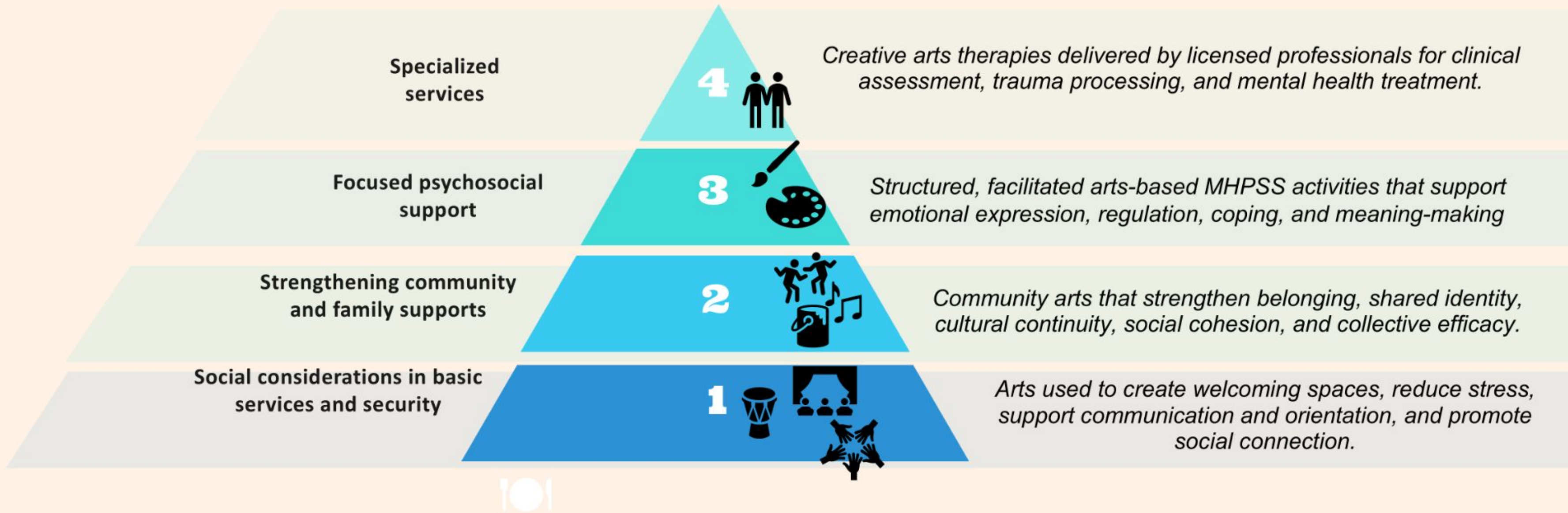
Licensed mental health professionals (art, music, drama, dance/movement therapists).

Provide **clinical arts therapies** for assessment, treatment, and trauma-focused care.

Sajnani et al. (2025). Creative Care: A Resource for Artist Working in Humanitarian Contexts. New York: Jameel Arts & Health Lab; 2025



The Arts in MHPSS



Case Example 1

Glory Lueong

Brushstrokes of Healing: Integrating Local Dynamics, Beliefs, and Culturally Meaningful Healing Practices

A sharing by RuWCED Cameroon

26 November 2025

Webinar #2.3: Arts-Based MHPSS

Arts-Based Mental Health in Conflict Settings

Project supported by the Peace of Mind Foundation



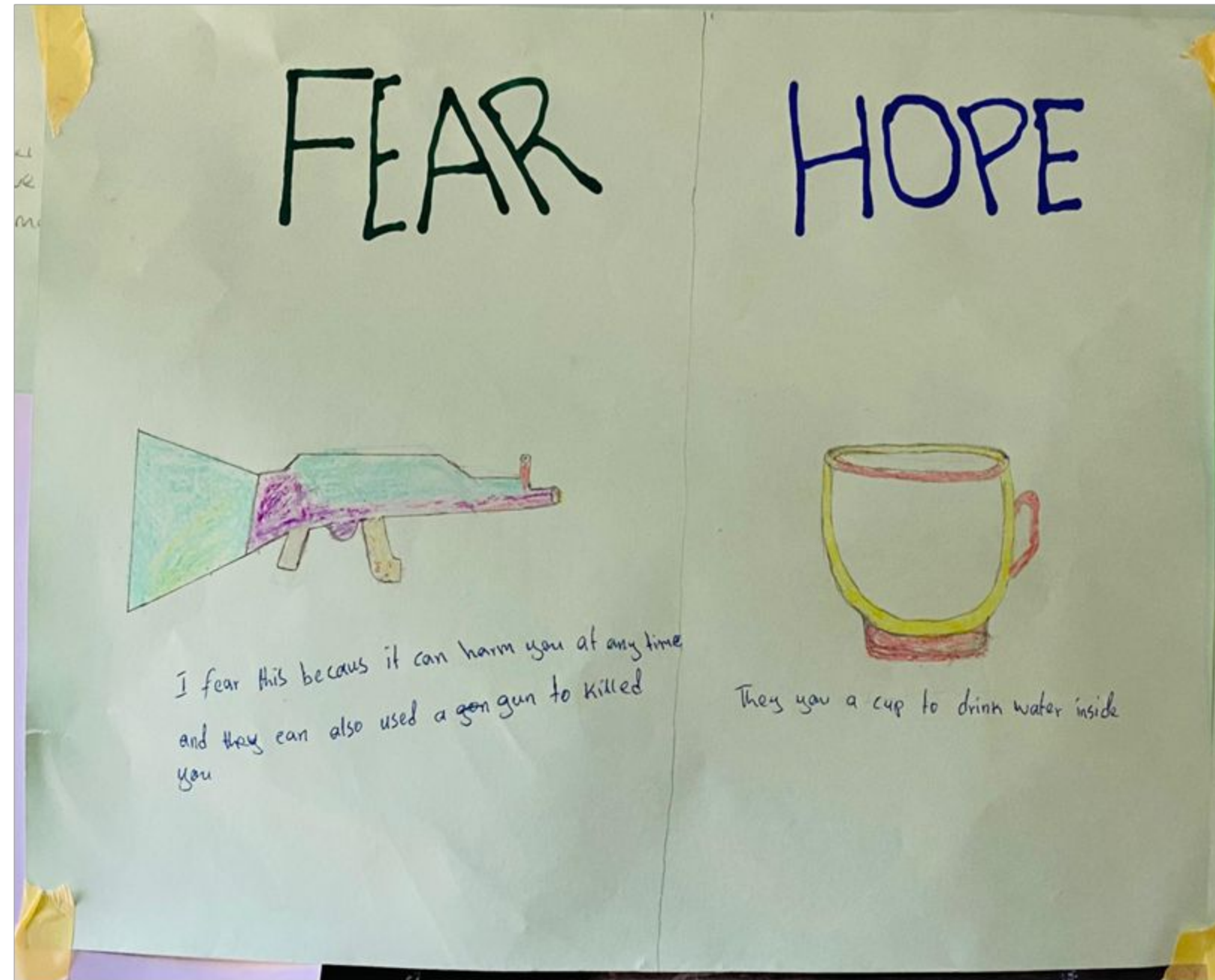
Presentation Outline

- ▶ Context and Crisis
- ▶ Why we think Arts-Based Healing Works
- ▶ Community Co-Creation
- ▶ Cultural Symbols & Narrative Integration
- ▶ Power, Gender & Safe Expression
- ▶ Spiritual & Communal Healing
- ▶ Safeguards
- ▶ Local Measures of Healing
- ▶ Sustainability
- ▶ Integration Principles
- ▶ Integration Model: IASC MHPSS Pyramid



Context & Crisis

- ▶ Over 1 million children out of school due to shutdowns
- ▶ Traumatic events: school shootings, abductions, rape, schools associated with a place of violence and trauma, not safety
- ▶ Traumatic stress among children include nightmares, withdrawal, fear of authority
- ▶ Silence, stigma, and cultural barriers to healing
- ▶ Limited formal mental health infrastructure and services in conflict affected region
- ▶ → **Art is the language between silence and speech**



Why we think Arts-Based Healing Works

- ▶ Provides non-verbal pathways for expression-**critical when culture and trauma silences speech**
- ▶ Respects and aligns with **oral traditions and indigenous storytelling**
- ▶ Accessible across all literacy levels-**no reading skills required**
- ▶ Transforms **pain into purpose** through color, rhythm, and symbol
- ▶ Validates local ways of knowing, feeling, and healing
- ▶ Allows children to process **identity, grief, and strength** in culturally familiar forms
- ▶ Reduces stigma and shame **healing becomes normalized, not hidden**
- ▶ Reclaims emotional expression as a **community act**, not a clinical procedure



Community Co-Creation

- ▶ Activities co-designed with youth, elders, local artists, and faith leaders
- ▶ Participatory mapping of local creative practices: painting, drawing, drumming, storytelling, weaving
- ▶ Use of cultural insiders as facilitators builds trust and relevance
- ▶ Arts amplify local coping not impose external methods



Cultural Symbols & Narrative Integration

- ▶ **Visual language rooted in local identity:** Tree (culturally seen as a place of rest, healing, dialogue and conflict resolution,...), cup (that welcomes with a cup of water) tortoise metaphors
- ▶ Use of ancestral stories and proverbs in healing sessions
- ▶ Symbols of strength, hope, and transformation embedded in artworks
- ▶ Art serves as both emotional outlet and cultural continuity
- ▶ Prompts reflect nature, spirituality, and identity
- ▶ **Healing through cultural metaphors**



Power, Gender & Safe Expression

- ▶ Gender-sensitive group sessions ensure safe spaces for girls and survivors
- ▶ Children lead public exhibitions, shifting power and breaking silence
- ▶ Faith and traditional leaders engaged to reduce resistance and stigma
- ▶ Youth are positioned as creators-not passive recipients-of healing



Spiritual & Communal Healing

- ▶ Sessions integrate ancestral honoring, gratitude rituals, collective music
- ▶ Arts activities mirror traditional conflict mediation (e.g., story circles)
- ▶ Emotional recovery is framed as communal, spiritual, and embodied
- ▶ Creativity is deeply compatible with indigenous healing worldviews



Safeguards

- ▶ Facilitators trained in Psychological First Aid and safeguarding
- ▶ Informed consent from both children and caregivers
- ▶ Structured sessions with flexible expression (public or private)
- ▶ Regular reflection and emotional safety protocols ensure protection



Local Measures of Healing

- ▶ WHO-5 Well-being Index adapted to local context
- ▶ Additional indicators: restored friendships, confidence, school re-engagement
- ▶ Community observes and defines progress: “strength to continue,” “hope restored”
- ▶ Stories and artwork serve as both data and testimony
- ▶ Observational journals
- ▶ **Drawings + words = measurable healing**



Sustainability

- ▶ 10 local women trained to become peer mentors and facilitators
- ▶ Arts-based MHPSS embedded in 10 schools and RuWCED Girls Clubs
- ▶ Traveling art exhibition and healing storybook to support policy advocacy
- ▶ Ongoing sessions led by local actors, not dependent on external support

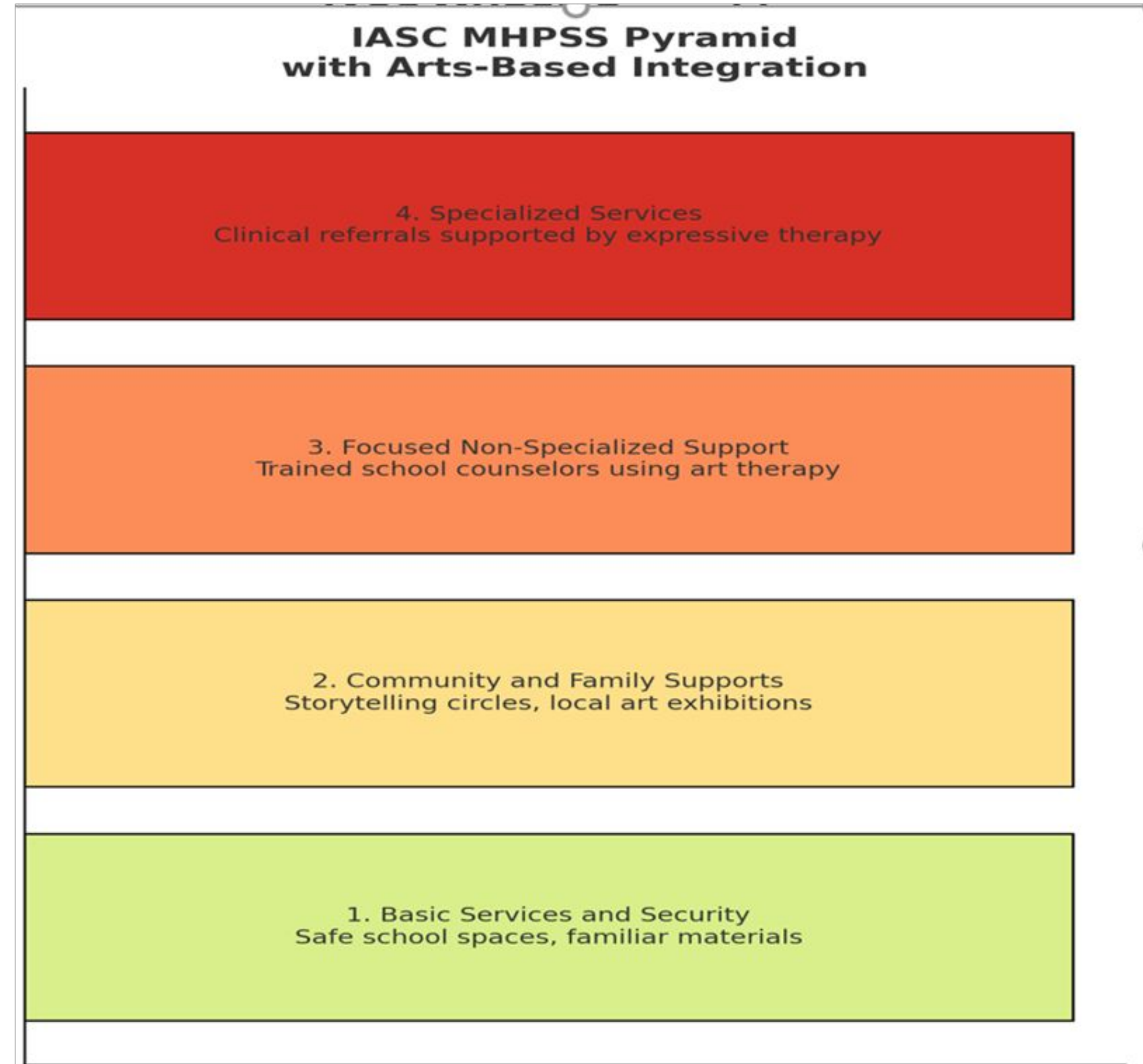


Summary: Integration Principles

Principle	What It Looks Like in RuWCED Model
Culturally grounded	Folktales, traditional painting etc
Collective & participatory	Community design, youth-led exhibits, group sessions
Inclusive & safe	Trauma-informed, gender-sensitive spaces
Empowering	Children as artists, authors, storytellers
Spiritually respectful	Drumming, rituals, storytelling circles
Community-defined success	Hope, school return, peer connection, confidence
Sustainable	Local training, embedded in schools and community clubs

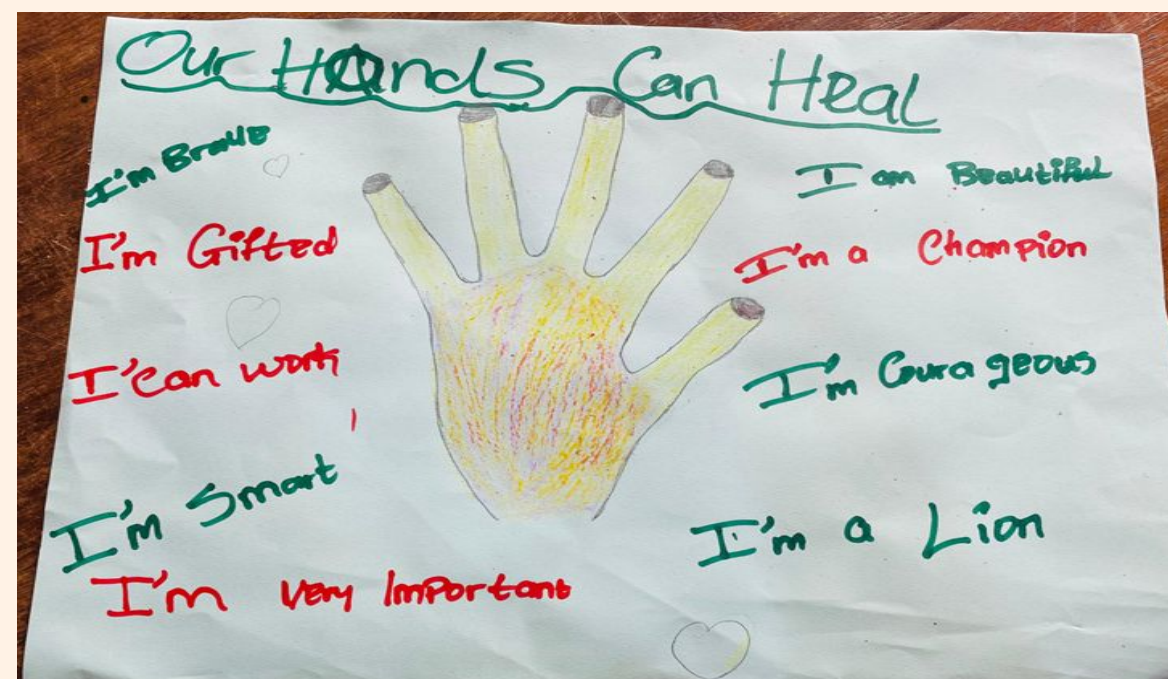
Integration Model: IASC MHPSS Pyramid

- ▶ Level 1: Basic Services - Art in safe school/community spaces
- ▶ Level 2: Community Support - Story circles, exhibitions
- ▶ Level 3: Non-specialist Support - Trained local women mentors
- ▶ Level 4: Clinical Support - referrals with professionals some of whom we have started to share our learnings about using arts based methods



Key recommendations

- ▶ Based on our learning and experiences thus far, we urge policymakers to prioritize the integration of culturally grounded, arts-based mental health support into school and community systems, enabling conflict-affected children to recover, rebuild confidence, and return to learning.



Case Example 2

Using the arts in response to an emergency

Marine Burdel (Artolution)

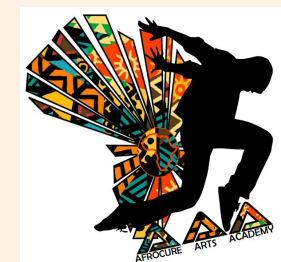
Samson Ndegwa & Sammuel Thiong'o



Kenya, May 2024 - Devastating floods leading to the death of 277 people and displacement of 56,000 families.

Artolution & AfroCure & Medair joining forces - emergency response by Medair complemented by arts-based community-work led by Artolution **from July 2024**.

Interventions in **Kibera, Mathare, Maai Mahiu** - **238 participants**



Case example 2



Key recommendations

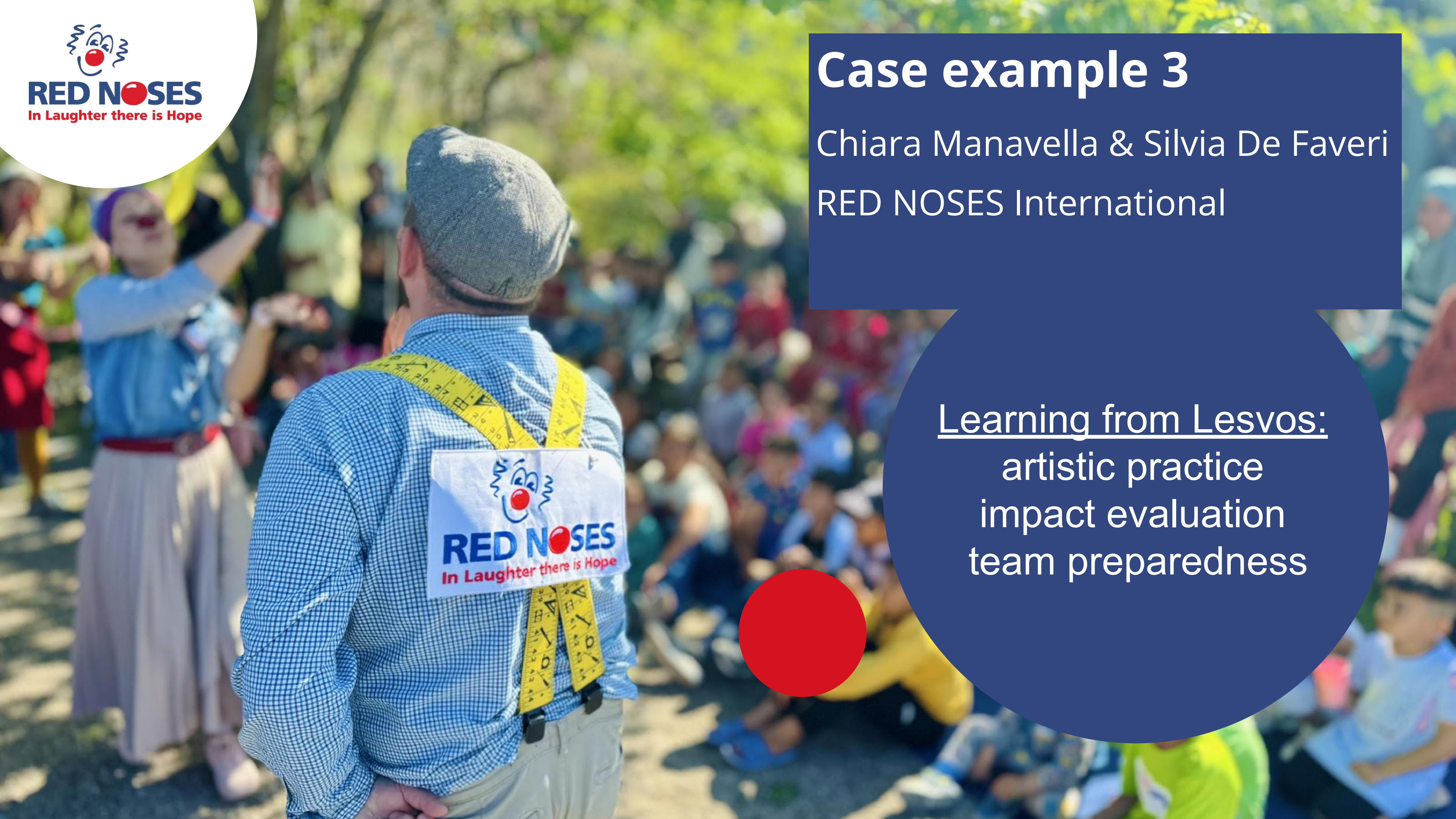
- Ensure a **thorough community briefing** to gather firsthand insights, understand the situation, and identify what participants wish to express.
- Create an inclusive dialogue that **engages all age groups**—children, youth, adults, and elders—so that diverse perspectives are heard and valued.
- Involve community members **directly in the artwork creation**, providing a safe outlet for emotional release and fostering a collective sense of accomplishment and renewed hope.



Case example 3

Chiara Manavella & Silvia De Faveri
RED NOSES International

Learning from Lesvos:
artistic practice
impact evaluation
team preparedness



RED NOSES Emergency Smile

Emergency Smile (ES) is a programme developed by RED NOSES International implemented in different **humanitarian and emergency settings** that aims to enable joy and promote the emotional well-being and resilience of children, youth and their support systems.



Formats:

- Clown shows
- Musical parades
- Circus Smile workshop
- Humour Relief workshop

Why clowning works in any humanitarian context



- Clowning is highly **adaptable** and can take place in any context where basic safety for participants and the team is ensured.
- It has the ability to create an **immediate, language-independent connection with children and young people** that can stand alone as support or serve as a strong entry point for further MHPSS activities.

Artistic quality and impact evaluation



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- Our work relies on the expertise of professional clown artists, whose skills are essential to delivering safe and meaningful activities.
- Because **quality** is central to our practice, we have invested significant time in developing appropriate ways to evaluate our impact and decided that we would implement an **Integrated Developmental Evaluation**.



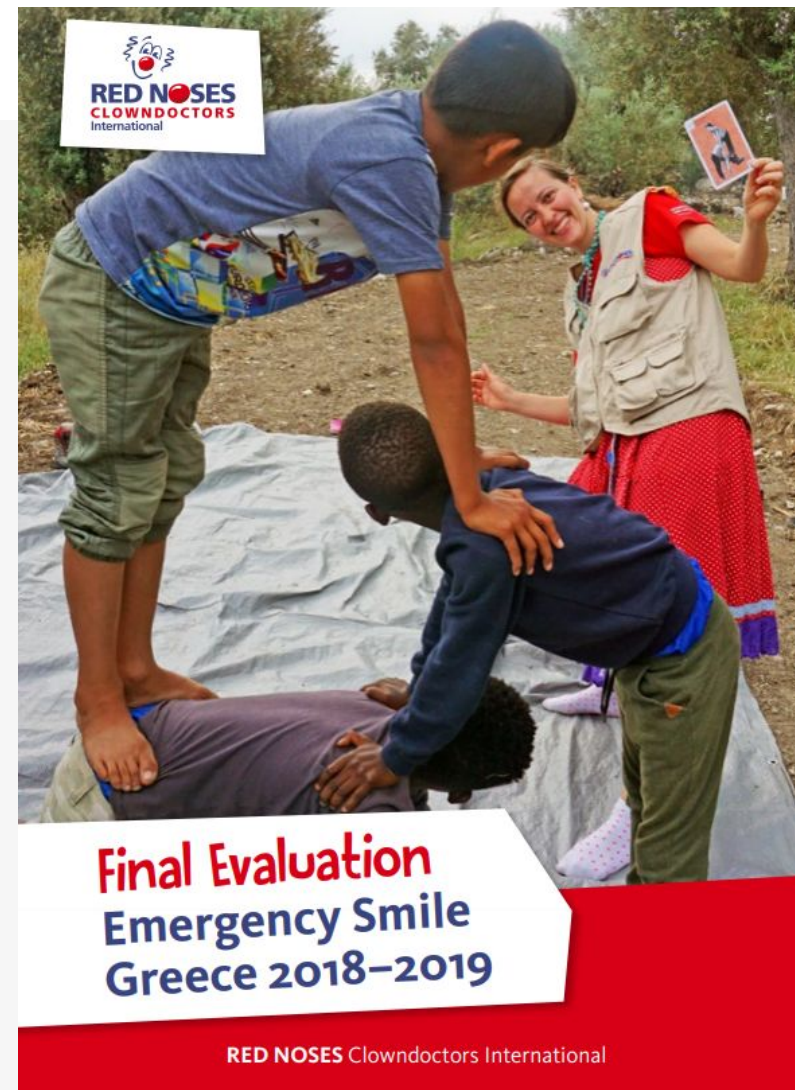
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➤ Strengthening artists' role in impact observation

- We worked to bring clown artists fully on board with impact evaluation, ensuring they understood what it means in practice.
- We integrated targeted questions into all debriefings, helping them reflect on observations and audience responses.
- Over time, observing change, reporting it, and adjusting the intervention when needed became an integral part of their artistic work.

Many processes had to happen in parallel to make sure we could collect as much information as possible.



Evaluations were implemented by our Research and Learning Department, and involved humanitarian **field workers and adult migrants.**

Evaluation with children

- We also really wanted to finally be able to evaluate our activities through the eyes of our primary audience, **the children!**
- Lesvos, where we have the most stable presence, was the first place where we conducted them in 2022
- Because of logistical constraints and the many different nationalities of the children, we minimised language use and had them work on the sheets in small focus groups.



How can we systematically collect data from children in humanitarian contexts?

- Since we knew this will not be an easy task, we put together a **TASK FORCE** composed by RED NOSES clown artists, head of missions, a safeguarding manager, members of our artistic and research departments, and three university researchers (University of Vienna, Austria, and University of Stuttgart, Germany)
- The goal of the task force was to come up with possible activities to implement with the children in humanitarian contexts.



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Focus group with children

Tbilisi, Georgia | 2023

"After school, I watch movies on the couch."



"So much fun. If [I am] bored, now I can do the magic at home and teach my sister and do it at home."



Emergency Smile Research Project

Lesvos, Greece | 2025-2027



Study 1, Impact on field workers



Study 2, Impact on unaccompanied minors

- **The Goal**

Analysing the impact of healthcare clowning on the mental health and well-being of migrant children and aid workers

- **Our Partners**

Grassroot and non-governmental organisations operating in Lesvos (Iliaktida; Parèa)



- **Research Team:**

Dr. Eliala Alice Salvadori, PhD in Developmental Psychopathology at the Research Institute of Child Development and Education, University of Amsterdam, the Netherlands;

Experts in the field of clinical psychology, arts for health and wellbeing, and social and developmental psychology from universities in the US and across Europe



➤ Recommendations:

Ensure trained and qualified professionals

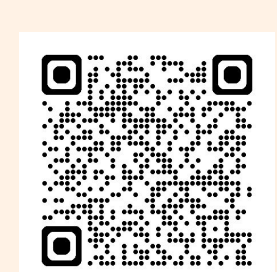
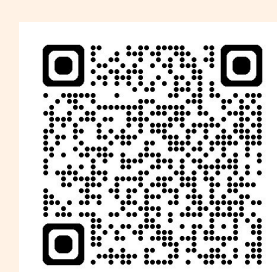
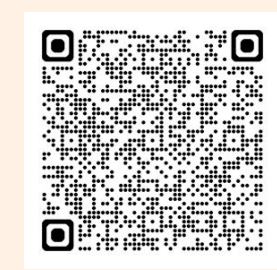
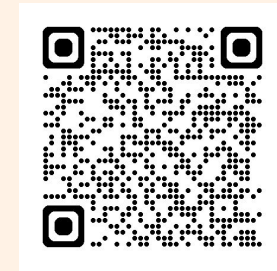
Artistic activities in sensitive contexts should be delivered by trained and qualified professionals who have the artistic, psychosocial, and ethical expertise needed to work safely and effectively with children and diverse communities.

Plan, monitor, and evaluate with participants

To uphold quality and ensure real impact, activities must be planned, monitored, and evaluated together with the main audiences—especially children—following child-participation principles, safeguarding standards, and ethical guidelines for vulnerable settings.

Resources

- [What is the evidence on the role of the arts in improving health and well-being? A scoping review](#)
- [Arts, Mental Health, and Forced Displacement... | Jameel Arts & Health Lab](#)
- [Arts-Based Approaches to Promote Mental Health and Well-Being: Support](#)
- [Creative Care: A Resource for Artist Working in Humanitarian Contexts. New York: Jameel Arts & Health Lab; 2025](#)
- [Assessing the impact of artistic and cultural activities on the health and well-being of forcibly displaced people using participatory action research | BMJ Open](#)
- [Arts-and-Health-Evaluation-Toolkit-AHET_Agres-et-al-2025-1.pdf](#)
- [Your Brain on Art](#)
- [Arts-Based Approaches and Methodology for Social Cohesion and Collective Psychosocial Healing of Affected Communities](#)
- [IOM Manual on Community-based Mental Health and Psychosocial Support in Emergencies and Displacement](#)
- [Emergency Smile | Emergency Smile](#)
- [Research & evaluation: Investigating the impact of healthcare clowning | RED NOSES International](#)
- Expression through Art: Arts-based MHPSS interventions package for children in humanitarian, fragile and low resource settings (forthcoming)

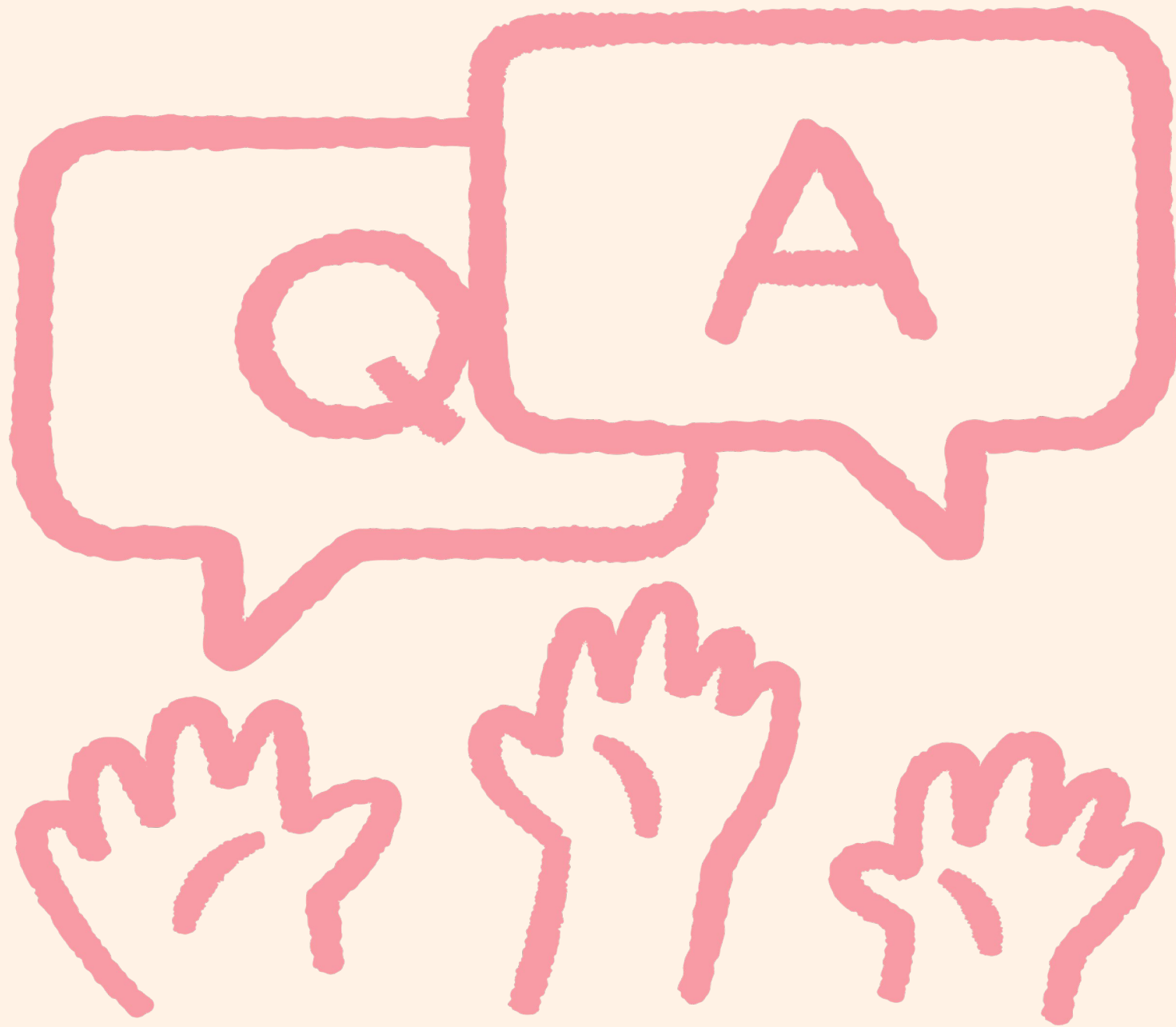




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Thank you!



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Coffee Chat

