

Art Therapy with Child Tsunami Survivors in Sri Lanka

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Abstract

This paper details art therapy with children affected by the December 2004 tsunami in Sri Lanka. Over 30,000 Sri Lankans lost their lives when the tsunami decimated coastal areas. The child survivors witnessed horrific traumatic events and the loss of loved ones, but had not been given opportunity to express their grief and pain. A 4-week art therapy intervention was implemented at a local school for 113 children ages 5 to 13. Art therapy was found to be an effective crosscultural intervention for these young tsunami survivors.

Introduction

On the morning of December 26, 2004, a 9.0 magnitude underwater earthquake triggered a series of deadly tsunamis that devastated coastal communities across eleven Southeast Asian countries. The small island nation of Sri Lanka, just off the southern tip of India, was one of the countries hit hard, with over 30,000 people killed as the tsunami slammed coastal areas (United States Agency for International Development, 2005).

As an art therapy graduate student, I felt called to action in the aftermath of the disaster. The following year I traveled to Sri Lanka as an Ursuline College art therapy intern and volunteered for 3 months with the International Child Art Foundation (ICAF), a U.S. based organization that fosters children's creative development worldwide. ICAF contacted the American Art Therapy Association shortly after the tsunami and the resulting dialogue helped create openness around art therapist participation in tsunami relief efforts.

Living with host families in urban southern coastal Sri Lanka, I provided group art therapy for children at three schools and an orphanage. Having previously spent two years in Zimbabwe conducting Fulbright research on the use of art with children orphaned by AIDS, my passion for

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international service in art therapy blossomed. Despite numerous travels, including growing up in Africa as a child of missionaries, I was unprepared for the amount of devastation that awaited me in Sri Lanka.

An estimated 10,000 children lost their lives in Sri Lanka that day (Nikapota, 2006) and those who survived were left with haunting memories, psychological trauma and pervasive poverty. Nearly one million Sri Lankans were displaced when the tsunami decimated entire communities (Pagonis, 2005). Children witnessed loved ones being washed away in the raging 20-foot waves (Bindra, 2005). In the aftermath of disaster, many children were not provided with a means of expressing their grief. Protective parents often withheld or fabricated information about lost loved ones, which led to the loss of trust (Nikapota, 2006) and a greater probability for a complicated grief reaction (Goldman, 1996). Many children who survived the tsunami directly witnessed the violent death of loved ones, which placed them at a high risk for posttraumatic stress disorder (PTSD) (Pynoos & Nader, 1988). In a study of Sri Lankan tsunami survivors, Dewaraja and Kawamura (2006) found that 42% of those surveyed were suffering from PTSD.

Trauma is defined as experiencing an event involving the threat of death or serious injury accompanied by intense fear, helplessness or horror (American Psychiatric Association, 2000). According to van der Kolk (1987), trauma may occur when an individual loses the sense of "having a safe place within or outside oneself to deal with frightening emotions and experiences" (p. 31). Ordinary systems of care become overwhelmed when a traumatic event occurs. As a result, an individual may lose a sense of control, connection, and meaning in life (Gonzalez-Dolginko, 2003).

Children experiencing natural disasters display a unique set of psychological problems that may include clinginess, separation anxiety, disobedience, decreased concentration, aggression, behavioral problems, and somatic concerns (Roje, 1995). When there is no means to process trauma, children psychologically register and store traumatic memories in the brain, which leads to anxiety, fearfulness, sleep-eating disturbances, and self-blame (Mallay, 2002). Many Sri Lankan children expressed fear of a recurring tsunami, experienced separation anxiety, or refused to attend school (Nikapota, 2006). Parents or caregivers experiencing grief, loss, and trauma may not be capable of

CHILCOTE 157

meeting their children's needs, which may cause apathy or withdrawal in children (Johnson, 1998). Fearful children look to parents for emotional reassurance when psychological trauma impacts their sense of security. If the parents are traumatized themselves, this assurance may not be given (Monahon, 1993).

In addition, both Nikapota (2006) and Bhugra (2006) concurred that the need for culturally sensitive treatment approaches is great. Nikapota (2006) found that counselors who were recruited by non-governmental organizations to provide treatment after the tsunami were minimally trained and often did not understand the grieving process or cultural nuances in Sri Lanka.

Review of the Literature

Art therapy has been utilized as a means of treating those suffering from traumatic experiences. Children who are incapable of putting their trauma into words almost always can process their traumatic event through creative activities (Mallay, 2002). A review of trauma literature by Appleton (2001) maintained that techniques involving the use of imagery are among the most effective in reducing the symptoms of PTSD. The mind stores trauma in memory as imagery; therefore art therapy is likely to be helpful in processing and resolving it (Appleton, 2001; Golman, 1997; van der Kolk & Fisler, 1995). A review by Collie, Backos, Malchiodi and Spiegel (2006) highlighted "best practices" for art therapy in PTSD treatment, including its success in the reduction of immediate symptoms, the decrease in avoidance and emotional numbing, and the integration of traumatic memories in ways not possible through verbal processing.

Malchiodi (2001) found that the use of drawing with traumatized children enables them to express emotions and verbalize experiences more effectively than talking alone. Pynoos and Eth (1985) found that children must have the opportunity to recount the details of the traumatic experience in order to successfully resolve it.

Stronach-Buschel (1990) found that it is helpful for a child to visualize the traumatic experience before putting it into words. Art therapy enables children to reproduce the trauma symbolically, thereby controlling emerging memories and integrating experiences without becoming overwhelmed. Art therapy helps to empower traumatized children by rebuilding their fractured sense of competency and control (Stronach-Buschel, 1990). Rankin and Taucher (2003) utilized art therapy to enable traumatized children to express their current emotional state, to narrate the traumatic event, to process feelings, and to integrate the trauma into their life histories.

Art therapy also may reduce the negative psychological impact of natural disasters with children (Roje, 1995; McDougall Herl, 1992). Art therapy sessions enable children to express internalized trauma that could not be previously verbalized, decreasing defenses and offering an image of safety (Roje, 1995). Children's graphic representations of their feelings can greatly facilitate their recovery process (McDougall Herl, 1992).

From my experience, I found the use of art therapy with children affected by the tsunami to be a valuable treatment modality. The program described below contributes to the literature on the use of art therapy in developing countries, specifically in the wake of an unprecedented, large scale natural disaster.

Method

Procedures

Participants

The art therapy groups comprised a total of 113 females, ranging in ages from 5 to 13. The children were divided by age into 11 groups, meeting sequentially, with an average of 10 children per group. All of the children were affected by the tsunami in some way (including the loss of a relative or loved ones, extensive damage or destruction to home/community, and or personal witness of the tsunami).

Art therapy assistant/translator

To help facilitate the intervention, I interviewed and trained one paid art therapy assistant/translator (a retired school principal) prior to beginning group sessions. Topics such as privacy/confidentiality, sensitivity towards the children, tsunami trauma, and art therapy were discussed. The translator oriented me in turn to the unique cultural aspects of Sri Lankan life, such as the educational system and rituals for expressing grief.

Location/structure

While in Sri Lanka I conducted art therapy groups at a total of three schools and an orphanage, but for the purposes of this article I will focus on one location. The art therapy groups described here took place at a private, allgirls school for children ages 6 to 18. This site, identified by the International Child Art Foundation, was located in a southern coastal community 4 hours from the capital city. Because many schools in surrounding areas were completely destroyed by the tsunami, this private school opened its doors to children from neighboring communities. Teachers in each classroom selected children who had been most affected by the tsunami and who exhibited symptoms of trauma or grief. These children were placed into age appropriate art therapy groups that met once a week for 4 weeks. Each session was approximately 1 hour long. The art therapy groups were held in an empty available classroom during school hours.

Supplies and activities

Art supplies were comprised of white copy paper, pencils, watercolor paint sets, and washable markers (materials that could be cheaply bought in Sri Lanka). Directives were given in simple terms to minimize complication in translation. Children were encouraged to draw or paint any image they needed to express for about 40 minutes with topics

designed to facilitate emotional expression. When a child finished her painting, she sat between the translator and art therapist and verbally shared her image with the group.

Gathering data

At the end of each session, the children's images were gathered and digitally photographed. The verbal response for each image, as stated by the child, was recorded during the session. At the beginning of the art therapy program, the children were given the option of keeping their artworks or giving them to the therapist. All of the children wanted their images to be taken to the United States, feeling empowered by sharing their stories and expressing the desire to solicit tsunami aid relief.

Session 1: My Life, Myself

I sat surrounded by a small group of 13-year-olds with wide smiles and dark eyes. They filed into the classroom timidly and, one by one, shared their names, which had beautiful meanings such as "shimmering" and "river moon." I explained art therapy to them through simple translation, letting them know that I had come after the tsunami to help them, that this was a group for sharing feelings by drawing, painting, and talking about things. It was not a class and they wouldn't be graded.

For the first task, I wanted to give the children a chance to reveal something about their lives and stated, "Draw or paint something about yourself and your life. What are some of your favorite things? How do you feel about your life?" This task was designed to understand each child's current reality and interests, and assess her level of trauma and approach to the artwork.

Although the children themselves were quiet and reserved in this school setting, their images spoke volumes about their lives. Most of them shared positive, brightly colored pictures representing happy memories or portraits of their families. I found their artwork to be developmentally appropriate, if not advanced, for their age. The rich artistic culture and heritage of the Sri Lankan people was reflected through their use of bright colors and sophisticated design. During this first week it seemed hard to imagine that the children were at all affected by the tsunami.

The children portrayed scenes that provided insight into their culture, steeped in artistic traditions of festivals, celebrations, and community life. Several depicted the Vesak Festival, an important celebration in Buddhism (the predominant religion in Sri Lanka). Family and community life in coastal Sri Lanka revolved around the ocean, and their pictures reflected this fact. Many children were from families of fishermen in areas that had been destroyed by the tsunami. Dependent upon the ocean for their survival, these families had no choice but to continue living on the beach. The children's artwork revealed their conflicted feelings about the ocean, as a source of fear as well as a source of survival.

Some children drew pleasant scenes of catching fish, whereas others drew more ominous scenes of the ocean, expressing their tsunami trauma indirectly. One girl drew a



Figure 1



Figure 2

blazing red sky and a sun with an ambiguous expression on its face, bent palm trees, and a tiny house appearing to be in the direct path of the sea (Figure 1). She depersonalized and emotionally distanced herself from the image by stating that it was someone else's home and not her own. Many drawings of the children's lives depicted large amounts of water, possibly as an attempt to graphically represent their trauma indirectly. One little girl drew herself in the middle of a rainstorm, engulfed by water that dominated the page.

Although most of the children did not depict their tsunami experiences directly in this session, some were ready to do so. A 5-year-old girl spent the entire hour soaking her paper with water and layers of paint. Although she was hesitant to speak, the medium promoted emotional expression and she claimed the picture was the tsunami. She was 4 years old when the tsunami struck, and her traumatic memory revolved around the vivid colors of the sea. Many younger children portrayed similar sensorial images, describing the color of the sky or water during the tsunami.

Session 2: The Day I Will Never Forget

I had developed the task "The day I will never forget" while in Zimbabwe, where it was useful in eliciting the expression of trauma and grief. The children simply were

CHILCOTE 159



Figure 3



Figure 4

told, "Draw the day you will never forget. It can be any day in your life. Draw what happened on this day. How did you feel?" Instead of inviting the children to draw the tsunami directly, this non-directive task empowered them by providing a measure of control. For children whose lives had been unpredictably turned upside down after the tsunami, this task provided a framework and an opportunity for sharing their trauma story but not mandating its expression. They were free to draw a good day or bad one, focusing on one day that stood out above all the others. For most Sri Lankans, the day of the tsunami was one that could not be forgotten. As in Zimbabwe, the children's response to this task was to pour out stories of grief and pain.

Previously reserved, the children talked rapidly in this session, revealing trauma stories not verbalized in the past year. As they shared the days they would never forget, their grief and loss was palpable in the room. Many children cried and I put my arm around them, reflecting back their feelings. I recognized the power of communal sharing as they listened to their classmates with rapt attention. By participating in art therapy with other survivors, the children united as witnesses to a collective grief they shared.

One child depicted the chaotic experience of the tsunami as she remembered it, with masses of water, tangled branches, and people struggling to survive (Figure 2).

Some children painted difficult stories of survival where they were separated from family members for days, having watched relatives wash away in the water. One girl, who could not swim, watched her entire family wash away. With nothing to grab onto, she was swept away, only to be sucked into a car that saved her life (Figure 3). These brushes with death clearly affected the children. When the tsunami struck, they witnessed incomprehensible death and suffering. In a neighboring town where many of the children lived, the road had been impassable, completely covered with dead bodies. One little girl depicted the horrifying scene of discovering the bodies of her grandparents in their rural home (Figure 4).

At the end of this week, most of the children had readily shared their trauma stories and opened up their lives to me through their art. Many children depicted their trauma, but others did not. Some children painted birthdays, festivals or other special events for this task. It was clear that these children simply weren't ready or did not need to share. Although the children in the art therapy groups had all experienced trauma, some were more affected than others.

Week 3: Safe Places and Memories

My task for the third week of art therapy was twofold and involved drawing a picture of a safe place and a memory of a loved one who had died. Working with 11 different groups of children with varying degrees of trauma, I needed to provide tasks that maximized the opportunity for healing among all the children. After the significant amount of trauma expressed in the previous week, I wanted to give them an opportunity to explore the feeling of safety. A large number of children had created images of loved ones who had died. I wanted them to reflect upon positive, happy times spent with these loved ones in an effort to facilitate and promote a healthy grieving process.

The directive for this week was, "Today I want you to draw or paint about a place where you feel safe and secure. It can be anything that makes you feel safe (a person, a place, a memory, etc.) Draw what makes you feel comforted and not afraid. When you are afraid, what do you do to feel safe? Last week, some of you drew pictures about losing your relatives and loved ones in the tsunami. If you would like, you can draw a happy memory of that loved one, or something you did together." The children had the choice of creating one or both of these drawings.

The responses to this topic varied, depending on the situation, emotional state, and process of each child. Many children needed to continue telling their tsunami stories. There was more trauma and grief that needed to be expressed, voiced, and released. Some talked for a long time about their rescue from the tsunami, where their family stayed, or how they were reunited with loved ones. Themes of rescue, love, protection, and safety were prominent in the children's drawings for this task. Many depicted being taken in by relatives or strangers who cared for them when they had nowhere else to go. One child spent a long time coloring a huge black boulder that dominated the page. On top of the rock was the temple where her



Figure 5



Figure 6

family had fled for safety. By representing a strong, powerful, indestructible rock, she seemed to regain emotional control of the safety that was shattered by the tsunami (Figure 5). Buddhist temples provided a primary means of rescue and continued support after the tsunami for most victims. The children's safe place drawings often depicted temples; this pervasive symbol reflected the centrality of religion and community in their recovery process.

Some of the children were only able to approach their trauma indirectly, from the vantage point of a safe place drawing. One girl never drew an image of the tsunami. Only when given the task of creating a safe place did she verbalize the traumatic story of her family fleeing to a nearby temple. Her drawing of this temple exudes safety and strength, with two trees on either side of the page, securing it in place (Figure 6). The Buddhist temple dominates and expands beyond the page. The drawing seemed to serve as a point of grounding and security for this child whereby she felt safe enough to share her trauma and the pain of her aunt's death.

Another little girl also had never talked about the tsunami. In initial sessions she depicted happy images of her birthday. When given the task of creating a memory of a lost loved one, however, she painted a story of grief and loss. Her baby cousin, who lived with her family, had died



Figure 7

in the tsunami. As the oldest girl, she was most likely the caretaker of this child and it was clear that his death was devastating. She drew herself cradling the baby close to her chest and talked about how he was just learning to walk. In her own way, without ever drawing a tsunami wave, this child commemorated loss and expressed her grief.

I believe that it was therapeutic for the children to remember and grieve the loved ones they had lost so suddenly and often horrifically. These memory drawings contained visual evidence of the permeating sadness and loss they felt. One girl drew a happy memory of an aunt before she died. But she positioned herself in the drawing with her back to this aunt, looking out to the ocean, as though foreshadowing what was to come (Figure 7). The physical separation of death seemed palpable in this image.

Week 4: Three Wishes

Over the course of our weeks together, the children revealed their trauma, grief, pain, and happiness through art therapy. Knowing that healthy closure was necessary, the goal for the final week was to encourage the children to reflect on their hope for the future, their dreams, and life after the tsunami. It was also a time for us to say goodbye. I had prepared them for this closure at the onset of the art therapy program. They knew the duration of our time together and for children who had experienced so much unpredictability, this schedule was helpful. For the closing session, the children were directed, "Draw or paint about three wishes you have for your life. What is your greatest dream or ambition? It can be anything." This task encouraged the children to engage in positive thinking and focus on the restoration of hope in their lives.

The groups for this final week were comparatively lighthearted and at times took on the atmosphere of a party. The children gave me gifts of all they had, peeling stickers from notebooks and pressing sacred 'bo' leaves into my hands. The room that had held so much pain for the past 3 weeks began to fill with the vibrancy of laughter. Their drawings and paintings for this task varied. For one group of girls, the theme of fairies emerged and they spent

CHILCOTE 161



Figure 8

most of the session drawing pictures of themselves as fairies with unlimited power. With these elaborate fairies, the children seemed to be dreaming of the possibility of making their world beautiful again; a world still reeling from the tsunami and their own personal emotional pain. The fairies, with their endless capacity to grant wishes and bring healing, served as a symbol of hope.

Other children created the more practical dreams of their future careers. Many drew pictures of becoming doctors or teachers, or living in fancy houses with cars. The children often included images of their families, wishing to provide for parents who could not provide for themselves, as many were still living in refugee camps or shelters with no source of income.

The theme of creating houses was prominent. The children drew four story homes with elaborate shutters and intricate designs. Most of the children in these groups had lost their homes in the tsunami and their drawings reflected their desire to have a safe place to live. I noticed one usually shy girl talking expressively as she drew a large mansion in a rich neighborhood, high up in the mountains (Figure 8). The little girl laughed and said that the tsunami could never reach her there.

Finally, the children addressed the task of saying goodbye. One girl drew a picture of her entire family standing with me, stating that she wanted us all to travel to America together. This provided a chance to express feelings for the group's end and my departure. At the end of the last group, the children came one by one, kneeling down to touch my feet as a customary Sri Lankan gesture of respect. I responded in the traditional Sri Lankan way by patting each child on the head in blessing. It was a sacred moment of silent remembrance and affirmation.

In the year following my journey to Sri Lanka, I often thought of these children who touched my life profoundly. A letter arrived in the mail one year later from one of the children, who wrote: "In fact I can remember the days we were together. Then I'm so happy. You came to us and painted drawings and spoke with us. You have shared our grief as well as the happiness so my friends and I will never forget you." This child, living in a country devastated by trauma and

natural disaster, spoke directly to my heart and to the testament of art therapy. Art knows no cultural bounds and neither does love. It is my greatest hope to encourage the development of art therapy around the world and to facilitate the alleviation of suffering.

Conclusion

Art therapy was an effective, psychologically beneficial, and culturally applicable intervention for children affected by the tsunami in Sri Lanka. Through simple, translated art tasks, they readily shared trauma and pain not previously verbalized. The children's artwork revealed traumatic tsunami experiences, grief over the loss of loved ones, the importance of family, the centrality of culture and religious heritage, and future dreams. Through art therapy, the children were able to regain emotional control that was shattered with the tsunami and to commemorate their loss. Moreover, the small group setting provided witness to a collective grief, allowing children to voice their trauma with other survivors. Non-intrusive art tasks, such as "the day I will never forget," encouraged the children to share their tsunami experiences only when ready.

As a whole, the children's artwork was developmentally appropriate, with few indicators of extreme psychological distress. Most of the children I worked with, however, were not orphaned by the tsunami and had the support of their parents. Still, there were underlying factors that seemed to impede emotional expression after the tsunami and led to detrimental psychological effects. School personnel and caregivers seemed hesitant to speak of the tsunami with the children, in an effort to protect them from further pain. Discussing the tenets of child psychology and art therapy with them was important. I created simple handouts detailing the basic principles of art therapy and engaged in many conversations with school staff about the importance of emotional expression.

It is imperative to use culturally sensitive treatment approaches rather than imposing western-oriented theories and methods on non-western people. Art is an integral part of Sri Lankan culture and is largely affirmed by the general population. However, many issues inherent to art therapy in western societies are neither feasible nor appropriate in some countries. Art therapists must have flexibility to adapt to different cultural norms. Western concepts of privacy and confidentiality simply did not apply in this community-oriented culture where bedrooms do not have doors but rather curtains, and where family relationships are deeply rooted in one another's lives. The classroom used for art therapy, for example, was part of an adjoining staff kitchen. As children shared their trauma, teachers and students would wander in and out. Their initial curiosity waned after the first week, but caused me to consider the implications. I noticed that these types of "intrusions" did not faze group members. They continued to share stories of trauma and pain even as teachers laughed in the adjoining kitchen or school kids ran by. In short, they were used to the ambiance of community life. But I did feel some containment was necessary and invited inquisitive teachers to speak with me over tea break, when I would discuss art therapy approaches.

It was crucial to find a caring, sensitive translator, as she would become a co-therapist of sorts, working closely with the children. I provided her with art therapy training prior to the onset of the groups and she proved to be an irreplaceable cultural liaison for me as well. Equally important was ensuring time to debrief with the translator (a tsunami survivor herself), especially after emotionally charged sessions. In between sessions and at the end of the day I created time for debriefing and discussing personal feelings, cultural issues, and ways to improve the group sessions.

In closing, the need for psychological and emotional support for victims of natural disasters, especially in developing countries, is dire. The children of Sri Lanka and other countries in the world face psychological trauma that will continue to increase in degree and kind if not given an outlet for expression. The children in this study benefitted from culturally sensitive art therapy groups in which to process traumatic experiences from the tsunami. Through the universal language of art, they readily poured out stories of grief, pain, and hope for the future. It is my hope that research in this area will expand and that art therapists will lead the way in promoting healing and recovery for all the world's children.

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