



# Art therapy at the Children's Hospital Zagreb

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## **Abstract**

*The article describes art therapy practice conducted over an 18-month period in the surgical, pediatric, and ophthalmology wards of the Children's Hospital Zagreb. Art therapy proved to be an effective method for alleviating symptoms of stress, fear, and anxiety prior to diagnostic examinations, especially among children and adolescents who experienced prolonged hospitalization. The participants, 314 children and adolescents aged 3-17, participated in individual and/or group art therapy sessions, and in an open studio format.*

*Art therapy contributed significantly to emotional regulation and the development of effective coping strategies. The use of symbols, motifs, and colors enabled children and adolescents to express inner states and reinforce a sense of security and control. Group and individual art therapy program at the Children's Hospital Zagreb demonstrates how creative process facilitates the expression of difficult experiences, supports the regulation of intense emotions that are often difficult to verbalize, social connection, and inner empowerment in children and adolescents.*

*An art therapy approach, individualized and tailored to the needs of each child, helps children and adolescents to restore a sense of control and autonomy that is often diminished by the uncertainty of the disease development and hospitalization through the free choice of materials, themes, and forms of expression. This work points to the importance of implementing art therapy protocols in the psychosocial care of hospitalized children as a valuable tool for improving psychological well-being and supporting their recovery.*

**Keywords:** art therapy, open studio, pediatrics, children's hospital, hospitalization

## 1. Introduction and Literature Review

In November 2023 author began clinical practice in the pediatric and surgical departments of the Children's Hospital Zagreb as part of the Art Therapy Program at the University specialistic study of Creative Therapies, Academy of Arts and Culture in Osijek, J. J. Strossmayer University in Osijek. Following year, an open studio model was introduced in the waiting room of the ophthalmology clinic.

The primary objective of this intervention was to reduce stress and anxiety in children and adolescents before medical examinations, and secondarily, to enhance the effectiveness of medical treatment and therapeutic procedures. By emphasising the patients' strengths, positive aspects of their lives, wishes, and goals, a sense of achievement and satisfaction was fostered through the use of a variety of art materials chosen according to the child's developmental abilities and personal inclinations.

### 1.1. Art therapy in the pediatric ward.

With hospitalization comes not only physical pain and anxiety associated with the medical condition, but also changes in daily routine, stressors such as medical examinations, physical activity restrictions, interruption of schooling, separation from family and significant others (Mourey, 2021; Hen, 2023), loss of control, and fear of pain and physical injury

(Hockenberry, Wilson & Winkelstein, 2016). Children often feel confused and tense and benefit from the presence of a professional to provide support during hospitalization (Hen, 2023).

Art therapy is an increasingly used method of coping with stress in clinical settings, especially in pediatric wards (Metzl, 2022; Olaizola, 2024) where it provides the child with emotional support, tools for expression and relaxation (Abdulah & Abdulla, 2018; Snyder, 2021), promotes self-understanding and self-awareness, improves social skills and behavior management, encourages creative problem solving, promotes personal transformation and development, and supports personality integration and potential fulfillment (Wu & Chung, 2023).

Art therapy practice responds to the child's emotional needs (Snyder, 2021), distracts and facilitates coping with physical pain, anxiety and fear related to the treatment outcome (Olaizola, 2024), and creates a sense of pleasure and attachment that supports the relationship between a child, the art process, and the art therapist (Shella, 2018).

Creative expression within art therapy enables patients to recognize and express emotions, cope with life changes, and strengthen resilience (Nishid, 2005; Liebmann, 2015). By channeling difficult emotions into creation and then sharing that experience with an art therapist (Waller, 2006), the child acquires a tool to get in touch with feelings that are not

easy to express in words, which positively affects the emotional state of children, independent of other factors (Shella, 2018).

Derman and Deatrck show that art, specifically drawing, helps children express experiences and needs (Snyder, 2021) thus reducing stress and anxiety levels (Ramdaniati, Hermaningsih, & Muryati, 2016; Rollins, 2005; Zhang et al., 2021; Zhang, Wang, & Abdullah, 2024; Hen, 2023), elevates mood and fosters communication between children, parents, and healthcare professionals (Lorreskär, 2024).

Council (Lopez-Bushnell & Berg, 2018) concludes that children's engagement in creative activities during hospitalization increases a sense of hope, autonomy, competence, and self-esteem. In adolescents it strengthens self-confidence and peer relations (Huang et al., 2021), supports emotion regulation (Bosgraaf, 2020), increases self-initiative, independence (Snyder, 2021), enhances capability to face challenges, and reduces the intensity of procedural and acute pain (Clapp et al., 2019; Olaizola, 2024; Metzl, 2016).

In children with chronic illnesses, such as kidney failure, symbolic expression through art therapy techniques strengthens inner resources, but also supports trauma processing, which spontaneously arises during the emotional processing linked with expectation of treatment outcomes, separation from family, unfamiliar new space, and a new identity of the

patient, as opposed to the child's everyday identity outside the hospital context.

Patients on hemodialysis often suffer from depression, stress, fear, and anxiety (National Kidney Foundation, 2001; Nishida, 2005). In children with cancer, group art-based intervention has been shown to be an effective technique for reducing the overall level of depressive symptoms and improving certain aspects of happiness (Abdulla & Abdulah, 2023).

For hospitalized children, art expression is one of the few empowering activities available when everything else seems to be out of their control (Lopez-Bushnell & Berg, 2018). Weldt (Nishida, 2005) remarks: „Art making encouraged positive attitudes, a sense of power, control, and freedom, and their drawings gave them a sense of accomplishment.”

In conclusion, art therapy can significantly facilitate the child's stay in the hospital, but it must be adapted to the unpredictable rhythm of patients' admission, their age, and diverse needs, with the inclusion of persons close to the child who provide a sense of security (Janković Shentser, 2024).

#### *1.1.1. Short-term therapy*

Short-term therapy is a targeted therapeutic intervention of limited duration (Perkins, 2006, as cited in Hen, 2023) and is successfully used to alleviate emotional distress caused by hospitalization (Barber et al., 2012; Hen, 2023).

The patient and therapist approach each encounter, which may also be the last one, as a separate therapeutic whole (Hen, 2023). The therapy plan is flexible and seeks to respond to the person's immediate problems. Short-term therapies are characterized by focus on here-and-now experience, engagement, flexibility, and require therapist's full presence, engagement, and open communication, while simultaneously building confidence and cooperation (2023).

#### *1.1.2 Group art therapy with children*

Despite the growing interest in art therapy, there are significantly fewer studies examining the effectiveness of group art therapy in children than in adults. The group provides a suitable environment for learning skills, where people with similar problems support each other, learn from feedback, are able to try out new roles by observing the reactions of others, and develop their potential and abilities (Liebmann, 2006). Group work is beneficial for those whose individual work is too intensive, and it allows supporting more people at the same time. Disadvantages of group work include a lower level of confidentiality due to the involvement of multiple people, reduced individual attention to members, and greater demands on therapist's organizational skills (2006).

#### *1.1.3. Open studio*

An open studio is an art therapy group format that places art at the center of the therapeutic work (Finkel & Bat Or, 2020), and is based on a free creative process that the therapist does not lead or moderate (Finkel & Bat Or, 2020, 2025). Sessions are longer than clinical appointments, allowing for deeper engagement, and the flexible approach allows application in different populations and settings. "Open" in this context implies the free choice of materials, duration, and participation of the participants themselves, which encourages exploration, imagination, and play (Malchiodi, 2013; McGraw, 1999; Miller, 2016).

Participants are given a choice of diverse art materials that engage multiple senses and allow free expression by following their creative impulse (Landgarten, 2013; Malchiodi, 2012; Knill, Levine & Levine, 2005; Miller, 2016), which contributes to the creation of a sense of agency and structure, tolerance, and exploration aiming to develop new perspectives (Robb, 2022; Robb, 2022).

Expression in a group setting fosters a sense of community (Allen, 1995; Malchiodi, 2013; McNiff, 1995; Shapiro, 2014; Finkel & Bat Or, 2020), the development of positive peer relationships, stronger self-confidence, creativity (Jewett, 2025), and the capacity for reflection (Finkel & Bat Or, 2020).

The open studio acts as a stimulating environment for balancing different as-

pects of adolescent's personality (Zalman Fanunu, 2022; Finkel & Bat, 2025) and connecting inner experiences with the outside world (Finkel & Bat, 2025). It allows one to participate according to his/her abilities, making decisions independently, thus developing autonomy (Block et al., 2005; Cavaliero, 2022; Finkel & Bat, 2025) and identity, especially among adolescents with mental difficulties (Kelemen & Shamri-Zvi, 2022; Jewett, 2025).

## **2. Methodology**

Individual and group art therapy sessions lasting 60-90 minutes were held twice a week for 12 months in the pediatric and surgical departments. The open studio model was held in the morning and afternoon, twice a week for 120 minutes over six months in the ophthalmology department.

Semi-structured activities with clearly defined goals and a flexible approach were designed to encourage focus on the present moment and reduce tension, and to facilitate or enable the expression of emotions. These activities also supported goal setting, boosting motivation, and focusing on positive experiences.

### **2.1. Setting**

Individual art therapy sessions were conducted at a table in a hospital room or at a patient's bedside, using a dining table as a work surface. Limitations of

the hospital environment included the presence of other patients, parents, and medical staff in hospital rooms, and frequent and unexpected interruptions.

Group art therapy sessions were held in the pediatric ward's living room. The space for the art therapy group was a separate table protected by nylon, with art materials provided on it.

For the implementation of the open studio, the waiting area was protected by nylon, materials were placed on two small tables with six chairs. Because of the newly renovated space, the walls could not be used, but the children spontaneously used the floor as a working surface.

### **2.2. Approach**

Art therapy in the hospital setting was adapted to children's specific needs, the busy hospital rhythm, and space options.

Art therapy activities include individual and group sessions, as well as an open studio format. Each approach has different goals, benefits, and challenges. The main goal of the short-term individual and group art therapy was to help children reduce stress, fear, and anxiety caused by hospitalization through the creative process, which is especially useful for children who have difficulty with verbal expression.

In long-term art therapy, a deeper relationship with the client is developed, the process is more structured, and it involves monitoring three aspects of a child's

life: hospitalization, home life, and school life. In the context of art therapy during long-term hospitalization, it is necessary to consider the challenge it poses to a child's emotional and psychosocial development.

Open studio is an unstructured art therapy group format, in which the focus is solely on creative expression. It is site specific, participants are given freedom in choosing the materials, the topics, and the time of participation within the two-hour session. In this way, they are given the experience of self-control and independence, qualities that are often lost by accepting the role of a patient. The art therapist was constantly present, observing the creative process and providing support when needed.

### 2.3. Participants

26 children and adolescents aged 4-17 participated in one to three individual

art therapy sessions during a short-term hospitalization.

- 7 boys (7-12) and 10 teenagers (12-17 years),
- 4 girls (4-12) and 5 teenagers (12-17 years).

Four children (3 girls and 1 boy) aged 8-12 participated in 5-17 individual art therapy sessions during a long-term hospitalization.

A total of 53 children and adolescents aged 4-17 participated in the group art therapy, which was held in smaller groups of 2-4 participants:

- 6 boys (6-12 years old) and 16 teenagers (12-17 years old),
- 14 girls (5-12 years old) and 17 teenagers (12-17 years old).

A total of 229 children and adolescents (2-17 years) participated in the open studio in the ophthalmology unit.

Table 1. Activities and Approach of Art Therapy Work in the Children's Hospital Zagreb

	Activity	Short-term treatment (1-3 days)		Long-term treatment				Psycho-therapeutic approach
		Individual	Group	A	B	C	D	
1	Scribble drawing	X	X	X	X	X	X	Psychodynamic (Freudian)

## 2.4. Instruments

In order to better understand the potential of art therapy in supporting this vulnerable group of children and adolescents, the following instruments were used:

### 1. The SOAP notes

The therapist systematically documents the therapeutic process during and immediately after each therapy session. The notes consist of four key segments that form the words of the abbreviation. SOAP: the subjective statement of the client (S), the objective observation of the therapist (O), the evaluation (A), and the plan for the next session (P). The notes provide insight into the emotional, behavioral, cognitive, and creative changes during the therapy process.

### 2. Photographs of participants' artworks

Qualitative analysis of artworks is based on a formal analysis of elements, style of expression, selection and manipulation of art materials.

The specific aspects of each work and symbols to which the client gives meaning, pointing to internal processes, are observed. Photographs of the participants' work were provided by the parents as part of the process description and an integral part of the implemented protocols.

### 3. Supervision

The art therapists' work in a hospital setting with children and adolescents on long-term treatment carries an emotional burden due to dealing with child suffering, chronic illnesses, uncertain prognoses, and complex family dynamics. Regular supervision provided by the Creative Therapies Study, Josip Juraj Strossmayer University in Osijek, provides the art therapy students with a safe space to reflect on their own emotions and reactions, develop goals and art therapy processes, preserve professional boundaries, and prevent burnout.

ETC level	Material usedn	Short-term therapeutic goal	Long-term therapeutic goal
		<b>Therapeutic function</b>	<b>(emergent function)</b>
Kinesthetic	Markers, oil pastels	Warm-up, focusing on the present moment	Reduced anxiety
Perceptive			

	Activity	Short-term treatment (1-3 days)		Long-term treatment				Psycho-therapeutic approach
		Individual	Group	A	B	C	D	
2	<b>Making archetypal masks</b>	X	X	X		X	X	Psychodynamic (Jungian)
3	<b>Expressing the dominant emotion (Happiness)</b>			X				Humanistic
4	<b>Bird's nest</b>				X	X	X	Psychodynamic/ Attachment Theory
5	<b>Hand strength</b>			X				Psychodynamic
6	<b>Tree of wishes</b>	X	X	X				Psychodynamic
7	<b>House</b>			X		X		Positive art therapy
8	<b>KFD</b>						X	Humanistic

<b>ETC level</b>	<b>Material usedn</b>	<b>Short-term therapeutic goal</b>	<b>Long-term therapeutic goal</b>
		<b>Terapeutic function</b>	<b>(emergent function)</b>
Perceptive	Oil pastels, markers, laminated paper, coloured pencils	Awareness of the differences between the shadow and the persona; their integration	Reduced anxiety
Affective	Acrylic paint, temperas, markers, coloured pencils, collage, eye shadow, hairspray	Emotional expression	Reduced anxiety
Symbolička	Oil pastels, markers	Identifying forms of attachment	Reduced anxiety
Perceptive	Oil paste, watercolours, acrylic paint, temperas	Recognising personal strengths and desires	Reduced anxiety
Cognitively symbolic	Collage, watercolours, coloured pencils, markers, pencil, oil pastels	Raising awareness of positive aspects, strengths, goals	Reduced anxiety
Kinesthetic	Acrylic paint	Relaxation, stress reduction	Reduced anxiety
Kinesthetic/symbolic	Oil pastels	Understanding client's self-concept and interpersonal relationships within the family. Family Dynamics	Reduced stress and anxiety

	Activity	Short-term treatment (1-3 days)		Long-term treatment				Psycho-therapeutic approach
		Individual	Group	A	B	C	D	
9	Self representation through something you love	X	X	X	X	X	X	Positive art therapy
10	Emotions (How it feels “here-and-now”)	X	X	X	X		X	Gestalt
11	Body outline			X			X	Psychodynamic
12	Drawing by observation (flower Gerber)			X				Positive art therapy
13	Labyrinth		X	X		X	X	Psychodynamic/Jungian
14	A place of dreams					X		Narrative art therapy

<b>ETC level</b>	<b>Material usedn</b>	<b>Short-term therapeutic goal</b>	<b>Long-term therapeutic goal</b>
		<b>Terapeutic function</b>	<b>(emergent function)</b>
Affective/ symbolic	Oil pastels, markers, newspaper cutouts, collage, seashells, birch bark, eyeshadow, nail polish, wool, rope, dry pastels, coloured pencils-watercolours, stickers, temperas	Expressing yourself and your own needs	Reduced stress and anxiety
Kinesthetic, sensory	Pencil, modelling clay, temperas, acrylic paint, coloured pencils-watercolours, collage	Emotional expression, reduced tension, relaxation	Reduced stress and anxiety
Perceptive / affective	Akrilne boje, bojice, uljane pastele, suhe pastele	Emotional expression, reduced tension, relaxation	Reduced stress and anxiety
Perceptive / affective	Acrylic paint, temperas, fingerpaints	Expressing your own needs and setting goals	Reduced stress and anxiety
Symbolic	Markers, coloured pencils	Encouraging introspection and reflection. Discovering inner wisdom and capacity for problem solving	Reduced stress and anxiety
Symbolic	Pencil	Encouraging confidence and imagination	Reduced stress and anxiety

	Activity	Short-term treatment (1-3 days)		Long-term treatment				Psycho-therapeutic approach
		Individual	Group	A	B	C	D	
15	A gift for a loved one (mom, dad sister, friend)	X	X	X	X	X		Positive art therapy
16	Favourite animal						X	Jung
17	Superhero on canvas						X	Positive art therapy
18	A depiction of the inner world (Space)				X			Narrative art therapy
19	Dream				X			Jung
20	Crown	X		X				Integrative art therapy
21	A new planet	X	X	X	X			Narrative art therapy

<b>ETC level</b>	<b>Material usedn</b>	<b>Short-term therapeutic goal</b>	<b>Long-term therapeutic goal</b>
		<b>Terapeutic function</b>	<b>(emergent function)</b>
Kinesthetic	Acrylic paint, buttons, cotton wool, pebbles, seashells, newspaper cutouts, collage, temperas, oil pastels, coloured pencils, dry pastels, pencil, watercolours, stickers, glitter, fabric, birch bark, ink, eyeshadow, nail polish	Relaxation and development of emotional regulation through the symbolic act of gift giving, encouraging emotional regulation	Reduced stress and anxiety
Symbolic	Markers, oil pastels, modelling clay	Increasing stability, grounding, relaxation.	Reduced stress and anxiety
Symbolic/kinesthetic	Textile, buttons, collage	Strengthening identity, expressing emotions	Reduced stress and anxiety
Kinesthetic / symbolic	Temperas, acrylic paint	Raising awareness of inner contents, emotions	Reduced stress and anxiety
Symbolic	Textile, watercolour, acrylic paint	Discovering inner wisdom and capacity for problem solving	Reduced stress and anxiety
Symbolic	Collage, coloured pencils-watercolours, markers, oil pastels, acrylic paint, temperas	Expressing your own needs	Reduced stress and anxiety
Symbolic/kinesthetic	Polystyrene, acrylic paint, temperas, watercolours	Reduced tension, relaxation, expressing emotions	Reduced stress and anxiety

	Activity	Short-term treatment (1-3 days)		Long-term treatment				Psycho-therapeutic approach
		Individual	Group	A	B	C	D	
22	Emotions of the four seasons			X				Narrative art therapy
23	Abstract Fingerpainting (How it feels)			X	X		X	Gestalt
24	Comics		X					Narrative art therapy

### 3. Process

A more elaborate look into the practice of art therapy at the Children's Hospital Zagreb certainly exceeds the scope of this article. This chapter will therefore summarize key points of practice and present one vignette per format.

#### 3.1. Short-time art therapy with children

Short-term art therapy sometimes consisted of a single session, in which an alliance could not be created, however, a supportive, accepting, and tolerant approach allowed room for communication. A sick child is often unable to ex-

press himself in words either because of an insufficiently developed vocabulary to describe his own experiences, or because of the need to protect the attending parent from his feelings (Councill, 2012), therefore the encouragement of free artistic expression provided the child with a channel to express what is happening the here-and-now, personal or environmental. If the child cannot express it in words, it may, in his own way, express it visually.

Children with chronic illnesses and multiple hospitalizations deserve special attention, as they often showed higher le-

ETC level	Material usedn	Short-term therapeutic goal	Long-term therapeutic goal
		<b>Therapeutic function</b>	<b>(emergent function)</b>
Affective/ symbolic	coloured pencils- watercolours	Emotional expression, reduced tension, relaxation	Reduced stress and anxiety
Kinesthetic, sensory	Temperas, acrylic paint, fingerpaints	Emotional exspression, reduced tension, relaxation	Reduced stress and anxiety
Perceptive	Pencil	Understanding self-perception in a social context	Reduced stress and anxiety

vels of worry, anxiety, and fear. In addition to various family problems that some children experienced, they generally showed a stronger need for security and affirmation under these circumstances. In children with developmental disabilities, an additional need for control and structure was observed. Their work is characterized by speed, minimal verbalization, and rich symbolism.

Encouraging children to express themselves freely often elicited positive emotions, that they then portrayed in their works (happy moments with family, beautiful landscapes, favorite superheroes,

and pets). The combination of different media (materials from nature, textiles, clay, plasticine) encouraged multisensory processing of experiences, particularly effective in younger children, who were eager to experiment, fully involved in their creative forces resulting the joy of play and relief from the stress of hospitalization. Some children drew with their parents, which strengthened their bond.

**Figure 1. Scribble drawing.**

*A boy (9 years old) after hospitalization and kidney transplant. Verbal description of the drawing: “A butterfly that has survived and grown stronger” The vignette in the appendix confirms the child’s ability to use the creative process intuitively as a means of self-healing (Councill, 2012).*



*Image is used with permission*

**3.1.1. Individual session process overview**

The patient (14 years old) was hospitalized for two days. She is familiar with different artistic techniques, likes to draw and make animations, but this is the first time she has participated in an art therapy session, which was also the only one during her hospitalization. She

is currently going through an emotionally demanding period in the family and school environment (parents’ divorce, peer bullying). At the same time, she is demonstrating resilience, a sense of her own value, but also a need for validation. At first, she was quiet and uncommunicative, but with the time, she opened up spontaneously.

**Activity: Scribble**

materials: white A3 paper, oil pastel

We meet in her hospital room, and walk together to the living room, where various art materials are already on the table. We start the activity with hand movements in the air, at her own pace. The participant then chose a color and filled the paper with spontaneous movements. When she had finished, she placed the paper on the table and observed it from all sides, then chose the desired orientation of the paper. She completed the drawing with colors and techniques of her own choice. She recognized a dragon while observing her work, a motif she connects with her personal experience of strength needed to endure another short period of time in an unsupportive environment (symbolized by the clock). She expected a change by enrolling in high school and moving to a new, supportive environment (Figure 2).

The kinesthetic level, present at the beginning of the work, enabled the release of tension and the activation of the

creative process. With spontaneous and quick strokes, she filled the entire surface of the paper with colorful shapes, gradually giving them meaning through personal interpretation. Processing on the perceptual–affective and cognitive–symbolic levels followed.

Slika 2. Scribble



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During the creative process, she expressed emotions that she initially had difficulty verbalizing. She demonstrated awareness of her own potential, a high level of introspection, and self-understanding. Creative expression helped her cope with negative experiences, and served as a confirmation of her identity.

This example of a one-time art therapy intervention demonstrates the importance of supporting youth in creative expression and creating a safe and supportive environment in which they will be free to express, be accepted, and seen.

### **3.2. Long-term individual art therapy with children**

Children with health problems who are hospitalized for long periods of time have similar experiences and needs. They attend school less often due to poor health and frequent medical check-ups, and are also exposed to an increased risk of stigma, social exclusion and peer bullying (Watts et al. 2024).

The goals of therapy included reducing stress, emotional regulation, and creating a safe space. Structured protocols that provide a framework but are not performance oriented (e.g. “something you love”, “a gift for a loved one” or “your own planet”) leave enough space for free expression, with a variety of materials offered (acrylic paints, felt-tip pens, clay, plasticine, collage, pastels, crayons, tempera, materials from nature). Children use personal and universal themes which provide a sense of security and belonging (family, home, nature, friends). Depictions of the universe and nature are common, expressing the need for security, belonging, closeness, and support.

Despite coming home from dialysis, not having eaten since the previous day, or arriving just before preparing for the planned surgery the next day, children often showed an urge to finish their work, which indicated marked motivation and desire to express inner contents.

### 3.2.1. Long-term individual art therapy process in hospital setting

A ten-year-old girl undergoing long-term hospital treatment participated in seventeen individual art therapy sessions held at the hospital bedside. Due to her poor health, operations, and medical examinations, she did not attend school regularly, so the art therapy activities (Table 1) were also aimed at her developmental needs.

Her mother was constantly present and occasionally involved in the work.

The main goals were relaxation, stress reduction, development of fine motor skills and dexterity, which she showed difficulties with (cutting paper, gluing, writing).

The girl showed a preference to experiment with different art materials, especially collage and shiny textures. Through family and other attachment motifs, she expresses nostalgia for home (Figure 3-6).

Figure 3. A Gift for My Sister



*Image is used with permission*

Figure 4. Joyful Collage – A Heart



*Image is used with permission*

Using collage, often shaping hearts, stars, dolls, and nature (Figure 4), she expresses joy. She sometimes uses motifs of the universe, a labyrinth with planets as a means of escaping into imaginary space, searching for a way out of a complex situation (Figure 7).

Author concludes by saying to her mother, “You are my greatest wish. May you always be with me.”

At first, she seeks help from an art therapist or her mother, she is withdrawn and verbalizes poorly. Over time, she becomes more independent, confident, and communicative, does not seek help, uses new materials and verbalizes her emotions. She likes to paint with her fingers and tear paper to create a collage, she experiences these activities

Figure 5. A Tree of Wishes (two hearts together: author and her mom)



*Image is used with permission*

Figure 6. Family



*Image is used with permission*

as liberating and calming. Joy and the need to play prevail, but anxiety and fear are also present. The drawings are often expressive and speak of an inner state, and with the drawings she often verbalizes: "I feel happy, joyful" (Figure 8), "It's not easy to be a painter, you work yourself up." showing her new, positive image of herself and acceptance of the identity of a "painter" instead of a patient.

Figure 7. Universe – New Planet



*Image is used with permission*

Figure 8. How I feel: Happiness



*Image is used with permission*

Control over the creative process and decision making, initiating activities, choosing materials and topics, helps the girl to shape and see personal content, and feel seen. Art therapy sessions were important to her, and she looked forward to new creative encounters: “I feel better when I see you”, she would say when she saw the author. After a demanding medical treatment (dialysis), although physically exhausted, she still wanted to draw. Creative expression became her way of coping with emotional and physical stress.

Over the course of 17 sessions self-confidence and independence in work are observed, along with greater accuracy in artistic and verbal expression, a more positive emotional state, stress reduction, and empowerment. She expressed satisfaction and a sense of accomplishment with her artworks. Before she was discharged from the hospital, the art therapist offers her the theme of going

home. The thought of home gives rise to an emotional responses, including excitement about being reunited with family and returning to a familiar and safe place (Figure 9).

### 3.3. Group art therapy

The open-type art therapy group often consisted from children and adolescents who came from the same room and were of similar age, but there were also cases with significant differences (from 8 to 17 years old). Regardless of age differences, the children cooperated and encouraged each other, and showed empathy for each other. They are expressive and imaginative, intuitive and spontaneous and initiated cooperation and verbal interaction. They experiment with textures, colors, paint with their fingers and intuitively use unfamiliar art techniques. The rich selection of materials (felt-tip pens, pastels, tempera, acrylic paints, clay, plasticine, collage, ink, and natural materials: shells, pebbles, wool, birch bark) is in itself an invitation to creative expression, and semi-structured and structured activities supported emotional regulation, which for some participants was interventional.

The group provided a space for mutual support, encouraging connection, belonging and friendship.

Adolescents expressed themselves clearly and were articulate and communicative. They often used (black) humor as a defense mechanism to alleviate anxiety and tension related to illness and the hospital

Figure 9. Coming Back Home from Hospital



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environment. Developed introspection and a sense of thematic elaboration were also evident in teenagers who are more introverted, but also clearly convey their emotions and inner world through visual language.

Figure 10. How I feel Now.

A boy, 9 years old



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### 3.3.1. A Group art therapy process

Two 14-year-old participants came out of a hospital room together. This was their first encounter with art therapy. The assignment was to make something they love. They spontaneously chose related themes, a unicorn and a horse. A wide variety of materials were available. Participant A decided to make a figure of her favorite horse in plasticine. She talked about her love of horses and riding, her connection to the horse that she regularly grooms. When she started making a horse's head, she wasn't sure how to pro-

ceed and consulted Participant B. The doctor came into the living room and took participant A for an examination, which interrupted her creative work from the very beginning. Participant B drew a blue unicorn (Figure 11).

Figure 11. Something I love: A Unicorn



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Finally, she signed the painting and put a plasticine ribbon under her name and gave the work to an art therapist. She enjoyed experimenting with watercolors and the effects they produced on paper by adding water with a brush. She then spontaneously took the initiative and went on to make a horse head for participant A (Picture 12). She was finalizing the head and a mane. When participant A returned from the test, she asked her what else was missing, so together they added the reins and heystck under the horse's head.

This example shows the interconnectedness of children from the same hospital

rooms and their mutual empowerment, empathy, strong sense of each other and cooperation.

Figure 12. Something I love: A Horse



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### 3.4. Open studio

The open studio followed the dynamics of the hospital environment, the unpredictable rhythm of arrivals and departures of the participants, and their different needs with respect to different ages. In an open-label study of ophthalmologic outpatients, children between the ages of 3 and 17 participated. Most children, upon arrival in the waiting room, immediately approach the drawing table and spon-

taneously begin to draw, while some come after they have become accustomed to the space. They're exploring new techniques that they haven't had a chance to try in their kindergartens or schools. In the course of the work, the kids are collaborating, creating together, and complementing each other. Smaller children often draw with their parents, most often mothers, whose presence supports a sense of security and relaxation in anticipation of the examination. Elementary school children draw in smaller groups. The art therapist guides and supports the child through the process as needed and provides technical and emotional support to the children and parents, through an individual and group approach, turning the waiting room space into a creative, social and positive experience. For children, and especially those with autism spectrum disorders, an open studio provides an opportunity to communicate, to enhance social skills while expressing emotions in a pleasant way. The success of the project was reflected in a reduction in patient anxiety, increased collaboration and thus a potentially more positive outcome of the treatment, which is a common goal of all involved.

#### 3.4.1. Open studio at the ophthalmology department of the Children's Hospital Zagreb

Twelve children were welcomed by two 80 x 100 cm white papers, oil pastels and paints, as they arrived in the waiting

Figure 13. Open Studio



*Image is used with permission*

room. They approached the colors spontaneously and during the activity were engaged and in a good mood. The children showed respect for the work of others, adding to it, rather than drawing over it, and the drawing spread and grew richer.

A 14-year-old teenager, who joined the children while she was waiting for her brother, created a symbolic drawing "Heart tree", which she linked to the drawings of other children. The boy with the elevated

energy level at one point began to scribble with the black color on the work of other children, so he was offered a lighter pastel, and additional drawing paper, to mitigate the effect of his strong energy on the group work.

The children were pleased with their drawings, laughed, and went back to drawing after the examination.

Figure 14. Open Studio



*Image is used with permission*

The head of the ophthalmology department, the children, and their parents were satisfied with the activities in the open studio as a safe space for the creative expression of the children in the group. The positive response and collaboration of all those involved (children, parents, carers, hospital staff) demonstrates the value of such activities within the hospital system.

#### **4. Results**

Art therapy at the Children's Hospital Zagreb contributed to children's empowerment, emotional expression, the representation of personal interests and recognition of goals and personal strengths. Creative, spontaneous expression enabled children to express experiences of hospitalization, including fear, pain, discomfort, anxiety, and a sense of loss of control, and to communicate inner experiences to the outside world,

including unconscious states, often explored through metaphor. During the course of the therapeutic process, even within a single session, a reduction in the anxiety and fear associated with hospitalization was observed.

In long-term hospitalized patients, the creative process addressed deeper personal issues, and stronger emotional regulation was established. The children gradually developed a greater sense of self-confidence and security in expressing themselves, both artistically and verbally, while simultaneously reducing tension and anxiety. Structured therapeutic interventions and protocols provided children on long-term treatment with a sense of security, stability, and control, reducing their sense of helplessness. Children were able to express and process emotions they could not verbalize, resulting in emotional relief. The children were introduced to tools for dealing with difficult situations, and used them by choosing specific colors and symbols that gave them a sense of security and control. Kinaesthetic activities and fluid media (finger painting, working with clay, plasticine, clay) reduced emotional tension by tactile interaction (pushing, stroking, crushing, punching). Narrative art therapy (comics, dreams) has often been a channel for creatively depicting complex family dynamics; while labyrinth and bird nest have symbolically aimed at working through various difficulties in family relationships.

Findings from studies involving children indicate that art therapy enables children and adolescents to experience:

- **Relaxation, reduction of stress and anxiety, and emotional regulation.** Participating in creative activities helps children to express emotional burdens and restores a sense of control. Through creativity and imagination we find our own identity and inner sources of healing (Stuckey and Nobel, 2010).
- **Motivation for the treatment process and co-operation** with the staff, leading to better treatment effectiveness.
- **Reduced use of mobile phones.** Children are focused on creative activities, interaction with materials and other children.
- **Socializing.** Collaborative creative work allows children to socialize and cooperate, which is especially important for children who are often isolated due to long hospital stays. Opening up about illness and disability fosters empathy among children and enables inclusion.
- **Involving the parents.** Parents often feel helpless during a child's hospitalization. Actively participating in creative activities with their children helps to reduce stress and provides meaningful shared time.

- **Positive memories** The artworks that children create often become precious memories that they give to one another, further strengthening friendships.

## 5. Discussion

Group and individual art therapy, and the open studio conducted at the Children's Hospital Zagreb demonstrate that art therapy is a valuable tool for emotional expression, social connection and inner empowerment of children and adolescence through the hospitalization period. Art therapy as an emotional support develops self-reliance (Snyder, 2021), assists in relaxation and redirecting attention during treatment (Abdulah and Abdulla, 2018; Snyder, 2021), and provides space for alternative expression of experiences and needs (Snyder, 2021).

During the artistic creation, patients entered a space where the disease did not define them, they could experience something different from their diagnosis (Malchiodi, 2013; Miller, 2016), an altered state of consciousness often described as "flow", which provides relief from suffering and can transform the experience and narrative of the disease (Miller, 2016).

### 5.1. Parents of patients in need of regulation

An important role in the therapeutic process played the presence of parents, more often than not, mothers, who sometimes actively participated or created their own artworks simultaneously. Mothers who stayed with their child during long-term treatment are under great stress because of the uncertainty of the child's medical condition, and sometimes, as a result of witnessing the child's suffering, they develop post-traumatic stress reactions. The hospital stay further complicates their daily lives as they balance family life, work commitments, and the childcare (Loreskär, 2024), which is why one of the important roles of the art therapist is to provide support to the parents (Liebmann, 2015). During one therapy session, the mother was more engaged in the work than the client, who, by observing the mother, mirrored her work. Through the art therapy process they eventually created a new artwork together. Cases like this indicate a need for parental support and attention in balancing long- and short-term therapeutic goals. Involving parents in the session, provides them with an informal support. Also, while the child is engaged in creative work, parent has the opportunity for a break away from the hospital environment.

Parents generally show respect for a child's artwork, self-expression, and patiently wait for the child to finish. They take pride in their children's work and

encourage them to show it off and give as a gift, and the children feel accomplishment. Positive feedback and support from art therapists, parents, and nurses contribute to the development of a sense of competence and social inclusion in children, which positively affects their self-esteem, self-perception, and mental health (Loreskär, 2024). Parents who participate in the process often have a need for verbal ventilation, thus affecting the course of the art therapy process with the child. This factor has not been studied, but it does provide an interesting perspective on the parent-child relationship in crisis situations.

### **5.2. Art therapist in a hospital setting. Relationships in the team.**

Working in hospital settings, in addition to flexibility, kindness, empathy, a motivational and positive attitude, and curiosity (Robb, 2022), requires from art therapists physical readiness and psychological and emotional resilience to stressful work conditions, the ability to react and make decisions quickly, and a high level of responsibility.

Within a dynamic hospital schedule, art therapist necessarily assists in the manipulation of art supplies and communication with the multidisciplinary medical staff in the department: the coordinator, the occupational therapist, and the social worker. Complex hospital conditions require adaptation of the therapy

space, and creativity in creating a safe environment to express, be seen, and empowered.

Art therapy is organized according to the visiting hours, doctor's visits, school, and the child's capabilities. Sometimes art therapy is conducted simultaneously with other professionals and activities. When the religious studies and art therapy overlapped, for example, even though school subjects were prioritized, we found a collaborative model in which the teacher linked the subject of religious studies to the drawings the children had made. One boy drew a view from his hospital room of the peaks of the Alps (Figure 15) after a kidney transplant and shared his experience during the operation which he described as: 'I saw God', which opened up a new symbolic interpretation of his experience of the operation and the treatment. Sometimes The Red Noses, medical clowns, came into the hospital room, playing and joking with the children, and making up stories inspired by children's artworks. At these moments, the art therapist makes a short break so that the children can participate in a fun interaction with them.

The rich experience of various forms of interaction (St. Nicholas and Santa Claus visit during the holidays) is certainly positive for children. However, it presents a challenge for the therapeutic process, which becomes fragmented, a therapeutic space compromised, requiring constant balancing between set goals and spontaneous events.

## 6. Conclusion

A total of 314 children and adolescents aged 3 to 17 years, undergoing short-term and long-term treatment with various medical diagnoses participated in individual and group art therapy. Children attending ophthalmological examinations participated in the open studio. Art therapy proved to be an effective method for relaxation, reducing stress, anxiety, and facilitating adaptation to hospitalization. It facilitated social interaction, strengthened self-confidence, and created positive memories of the hospital stay. Children were focused on creative activities, interacting with materials and other children, which also led to reduced cell phone use.

Parents actively participated in working with their children in the open studio, which further helped reduce stress and enabled quality time spent together.

Art therapy has provided a safe space for creative expression, emotional relief, introspection, and psychological support for children who are going through the hardships of illness, separation from parents, school life, and familiar surroundings. Art therapy continues to be successfully, though voluntarily, carried out in the Children's Hospital Zagreb, whose effectiveness is achieved through close coordination with the medical team and parents, and flexible responsiveness to children's evolving needs.

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