Life after sex trafficking in Nepal: An art therapy and reproductive health therapeutic program with women who have experienced sex trafficking, exploitation and abuse

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Abstract

This paper presents a creative art therapy and reproductive health program for women who have experienced sex slavery, exploitation and abuse in Nepal. The program was created and delivered by the author and her organisation, Art to Healing, which has a longstanding engagement with this issue in Nepal and other grassroots organisations in the region.

An art therapy qualitative approach is used to explore how creative arts therapies, combined with reproductive health experimental education, can support a positive change in attitudes towards body image, gender stigma and cultural status, as well as increase in inner resilience, confidence and self-esteem, for survivors of sex trafficking.

Keywords

Women's health, focusing-oriented art therapy, sex trafficking, gender-based violence, group art therapy.

Introduction: What is trafficking?

Sex trafficking is a complex global issue and a rapidly growing problem in Nepal. According to the Global Slavery Index, Nepal has the fifth highest prevalence of modern slavery after Mauritania, Haiti, Pakistan and India (2013). Victims of Nepali trafficking comprise women (53 percent), girls (33 percent), men (11 percent) and boys (3 percent) (United Nations Office on Drugs and Crime, UNODC, 2012). This means that women and girls make up 86 percent of the total number of trafficking victims in Nepal, with prostitution the predominant sector in which they are forced to work. The United Nations (UN) considers trafficking to be the third largest international criminal industry, with an annual US\$150 billion global estimated profit (ILO, 2014).

Trafficking is defined in Article 3 of the UN Protocol to Prevent Suppress and Punish Trafficking in Persons, Especially Women and Children as:

The recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum,

the exploitation or the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs. (2000)

Simply put, sex trafficking is the movement of an adult or child from one place to another, either within a country or across a border, by a group or an individual into a situation in which they face sexual exploitation and slavery.

Nepali girls and women are not only trafficked internally from remote villages to urban centres in Nepal for prostitution, but they are also trafficked to India, Bangladesh and the Middle East. In addition, they work in *dhabas* (highway hotels), dance bars, cabin restaurants and massage parlours in Kathmandu that facilitate sex trafficking (U.S. Department of State, 2011).

The implications of trafficking on survivors are devastating. Many of the women and children who experience sex trafficking and exploitation end up dead or permanently injured. They are denied access to education and healthcare, subjected to violence and starvation, and can develop addictions to drugs administered by traffickers (Stallard, 2014). The United Nations Global Initiative to Fight Human Trafficking (2008) reports that trafficked women and children often suffer from depression, anxiety and post-traumatic stress disorder (PTSD). This is true of the survivors in Nepal who attended the art therapy program.

It is important to frame the project described in this article within the ongoing, complex and contested debate about how best to conceptualise and counter human trafficking (Kempadoo, Sanghera, & Pattainak, 2016). Kempadoo (2001) has long argued that "the global sex trade is not unitary and cannot be simply reduced to one monolithic explanation of violence to women": trafficking also needs to be understood in the context of "the realities, contradictions and intersections of various global relations of power" (p.28). Furthermore, trafficking needs to be addressed within a framework that takes account of the complex intersections of forms of colonialism and cultural imperialism with "specific local cultural traditions and histories that shape the sexual agency of women" (Kempadoo, 2001, p.28). These global and local conditions are beyond the scope of this article to fully explore. Therefore, while acknowledging that there is a greater complexity at work in the lives of these Nepali women and girls, the next section of this article concentrates on an issue we repeatedly hear about and notice in the 'Art to Healing' program: how particular Nepalese cultural and religious beliefs position women and girls as particularly vulnerable to trafficking.

Being born a woman: Religious and cultural positioning of women in Nepalese society

The high risk of girls and women being trafficked into sex slavery in Nepal is strongly reinforced by the country's patriarchal society, with discrimination against women and girls being highly institutionalised. (Stallard, 2014). Girls and women have fewer employment and vocational training opportunities than males – as girls are under-valued in Nepali society, educating females is not seen as a priority (Stallard, 2014).

Cultural conditioning and stigma about being born a woman is steeped in tradition, culture and religion. A good example comes from a study by the State of the World's Children Report (2011), which found that 23 percent of Nepali women aged between 15 and 49 years considered their husband justified in beating or hitting them if they argued with him, burnt the dinner or neglected their children (2011). Many men feel that they have the right to use physical violence against their wives, and the beating of wives is approved of by the wider society (Cameron, 1998).

In addition, Nepali tradition and culture revolves around the concept of karma. Karma is the concept of good or bad deeds from previous lives determining prosperity or suffering in the present life (Kohrt & Hruschka, 2010). Women are considered to have been less pious than men were in their previous lives, and this consequently puts them at greater risk of traumatic life events. As women are seen as 'lesser' than men, they have less access to education, citizenship and civil rights (Crawford, 2010). Sons are materially and symbolically prized, and mothers are praised for giving birth to them, while many mothers are verbally and physically abused for giving birth to daughters (Crawford, 2010).

These beliefs have complicated consequences for a woman or girl who has experienced sex trafficking, abuse or exploitation. Many of these women and girls believe that they must have been a 'bad person' in a prior life, or that their family members and ancestors were 'bad people' (Kohrt & Hruschka, 2010). As a result, many of these girls and women stay in the sex slavery trade to 'pay back' their karmic debt by providing financially for their family members, and find it challenging to reintegrate back into their communities and villages. The belief in 'karmic debt', and the practice of paying it off through exploitative forms of 'labor', including sex slavery, is normalised by centuries of agricultural debt bondage systems and practices of servitude that endure into the current day (Godziak, 2016).

Gender stigma worsens a traumatic experience of sex trafficking, often limiting access to care, and leading to social isolation and internalised feelings of shame, inferiority and fatalism. This is evidenced in the case studies presented in this paper.

The gender system in Nepal can be briefly summed up in a Nepali proverb:

Choriko jamma, hareko karma. (To be born a daughter is a lost destiny. Educating a daughter is like watering your neighbour's garden) (Kondos, 2004, p.11).

Therefore, in working towards effective curative measures for sex-trafficked survivors in Nepal, considering the cross-cultural gender context and cultural impressions is of utmost importance.

Women's health issues and stigma in Nepal

When women and girls return after being trafficked they will typically be suffering physical and psychological trauma, and may also have medical issues such as HIV or AIDs, STDs and menstrual problems. A Harvard Public Health study of Nepali sex-trafficked women and girls found that 38 percent tested positive for HIV (2007).

In the far western regions and in areas of Nepal where sex trafficking and exploitation is most prevalent, the communities practice Chhaupadi, a social tradition that isolates girls and women when they are menstruating, especially girls on their first menstruation. This cultural practice dictates that a women or girl be cast out from her home and separated from her family during their menstruation because she is considered unclean. The underlying belief is that a menstruating woman's touch is polluting to their family members (Bennett, 1983; Cameron, 1998; Huntington & Crawford, 2009). When a girl menstruates for the first time, she must stay in the cow shed for ten days, frequently without food or water, often in extreme weather conditions. Girls and women still die from the practice of Chhaupadi.

In addition to the fatalities resulting from this practice, many women have negative feelings towards their bodies and reproductive cycles, and feel ashamed of being born women. This cultural mindset, and the bigger issue of gender stigma and the oppression of women, is the root cause of many gender-linked violence issues in Nepal, including sex trafficking, exploitation and abuse (Crawford, 2010). To create change and promote recovery, these stigmas and issues need to be considered.

Godziak (2016), whose team of researchers conducted an extensive case study of Nepali trafficking survivors returning home, notes that the current emphasis on prevention of trafficking, while necessary, often comes at the expense of attending to the immediate and longer-term needs of survivors. It is this gap that Art to Healing seeks to address, through the Women's Transformational Program described below.

Art to Healing in the Women's Transformational Program, Nepal

Art to Healing is an international grassroots charitable organisation that I founded on the basis of my own experiences, convictions and commitment. Our organisation works within and across several countries and contexts to empower women and girls who have experienced gendered violence and sex trafficking. In Nepal, as elsewhere, the program is strongly embedded in the community: working in consultation with progressive local grass-roots organisations and in partnership with survivors of violence and sex slavery (see https://www.arttohealing.org/).

Given the endurance of the powerful beliefs that can render Nepali women and girls vulnerable to trafficking, and the severe emotional, psychological and physical effects of trafficking itself, the resilience and agency of the Nepali women in this project was remarkable. The women in my research project were already actively working in anti-trafficking organisations, but their commitment to ending trafficking frequently co-existed with great ongoing personal suffering. In this context, it seems only just that the Women's Transformational Program offers these women the opportunity to experience the compassion and support they in turn offer to other survivors.

In my ten years as an art therapist in Nepal, I noticed a theme emerging in the data collected in our therapeutic program, highlighting a possible link between the women's somatic ailments and their difficulties with prioritising self-care, a disconnection between their bodies and feelings, and the influence of self-hatred and negative judgments about their bodies and being women. Many of these women told me about the physical reproductive health issues they were struggling with, such as HIV/ AIDS, STDs, polycystic ovary syndrome, uterine and ovarian cysts, menorrhagia, dysmenorrhea, and amenorrhea. It was apparent that the medical care provided for women experiencing the devastating effects of trafficking on health and wellbeing, while necessary, did not sufficiently address some important psychological and emotional dimensions of their health. I began to wonder if helping women reconnect with their bodies and reproductive health should be a key aspect of therapeutic care, as a way to create positive changes in resilience, self-image and attitudes towards their bodies and gender.

In 2008, I ran an art therapy program on women's reproductive health with Art to Healing and with 20 women who had experienced sex trafficking, exploitation and abuse. In the follow-up sessions, many women reported that the program had helped them recover from many of the symptoms of reproductive health issues. Through our six- and 12-month follow-up interviews, we documented multiple reports on how this particular program had increased their self-esteem, confidence and self-worth, and supported the women in their self-care.

I was trafficked to Dubai, and my menstrual period completely stopped at that time. I did not have a period since then, around three years ago.

After I participated in the Art to Healing women's reproductive health training program, I had my period the week after the program finished. Since then, I have had regular periods for the past seven months. It has been a miracle for me, and I am very thankful to Art to Healing for running this program.

I am now incorporating this information on women's reproductive health into my work as a counselor with sex trafficked women now in my organisation.

Priya, ¹ trafficked survivor, Nepal.

Some women also said they had found inner resilience and confidence through the therapeutic program and that this has helped them pursue new careers and lives, and helped them live a normal life free from sex slavery.

I was trafficked when I was 5 years old, initially to a carpet factory as a child laborer, and then into a brothel when I was older. I have HIV/AIDS. Participating in Art to Healing's women's reproductive health program is one of the best things I have done in my life. This program made me realize the importance of self-care, that I am worthy of love, how important my body and my female reproductive organs are, and how I can love and take care of it.

Before attending this program, I used to feel very hopeless, and I did not believe that I could do anything with my life. I was dead. After this program, as well as attending other Art to Healing programs, now I know that I can do anything, and that I can believe in myself to create a new life, and now, I am alive. I am now a field worker, helping other women like myself to recover from sexual exploitation and slavery.

Manisha, 1 sex-trafficked survivor, Nepal.

Art to Healing first delivered the Women's Transformational Program in 2012. The objectives of the program were: to understand how art therapy and reproductive health experiential education could support a positive re-connection and relationship with the body; to improve self-esteem, resilience, body image and self-care; and to change personal attitudes towards gender stigma.

In 2015, a needs assessment was conducted with 32 staff members of Art to Healing's partner anti-trafficking non-government organisations. This led to a request for me to run the Women's Transformational Program for staff who had themselves experienced sex slavery, exploitation and abuse. I returned to Nepal to do so in November 2016. The case studies that follow are drawn from the program.

Before and after case studies are presented below. Also included are the images, poems and stories participants produced in response to the question: "What does being a woman mean for me?" and their response to a Focusing-Oriented Art Therapy (FOAT) exercise, Womb Bowls. These case studies highlight the women's subjective insights and experiences, and demonstrate the efficacy of expressive art therapies and reproductive health experiential education, as an emotional and psychological intervention for women who have experienced sex slavery, exploitation and abuse.

Participants

Twenty-five women aged 20 to 39 engaged in the art therapy program. All the participants were staff members of anti-trafficking organisations, and 84 percent of the participants had experienced sex slavery, exploitation and abuse. These women had reached a point in their recovery process where they had found purpose, direction and livelihood through caring for other women and children with similar histories. Many worked as caseworkers, counsellors, and field workers in these organisations, and knew each other through participation in previous Art to Healing art therapy programs.

Setting

The reproductive health and art therapy five-day therapeutic program was part of a larger Women's Wellness Program. It was followed by a three-day leadership training, as well as by individual art therapy and counselling for the participants, as well as clinical supervision and a six-week art therapy and research program for girls aged 12 to 18 who had experienced sexual slavery and exploitation. The participants were informed that, as group work could potentially trigger overwhelming feelings or memories, the program included additional individual therapeutic support .

It was important to create a psychologically safe environment for the program. The setting was non-residential, behind closed doors and was held without interruptions apart from two tea breaks and a one-hour lunch break. It helped that most of the participants had known the translator and myself for many years, and were familiar with our positive unconditional regard and our non-judgmental approach. Many of the participants previously reported feeling acknowledged, valued and safe by our group therapy approach.

The process

The five-day program began gently, with the morning of the first day introducing arts therapy, discussing logistical information, group agreements, safety and confidentiality, the availability of individual counselling and supervision during and after the five-day program, and an intention-setting activity. The gentleness and slow pace of the first

day was important to create trust and rapport, and to establish elements of safety.

The framework for the five-day group art therapy program adhered to the approach of themed-based art therapy, in which art therapy participants connect for a common purpose to explore a particular area of interest and experience, in this case, women's reproductive health and the experience of being a woman (Liebman, 1986). There was a formal structure to the group, starting with an introduction or a warm-up, the selection of a theme, time to engage in making art, followed by sharing and finally a group conclusion (Barber, 2002; Campbell, 1997; Liebmann 1986; Ross 1997).

According to Liebman (1986) and Thornthon (1985), themed-based art therapy can be the best approach for groups and supports the group members' focus on an intention. In addition, the act of sharing a theme can bring the group together, and create community building and sharing. (Liebmann, 1979; 1985; 1986; Thornton, 1985).

Each day had the same structure. It began with a warm-up where participants were invited to create a body structure on how they were feeling, followed by some mindfulness and movement practice. This was followed by a short introduction to the content of the day, the main body of the art therapy activity, and ended with a group sharing of reflections on their artwork. This structure provided continuity, repetition and consistency.

The themes of each day of the five-day program were:

Day One: What it means to be a woman

Day Two: My menarche

Day Three: My fertility and creativity

Day Four: Womb bowls

Day Five: What it means to be a woman

The art media and materials used during the program included visual art materials such as paint, oil and chalk pastels, color pencils and pens, clay and collage. Expressive arts modalities included poetry, drama and theatre, singing and songwriting, visual art, and dance and movement. Each day focused on a topic on women's reproductive health.

This paper presents two out of five of the main art therapy interventions introduced.

- 1. What does being a woman mean for me?
- 2. Womb bowls.

Day One: What does being a woman mean for me?

The art activity on the first day began with exploring the question: "What does being a woman mean for me?" The participants were given minimal prompts, and were invited to create an image in response to this question, and write a short poem about their image. The participants had the option to share at the end of the activity. I gave as little instruction as possible, so as not to influence their art. The participants were shown a wide range of art materials, which included collage, paints, oil and chalk pastels, color pencils, pens and markers, and clay.

On the first day, most of the participants were tentative about what art materials to use, and many of them chose to use collage. Those who had experience with art therapy were more adept at using other art media such as paint and clay.

The main theme that emerged from the first day was the struggle of being a woman in Nepal. The challenges voiced included: loneliness and isolation, exhaustion, struggle, responsibilities and roles, discrimination, sadness, and pressure from cultural expectations.



Figure 1. What it means to be a woman, Lalita, 1 chalk pastels and collage.

One woman wrote: "In the middle of this artwork is me. I look happy but the colors are sad".

Another woman shared: "I have drawn a symbol of my heart. There are so many things that are hidden. I am a woman, struggling and all alone".

Expressing similar feelings of emotional isolation, a young participant wrote: "I am frustrated with my life. I want to share but I cannot find anyone who I can trust".

Another woman described her experience of loneliness and discrimination: "There was nobody to help me when I was in pain. I was a person who was laughed at by the whole society".

Regarding cultural and societal expectation, a participant commented: "All of society expects a woman to be smiling and happy, but that may not be our true feelings". Another stated: "Coming up to this life, I have learnt to hide my feelings and keep a smile on my face".

At the end of the five-day group art therapy program, the participants were invited to create an image in response to the same question again. The two images were compared and analysed. The themes, artwork and examples of the analysis are presented below.







Figure 2. Womb bowl 1.

Figure 3. Womb bowl 2.

Figure 4. Womb bowl 3.

Day Four: Womb bowls

Day Four focused on the activity, 'Womb bowls'. The 'Womb bowls' exercise was created by myself with the focus on helping the women to access and connect somatically to their uterus and pelvis. They were instructed to hold a ball of clay in their hands, attune to the sensations in their pelvis, and to create in silence a symbol of what they felt in this part of their bodies. After the art exercise, the women were encouraged to write a narrative, or story about their process.

This activity was adapted from FOAT, which was created by Eugene Gendlin (1981) and further developed by Rappaport (2010). Focusing is a mind/body process involving self-directed listening to the inner felt-sense of experience. This process accesses the body's innate wisdom and potential to heal, helping the client find new ways of recovery (Rappaport, 1998; 2006). FOAT integrates Gendlin's focusing with art therapy (Rappaport, 2010). This process of building a relationship with the self can offer the client an "experiential knowing of the self that is whole" (Rappaport, 2010, p.140).

The participants were introduced to clay, an art material that many of them had not used. Many of the participants described how they used to play with clay when they were children in the villages, and how that reminded them of childhood memories and experiences.

The first part of the exercise began with a short mindfulness and breathing exercise. The group was guided in holding the ball of clay in their hands, and asked to focus breathing into the area of their uterus. The breath and focus assisted the 'felt sense' or sensory experience of this area of their bodies.

When they felt ready to start, they were taught how to create a pinch bowl with the ball of clay. Throughout the activity, the group was focused and quiet, and I observed that they were responding to their artwork with care and concentration.

Afterwards, the group shared, and appeared energised and exited. The themes that emerged included how the activity had helped the women experience a felt sense of their wombs, how that brought up different emotions, and the realisation of the importance of self-care for their bodies and emotions.

Participants' comments:

"I realised that my womb is mine, and it holds so many emotions. To keep it happy, I need to balance my emotions. I would like to keep my womb happier."

"My womb is really beautiful and delicate. It is important to take care of my womb. I had forgotten I had a womb. It had left my mind. This exercise has helped me to feel a connection with it again, and I am wanting to take care of my womb more."

Other themes included how the activity itself helped them in self-soothing and comfort.

"Initially, I felt stressed about how I would create a womb bowl, but the mindfulness exercise in the beginning helped me. As I was making my womb bowl, I felt [my womb] deep inside me, and I felt how much I would like to nurture my womb. When the cracks appeared in the clay, I felt as if when I was smoothing over the cracks in the clay, I was also soothing and fixing my own womb on the inside."

"When I was doing the clay exercise, I really felt I was making physical contact with my womb. I wanted to name my womb bowl 'Creation of life'."

Through the group sharing, it was apparent how the mindfulness exercise helped participants connect with the felt sense of the body, how making art helped them gain insights into their cultural experiences and emotions. This led to self-awareness and insight, resulting in an increased regard for self-value and care, and a newly found appreciation for their bodies. In addition, the sensory nature of clay helped the participants to self-soothe.

Day Five: What does being a woman mean for me?

At the end of the five days, the participants were again invited to explore the same question through visual art and poetry. The art materials chosen were very different from those chosen on the first day.

The tentativeness that was observed on the first day was not present, and I observed an easefulness, joy and lively chatter in the room during the art-making process. Most of the group chose oil and chalk pastels, paints and other media rather than collage.

In addition, the themes that emerged from the inquiry differed, including feelings of pride, love, self-care and respect, valuing the reproductive organs and the body, an increase of inner resilience and confidence, and gratitude in being a woman.

The central theme was an increase of pride and love. Participants' comments:

"I am proud of being a woman. I love myself. Now, my thoughts are different. My story is different."

"I am thankful. I am a woman."

"I respect and love myself as a person who is capable of everything."

Many of the participants expressed how the FOAT activity of 'Womb bowls' changed their self-perception.

"I wasn't aware about my gift, the precious gift of my womb. Now I am powerful, I am caring towards myself, and I love myself."

"Although I knew myself, I was not aware about my inner reproductive organs. Now I know them and I felt them inside me. I feel that I am complete now."

In addition, most of the women stated that they felt an increase of self-love and care for their bodies.

"I learnt that what I have inside me is the feeling of wholeness. I don't need to search for it on the outside. All my energy, all my power, are inside my body. It is a temple that I need to respect, care and love. Now I understand why I need to respect and love my own self."

To demonstrate the subjective experience and change that was observed before and after, two artworks and poems collected from the art activity 'What being a woman mean for me?' are presented overleaf.

Both images and stories revolve around similar themes. The image and poetry from Day One reflected the hardship that they had to endure in their lives, both the stigma and discrimination they faced in Nepalese culture, as well as their experience of trafficking.

The first artwork by Sita depicts a woman in a village, persecuted by the villagers. She is in a submissive posture, and there is a figure on the left pointing at her. She shares her journey of survival, becoming numb as a form of protection, so that her world could be separate from society. Her isolation, pain and suffering are evident in both the image and the poetry.

In her second artwork, she uses collage and images of smiling strong women to depict her journey from suffering to strength. In her poetry, Sita acknowledges her power, and her ability to live now in freedom. She calls herself "an angel" who has come out from struggle. This acknowledgement of her inner resilience is evident of a shift in her attitude towards her self.

Similarly, Lakshmi shares the suffering in her life in her first artwork and poem. On the top left-hand side of her collage image is a heart which contains images of women that look lost, alone and sad. She writes about her confusion, her unrealised hopes and dreams, her isolation, and how she has now forgotten about herself in order to care for others.

Lakshmi's second artwork is a big, bright sun in the sky with a smile in the middle. There is an image of a heart, as well as a star. In her poetry, she explains that women are the sun, sky, stars and moon, which provide warmth, protection and love for life. It is apparent that Lakshmi's attitude towards herself has changed from pain and confusion into acknowledgment and gratitude. She no longer focuses on herself and her own suffering, but celebrates the gifts of women collectively.

These interpretations have been collected from the verbal narratives in the group discussion of the artwork.

Conclusion

Being a woman is not easy in Nepal. Twenty-one of the 25 participants expressed core experiences of emotional isolation, disempowerment and disconnection from others in their artwork and stories responding to, "What does being a woman mean for me?" The five-day art therapy program on women's reproductive health helped the participants to re-connect with themselves in a different way, through the felt sense of their bodies. It also provided a safe enough place to express their emotions and experiences through art, storytelling, and other creative modalities. The opportunity to express themselves is a poignant step in their recovery, as a central theme was their inability to express their true feelings. The visual art and poetry were effective tools for the participants to express their authentic experience.

As the participants realised that they were not alone in their subjective experiences and challenges, there arose a deeper connection and solidarity, a sense of community and strength, and acknowledgment for each other in the group.

Sita¹



Figure 5. Sita, Day one, chalk pastel.



Figure 6. Sita, Day five, collage and text.

Lakshmi¹



Figure 7. Lakshmi, Day one, mixed media.



Figure 8. Lakshmi, Day five, chalk pastel and paint.

There was nobody to help me when I was in pain I was person who was laughed at by the entire society.

It used to add salt to my wound
I reflected to myself and told myself that this
experience of pain is enough.
I realized that it is enough. I won't bear it anymore
After that, I carried my experience, my
learning, my feelings on my shoulders. I forced
myself to stand up between the pain.
Now I am numb, I don't feel the pain anymore.
My heart doesn't break.
I don't break no matter what everyone else says.
That is why I am here and my world is here away
from everyone else.
And I am peaceful inside my world.

I am a bird rose up after the bad times. I am an angel who came out of the struggle. I am powerful in myself to live in freedom I am also the lines of this beautiful poem.

The pain in my heart,

I used to cry to stop it from firing.

I used to smile through the tears.

My wish was to be something else

But I have been forced to do something.

It was only me, not others.

I couldn't understand why I couldn't be a flying bird,
why couldn't I get a life like butterflies.

That is why I have forgotten myself.

Now, I give my life to support others.

Women are creation, where all the life is birthed.

Women give life to this to build a beautiful world

Women are the sky of this world which

provides protection.

Women are sun that gives light and warmth

to creation.

Women are the full moon that gives light

in the darkness.

Women are stars that twinkle when we sleep.

In that way, women work continuously to

protect and care for life.

The use of clay, and the connection of the felt sense of their bodies through the technique of FOAT were paramount in the positive change in perceptions and attitudes towards self and gender, as well as in healing of their emotions and physical ailments. Many of the participants started to change their perception from women as "second-class" to self-respect, love and an increased value of self. The sensory quality of clay also helped the participants experience their bodies in a more tangible way, using the sensory experience in self-soothing and healing their emotional and physical suffering.

This five-day program demonstrates how the expressive art therapies can serve as a psychological and emotional intervention for women who have experienced sex trafficking to increase inner resilience and positive attitudes towards self and gender. More in-depth qualitative and quantitative research in this field is needed to understand how such a program can contribute to the recovery of survivors of sex trafficking, as well as to the prevention of sex slavery and exploitation in Nepal.

Endnote

1. Not her real name. All participant names have been changed to protect privacy.

References

Barber, V. (2002). *Explore yourself through art*. New York: Penguin.

Bennett, L. (1983). *Dangerous wives and sacred sisters:* Social and symbolic roles of high-caste women in Nepal. New York: Columbia University Press.

Cameron, M. (1998). *On the edge of the auspicious: Gender and caste in Nepal.* Champaign, IL: University of Illinois Press.

Campbell, J. (1997). *Creative art in groupwork*. Abingdon-on-Thames, UK: Taylor & Francis.

Crawford, M. (2010). *Sex trafficking in South Asia: Telling Maya's story.* New York: Routledge.

Gendlin, E.T. (1981). *Focusing*. (2nd ed). New York: Bantam Books.

Goździak, E.M. (2016). *Trafficking survivors returning home: Case study of Nepal*. Washington, DC: Georgetown University. Retrieved from https://www.researchgate.net/publication/305640027_Trafficking_Survivors_Return_Home_Case_Study_of_Nepal/download International Labour Organization. (2008). *ILO action against trafficking in human beings*. Geneva, Switzerland. Retrieved from http://www.ilo.org/wcmsp5/groups/public/@ed_norm/@declaration/documents/publication/wcms_090356.pdf International Labour Organization. (2017). *Global estimates of modern slavery: Forced labour and forced marriage*. Retrieved from http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_575479.pdf

Kempadoo. K. (2001). Women of color and the global sex trade: Transnational feminist perspectives. *Meridians: Feminism, Race, Transnationalism, 1*(2), 28–51.

Kempadoo, K., Sanghera, J., & Pattanaik, B. (Eds.). (2016). *Trafficking and prostitution reconsidered: New perspectives on migration, sex work and human rights.* (2nd ed.). Abingdon, UK; New York: Routledge.

Kohrt, B.A., & Hruschka, D.J. (2010). Nepali concepts of psychological trauma: The role of idioms of distress, ethnopsychology and ethnophysiology in alleviating suffering and preventing stigma. *Culture Medicine and Psychiatry*, 34, 322–352, doi:10.1007/s11013-010-9170-2.

Kondos, V. (2004). *On the ethos of Hindu women*. Kathmandu, Nepal: Mandala Press.

Liebmann, M. (1986). *Art therapy for groups*. London; New York: Routledge.

Rappaport, L. (1998). Focusing and art therapy: Tools for working through post-traumatic stress disorder. Retrieved from https://www.focusing.org/pdf/rappaport_focusing_and_art_therapy_tools_for_working_through_trauma.pdf Rappaport, L. (2006). Clearing a space: Expressing the wholeness within using art. Retrieved from http://www.focusing.org/pdf/rappaport_clearing_a_space_expressing_the_wholeness_within_using_art.pdf Rappaport, L. (2010). Focusing-oriented art therapy: Working with trauma. Person-Centered and Experiential

Psychotherapies, 9(2), 129–142.

Ross, C. (1997). Something to draw on: Activities and interventions using an art therapy approach. London:

interventions using an art therapy approach. London: Jessica Kingsley.

Silverman, J.G., Decker, M.R., Gupta, J., Maheshwari, A., Willis, B.M., & Raj, A. (2007). HIV prevalence and predictors of infection in sex-trafficked Nepalese girls and women. *Journal of the American Medical Association*, 298(5), 536–42. Doi:10.1001/jama.298.5.536 Stallard, R. (2014). *Child trafficking in Nepal: Causes, consequences and education as prevention*. Childreach UK. Retrieved from https://www.scribd.com/document/233986354/Child-trafficking-in-Nepal-Causesconsequences-and-education-as-prevention

Thornton, R. (1985). Review of Gerry McNeilly's article, "Directive and non-directive approaches in art therapy". *Inscape Journal of Art Therapy, 4*, 23–25.

UNICEF. (2011). State of the world's children 2011. New York. Retrieved from http://www.unicef.org/sowc2011/United Nations Office on Drugs and Crime (UNODC). (2012). Global report on trafficking in persons 2016. Vienna, Austria. Retrieved from https://www.unodc.org/documents/data-and-analysis/glotip/2012_Global_Report_on_Trafficking_in_Persons.pdf

UN.GIFT.HUB. (2008). *Human trafficking: An overview.* Retrieved from https://www.unodc.org/documents/human-trafficking/2008/HumanTrafficking-AnOverview.pdf

U.S. Department of State. (2011). *Trafficking in persons report*. Retrieved from https://www.state.gov/documents/organization/164457.pdf



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