



## Proposed Art Therapy Mural Design Activities

<sup>1</sup>Aber Abdo Mohamed, <sup>2</sup>Prof. Mustafa Mohamed Abdel Aziz Hassan,  
<sup>3</sup>Prof. Ahmed Mostafa Mohamed Abdel Aziz,

<sup>1</sup>Associate Professor at the College of Tourism and Hospitality- King Khalid University  
[abeerabdo@kku.edu.sa](mailto:abeerabdo@kku.edu.sa)

<sup>2</sup>Professor of Psychology, Artistic Expression Analysis of Children's,  
and Adult Arts - Faculty of Art Education, Helwan University.

<sup>3</sup>Professor of Mass Communication, School of Humanities and  
Creative Arts, University of Hertfordshire – Hosted by global  
Academic Foundation - Egypt

### Abstract

#### Suggested design activities through art therapy murals<sup>1</sup>

**Research background:** The art education teacher, when presenting technical expertise, seeks to achieve his goals through a development strategy, a preventive strategy, and a curative strategy, the latter of which does not receive sufficient attention. In this research, this strategy is shed light on.

**Research problem:** What is the contribution of proposed design activities through art therapy murals?

**Research objective:** propose art activities for design through art therapy murals.

**Research hypotheses:** There is a positive relationship between the proposed design activities through the murals and art therapy.

**Research methodology:** The correlative method.

**Research results:** The researcher came up with a proposal of (13) sessions that include artistic through the murals for art therapy, the final version of which was approved by specialized professors in the field of design and psychology of art education.

**Keyword** – activities, achieve, design, method

**Received:** 28 May 2024 **Revised:** 26 June 2024 **Accepted:** 08 August 2024

### Introduction:

The educational journey is undeniably complex, involving numerous intertwined elements. A good teacher recognizes the significance and role of these factors and strives to address them in their teaching practices, always focusing on the continuous growth and development of their students.

In their educational roles, art education teachers engage with both typical and atypical students, using their expertise to pursue various diverse objectives. Among these are aims related to guidance and psychological counseling, which can be accomplished through development and preventive strategies. The development strategy focuses on providing ordinary students with experiences that enhance their efficiency and compatibility throughout their growth journeys in life, while the preventive strategy involves psychological immunization processes designed to protect against problems, disorders, and mental illnesses. This means that preventive strategies prioritize maintaining the mental health of individuals before they become affected by issues.

When art education teachers work with students who exhibit maladaptive behaviors, their focus shifts toward goals associated with guidance and psychological counseling through therapeutic strategies. These strategies require more precision in addressing psychological aspects compared to developmental

---

<sup>1</sup> Ahmed Mustafa Mohamed Abdel Aziz, Assistant Professor of Design, Department of Art Education, Faculty of Specific Education, Ain Shams University.

and preventive approaches. Although therapeutic strategies demand greater time, effort, and financial resources, their success rate is not guaranteed.

The researcher was interested in exploring art therapy within the design field, specifically using mural paintings. They aimed to investigate how large-scale art projects could impact emotional well-being and creativity among participants. The study included a series of workshops where individuals collaborated on mural designs, discussing their feelings and experiences throughout the process. By examining the therapeutic effects of creating and interacting with public art, the researcher hoped to identify strategies for integrating art therapy into urban planning and community development projects, ultimately fostering a greater sense of community and personal fulfillment.

**Second: Research Problem:**

The problem of the current research boils down to:

- To what extent do proposed design activities contribute through art therapy murals?

**Third: Research Objective:**

The current research aims to:

- Propose artistic activities for design through art therapy murals.

**Fourth: The importance of research:**

1. Achieving the therapeutic strategy in the field of art education as one of the strategies in the educational field.
2. Keeping pace with the current interest in the field of art therapy.

**Fifth: Imposing Research:**

This hypothesis stems from deductive hypotheses that demonstrate the advantages of current knowledge in art therapy and mural painting. The proposed hypothesis is:

"There is a positive relationship between the proposed design art activities through the potential of murals and art therapy."

**Sixth: Research Sample:**

The proposed artistic activities can be applied at any age, considering the characteristics of growth in chronological age at each stage.

**Seventh: Research Methodology:**

The descriptive relational approach The Correlational Method aims to discover the relationship between variables (art therapy, the potential of murals in design).

**Eighth: Design:**

In contemporary research and practice, design encompasses the assorted topics, tools, procedures, and discussions involved in artistic endeavors. Rather than primarily aiming to produce creative works, its purpose is to serve as an independent variable influencing the field of art therapy.

**Ninth: Artistic activities in the field of design and their role in the field of art therapy:**

The arts, especially plastic arts, play a crucial role in child development. They offer children, including those with disabilities, a way to express their feelings and thoughts, particularly when speech and language are difficult. Arts programs are highly valued in special education curricula, especially during early schooling.

The goal of arts training is not artistic mastery, but rather to provide a pressure-free environment for self-expression. Each art activity has emotional, mental, and social benefits, making them useful in psychological treatment for children. These activities also aid in sensory and muscle training, self-discipline, aesthetic appreciation, and teaching enjoyable ways to spend leisure time.

**The importance of artistic expression in general, including the field of design, is evident in the following:**

- Artistic expression is crucial in work therapy.
  - Allows release of conflicts and problems (emotional and non-emotional).
  - Enables motivations to be expressed without censorship.
- Historical use:
  - "Freeman 1936" used artistic expression with developmental disability patients.
  - Applied both individually and collectively.
- Importance in verbal self-expression cases:
  - Artistic expression is critical for diagnosis and treatment of mental illness.
  - Involves venting during expression and acquiring diagnostic information.
- Benefits of art therapy:
  - Enhances concentration and creativity, contributing to therapeutic goals.
  - Strengthens psychological defenses.
  - Aids in developing constructive coping mechanisms.
- Art therapy's alignment with patient needs:
  - Matches abilities of children with disabilities.
  - Encourages interaction with the environment and treating team.
  - Promotes thought, emotion, and action.
  - Tests diverse skills and provides self-recognition opportunities.
- Symbols in drawings:
  - Each symbol has a unique dynamic history.
  - Originates from different fields for different individuals.
  - Patient behavior during artistic expression is indicative of emotional responses.
- Impact of artistic training on self-expression:
  - Artistic skill facilitates rather than obstructs self-expression (Ahmed Muhammad Ali Amer 1972).

**\*The bottom line:**

Art therapy involves aiding individuals in uncovering, understanding, and analyzing their personal, emotional, and behavioral issues that result in poor psychological adjustment. The goal is to address these problems in a manner that promotes optimal mental health and compatibility. A key objective is to study the individual's personality comprehensively, enabling them to guide their life more effectively and enhance their psychological adjustment to the highest possible level (Hamid Zahran 1980).

**Tenth: Collective Murals:**

There is no doubt that the wall paintings or what is known as wall paintings extend to the prehistoric period and it was found that the oldest models of them on the walls and ceilings of caves in Spain and France, and then they were on the walls and temples of the ancient Egyptians, but some of those interested in these works see that they were not pure art for the sake of art, but were for other purposes, and the mural works continued and the methods and materials in which they are implemented varied, as well as their purposes varied because in the end it is a means of communication and in our time the painter has become The mural is aware of what he has of available materials and has become aware that the process is not filling the voids, but an important part of the building and is not an outsider, but rather gives it beauty, and therefore its age must be the age of the building itself and must be implemented with materials that resist weather factors and withstand cleaning, as well as that the drawing surface is matte so that it can be seen from all angles and from long distances. The previous concept of mural works can be achieved by some talented people, but in general prefer experimental works and prefer to equip certain walls agreed upon to practice this activity and can be obliterated and

work on them again and this would relieve tension in the child, for example, and also help him to boldness in expression, including the formation of valid social habits.

#### **Eleventh : Art therapy and its techniques in the field of fine art:**

The doctor tried to determine which programs are suitable for the people he deals with, whether they are individuals or in a group, some exercises suit more clients of depression and some may be directed to the elderly or people with schizophrenia, each therapist must use good behavior when providing and choosing training, some methods need to be divided and distributed over two or three sessions, in the case if the clients absorb them slow or little concentration or if these methods include many steps, In the case of patients with schizophrenia, for example, they may benefit more from exercises that are based on reality, while people with depression may benefit from programs that need more concentration and abstract thinking, and there is an opportunity for the therapist to modify the programs he offers to suit the client's need.<sup>1</sup>.

Art therapy interventions achieve several goals, including useful communication and expression of feelings, as well as fears, hopes, conflicts and problems, in addition to the ability to solve problems and develop thinking and logical skills, the content of this research relied on some references, the most important of which is what came in the book "Susan I Buchalte" in her book "Art Therapy Techniques and Applications"<sup>0</sup>

#### **Twelfth: Art therapy and its techniques in the field of murals:**

Working in murals is beneficial for patients as it encourages fellowship, unity, cooperation and social communication, it provides a forum for discussion, taking escapes and solving problems, and is often less disturbing for patients as everyone participates and everyone is considered equal in their contributions to the artwork and strengthens creative thinking whenever group members choose a theme for the mural and the way it should be addressed, giving patients the opportunity to notice and reflect their artwork as well as the work of others, their comments are welcome because The unobtrusive nature of the guidance In addition to the fact that patients know that each individual is an integral part of the artistic process, groups can be led in a range of ways, murals can be placed on the wall or even on the floor according to the flexibility of the patients and the design of the drawing room, patients and therapists can decide either to draw group members at the same time, or to take roles, so each participant draws in his role may present the patients with an idea or that the group members choose the topic, Or to paint the mural spontaneously and any number of materials can be used for paint or be colors of Felmaster or pastel or paint or clay or can be pictures of magazines or posters, according to the abilities and desires of the participating patients, when the mural is hung after the end of the session patients often enjoy watching them and indicating their participation in it and analyzing it with their colleagues, which increases their self-esteem and sense of belonging.

#### **Thirteenth: Proposed design activities through art therapy murals:**

Through the above and what came in the background of the problem, the problem, the goal, the hypothesis, the importance, and the importance of art therapy through wall paintings, and through the reference experience of the researcher in his specialty, which is design:

The researcher proposed (13) design activities in the form of sessions in the field of art therapy, submitted by the researcher to the teacher in order to achieve the therapeutic strategy in addition to the development and preventive strategy.

The researcher saw the development of these activities (or sessions) in the form of a table with 4 (dimensions) boxes, the first box for the sequence of the session and its name, the second box for the tools, the third for the procedures, and the fourth for the discussion.

The following is this table in its final form after its presentation and approval by Prof. Dr. Hussein Ali, Prof. Dr. Emad Farouk, Prof. Dr. / Omnia Rashad. Professors at the Department of Design at the Faculty of Art Education – Helwan University, Prof. Dr. Mustafa Abdel Aziz, Prof. Dr. Afaf Ahmed Farrag,

---

<sup>1</sup> Jessica Kingsley Publishers, London and Philadelphia.

Department of Art Education Sciences (Psychology), and thus the sincerity of what was stated in the table was achieved.

**Table (1) Sequencing, Tools Used, Procedures and Discussion**

Discussion	Procedures	Instruments	Activity Title (Session)
<p>Discussion focuses on reactions to the mural as a whole and on the participation of each individual. Research the emotions depicted and how patients relate to them. Discuss the importance of facial expressions when communicating with others, goals include researching communication styles and determining mood and feeling.</p>	<p>Put the paper on the table so that all members of the group can draw on it at the same time, or put it on the wall and make patients stand and draw a face, draw a face that expresses emotion in their share of the paper, when the faces are complete, make them add an experimental shape symbol next to their faces, which reflects the acceptable emotion.</p>	<p>Large paper mural, flumaster pens, wax colors, pastel colors.</p>	<p>1. Mural of faces "Mural of Faces"</p>
<p>The discussion focuses on footprints in the middle of the leaf, on the side or at the end of the paper, the way the colors are painted dark, light and completely full inside, quickly drawn, detailed or scratched, and how the patient felt while working on this project, the foot print will be seen as a representative of the person. Goals include exploring self-esteem, the situation within the group, social activity, cooperation and also communication.</p>	<p>Place the large sheet on the floor. Inform patients that they will participate in the design of the collective footprint mural, ask the group members to decide where they choose to put their feet to paint for the mural, have patients paint each other's feet if they feel comfortable doing so as they will still wear their shoes, then ask the participants to write their names on their foot prints, suggest that they fill in the picture in any way that satisfies them depending on the size of the room and the patients' ability to Bending, the copies may fill in on the floor or you can bring the paper to work on it on the table.</p>	<p>Paper mural, large paper, pastel colors, wax colors, flumaster pens, pencils, ballpoint pens or ink</p>	<p>2- Foot Print Mural</p>

Discussion	Procedures	Instruments	Activity Title (Session)
<p>Focusing on the positive touches of each individual and exploring each unique mandala encourages group members to observe the mural in a range of ways, first as a single unit and then as an arrangement of several distinct circles, the mural can be used to explore how group members see themselves as well as how others see them. Actions to recognize, preserve and increase self-esteem should be researched.</p>	<p>Ask patients to draw a circle using a paper plate on a sheet of paper and make them draw a small rectangle in the middle of the circle inside the rectangle, ask them to write one or more positive adjectives about themselves, suggest that they decorate the surrounding circle to represent the multiple facets of their personalities such as: the red vortex represents happiness and the blue skies represent peace and harmony. When the circles are complete, the patients face them in cutting and pasting them on a large cardboard sheet where the group as a whole decides where each circle should be placed.</p>	<p>Paper, pastel colors, wax colors, flumaster pens, paper plate, large cardboard sheet</p>	<p>3 Mandala mural Self-esteem "Mandala Self Esteem Mural".</p>
<p>The discussion focuses on the quilt and representative box of each individual Goals include socializing, sharing, group cohesion, and increasing self-esteem by being part of a team.</p>	<p>Each individual chooses a color and then receives a 3x3 or 4x4 box of colored paper cut before the session from the therapist, patients will be asked to draw one period in their lives and then glued together to make a paper quilt.</p>	<p>Mural, Flomaster Pencils, 3x3 colored paper squares, 0x4x4</p>	<p>4- Mural period of life "A Patch of Life Mural"0</p>
<p>The discussion focuses on the era, bananas drawn, remembering that period of time, goals include social communication, cooperation and unity, remembering</p>	<p>Let patients decide which decade they want to focus on, it will depend on the age of the group members, for example, older people will often choose their</p>	<p>Large mural sheet, flammaster pens, wax colors, pastel colors.</p>	<p>5 Contract mural "Decodes Mural".</p>

Discussion	Procedures	Instruments	Activity Title (Session)
unites individuals together, enhances self-knowledge, and brings positive emotions	forties or fifties, and the boomer generation may choose the sixties or seventies, suggest patients draw objects, clothes, symbols, words and things that they will find during that time period. For example, if the sixties are chosen, they may include symbols such as bell bottoms, guitar, flowers, power happy or beatles.		
<p>Focusing on relationships with others The discussion may include the following questions:</p> <p>(A) What do you think of that mural? Feelings that may arise during observation.</p> <p>(B) How do you feel about shape mode?</p> <p>(C) How do you feel about the relationships others have with your "person"?</p> <p>(D) Which shapes are related to them and why?</p> <p>(E) How many shapes are related to it?</p> <p>(F) How do you feel about forming relationships? Is it easy or difficult?</p> <p>(G) How does an artistic relationship represent the type and magnitude of relationships you form in your life?</p> <p>(H) Is it easy or difficult for you to form relationships with others?</p> <p>(I) List some of the ways in which relationships are formed?</p> <p>(J) What obstacles stand in your way when forming relationships with others?</p>	<p>The therapist draws a person's figure on an 8x10 cm sheet of paper The group members receive this shape, cut it and fill it in order to represent themselves in one way or another, asking them: "Fill in the person or shape to represent a face in yourself" and then instructs the group members to paste the shape on the paper wherever they like and asks them to create a background around the shape, and to relate the shape to at least another shape using that environment.</p>	<p>A sheet of white or brown paper large enough to spread on a long table, paper, glue sticks, wax colors, and flumaster pens.</p>	<p>6 Mural shapes glued "Collage Mural Figures".</p>

Discussion	Procedures	Instruments	Activity Title (Session)
(K) Who would you like to improve your relationship with?			
The discussion focuses on drawing and the way the patient has relationships with his colleagues, the goals include abstract thinking and forming relationships with others.	He guided patients in creating an abstract or realistic design using squares, and as the design progressed, he suggested that they think of a way to relate the design to the design of the individuals sitting near them.	Large mural sheet, scissors, glue glue, small squares of colored paper pre-cut or have patients cut squares.	7- Mural relations "Connections Mural"0
The discussion focuses on dinners, painted desserts, patients' thoughts and attachment to food, often reminiscing about holidays and dinner parties in the past, group members discuss how it looks like to enjoy their meals together, goals include socializing, bonding and collaborating with colleagues.	Face the patients in the place of the large plate in front of them and the small plate next to them, then have the group members paint the dishes on a mural, face them in drawing their favorite dinner on the large plate, and their favorite dessert dish on the smaller plate, ask the patients what kind of eye-catching thing they like to put in the middle of the table and have the participants work on one striking thing together, or choose one individual to design, everyone helps in creating the table cover by choosing the type of shapes that You should draw, for example patients may choose the dotted shape and everyone draws the dotted shape where they sit until the background of the page is filled and the mattress is complete.	Wall painting, flomaster pens, wax colors, oil pastel, small paper plate and large ones.	8- Dinner "The Dinner Mural".
The discussion focuses on each individual's preferred location and the locations where patients placed influence relationships. Ask group members about the reasons behind their choice, goals include exploring	Direct patients in drawing their favorite place, give them a glimpse that this place can be inside the house, for example, or a place where you spend a vacation, a shop or a theater, when the drawings	Mural, flomaster pens, wax colors, oil pastel	9- Favorite place "Favorite Place".



Discussion	Procedures	Instruments	Activity Title (Session)
recreational activities, broadening one's horizons about future possibilities, and sharing and forming meetings with fellow participants in the experiences that raise self-esteem and increase positive emotions.	are complete, ask the group members to check the mural, and to put an impact relationship (right or wrong) near one place, other than the place they like to visit or try.		
The discussion focuses on drawings and images, and the way they represent a warm welcome to new patients, helps group members participate with their contributions to the mural, and their ideas about working together, goals include socializing, collaboration, problem solving and connecting with others.	Ask group members to work together on drawing or cutting shapes, symbols, pictures and words that welcome newcomers to the group, examples include: smiling faces, suns, flowers, trees, people holding each other's hands, and the word "welcome" written in an ornate way.	Mural, flomaster pens, wax colors, oil pastels, glue, scissors, magazines.	10 - Welcome Mural " Welcome Mural".
The discussion focuses on reactions to the entire mural as well as the similarities and differences between hand designs, celebrating the uniqueness of each individual who may be searching. Goals include social communication, cooperation, unity and cohesion among group members.	Direct the patients to put their hands on a sheet of paper and then draw them (walk on the border with a pen fluomaster) and then ask the group members to fill in the drawings with colors and designs, have them cut the hand drawings and then put them on the mural so that everyone's hand is touched, ask the participants to work together in a title for the mural.	Mural, flomaster pens, wax colors, oil pastel	11 . Unity.
The discussion focuses on the type of face drawn, its expressions and posture, discussing how the situation may represent an individual's readiness or unwillingness to face problems and challenges and act. Goals include self-knowledge and exploring attitudes towards recovery.	Discuss the expression: "bury your head in the sand", this expression moved to human behavior in the early 1600 AD, referring to the belief that the ostrich bird hides in the sand in the belief that it will not see because they cannot see, in fact and on the other hand when they do this they consume sand	Mural, flomaster pens, wax colors, oil pastel	12. Confronting Issues

Discussion	Procedures	Instruments	Activity Title (Session)
	<p>and gravel to help their digestive system, it is clear that it means (the saying) retreat or withdraw and not allow the individual himself to face problems and responsibilities, by pretending not to recognize responsibilities and pretending not to see the dilemma. Then provide the patients with drawings of the heads with white faces (empty) or have the patients draw them themselves, the face of the patients in filling the faces so that the patient represents himself in one way or another, ask the patients to cut the heads (work in a circle curved forward subject so that the adhesive tape cannot be seen from the front) and then have the patients work together in drawing a layer of sand spread across the paper lengthwise, at the end ask them to take their faces and put them somewhere related to the sand either On or under sand.</p>		
<p>Involving socializing, increasing communication with colleagues, focusing and solving problems, discussion may center on working together, and exploring how the home is placed in the group setting.</p>	<p>Copy copies of drawings by artists such as Claude Monet and Edward Manet These copies should be sketches, unfilled line drawings, patients are given copies and art books and asked to fill in the drawings of the copied scenes and shapes in color They can use art books as inspiration or guidance and then ask them to cut their pictures so that they are left with the main</p>	<p>Large sheet paper, flomasters, wax colours, oil pastels, duct tape, art books focusing on well-known groups of artists such as the Impressionists (pioneers of influence).</p>	<p>13- Celebrity Artists Mural "Famous Artist Mural"0</p>

Discussion	Procedures	Instruments	Activity (Session)	Title
	image on the page, for example: Person, home, garden. Participants are then asked to stick a large urban painting on a chick, the final step for group members is to draw a background for their photos.			

### Notes

1.

- This project is ideal for a group where members:
  - Have known each other for a brief time
  - Can be flexible
  - Feel comfortable collaborating to enrich their experience and potentially foster an environment focused on footprints.
- "Mandala," a Sanskrit word for circle, is utilized in art therapy groups to help participants:
  - Concentrate
  - Reduce stress
  - Engage in therapeutic activities
- This project originates from one presented to patients at the Center for Medical Art Therapy at the University of Brincaton by Certified Art Therapist Jill Gardner and documented in \*A Practical Art Therapy\* (Buchalter 2004).

### Acknowledgement:

"The authors extend their appreciation to the Deanship of Research and Graduate Studies at King Khalid University for funding this work through Large Research Project under grant number RGP2/250/45

### Reference

1. Ahmed Mohamed Ali Amer, 1972, Diagnostic study of the drawings of a group of psychiatric patients, Master Thesis, Faculty of Education, Department of Art Education, Helwan University.
2. Hamed Abdel Salam Zahran, 1980, Psychological Guidance and Counseling, World of Books.
3. Alien, P.B, 1992, Artist-in residence: An alternative to «clarification» for art therapists, Art Therapy Journal of the American Art Therapy Association 9, 1.
4. Alien, P.B, 1995, Coyote comes in from the cold, The evolution of the open studio concept/ Art Therapy, Journal of the American Art Therapy Association 12, 3.
5. Alien, P.B, 2001, Art making as spiritual path, The open studio process as a way to practice art therapy/ In J.A. Rubin (ed) Approaches to Art Therapy, Theory and Technique (Second edition). Philadelphia, PA: Brunner-Rutledge.
6. Alien, P.B, 2008, Commentary on community-based art studios, Underlying principles, A Therapy: Journal of the American Art Therapy Association 25, 1.
7. Block, D Harris, T. and Laing, S, 2005, Open studio as a model of social action: A program for at-risk youth/ Art Therapy, Journal of the American Art Therapy Association, 22, 1, 32-38.
8. Buchalter, Susan, 2004, A Practical And Therapy, London: Jessica Kingsley Publishers.
9. Cahn, E, 2000, Proposal for a studio-based art therapy educa- tion/ And Therapy, Journal of the American And Therapy Association 17, 3, 177-182.
10. Case,caroline and dally, tessa, 1992, the handlook od art therapy , London , atavistoc l/ rout ledge
11. Corsini, raymod, j, 1981, handlook of innovative, psychthrapieo, New York,john wiley&sons.

12. Coleman, m. anderew, 2000, a dictionaly of psychology,oxford university press.
13. Deco. S, 1998, Return to the open studio group In S. Skaife and V. Huet (eds) Art Psychotherapy Groups, London: Routledge.
14. Frost, R, 1916, The Road Not Taken, The Mountain Interval New York, NY, Henry Holt, and Co.
15. Hayes, Steven D., Strosahl, Kirk D. and Wilson, Kelly G, 1999, Acceptance and Commitment Therapy. New York, Guilford Press.
16. Lesley Jackson, 2011, 20th Century Pattern Design, Princeton Architectural Press, p.208.
17. Landgarten,b,Helen, 1981, clinical art therapy, a comprehensive guide , new york , brnnerl/mazel, publishers .
18. Link, A.L, 1997, Group Work with Elders, Sarasota, FL: Professional Resource Press.
19. McGraw, M.K, 1995, The art studio, A studio-based art therapy program/ Art Therapy: Journal of the American Art Therapy Associa- tion 12, 3, 167-174.
20. McNiff, S, 1995, Keeping the studio, Art Therapy: Journal of the American Art Therapy Association /2, 3, 179-183.
21. Moon, C.H, 2002, Studio Art Therapy, Cultivating the Artist Identity in the Art Therapist. London, Jessica Kingsley Publishers.
22. Moss,debrah, 1993, art therapy for young children a review of the research and literature , California state university , long beach, ed 695.
23. Naumburg,Margaret, 1987, d ynamicly oriented art therapy :its prineiples and practice , second ed, Chicago,magnolia street publishers .
24. Philip B. Meggs, 1992, Type and Image the Language F. Graphic Design, John Wiley& Sons, Inc., New York, P. viii.
25. Rubin,judih, 1984, child art therapy ,second ed,new yourk , van nostrand renhold:
26. The art therapy: <http://ww.atcb.org/whatio.htm>.
27. Vick, R. and Sexton-Radek, K, 2008, Community-based art studios in Europe and the United States: A comparative study/ Susam I. Buchalter " Art Therapy Techniques and Applications, Art Therapy: Journal of the American Art Therapy Association 25, 1,4.
28. Wadeon,harriet, 1987, the dynamics of art psychotherapy, New York , john wiley & sons inc.
29. Wix, L, 1995, The intern studio: A pilot study/ Art Therapy: Jour- nal of the American Art Therapy Association 12, 3, 175-178.
30. Wix, L, 1996, The art in art therapy education: Where is it?5 Art Therapy: Journal of the 4 mm can An Therapy Association 13, 3, 174-180.