Street children in Mexico and the intervention of Art Therapy as a psychosocial perspective and model of social action

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‘No man is an island, entire of itself; every man is a piece of the continent, a part of the main. If a clod be washed away by the sea, Europe is the less, as well as if a promontory were, as well as if a manor of the friend’s or of thine own were: any man’s death diminishes me, because I am involved in mankind, and therefore never send to know for whom the bells tolls, it tolls for thee’. (Hemingway 1940, p 4)

This paper will show that our profession is shaped by context, or in other words, the reality of the situations in which we find ourselves. As art therapists, we have a commitment to our social context and it is our duty to respond to any specific requirements. Nowadays we live in a global, economic recession whereby political conflicts are rife and natural disasters and world poverty are on the increase. This paper will describe the phenomenon known as 'street children', which is present in several countries around the world, with the main focus being on those in Mexico. It will also attempt to answer the following questions: why are there street children in Mexico and how is Art Therapy a relevant model of intervention?

It is essential to highlight the difference between ‘children on the streets’ and ‘street children’. ‘Children on the streets’ refers to children who normally work or spend most of their time on the streets whilst maintaining a bond with their family, whereas ‘street children’ refers to children living on the streets who have broken all familial ties.
Mexico is a country located in the American continent bordered by the United States in the north and Guatemala in the south. When we observe children in any city of Mexico begging we must ask: where do these children come from and why are they working in the streets when they are supposed to be at school? It is undeniable that Mexico's economic and psychosocial situation is one of the main factors for the occurrence of the 'street children' phenomenon. Mexico is one of the most populated countries in the world where the minimum wage per day is the equivalent to £3.35. To add to that, one must acknowledge that Mexico has a corrupt government which neglects those most vulnerable in society and many intervention programmes have revealed that a large proportion of the population are living in a state of hopelessness.

It must be noted that many Mexican families are large mainly due to their religious views, the lack of contraceptive programmes, early pregnancies, and the chauvinistic attitude common in Mexico. In addition, within many families there are problems such as domestic abuse, drug and alcohol abuse, emotional, sexual and physical abuse. Other factors to consider are: the occurrence of natural disasters, the migration of the indigenous population to the cities, and the narco-trafflc war, leaving the whole country in a state of constant instability. Whether a country is experiencing a natural disaster or a war, it is often the children who are affected first.

Over the generations the Seligman concept (1975) of ‘learned helplessness’ has been consolidated. This concept refers to a state of loss of motivation, hopes and dreams and of the certainty that nothing good is going to happen. The result of this is that people fulfil their own prophecies of helplessness that have been passed down to them from generation to generation, leaving them helpless in the face of an oppressive system. A good example of learned helplessness is the Luis Buñuel (1950) film ‘The forgotten ones’, which describes the poverty and misery faced by many, as well as showing how impossible a task fighting marginalization is. It is being born into these grim conditions that a child becomes part of the Mexican working class. In the words of Galeano (1971) it 'is the curse of the multitudes condemned to exist as beasts of burden' (p. 17). According to Freire, (1970) the system is imbalanced and the distribution of welfare unjust, resulting in the workers becoming oppressed by the chains of the system into where they born and now live.

It is a known fact that children must work to help support their family economically, and this is especially true within the working class families of Mexico. When children begin working on the streets, they are not only exposed to the risks of becoming a 'street child' (living in the streets without any ties or connection to their family) but also to the dangers, which are associated with
the streets of Mexico: gangs, violence, drugs, prostitution and so on. Generally, a child does not automatically become a ‘street child’ at a fixed age; it is a progressive journey and a consequence of that child’s social, economic and psychological situation.

When children begin their life on the street, they discover ways to ensure their survival. They often experience the following processes:

- **Universalization** - they are able to see themselves in the eyes of the other street children, who they view as equals, as they have suffered similar problems.
- **Ownership of their life** - they take control of their own life, that is, not allowing anyone to tell them what to do.
- **Association with a gang** - they become part of a gang which allows them to share the same identity, language and so on with other members whilst at the same time excluding the ‘adult-world’ around them.

But reality reveals that the lives of these children are in constant danger. They sleep on the streets, in trains and underground stations, in sewers and under bridges. They cover themselves with newspapers and cardboard to ‘protect’ themselves from the cold temperatures at night and live with the constant fear of sexual abuse from paedophiles and members of other gangs. They live in unhygienic conditions with no possibility of receiving medical attention if required. Many of them beg in order to buy food, while others work as shoe cleaners, car cleaners or fire breathers. Others work in the markets, carrying customers’ groceries or selling sweets at traffic lights.

It is known that once a child is on the streets he/she starts to consume drugs and other substances: they inhale cement dust, gasoline and other substances to avoid feeling the cold and hunger. This action is known in Mexican street children’s’ slang as ‘Chemear’. A ‘chemo’ is a dosage of a substance to be inhaled. The drugs help them avoid their difficult conditions but result in violent behaviour, and in the long term, brain damage. A ‘chemo’ is an open door for the consumption of harder substances such as alcohol, cocaine, or crack cocaine.

When one thinks of street children, one thinks only of adolescents and not of the many young children (aged between 2-3 years) living on the streets. Many street children have grown up on the streets, have become delinquents and consequently a problem to society.
The overall consequences of having been a street child include: low self-esteem, mistrust of adults, victim of abuse, illness, bad nutrition, prostitution, early pregnancies, mental issues (as researched and discussed by Martin Baró [1996], who states that the mental issues stem from an unjust social context) and even death.

How should we act?

First of all we have to ensure the survival of these children. In Mexico the quote 'we can't educate an empty stomach' was inspired by Abraham Maslow's (1943) pyramid of basic needs and shows the first step to ensuring their survival. It is important to highlight that Art Therapy - as an intervention - cannot be used if a child's life is in constant danger. For that reason, my intervention occurred in a small community of ex-street children on the outskirts of the city of Guadalajara (Mexico's second largest city). This organisation runs a programme based on Paulo Freire's (1970) ‘psychology of the liberation’.

In 2003 I collaborated with this community as part of a psycho-social project. My role as a psychologist consisted of assessing each child in the community; on many occasions the ages of the children were unknown. I also carried out a community intervention as part of an inter-community mediation (as there often exists rivalries amongst the children and violence is common).

In 2011 I collaborated again with this community as a trained Art Therapist, offering a variety of activities and exploring the impact of Art Therapy both in and throughout the community. A group of children were referred to me and, depending on their age and individual needs, I worked with the children by holding both group and individual sessions. The group was mainly made up of pre-adolescents who were surprisingly keen to be involved in such a programme. They were very grateful to both the community and myself for being permitted to ‘try something new’. When faced with a variety of art techniques, the group had no difficulty getting involved. However on the occasions that the sessions were free, with less instructions being given, they felt overwhelmed and said that they felt the experience was meaningless. It was, however, dealing with the violence that was the main challenge I faced as a professional.

Due to the lack of resources that the children have and their difficulty with accessing art materials, we offered alternative materials (cardboard, news paper, paper maché, clay, stones, sand, leaves, seeds) alongside basic materials, crayons, pencils, erasers, rulers, sheets,
coloured paper [sometimes], coloured pencils. Part of my intervention also included dealing with the response to this new ‘community setting’. In order to be a professional working alongside a community, it is important to set clear boundaries with regards to your identity as an art therapist especially when you find yourself working outside the usual ‘setting’.

Working as a professional within a community, I had to be both flexible and adaptable. It was not possible to maintain a pure clinical setting, especially with the resources and infrastructure available. For example, sometimes I had to work in the middle of the basketball court or in the middle of a small field.

Using various images and pictures that I gathered (often depicting violence, with many showing scenes of drug consumption, prostitution, abuse by the local authorities and so on) the children were able to build their own narrative in order to show the way of life on the streets. This task gave meaning to the group and, through this narrative, the children could understand what the others had experienced, many discovering that the others had experienced the same, that is, abuse or drug consumption.

On another occasion, I had a session arranged with a three and a half year old boy called Edu. I decided to enquire about his whereabouts when he was late for the session. I discovered that he was washing his clothes by hand and was struggling because he was unable to hang them on the clothesline. I helped him, forgetting about the session we were supposed to have, because this interaction between us was a way to both help and engage him.

Finally, the issue as to whether Art Therapy has anything to offer communities of street children will be discussed.

Hocoy (2005) says ‘one way in which social action and art therapy are linked is through the versatility and power of the image. Social action is ultimately predicated on the relationship between personal and collective suffering, and the image has the unique ability to bring to consciousness the reality of a current collective predicament, as well as the universality and timelessness of an individual’s suffering. Moreover, images can concurrently heal personal-collective wounds while demanding a response to injustice’ (p.1)

From my experience, Art Therapy at a basic level (as a way of exploration) can act for street children as:
• A mirror - a way for the child to see themselves, their situation and the oppressive society in which they live.

• An act of recognition in others, whereby they can observe and see themselves in the other.

• A moment of becoming aware of their current situation, that is, a break away from the idea of learned helplessness and an opportunity to take control (empowering).

As a second level of intervention - Art Therapy as providing a boundaried space - it:

• Can allow the children to explore their own experience in depth

• Deepen the bond between the children because both the Art Therapy group and the community can help the children to find meaning, hope and a secure base. When children feel secure they start to explore the world (Bowlby, 1988). Street children can change their view of the outside world and view the community as a friendly space.

• Can provide both basic support and in depth support through the relationship between the Art Therapist, the image and the child (or group), as the art therapy process is a way to learn about secure relationships and build attachments with adults and objects (Winnicott 1971).

• Empower the children through the materials and the elaboration of the image. According to Skaife (1995) the nature of Art Therapy is radical because it is about empowering others. Through art, people find their own ability to do and create.

• Help the children construct a narrative of their own experience. This is helpful because the image can be a tool to help children open up in a way words can’t. It can also be a tool for finding words and understanding. I witnessed first hand how most of the children took control of their lives and decided to embrace their futures. Some of them, as time went on, decided to work as ‘Street Carers’ in order to help other children fight and overcome life in the street.
As a way of concluding I will add that in our profession, due to the nature of our traditional clinical setting, that is working closely on a one-to-one basis, we can feel disconnected and distant from the context to which our clients belong. However whatever the setting in which we work, in order to gain a better understanding of our clients and what they need, it is important that we remain aware of both their background, that is, where they come from, as well as the environment in which we will be working with them. In the words of Kaplan (2005): ‘we cannot separate the people we treat from the cultural settings in which they live and by which they have been influenced’ (p. 2).

Art Therapy is not one single approach but rather it is a combination of approaches with different ways of doing, knowing, thinking, looking, listening, all of which depend on experience, cultures, and ethics.

But like Hemingway (1940) who said ‘No man is an island… every man is a piece of the continent’ (p4) it is our duty to keep building our profession according to necessity and the changes in our reality.

**Biography**

Marcela Andrade del Coro holds a degree in Psychology (University ITESO 2002) and a Master degree in Art Therapy (University of Barcelona 2007). For ten years she has worked in Social projects in Mexico and Spain with people in vulnerable situation including street children, women victims of gender violence, foster children, and older people. She is an Invited Lecturer at Queen Margaret University in Edinburgh, for the Masters program in Art Psychotherapy, and also at the Lviv training program in Art Therapy in Ukraine.

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