

# ART THERAPY IN SYSTEM OF EXPRESSIVE THERAPIES

(overview essay)

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**Abstract:** *This research is aimed at defining art therapy in the system of expressive, artistic therapies in the context of curative education. Based on other researches it focuses on effective factors of creative arts. This research describes individual and social goals, effects, methods and interventions in art therapy. It also describes research in the field of art therapy.*

**Keywords:** *expressive therapies, creative therapies, art therapies curative education*

## 1 Art as therapy

People have expressed their inner world by the means of art since the dawn of time; people express their emotions and desires, relationship to their surroundings and spiritual values. The value of the creative expression for the life of man can be already seen in the cave paintings. Art became part of personality. It allows people to communicate with their surroundings, reveal their emotions, integrate their personality and express their opinions.

Art therapy, music therapy, drama therapy, poetry therapy, dance therapy belong to so called creative arts therapies because they all have roots in arts and theory of creativity. Together with other therapies that use self expression they are also called 'expressive therapies'. Expressive therapies are defined by the use of creative arts, music, drama, dance, motion, creative writing, and playing games, playing in sand (in the context of psychotherapy), consultations, rehabilitation or medicine. If during the treatment different kinds of arts are combined the term expressive therapy is sometimes identified as integrating (Malchiodi, 2014).

According to Malchiodi (2014), the term non-verbal therapies used in the context of art, music, dance and motion therapies, is incorrect. These therapies can be both verbal and non-verbal. In most cases, the cornerstone of therapy is a verbal communication of thoughts and feelings.

Kováčová and Guillaume (2014, p. 87) prefer the term artistic therapies; drama therapy, psychomotor therapy, art therapy, music therapy and bibliotherapy are classified as artistic therapies. According to authors the cornerstone of these is: *“Application of arts in different forms and helping the person whose living is the key to the therapeutic process. The goal of the art therapy is to understand and help client with solving the problem during his life.”*

Due to positive effect of the art on the psychological and physical health different kinds of expressive therapies are used by all kinds of experts: psychotherapists, psychiatrists, psychologists, curative and special pedagogues, and others. Art and expressive therapies from the curative pedagogics point of view are explained as an educational-treatment process, which uses different forms of art as a means of treatment and rehabilitation. From this point of view, expressive therapies do not have to be aimed at the problems of the individual person; they can be used as a tool of education, prevention, knowing oneself, and personal growth.

Art therapy is a therapeutic method which uses images to simplify the communication in therapeutic environment (Case, Dalley 1992 In Luzzatto, 2014). It is possible to describe art therapy with targeted usage of visual and creative materials during interventions, consultations, psychotherapy, and rehabilitation. These are used with people of different age categories, families and groups (Malchiodi, 2014).

For its purposes art therapy uses cathartic and therapeutic effect of creative art. Artists were the ones who pointed out that art can be used to heal psychological disorders. During the course of the twentieth century (with the development of psychotherapy), art therapy is being used as a treatment method. It has positive effects on the psyche of a person, and relationships of people. It allows them to regain lost balance.

## 2 Effective factors of art therapy

German author Ingrid Riedel (in Grohol, 2009) identified a few effective means of art therapy. Among them there is the process of creation, process of symbolization, process of conversation, and therapeutic relation.

The process itself has a healing potential, which is based on the concept of sublimation. Creative process of clients is activated during art creation. This process can later be used by the clients during the course of their life outside of therapy to help them build their self-trust and independence. Visual illustration also allows the

problem to be materialized and externalized. The process of work with an artifact allows clients to step away from the problem and thus by this process allows them to verbalize the problem more easily (Grohol, 2009). Art visualization helps people to unite opposites and to overcome dullness (via additional colors, forms, etc.). It can support the process of integration in a significant manner.

In art therapy, during the process of symbolization, it comes to the expression of emotional feelings, inner conflicts, and reflections of relationships to other people. These gain the visual representation by symbols. Often the subject is of an intimate manner, which using symbols can be disclosed; symbols protect clients from direct confrontation. On the other hand, this allows clients to handle expressed matter on the level that is acceptable to them. On an acceptable level, clients are able to contact with their own feelings, their relations to other people, and with feelings of other people. These become easier to process and is a very important support in requested process of mentalization.

Mentalization process is supported by discussion after the art creation process is finished. A group can support discussion and interpretation of art. Competence of clients' self-regulation needed to process discussed matter on acceptable level is respected during the process of discussion. Art therapist is perceptive to the self-regulation of the client. Using questions and one's own interpretations the therapist tries to focus on subjects which both client and therapist are prepared to process.

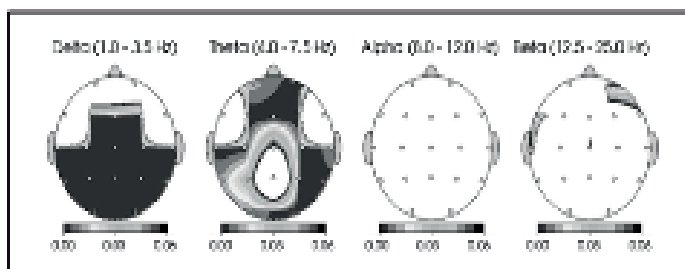
Process of discussion and interpretation is saturated by empathic atmosphere (which is willing to accept). It is supported by self-description and confession of the client about creation of the art product and of its meaning to the client, as well as by complementary questions, observations, associations, and interpretations of both therapist and group. They both allow overlap with of the process with the life story and problems in it (Grohol, 2009).

Art therapy with the help of the outlined efficient factors could fulfill the goals of resilience, help to discover and strengthen inner sources of clients, and support their auto-sanitation mechanics. In the process of art therapy intervention, it is possible to create sanitation therapeutic relation, which will give the experience of safety to the client and will create the environment for recreating the contact with one-self and with the own inner world of clients.

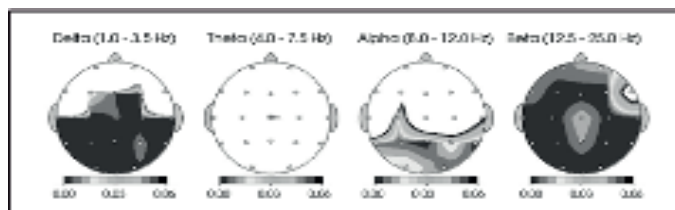
Thanks to the modern visualization methods, during the course of the last decades the perception of human reactions to the art and its relation to the brain functions have advanced. Researches from the long term perspective point of view are aimed at the relations between art, science, and medicine. Primarily, they focus on systems that take part in perception of the art; systems that take part in processing music and visual arts – the relation between art and emotional reactions (Staricoff, 2004). Lusebrink (2004) described, in a very detailed manner, basic structures and brain functions that are related with the creative experience and level of expression. He

outlined the possibilities of application of that information in the process of art therapy.

Belkofer's and Konopka's research (2008) indicates that measuring electrical activity of the brain using electroencephalogram (EEG) can be a useful and innovative tool for the art therapy research. Participants' brain activity was measured during the research; an hour after they finished drawing. Pair t-tests were used to compare data acquired from EEG both before and after the process of creative art. Results proved that there was a statistically significant difference ( $p < 0.05$ ) between neurobiological activity in the brain during the process of drawing and during the rest. Higher frequency ranges (alpha and beta) showed increased rate. Lower frequency rates (delta and theta) went into decrease. Results of the research outline using art therapy to induce changes or normalize the brain functions, both leading to improvement of the wellbeing of patients.



**Figure 1.** FFT Absolute Power Paired t-Test (Belkofer, Konopka, 2008)



**Figure 2.** FFT Relative Power Paired t-Test (Belkofer, Konopka, 2008)

### 3 Goals and effects of art therapy

The main goal of art therapy is, by the means of artistic media, to therapeutically affect the personality of a person, the inner integrity, provide the contact with social environment and with one-self. Goals of art therapy can be separated into individual

and social goals, and group goals. Individual goals cover goals that are part of a person's individuality. Social and group goals are derived from relation of person to their social environment; they are related to filling their social needs.

| Individual AT goals                                                                                                                                                                                                                                                                          | Social AT goals                                                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>• express emotions, feelings, conflicts</li> <li>• self-understanding, self-assessment</li> <li>• building confidence, autonomy</li> <li>• developing creativity, imagination</li> <li>• activation, motivation</li> <li>• relaxation etc.</li> </ul> | <ul style="list-style-type: none"> <li>• communication, cooperation</li> <li>• appreciation and support</li> <li>• tolerance, empathy</li> <li>• sharing and problem solving</li> <li>• developing social relationships etc.</li> </ul> |

**Figure 3.** Individual and social goals of art therapy (Liebmann, 2005)

Art therapy satisfies the need to be productive and creative by offering space for expression. In the group, art therapy also supports creating relations between clients. Especially during the first phases of group work it may be the means of communication of clients' emotional feelings; art therapy, in this case, is safer for clients and less demanding. Similarly to group therapy, individual art therapy offers safe space and boundaries to relief painful emotions and inner conflicts. Doing so, art therapy provides emotional catharsis, psychological relief, and lowers inner tension. Art therapy can help in solving problems by offering space to clients to settle thoughts and experiences, and at the same time it allows experiments and transformation (Kaplan in Van Lith; Fenner; Schofield, 2010).

In the field of health care, art therapy supports the quality of life, reduces the perception of disease, pain, and physical disorders. It serves as a way to reduce stress, to improve mood, and to increase (or sustain) cognitive functions. Malchiody (2013) pointed at several important researches from the field of medical care which documented and proved the effectiveness of art therapy used while treating different types of diseases.

| Authors                                                                | The results of research studies                                                                                                                                                                                                                                             |
|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Monti et al., 2006;<br>Nainist et al., 2002;<br>Svensk et al., 2009    | Several studies demonstrated that art therapy enhances the psychosocial treatment of cancer, including decreased symptoms of distress, improved quality of life and perceptions of body image, reduction of pain perception, and general physical and psychological health. |
| Bar-Sel, 2007                                                          | Studies indicated a reduction of depression and fatigue levels in cancer patients on chemotherapy.                                                                                                                                                                          |
| Gabriel, Bromberg,<br>Vandenbovenkamp,<br>Kornblith & Luzzato,<br>2011 | Art therapy strengthens positive feelings, alleviates distress, and helps individuals to clarify existential questions for adult bone marrow transplant patients.                                                                                                           |
| Rollins, 2005                                                          | Research with children with cancer indicated that engaging in drawing and painting is an effective method for dealing with pain and other disturbing symptoms of illness and treatment.                                                                                     |
| Beebe, Gelfand &<br>Bender, 2010                                       | Research on art therapy with children with asthma indicated that it reduces anxiety, improves feelings of quality of life, and strengthens self-concept.                                                                                                                    |
| Levine-Madori, 2009;<br>Elkis-Abuhoff et al.,<br>2008                  | Evidence indicated that art therapy and other creative arts therapies stimulate cognitive function in older adults who have dementia or related disorders and may reduce depression in those with Parkinson's disease.                                                      |
| Walsh et al., 2007                                                     | Art making may reduce anxiety and stress reactions as measured by cortisol.                                                                                                                                                                                                 |

**Figure 4.** The results of selected research studies (Malchiody, 2013)

Staricoff (2004), based on the analysis of more than three hundred references from medical literature (which were concerned with effects of art in medical healthcare), emphasized the crucial meaning of art in this field: causing positive physiological and psychological changes; decreased drugs consumption; shortening span of staying at the hospital; increase in work satisfaction; supporting the relationship between patient and doctor; overall increase of mental health; and development of doctors empathy.

## 4 Art-therapeutic relationship

Genuine, therapeutic and curative educational relationship may help to achieve new inner corrective experience. This can be understood as the main means of treatment. That is the reason why from the art therapists' perspective the approach to clients with relations disorder is the center of attention. It is defined by effort to empathically understand clients and accept them while keeping congruence. During the process of art therapy the latter is expressed by consistently reflecting the needs of clients and reacting to them. Hašto (2006) wrote that personality of therapist helps to process dysfunctional inner models and previous experiences which are connected

to negative emotions. Therapist prompts development of metacognitive level. In this case, empathy, trust, acceptance, congruence, experience of safety, good work connection, corrective experience, holding and containing have therapeutic effect.

According to Grohol (2009, p. 210) therapeutic relationship in art therapy is a soil in which the change is happening, catalysed and registered. Author is concisely comparing it to the playground where the change is happening; although the playground is an independent active factor of therapeutic change. Art-therapeutic relationship is specific due to the presence of a third and very important creative product. Creative product allows particular transmission, which is called lateralized transmission or transmission of sacrificial lamb.

Lateralized transmission in art therapy allows a shift from classic transmission of clients' past conflicts from the therapist to the art material. By this way therapist does not have to act in two different roles. Clients are progressing and becoming more sapient after finding similarity between drawn figure and their own past experience. Regression can be part of the process in which client is emotionally re-living old conflicts and traumas. Real art product keeps clients' perception of reality, allows movement in between of regression and correction (within allowed range). It allows returning back to reality from experience. By this way, act of understanding followed by relief and flickering of pathological symptoms can happen (Slavík, 2003).

Lateralized transmission allowed by art therapy keeps clients' trust in the therapist and a feeling of safety in therapeutic relationship. It is also possible for the healing process not to be dependent on the ability of the therapist to work with verbal transmission.

## **5 Art therapy methods and interventions**

Art therapy methods are described and categorized in different ways. The question of its methods is not clearly answerable from this point of view. Clarification of this question is needed for the purpose of practice. Art therapists often work in multidisciplinary teams; it can be expected from them to clearly describe methods and principles of their work, mainly to avoid duplicity in clinical approaches and care.

Luzzatto (2014) held an opinion that it is necessary to distinguish between art therapy method, which is singleton and many possible interventions, which can be arranged in an interdisciplinary team according to the needs of the client. Art therapists should avoid identifying art therapy methods with a single intervention type. For this reason author creates his own classification of art therapy methods using basic classification of Case and Dalley (1992 cited by Luzzato, 2014).

| The image – making process | The use of the image: types of communication |                      |                |
|----------------------------|----------------------------------------------|----------------------|----------------|
|                            | Intrapsychic                                 | Symbolic/interactive | Inter-personal |
| From art materials         | A1                                           | A2                   | A3             |
| From external images       | B1                                           | B2                   | B3             |
| From inner images          | C1                                           | C2                   | C3             |

**Figure 5.** The art therapy grid (Luzzatto, 2014)

Art therapy can be imagined as a grid. On its vertical axis, there is a process of creativity placed, which is realized based on inspiration created by art material, by external image (an item, any other painting, piece of art etc.) or by inner images (projection of inner world, emotions, conflicts etc.). On the horizontal axis, there is an art therapy method for further work with a painting; here it can be communication on inner level or by the means of symbols or via dialogue with another person. For art therapy, this classification is very flexible (AC1-C3); it can react on different client requirements using different types of intervention.

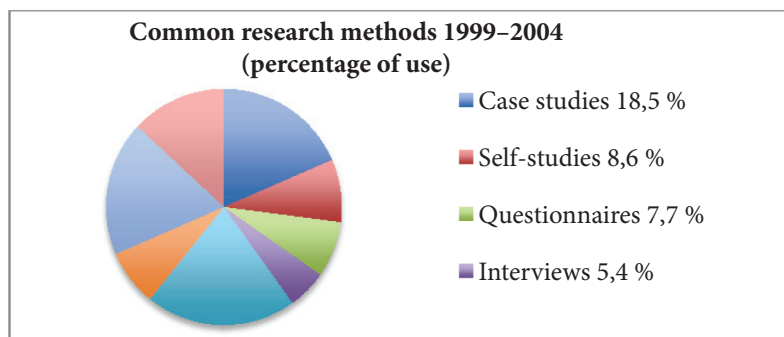
## 6 International art therapy research

Research in art therapy can be separated into three groups; 1. Basic research which builds a theory – theory building research; 2. Practical research; 3. Institutional research. Theory building research is oriented at building of basic theoretical art therapy, seeking answers for creation of building of theoretical pillars of art therapy. Practical research is aimed at finding out effectiveness of different approaches and methods of art therapy that are being used. Institutional research examines different aspects of art therapy as a profession (Deaver, 2002).

Research in art therapy uses both qualitative and quantitative approach; in practice qualitative methods prevail, though. Slayton, D'Archer, & Kaplan (2010) described a research design using analysis of art therapy researches which were carried out during 1999–2007 timespan. They outlined four different types of researches: 1. In-depth and detailed qualitative studies; 2. Single subject pre- and post-test designs; 3. Designs using control and treatment groups without random assignment; 4. Controlled clinical studies with randomized assignment to groups.

Metzl (2008) presented systematic analysis of research methodologies used in an area of art therapy during 1987–2004. Using quantitative research, author identifies eight basic methods of extracting information that is common for art therapy research: clinical case studies, self studies, survey research, interviews, art therapy tests, anthropological research, observation of behavior, and analysis of clients artworks (their percent representation in graph 1). From the available methods the

following were used: ANOVA; quantitative tools (t-test, Chi-square, etc.); correlation (between valuation, pre- / post-tests, and control group); comparison (with other fields, between clients, between tasks, etc.); thematic research; analysis of scores; practical synthesis; content analysis.



**Figure 6.** Common methodology tools used 1999–2004 (Metzl, 2008)

Deaver (2002) grouped numerous research topics into four areas of art therapy: 1. Therapeutic relation; 2. Valuation; 3. Intervention; 4. Art therapy as a profession. Cathy Malchiodi (2009), an internationally recognized professional in the field of art therapy, pointed at missing sufficient scientific evidence to prove effectiveness of art therapy in different areas of intervention; even though there were many researches made. International art therapy community points out more and more the need of broad researches.

## 7 Conclusion

Creative process by itself has therapeutic potential. In the field of curative pedagogics, it is possible to multiply that potential with further therapeutic-educational processing of experience. In therapy, creative expression can be used as a means that opens the way to one-self and one's surroundings. The basic goal of art therapy is, by the means of art materials, to therapeutically affect personality of person and their internal integrity, to mediate the contact with social environment and with one-self. Therapeutic-educational effect is created by the means of creative process, process of symbolization, process of discussion and interpretation, and therapeutic relation. Foreign researches in the field of art therapy uncover a lot of information about reaction of human brain to art and its relation to brain functions as well as effectiveness of art therapy as a therapeutic method. They also outline many future challenges and clearly indicate the need of researches.

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