Research in Creative Arts Therapies: When Counselling and the Arts Meet
La recherche sur les thérapies par les arts créatifs : rencontre entre le counseling et les arts

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ABSTRACT
The focus of this special issue of Canadian Journal of Counselling and Psychotherapy is on the use of arts in counselling. Considerations are given to creative arts therapists and to professional counsellors who use creative arts interventions in their practice. Issues regarding research involving arts practice are raised, and the ethics of practitioners and the ways in which art is part of research are discussed. Studies are presented involving a variety of populations covering the lifespan of children, young adults, and older adults and including Indigenous residential school survivors. Various art practices are also used, including art therapy, music therapy, sand tray therapy, play therapy, theatre creation, writing, and creative practices embedded in Indigenous cultures. The arts are integral to life, and their application in counselling, treatment, and research needs to be done thoughtfully and responsibly. Collaboration among creative arts therapists, artists, counsellors, and researchers can only benefit those we serve. We conclude the introduction with an overview of the 11 articles that make up this special issue.

RéSUMÉ
Ce numéro spécial de la Revue canadienne de counseling et de psychothérapie a pour thème principal le recours aux arts en counseling. On y prend en compte les thérapeutes en arts créatifs et les conseillers professionnels qui ont recours à des interventions par les arts créatifs dans le cadre de leur pratique. On y souligne les enjeux liés à la recherche sur les pratiques fondées sur les arts ainsi que les questions d’éthique chez les praticiens, et on y discute des façons dont l’art peut s’inscrire comme une composante de la recherche. On présente des études portant sur diverses populations, en couvrant les étapes de vie allant de l’enfance aux jeunes adultes et aux aînés, y compris des survivants des pensionnats autochtones. On utilise aussi diverses pratiques fondées sur l’art, notamment l’art-thérapie, la musicothérapie, la thérapie par le jeu de sable, la thérapie par le jeu, la création théâtrale, l’écriture et des pratiques créatives issues des cultures autochtones. Les arts font partie intégrante de la vie et leur application en counseling, dans le traitement et dans la recherche, doit s’effectuer de
façon réfléchie et responsable. La collaboration entre les thérapeutes ayant recours aux arts créatifs, les artistes, les conseillers et les chercheurs ne peut qu’être bénéfique aux personnes que nous desservons. Pour conclure l’introduction, nous présentons un aperçu des 11 articles qui composent ce numéro spécial.

The therapeutic power of art rests not in its elimination of suffering but rather in its capacity to hold us in the midst of that suffering so that we can bear the chaos without denial or flight. (Levine, 1999, p. 31)

In the fall of 2018, the board of the Creative Arts in Counselling and Psychotherapy Chapter of the Canadian Counselling and Psychotherapy Association (CCPA) proposed to publish research in the creative arts therapies. As special projects coordinator, Melody Newcomb was tasked with contacting Dr. Kevin Alderson, editor of Canadian Journal of Counselling and Psychotherapy. He graciously accepted the proposal, and the process of bringing this issue to publication began. Isabel Centeno and Ingrid Wissink answered the call for an editorial team. Ingrid was most helpful in the initial stages of this journey, and her contribution is appreciated. We (Isabel and Melody) have completed this journey, enriched by the experience of editing, supported by Dr. Alderson and his able assistant, Heather Zabawski, and by the work of the authors included in this issue.

The use of the arts in the context of counselling happens frequently: handing a child markers and paper and asking them to draw what they remember, listening with a young person to the lyrics of a favourite song, and witnessing the poetry arising from a person’s grief. Many counsellors may not even consider this to be part of “the arts,” thinking it is merely another tool for expression during the therapeutic journey. However, there is increasing recognition that “engaging with the arts is not just the purview of the talented or the quirky and the arts are proving increasingly vital as an avenue for healing” (Lengelle et al., 2020, p. 1).

Arts as expression is not new; it has been used since the beginning of human history as a medium for communicating thoughts, feelings, and ideas. During the 1930s and 1940s, creative arts therapies became more widely known as helpful for people with mental illness. Professional organizations for practitioners and training programs in the disciplines of art, music, dance movement, drama, poetry, and later sand tray therapy and play therapy were developed (Malchiodi, 2005, pp. 5–6). This rise of professional associations and training programs for creative arts therapies took place in Canada starting in the 1970s. In the hands of a trained practitioner, the arts are employed to meet therapeutic goals and to promote growth and well-being. Within the arts, it is recognized that in the embodied creative process, understanding, growth, and healing are possible (see the appendix for definitions).
We can identify two ways of describing the intersection of the arts and therapy, both of which are valid. One is the use of the arts as an expressive tool adjunct to the traditional talk therapy process. The other is expressive therapy as a wholly creative and curative process with its own particular goals. The role of the arts is different in these two processes, and so are the training and the expertise required of the practitioner.

In the present issue, the focus is on the arts as the primary therapeutic process. The research articulates the results of that process on different populations using a variety of art forms. As in other, less traditional counselling fields, more research needs to be done, but these papers make us proud and grateful to be involved in this visionary editorial project.

The articles presented in this issue challenge the assumption that counsellors and artists are different categories of professionals As Von Stackelberg (2019) wrote regarding the broadening of our future perspectives, “The big realization that’s coming over the next decade is how important creative expression is for health, and that everyone should do some sort of creative work as close to daily as possible” (as cited in Lengelle et al., 2020, p. 1).

The authors of the articles in this issue include counselling professionals who use the arts in their practice, trained creative arts therapists who work alone or with other professionals, and artists who find value in using their art practice to help others. These articles cover most of the lifespan from children to older adults. Mindful of the World Health Organization’s (n.d.) definition of health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity,” the most accepted and person-centred biopsychosocial definition of the term, we invite you to read the work done by these researchers and to explore the possibilities that the arts and counselling can bring to our clients when both disciplines work together.

To begin this exploration, Erin L. Kuri wrestles with issues arising from the intersection of the arts and research in “Ethics in Arts-Based Research: Drawing on the Strengths of Creative Arts Therapists.” These issues include the inherent uncertainty about the creative process, the range of people involved in the research at different capacities, how the arts are incorporated, and the attendant risks involved in blending research and the arts. She points out that creative arts therapists are trained in the ethical use of self with clients, art materials, and works produced, and therefore they have a great deal to offer any research effort.

Creative activities and play are second nature to children. Beer et al., Simmons, and De Little turn their attention to ways to use these activities intentionally for skill development and healing. In “Prosocial Behaviors in a Creative Arts Day Camp for Children With and Without Special Needs: A Mixed-Methods Study,” Laura Beer, Mary Andrus, and Jordan Hubchik demonstrate the use of art and music therapy to achieve treatment goals in evaluating the impact of participation in a day camp on the development of prosocial skills in special needs children.
Students of art and music therapy, faculty, and clinical supervisors formed the research team, and the creative arts were used as a primary therapeutic intervention.

Play is the way children express their inner world, and Johanna Simmons has chosen to draw upon synergetic play therapy in “Moving Toward Regulation Using Synergetic Play Therapy.” This approach combines interpersonal neurobiology, attachment theory, nervous system regulatory principles, mindfulness, physics, and the self of the therapist. By combining this model with child-centred play therapy, the author draws on two case study examples to demonstrate the efficacy of this combined approach in making gains in observable self-regulatory behaviours and in increasing a sense of self-awareness and personal identity.

Becoming aware and transforming old defensive patterns is essential for personal growth. In “Using the Sand Tray in the Context of the Latest Research in Neuroscience to Transform Clients’ Defences,” Madeleine M. De Little explores the latest research in neuroscience using the sand tray. She documents an example of how conscious and unconscious images arise in the sand, allowing for the client’s projection and transformation in attunement with the therapist and for the creation of new metaphors to occur in this secure attachment relation.

Smallwood and Briks et al. describe the impact of the expressive qualities of the arts in the face of disease and injury. Prompted by Ellen Smallwood’s lived experience with epilepsy, she, Stephen Legari, and Signy Sheldon explore the use of group art therapy to address the psychosocial element of epilepsy treatment in “Group Art Therapy for the Psychosocial Dimension of Epilepsy: A Perspective and a Preliminary Mixed-Methods Study.” People living with epilepsy experience stigma and social barriers, and art therapy provides a way of working when talk therapy is too hard or too painful. The group also took place in a fine arts museum in the community, inviting dialogue and collaboration among systems of government, health, and education that may represent a shift toward more inclusion.

Alan L. Briks, Monica L. Wiebe, Sandra P. Hirst, E. Aoife Freeman-Cruz, Carole-Lynne M. Le Navenec, and Gerrit Groeneweg draw our attention to people living with traumatic brain injury (TBI), a major public health problem caused by a fall or a car accident. “Drawn Together Through Group Art Therapy: Intervention Responses of Adults With a Traumatic Brain Injury” explores the creative visual expressions and effects of an adult TBI in an art therapy group. The non-verbal aspect of artmaking is seen as an effective treatment because the effects of head trauma make it difficult or impossible for people with a TBI to convey those experiences verbally. The authors offer qualitative and quantitative research findings with positive outcomes in anxiety reduction, social engagement, promotion of feelings of well-being, problem solving, and experience of community.

As artists, Cook and Borgen as well as van der Vennet and Cassella explore the impact that the creative process has on creators, including how artmaking reflects creators’ lived experiences. Christopher Cook, a playwright and a counsellor,
together with William Borgen, offer “Give Me Your Hands: Therapeutic Experiences of Collective Theatre Creation in Vancouver’s Downtown Eastside,” which is focused on a collective theatre creation developed with members of a marginalized community. With participants as co-inquirers using their lived experience of the process, Cook and Borgen present their findings regarding the social connections established through collaborative artmaking, puppetry as a means to build therapeutic relationships, and the embodied expression inherent in theatre creation. This article raises issues inherent in arts as research and will have particular resonance for counsellors exploring creative arts practices.

Renée van der Vennet and Caitlin Cassella introduce the MARI Mandala Assessment Research Instrument as a clinical tool for treatment planning and evaluation in “Do Mandalas Exhibit Archetypal Patterns Based on Kellogg’s MARI? A Pilot Study.” Developed from Jung’s work with archetypal patterns and on the ways that these archetypes show up in images on mandalas, this study examines a series of mandalas created by van der Vennet to see if the images corresponded to issues in her life. Her conclusion lends support to the use of the MARI in the hands of trained clinicians as an effective tool for treatment planning and evaluation.

The next two articles are about storytelling. Describing the integration of the arts in the healing process of residential school survivors, Honoré France explores the intersection of counselling, creative arts, spirituality, and Indigenous culture in “Creative Arts and the Indigenous Healing Circle Within an Indigenous Context.” He shares the stories of residential school survivors in a healing circle. They use creative expression not only as a tool for healing but also as an expression of their culture and their spirituality. The integration of the arts in everyday life in storytelling, ritual, and woodcarving situates the healing capacity of the arts within the Indigenous context.

Focusing on writing expression in a grassroots community group in which older women write about memory and legacy, Kelly J. Mills, Jennifer J. Nicol, and M. Shaun Murphy’s “Storying the Past, Creating the Future: Hope and Narrative Openness in a Writing Group for Older Women” explores interesting questions concerning what it is like to write, to share writing with others, and to sustain a writing community as an older woman. In an unusual setting, not professionally facilitated, women older than 65 wrote about their memories, exploring their legacy and using a retrospective voice to find a sense of life purpose and personal agency to create an encouraging future.

In our last piece (which can be found at the end of the issue following the regular articles), Kristen L. Anderson reviews Joel Kroeker’s new book, Jungian Music Psychotherapy: When Psyche Sings.

We hope that this exploration of the arts, counselling, and research will raise awareness of the possible dimensions. The arts are integral to life, and their application in counselling, treatment, and research needs to be done thoughtfully and
responsibly. Collaboration among creative arts therapists, artists, counsellors, and researchers can only benefit those we serve.

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Appendix: Definitions of Arts Therapies

Art therapy “combines the creative process and psychotherapy, facilitating self-exploration and understanding. Using imagery, colour and shape as part of this creative therapeutic process, thoughts and feelings can be expressed that would otherwise be difficult to articulate … In Canada and the United States, art therapists must have at minimum a master’s degree or a master’s level diploma in Art
Therapy before identifying themselves within the profession. This graduate level education includes supervised clinical practicum hours (minimum requirement for all practicums is 700 hours and at least 350 of these hours should involve direct client contact), thus ensuring the safety of the client as well as professional liability for agencies and employers offering this form of therapy” (Canadian Art Therapy Association, n.d.).

**Dance movement therapy** (DMT) “is based on the premise that thoughts, feelings and the experience of self are expressed through the body and movement. It is a relational process that integrates emotional, cognitive, physical and social aspects of self. The DMT approach incorporates knowledge from psychotherapeutic approaches, psychology, sensorimotor and developmental movement, movement analysis and neuroscience. The elements of dance (body awareness, rhythm, time, space, gesture, posture, dynamics) are applied as a framework for exploration, discovery, learning and change. DMT focuses on movement behaviour as it emerges in the therapeutic relationship. Expressive, communicative, and adaptive behaviours are all considered for group and individual treatment. Body movement, as the core component of dance, simultaneously provides the means of assessment and the mode of intervention. A dance movement therapist has a master’s or PhD level of education that is followed by an extensive supervised internship prior to the onset of DMT practice” (Dance Movement Therapy Association in Canada, n.d.).

**Drama therapy** “is the intentional use of drama and/or theater processes to achieve therapeutic goals. Drama therapy is an embodied practice that is active and experiential. This approach can provide the context for participants to tell their stories, set goals and solve problems, express feelings, or achieve catharsis. Through drama, the depth and breadth of inner experience can be actively explored and interpersonal relationship skills can be enhanced” (North American Drama Therapy Association, n.d.).

**Expressive arts therapy.** “The expressive arts combine the visual arts, movement, drama, music, writing and other creative processes to foster deep personal growth and community development … Our inclusive, culturally diverse organization supports expressive arts therapists, artists, educators, consultants and others using integrative, multimodal arts processes for personal and community growth and transformation” (International Expressive Arts Therapy Association, n.d.).

**Expressive writing therapy.** “Journal therapy is the purposeful and intentional use of reflective writing to further mental, physical, emotional and spiritual health and wellness. It offers an effective means of providing focus and clarity to issues, concerns, conflicts, and confusions. In practice, it is the act of writing down thoughts and feelings to sort through problems and come to deeper understandings of oneself or the issues in one’s life” (Center for Journal Therapy, n.d.). “One of the major differences between keeping a journal and journal therapy is the way
internal experiences, thoughts, and feelings are captured. Journal therapy allows a person to write down, dialogue with, and analyze their issues and concerns. Therapeutic journal writing and journal therapy use writing prompts and exercises to support the work of therapy. The practice allows people to be reflective, introspective, and intentional about their writing” (Good Therapy, n.d.).

**Music therapy** “is a discipline in which credentialed professionals … use music purposefully within therapeutic relationships to support development, health, and well-being. Music therapists use music safely and ethically to address human needs within cognitive, communicative, emotional, musical, physical, social, and spiritual domains” (Canadian Association of Music Therapists, 2016).

**Play therapy** “is a psychotherapeutic treatment approach specifically developed to help children between the ages of three [and] 12 years old. A trained mental health professional, called a play therapist, works with a child to explore and resolve problems through the therapeutic use of play. Child and therapist work together in a counselling space called a playroom, which is equipped with specially chosen toys that will encourage the safe expression of feelings and also support the development of healthier behaviors” (Eugster, 2013).

**Poetry therapy** “is the use of the written or spoken word to further therapeutic goals and enhance the well-being of individuals, families, couples, or groups. A type of expressive arts therapy, poetry therapy promotes growth and healing through expressive writing activities and through the reading and facilitated discussion of literary material. The term, “poetry therapy” encompasses interactive bibliotherapy, journal therapy, therapeutic storytelling, film, as well as performance poetry. The benefits of poetry therapy include increased self and interpersonal awareness, increased sense of validation in voicing one’s truth, and enhanced capacity to capture and reframe significant life stories” (National Association for Poetry Therapy, n.d.).

**Sandplay therapy**, “a psychotherapeutic approach for children and adults, was developed in Switzerland by Dora M. Kalff in the late 1950s. Through spontaneous imaginative play in small trays of wet or dry sand, people sculpt the sand and position miniature figurines and objects to create three-dimensional scenes or designs that express and mediate between their inner and outer worlds. When psychic wounding has occurred or typical development has been interrupted or impeded, a sandplay process may encourage psychological healing and expansion of consciousness through activation of the human psyche’s innate drive towards healing and wholeness. Psychological distress often occurs because of inner conflicts about relationships, situations, and decisions. Sandplay provides a means of concretizing opposites and representing unifying resolutions that ideally lead to transformation and healing” (Canadian Association for Sandplay Therapy, n.d.).
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