**Art Therapy. Psychological Creativity in the healing of mild depression**

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**Abstract**

Based on a Jungian epistemology, this article will introduce an integrative approach to therapeutic change using art therapeutic methods as a practical intervention tool aiming to improve quality of life as prevention against depression.

Findings from a research study with 6 participants showed, that a creative interaction between the conscious ego and the unconscious self improved quality of life for the participants.
A bricolage methodology consisting of a phenomenological, hermeneutic and heuristic approach followed by theoretical triangulation was applied together with an analytical procedure based on Jung’s typology as a tool to register therapeutic change.

As an unexpected finding, creative, imaginative and verbal processes were needed on a biological, psychological, social and spiritual level in order to facilitate change in consciousness. An integrative model was developed as a suggestion for future implications related to self-regulation and therapeutic change.

**Introduction**

A research study in art therapy for people with mild to moderate depression was carried out in a group setting. The main question in the study was to see whether art therapy could be a therapeutic method in the development of the ego-self relationship in order to improve quality of life.

A Jungian approach was used, where the relationship between the conscious ego and the unconscious self is seen as a condition for a good quality of life, while a lack of connection is
considered to inhibit creative processing and solutions in everyday living.

Findings from the study suggested a relationship between art therapy methods and improvement of ego-self relationship based on case analysis, comparison analysis and self-evaluation rapports. Findings also pointed towards an understanding of the process of change itself and the conditions that need to be present for the creative process to work within the human mind and how this process operate beneath the surface of consciousness.

From the analysis of the six participants in the study, one participant did not seem to improve according to the post and follow-up test, and the understanding was, that her motivation to feel happier in life was founded on a biological level and not on a psychological level. She just wanted to feel better, without being prepared to confront her inner reality of grief of having lost her husband and son, so she could move on in her own life. Three participants had emotional problems that they needed to express and understand and were motivated on a psychological level. Another participant felt lonely in social life and the most
transforming experience for her during the therapy was on a social level to be part of a group, where she felt included and accepted. Finally one participant had a longing for a spiritual connectedness to her self, and related deeply to the images in her artwork (on a spiritual level).

From this understanding it can become an important knowledge for future art therapy practitioners that different client needs can be met through different choices made by the therapist in an art therapy setting.

This paper will focus on the psychological aspect of creativity related to mild depression with an emphasis on the interaction between the conscious and the unconscious.

**The depressed position**

The conscious ego is expected to be rational, verbal and linear and connected to left hemisphere, while the unconscious (self) appears irrational, circular and symbolic and connected to right hemisphere (Cozolino, 2010). In a depression right hemisphere has been found dominating to left hemisphere, which explains why emotional experiences such as negative self-judgments,
anxiety and lack of interest in life can overrule everyday creativity in an individual’s life (Cozolino, 2010; Schore, 1994).

The application of expressive and symbolic art modalities related to emotional conditions is considered to be a treatment method that separates art therapy from more traditional therapy methods applied within the field of depression, such as medical treatment and cognitive therapies (Cooper, 2008). These traditional offerings all have as their purpose to stimulate left-hemisphere and rational ways of functioning without actively including the right-hemisphere’s connection to emotion and imagination (Sloman & Gilbert, 2000).

The bridge between experienced inner and outer life can be difficult to cross, when using purely rational words that are unable to describe emotions experienced from inside, which is one of the main reasons for using the expressive arts in psychotherapy.

**Psychological creativity**

In the art therapy approach suggested in this paper both left and right hemisphere are activated. The pre-understanding is that the
*interaction* between emotion and cognition becomes the condition for psychological creativity and change.

An art therapy procedure can be described as a) a non-verbal creative expressive process, b) an imaginative dialogue between the client and therapist based on the artwork and c) associations/discoveries related to personal life issues.

The condition for psychological creativity in art therapy practice is a conscious openness to explore the unconscious through the artwork.

In art therapy there has been a polarity in understanding and valuing the discipline in the field for many years, through the “art as therapy” and “art in therapy” discussion. Some people suggest, that the creative act is healing in itself (Teglbjærg, 2011), while others think that a verbal interaction with a therapist and the artwork, is the most important healing agent (Robbins, 2000).

In this paper, the process of psychological creativity and change includes both approaches as equal important. The non-verbal process of creating the artwork is considered to function on a biological and compensative level, based on a need “to feel
better” as was the case for one of the participants in this research study.

The compensative aspect to creativity is based on the concept of flow, where the expressive process is described as an experience of self-forgetfulness and total involvement in a creative activity (Csikszentmihalyi, 1992).

The expressive process also functions as a process where unconscious content are intuitively selected and projected into the artwork, which then becomes the focus in a psychological and therapeutic dialogue. From a Jungian understanding the flow-related expressive process can be explained as a process of self-regulation controlled by the unconscious self and not by the ego (Sullivan, 2010). Psychological creativity therefore includes both unconscious and conscious processing, which can explain the novelty and unexpected outcome of the creative psychological process that can lead to therapeutic change.
The concept of ego-self in Jungian psychology

In Jungian psychology, the concept of self is described as a center in the psyche that regulates the conscious ego from living a one-sided life, which connects to the compensative process of creativity as described earlier. Sullivan (2010) says, that it is an “energetic force that strives for much more than instinctual satisfaction... It is trying to balance and complete the person” (p.50). The self is also understood as an “objective” part of the individual psyche because of its archetypal nature, and life long attempt to become part of living, which Jung named “the process of individuation” (Bertelsen, 1975).

In this paper psychological creativity rests on this two-folded understanding of the self, a) as a compensative function, and b) as a drive towards wholeness. When the self is unable to reach the conscious ego with suggestions for corrections (through symbolical information), the ego becomes alienated from the self and from knowing what to do in life. Everyday creativity as described by Richards (2010) is a necessity for our survival both as individuals and species and is connected to an attitude of
openness to experience. Trusting the creative process during the phase where it does not make rational sense seems to be a helpful working-through attitude in psychological creativity.

Since the self expresses itself through symbols unknown to the conscious ego, a dialogue between the ego and self, must include the symbolical dimension, as otherwise the self is not able to regulate the ego towards wholeness.

The psychological creative process can thus be seen as an interchange taking place in the space between the ego and the self.

**Research procedure**

**Sampling procedure**

Out of 17 volunteers, 7 were chosen to participate in an art therapy group during a 6-month intervention with a total of 13 meetings with 5 hours each time.

The inclusion criterion was identification of mild to moderate depression based on test results from the WHOQoL-Bref and Depression MDI. There were no dropouts during the 6-month
intervention, but one participant was absent three times and is therefore not included in the analysis.

**Methodology**

In the search for a research methodology I was looking for a paradigm that could combine the subjective reality of the ego with the objective reality of the self according to Jung’s concept of self.

I chose to use a bricolage methodology, combining: (a) a phenomenological approach with a focus on the inner development of the participant, (b) a hermeneutic approach with a focus on the relationship between participant and researcher/therapist, and (c) a heuristic approach with a focus on the inner development of the researcher/therapist.

Using this methodology I was able to include the reality of both ego and self as a space for creative explorations.

**The setting**

The procedure during the workshops were:

1. Group drumming for 10 minutes
2. Relaxation/meditation for 15 minutes
3. An expressive process (painting or clay work)
4. Art therapy dialogues between participant and researcher/therapist

5. Group discussion and reflections

The art therapy ritual included: a. biological processes (drumming, meditation, painting and clay work), b. psychological processes (dialogues related to the artwork and personal life), c. social interaction (through group dynamics), and d. spiritual processes (imaginative work with symbols discovered in the artwork).

Every other time the researcher/therapist suggested a specific directive that was related to the shadow, the inner masculine and feminine or the self, thereby attempting to guide consciousness from the ego towards the inner self.

Every other time the participants worked with a dream as an inspiration to an artwork and as “directives” coming from the inner self. Also the participants were given a dream diary and invited to write down all their dreams, as a ritual that was intended to strengthen the awareness of inner reality.
The purpose of giving a direction every other time was to guide the participants to follow different (neurological) patterns and then to listen to the following dream reaction. From many years of clinical work, I have found this way of approaching the unconscious to be most effective and less threatening to consciousness, because it stimulates new parts in the unconscious through the directives, but also allows the unconscious to be heard (through dream work).

Data collection
The data collection consisted of test results from questionnaires, pre, post, follow-up 1 and follow-up 2, video recordings of all workshops, video transcription of therapeutic dialogues, dreams, artwork and participants self-evaluative rapports.

Analytical procedure
The analytical procedure was based on Jung’s typology and related to sensation, feeling, thinking and intuition. The four psychological functions were used as different ways to relate to the data, which gradually narrowed the data into core findings related to (a) therapeutic process, (b) theory, and (c) art therapy
method. This analytical method was inspired by Abt’s (2005) model of “picture interpretation.”

The first level in the analysis was based on a descriptive presentation of the dialogues between participant and therapist as artworks were explored together during the 13 workshops. All dialogues with each participant were cut out from the transcripts and organized in individual case presentations over time. Each case was then exported to NVivo and coded.

The second level of the analysis had an emphasis on the emotional content from the images and the participant’s life situation. I used quotes from the transcripts and nodes from the coding thereby allowing the participant’s own voice to become part of the procedure. Themes were recognized as patterns of therapeutic change and related to Rosen’s transformative model (2002).

The third level of the analysis consisted of a theoretical understanding of the participant’s emotional development using an integrative approach. Having described the data from the participant’s perspective at the first two levels of analysis, there was a change of perspective here in using different theoretical
approaches as a way to further understand the art therapeutic process.

The fourth level of the analysis showed the overall transformation in the participant’s development as an indication of therapeutic change. One important aspect here was to see if and how the self as a regulative function was active during the process of change. Part of this level included a triangulation of qualitative data with pre-post and follow-up tests results.

The analytical procedure consisted of:

a. A descriptive level (sensation) as an orientation towards details.

b. An emotional level (feeling) as an orientation towards an evaluation of experience.

c. A theoretical level (thinking) as an orientation towards an objective understanding of the experienced reality.

d. A transformative level (intuition) as an orientation towards self-regulation and therapeutic change.

According to Shepherd (1993) sensation and thinking is the most used psychological functions within mainstream science, leading to a preference for reductionism within research.
To include all four psychological functions (as they are described in Jung’s typology) as different steps in the analytical procedure became a way to avoid reductionism in this research.

Findings were found related to a) therapeutic process b) theory, and c) art therapy methods and will be presented in the following.

**Findings related to the therapeutic process**

From the first case analysis three phases were discovered from the coding procedure, where nodes were organized according to Rosen’s (2002) description of egocide, initiation and return.

These three developmental phases became the main structure for the analysis of the therapeutic process in the other five cases as well.

**Egocide**

Egocide relates to the process of letting go of inner psychological patterns that are no longer supportive for the individual.
During the egocide stage the inner judge appeared in the artwork experienced as an inner voice preventing the creative process to unfold. In an image made by A. the expressive process started with the yellow figure in the painting followed by black lines and dots covering the figure. The participant later explained “it was as if my father’s voice came up confusing me with all his comments about right and wrong”.

The egocide for this participant became the sacrifice of her attachment to her father’s voice inside, which appeared as the key figure preventing a more creative life. Prior to this discovery, A had identified with the inner judge as if that voice was part of her own self.

**Initiation**

In the following stage of initiation, a more imaginative exploration of new possibilities came up, suggesting a new approach and attitude in life. Looking at the first and last
artwork made by A. the symbol of a spiral became the creative solution to the dissociation between the front and the back in the first figure. The participant had not seen the clay figure since it was made 6 month earlier.

Return

The stage of return was explored in her new work as a drama teacher, where she felt she could use herself in a more integrated way than when she was performing on stage as an actor only showing her front side to the audience. As a transforming image
between the inner and the outer reality the spiral was recognized in her new attitude to work and life.

**Originality**

For all participants the creative product to some extend mirrored experiences that were once conscious, but then repressed. Nothing *original* was found in these memories. For something original to appear, the image must be recognized as something unknown to the subjective experience. This is what Jung referred to as the archetypal level in the psyche, which can only become known through the symbol (Kugler, 2008). From a Jungian perspective working with symbols means therefore working with the original part of the psyche and in order to initiate that process, the inner judge was confronted and sacrificed as a part of the participant´s self-understanding.

Recognition of personal repressed memories and ways of being that were not allowed in childhood, became an important part of the opening to more original parts in the psyche.
Findings related to theory

Though I wanted to include other approaches than Jungian psychology from the beginning, it was not until I started to use the theories in the analysis of data that I began to understand how they could all bring inspiration to the field of art therapy and creativity in different ways. Art therapy practice could become more differentiated in the way methods are used through a deeper connection between method and theory.

Within the art as therapy approach, there is some resistance towards the use of psychological theory as if cognitive understanding of emotional and aesthetic processing prevents the experience from connecting to the body (Teglbjærg, 2011). I think this can be the case when theoretical concepts are used as a replacement for imaginative experience instead of (later) attempts to understand, integrate and initiate experiences.

I also suggest that the art as therapy perspective is compensative to the Freudian reductive approach to the creative outcome, which has dominated psychotherapy practice since its beginning in the last century. A new paradigm has not yet developed from the reductive stance to the unconscious and to
images (Skov, 2013). What is the meaning and function of the image? And how can we come to include the subjective experience in the meaning-making process? If imaginative exploration is not included in the meaning-making process, interpretations are easily made on reductive assumptions more than on individual originality.

I think this is the relevancy of adapting Jung’s typology to analytical steps in the interpretation of images (Abt, 2005). By using each function (sensation, feeling, thinking and intuition) as different approaches to the creative product, the method of amplification can be used as a meaning-making procedure that includes subjective experience as a link to a more general understanding of psychological creativity.

In combining the subjective experience with theoretical concepts such as the inner judge or shadow, can help accumulate knowledge about the living relationship between the conscious ego and the unconscious self. From this knowledge more effective approaches to therapeutic change can be developed and used in practical creativity.
Findings related to art therapy methods

The use of art therapy methods in this research study has been based on a pluralistic psychotherapeutic orientation, which depends widely on the choices and directions that the therapist makes during the therapy, as well as the relational style of the therapist (Cooper & McLeod, 2011).

The art directives in this study were meant to create a connection between ego and self. In the following schema I have shown the goal of each directive that was used in the study.

Table 1. Goal and directives in group art therapy

<table>
<thead>
<tr>
<th>Goal</th>
<th>Art directive</th>
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<tbody>
<tr>
<td>Activation of ego-state</td>
<td>Present yourself as a clay figure</td>
</tr>
<tr>
<td>Activation of inner voices</td>
<td>Make a family portrait in a painting</td>
</tr>
<tr>
<td>Activation of shadow</td>
<td>Make a painting of the person you were not allowed to be as a child</td>
</tr>
</tbody>
</table>
As soon as the participants had understood the task/theme for the workshop, they were invited to solve the task in their own individual ways by following the body more than what they thought was expected from them. The therapeutic process that followed the expressive process was high supportive following the participant’s imaginative meaning-making process in the dialogue around the artwork. Using this relational mode, I found that the participants were able to project the images needed for self-regulation into the artwork.
According to Cooper (2008), the combination of non-directive and directive therapy has been found to be the most effective in psychotherapy. The participants in this research all preferred the blend of both types of stimulation according to their evaluative reports. They thought, that the blend of therapeutic dialogues (psychological creativity) and art expression (biological creativity) was mutually important for the therapeutic outcome.

**Summary**

Using Rosen’s model (2002) of egocide, initiation and return the developmental goal was to move from the ego re-connecting with the self through practical creative processes. As a result of this development the ego also became stronger from having gained new knowledge about the self. Considering the focus on the imaginative work with symbols, I find this to be an indication that speaks for using imaginative work in relation to people with a low ego functioning.
Another therapeutic outcome was, that all participants felt a better balance between their extravert and introvert attitude through a more conscious relationship to the inner reality.

“I discover new places in myself”

“I have become more conscious about the role my father has had in relation to my self confidence and self-worth”

“I became aware of my own power”

“I have become more aware of myself”

“I feel that I have gained insight into the masculine and feminine sides of myself”

“I have more attention to myself”

In this research study I have combined different approaches in the clinical setting, which I believe would facilitate change in the best way for the client. Some of the activities have been activating the unconscious and right hemisphere like painting and drumming, while others have been more left hemisphere oriented, like putting words to images.

A final conclusion related to creativity and therapeutic change was, that the biological (expressive), social (group) and spiritual (symbolic) aspects and levels were beneficial for psychological
creativity to operate in a practical and transformative way. As a further implication it is suggested, that art directives and ways of approaching the image (relational style) could be addressed more specifically to individual needs within the different levels.

Especially when dealing with people who are avoiding vitality in life, as is often seen in depression, a blend of personal and imaginative activities seems to fit well with neuropsychological findings related to therapeutic change (Grawe, 2007; Cozolino, 2010; Shore, 2012).

References


