

**JUDSON DAVIS AND ROSELLE O'BRIEN**  
**PUBLICATIONS CO-CHAIRS**

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*Spring: — to rise, leap, move or act suddenly or swiftly; to be released from a constrained position; to come into being by growth; to begin to appear; a source or fountainhead of something; elasticity or resilience; the first stage and the freshest period; the season of the year following winter that is characterized by the budding of trees and the growth of plants; to bring out, disclose, produce; to issue forth suddenly; arise; explode; the dawn—as of the day, of the light; the place of such an issue  
/ dictionary.com*



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# Artist Contributions

Cover: My Mother's Trunk #1 — Wendy Phillips

Notes from the Field: My Mother's Trunk #7 — Wendy Phillips

*ABOUT: Wendy Phillips is a psychologist, Expressive Arts informed psychotherapist, researcher, practicing visual artist, LMFT, and an IEATA Registered Expressive Arts Consultant Educator (REACE). In 2015 she founded "El Colectivo Macondo," an Expressive Arts Training Institute based in Mexico. Together with co-teacher Jesus Pastor, they offer workshops in varied regions of Mexico that integrate multimodal Expressive Arts with Mexican Popular Arts Practices. Wendy is a faculty member at Goddard College in their Psychology and Counseling Program, Expressive Arts Therapy Emphasis and is the Internship Coordinator.*

Thank you to all the artists  
who submitted their original work  
for this Newsletter.

Judson Davis  
Roselle O'Brien  
Co-Chairs

Publications

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**International Expressive Arts Therapy Association**

## Conference Committee

### 1. Conference Evaluation

Two online evaluations were conducted via Survey Monkey. Opinions from the conference participants and volunteers were collected.

We received 87 responses out of 400 participants (21.75% response rate.) We are glad that the conference was mostly well received by our participants. We got helpful feedback for improvement and also many great ideas for the next conference. Below are some highlights:

#### *Feedback and comments about the conference:*

"Victor Ma was one of the best experiential trainers. His authenticity and use of the sacred space of the walled city was impressive."

"Cross-cultural clinical applications of expressive arts therapies—the mindfulness-based hospital program of Josephine Cheng was outstanding as well as the group that presented on using Chinese cultural interventions with dementia."

"Finding my way there was a bit overwhelming on the first day, without knowing my way around at all. And the conference co-chairs and volunteers were amazingly helpful and totally accommodating. Thank You!"

"Sharing of resources and ideas would be most valuable. It was tough to choose one out of the so many sessions to learn from."

"Provide a broader range of presentation and workshops by actual practitioners."

"I appreciate so many expressive art therapists come to conference and unlike other professionals, they are really nice."

"There were many sessions that were all interesting; however, we essentially had only 4 choices in all throughout the entire conference. I really wish I could have attended more sessions. Perhaps an additional day will be possible in future conferences to extend the opportunity to attend more sessions."

"So much to choose from! It has a lot of depth and breadth. I really appreciate the variety and diversity of options. Hearing from new emerging voices and people from other parts of the world was very inspiring, enlivening, and rich."

"The Y site was substandard for food quality and cleanliness. I would be willing to pay more for registration to have improved food and housing. I would have liked an opening similar to the closing to have a

**Conference Committee** *(continued)*

sense of what countries were represented for the conference.”

“I must say that the food could have been much better—with more variety and appetizing flavors. This helps in keeping the participant energy up.”

“Wish I heard more from Asian expressive arts practices on keynote presentation.”

“I suggest to reserve one session for research paper sharing in order to future develop our field more grounded and sounded to others.”

“Personally, I benefited the most from being in a new place, making new connections, and renewing past connections. Immersing myself in the international field/community of EXA. Feeling the youthful energy. Being with the Nepalese woman and visiting the hospital.”

“Professionally, I benefited the most from meeting a collective of professionals who are choosing to use the expressive arts in their work. This challenges me to see how I can fit in.”

“Local Hong Kong volunteers were outstanding: well-organized, hard-working, a pleasure to work with.”

“Would like to have the conference in a more user friendly/family friendly hotel setting. This did not work for couples and families, but was spacious. Can we offer coffee/tea throughout the day included.”

“I think it was challenging with the different venues. The volunteers and the conference co-chairs were remarkably available and attentive.”

*What stood out to you the most?*

“Diversity of attendees, especially those living and working in Asia.”

“Diversity of people from so many countries and pioneering work in EXA.”

“I learned how presenters are deepen in EA to support others; I will be that too.”

“Meeting people from all over the world. The community.”

“How the participants/speakers are very open to receiving what others have to offer; how they are very much in touch with their inner spirit.”

“I felt warmth and passion between participants.”

**Conference Committee** *(continued)*

"The collective enthusiasm and positivity of participants."

"I love the friendliness, enthusiasm, humility, and openness of everyone in the conference."

"Excellent Workshops by wonderful presenters!"

"The Asian panel was inspiring. The camaraderie and openness of all participants was very invigorating and the diversity very rich. It provided space for all kinds of dialogues and conversations."

"The master workshops are excellent. Inspiring and demonstrate as a model, they are passionate and well demonstrate how EXAT works."

"I felt there was a lot of great energy in the room and a tremendous amount of creativity. The presentations I went to for the most part were very well organized."

*What topics/workshops would you like to see presented at future conferences?*

"Workshops on trauma, cultural competencies, work with oppressed populations, and international work."

"Practical application for the expressive art therapy."

"More scientific and evidence-based research done in the field, and support on how to plan and implement such research projects. It's something that we strongly lack in our field and quite important to move forward."

"Theory with practical workshops to demo or let's participate in different arts format."

"Self-care as a therapist, and how to build a practice, fine-tuning practical facilitation."

"More on caring for the caregiver."

"New exploration on the practice of EXAT."

"More on indigenous/First Peoples' art forms and expressions."

"Continue workshops led by pioneers. Continue experimental workshops."

"Integrating spirituality and expressive arts."

## Conference Committee *(continued)*

"More vibrant collaborative art project and social action project."

"More presentations about contemporary, nontraditional, and culture-specific application of expressive arts"

Regarding the volunteers evaluation, we received 12 responses out of 60 participants (20% response rate.) Our volunteers thought it was meaningful to be part of the conference organizing. Attention should be paid to information giving, division of work, and better communication.

### 2. Conference Report

A 100-page Conference Report has been published and sent to all conference participants. For non-attendees, they are encouraged to join IEATA membership or renew their membership to receive the report.

### 3. Video Production

Our PR Co-Chair, David, has made a tribute video to our late shining star Natalie Rogers for her contributions to IEATA and our field. Natalie's tribute video: <https://youtu.be/9SDJbs4zTCk>

David also made a video of Mandala co-creation at the conference. It was posted on FB on Valentine's Day to re-taste our collaborative effort. Mandala video: <https://youtu.be/4reEvxWsy4>

A documentary video of the conference will be made by October to celebrate the anniversary of our first conference in Asia and promote the next conference in Winnipeg.

### 4. Submission to Journals

A conference report titled, "Report on the 11th International Expressive Arts Therapy Association Conference in Hong Kong, China: The Flowing Tao of Expressive Arts Therapy" was submitted for the first issue of the *Creative Arts in Education Therapy Journal*.

A review title, "Unfolding Reflection from the Flowing Tao of Expressive Arts—The 11th International Expressive Arts Therapy Association Conference," was submitted to the *Journal of Applied Arts & Health* (JAAH).

*Prepared by Fiona Chang*

## Governance Committee

Since our last committee report prior to the October 5th, 2015 Conference in Hong Kong, the Governance Committee vetted and voted in to the administrative board the following co-chair positions: Christina Hampton, Governance Committee Co-Chair; Aleck Kwong, Students & New Professionals Committee; Roselle O'Brien, Publications Committee Co-Chair; Diane LaRochelle, Students & New Professionals Committee Co-Chair; Fiona Chang, Website Committee Co-Chair; Louise Tarrier, Finance Committee Co-Chair; Joana Fins Faria, Artist Committee Co-Chair; Tammy YC Leung, Finance Committee Co-Chair.

The committee has also interpreted By-Laws during a discussion of expiring board member terms and transitions to newly appointed board members.

Currently, the Governance Committee is slightly amending the By-Laws and revising the Procedures Manual to reflect our status as a 501c3 organization.

*Bonnie Cardell & Christina Hampton  
Co-Chairs, Governance Committee*

## Artists Committee

I would like to welcome Joana Fins Faria, from Portugal, as our new Artists Committee Co-Chair—she and I both graduated with our Master's in Expressive Arts Therapy from EGS, Switzerland!

Since the Hong Kong board meeting at the conference, I have formed an artist committee of 14 members. Many of these came from the visioning meeting and some have come from membership and emails.

I have sent out email greetings to all members, and individual emails, welcoming each joining member. Recently I sent out a questionnaire asking their vision and hopes. Then I sent another short email outlining our current ideas and plans. There have been numerous emails and a Skype meeting with Tiff Chan and Joanna. Tiff is now stepping down as Co-Chair, but wants to touch-base with members when she visits other cities and hopes to also participate in their events. I have asked her to keep IEATA informed so we can post these events. Please, members, let us know what you are up to so we can promote it on our website and to our members.

Our current goal is gathering data from our own art committee members as we would like to prototype the profiles and, for now, have those profiles rotate on the Artist Gallery page. This will give members a sample of our vision. It will also allow input for suggestions and a chance to work out any kinks.

## Artists Committee *(continued)*

Next, we would like to add the REACE group to this profile resource.

For a long-term future goal, we would like **each member to have a page** that features a short bio, contact information, a picture of yourself, and up to three images—and have it be accessible to the public. A BIG GOAL! This will take at least 1-2 years, so a great shorter-term goal is to have this pretty solid by our 2017 International Conference.

We are hoping that we can include the basic questionnaire on the membership renewal as an option, so as members renew we can include their page. This will save much time in reaching out individually to each member.

The Artist Gallery page will still feature artists and be a forum to display work and post events.

*Prepared by Elke Scholz*

## Educational Resources Committee

### ◇ Outreach:

We continue our outreach to professional organizations in an effort to enroll new individual members as well as organizational members. To that end, we proposed to activate a blogsite and kick-off the first online global event.

### ◇ Educational Resources BLOG:

The first social media BLOG is ready, enabling us to keep expanding our reach and interest in IEATA. Click here to connect with the Blogsite: <https://edresourceconnection.wordpress.com/>

### ◇ Earth Day Global Online IEATA Event:

Our aim to create an expressive arts Earth Day global, online event is underway. This is another marketing and promotion strategy that both educates and involves our connections around the world. We have invited the Social Action Committee and the Public Relations Committee to join us in this effort.

### ◇ Webinars:

Anyone interested in submitting an online informational course, please let us know.

*Roxanne Daleo, PhD, Co-Chair*

*Wendy Phillips, PhD, LMFT, REACE, Co-Chair*

## Public Relations Committee

### Vision

To empower the active, motivate the passive, and inform the curious.

### Objectives

1. Maintaining the relative value of creativity in the world.
2. Projecting a theme that reflects the changing needs of our association and the cultures we live in.
3. Enhance the visibility of IEATA in the world.
4. Promote the expressive arts therapies within consultation services, educational systems, and established therapeutic systems.
5. Mobilize support and resources to IEATA members.
6. Educate the uninformed in an artful way.

### Collaborative Team Work

Our Public Relations Committee will coordinate with the board, especially the Regional Committee, Finance Committee, Membership Committee, Publications Committee, and Conference Committee for branding building. Promotion strategies and actions are summarized in the following table:

### Public Relations Accomplishments 2015

#### Social Media

Facebook is our primary tool still. With our largest audience of members and like-minded nonmembers we are posed to keep this audience's attention and promote the image and efforts of IEATA.

#### 2015 Conference Promo Videos ☒ Done!

As part of our support of the 2015 IEATA conference in Hong Kong we produced 10 videos of original crowd sourced content to raise attendance to our first conference venture in Asia.

Fiona Chang worked closely with the Public Relations Committee showing the power of inter-committee collaboration in a **first ever IEATA multi-media publicity campaign** on social media to promote one of our conferences. Fiona asked various members of the contributing presenters to turn their cameras towards themselves. We used file-sharing technology to gather video content from around the world to produce singular video content: a first for IEATA that will undoubtedly become a standard of public relations networking for every conference to come.

## Public Relations Committee *(continued)*

### Natalie Rogers Tribute ☒ Done!

Our beloved founding member, Natalie Rogers, passed away this year. She was a vocal part of the promotional campaign for our conference and celebrated her birthday during that time, although she was unable to attend. With the help of IEATA founders, the Public Relations Committee produced a video tribute to her work by gathering testimonial video, archival photos and videos, and footage from the conference to produce the single largest media campaign IEATA has made thus far. We reached more than 20,000 people combined between Facebook, YouTube, and email outreach to demonstrate the importance of Natalie's contribution to our work.

The amount of traffic that was drawn to our page is not a success of our Public Relations effort but instead a testament to the spirit and influence of Natalie.

### Member Spotlight

The IEATA PR Committee is gathering interview footage of a variety of members that showcase the diverse contributions and process of doing our work. We plan to use our expanding social media network to show-case the incredibly diverse ways that our work manifests itself in the field. We will produce short video segments that quickly show **the many different ways that our work has impact on the world.**

*Prepared by Public Relations Committee: David Eckelkamp, Connie Gretsch, Fiona Chang*

## Social Action Committee

### Our Vision and Goals:

- To create a structure for the Social Action Committee with specific recurring projects, supporting recognition of current global Social Action Projects and of the profession.
- To create tangible connections within the IEATA community and reaching out to visibly share those connections and encourage growth and recognition of the profession

### Our Current Projects:

- Social Action webpage
- Outreach to members from the HK conference who expressed interest in the SAC potential projects
- Ongoing thoughts about a Social Action Blog
- Creating the Postcard Mail Art Project to be an online continuous project

## Social Action Committee *(continued)*

- Facebook involvement/postings/linking to webpage/potential blog
- Conference Social/Art action project

*Social Action Committee Report*

*Submitted by Co-Chairs:*

*Cailin Turcotte-Good and Amy Morrison*

## Professional Standards Committee: REAT



The beginning of this period (October 2015-March 2016) was marked by the 11th International Conference in Hong Kong which was attended by one of the co-chairs, Phil Weglarz. Conference participants including many first-time attendees and new members attended the REAT/REACE informational meeting at the end of the conference, where board members and long-term REATs facilitated small group discussions by region. Phil also engaged in many individual and small group conversations about this credential and ways to promote professional standards and affiliation in various regions, most especially South East Asia. It is clear that this credential is valuable to therapists in many countries and that continued articulation and interpretation of internationally-appropriate standards is warranted. REAT leaders and advocates were identified in several regions and countries, (e.g., Korea, Philippines, Malaysia, India.) Phil's conversations with these advocates can

be used as prototypes for engaging and organizing professionals at the local level and in ways that increasingly reflect indigenous practice and local professional organization.

These authors would like to express their gratitude for all past REAT co-chairs, past and current REAT committee members and reviewers, colleagues among the IEATA Board (most especially ECCs, Membership, and REACE co-chairs), IEATA Advisors, individual REATs and IEATA members, and, finally, those professionals around the globe who continue to express interest in earning this credential — This work is for you.

*Aradhna Singh & Phil Weglarz, Co-Chairs*  
*REAT Professional Standards Committee*

## Student & New Professional Committee

Since our last committee report prior to the October 5, 2015 Conference in Hong Kong, the Student & New Professional Committee started a new round of mentorship matches. They loosened requirements for mentors; mentors no longer need to have the REACE or REAT credential, but rather at least 5 years of post-graduate experience. The committee also added a question in the application for specialization/expertise to allow for better matches.

As a result, the committee received 4 new applications for mentors, and 2 mentors decided to serve again—6 mentors in total. The committee received 6 new applications from mentees: 5 for a (R)EAT mentor and 1 for a (R)EACE mentor. Unfortunately, all current mentors are (R)EATs and no new (R)EACEs have applied to be mentors yet. The committee matched 5 mentorship pairs as of March 4, 2016, and they will reach out to REACEs to increase REACE mentors.

With the revival of the main IEATA Facebook page, the committee will discontinue the Student & New Professional Facebook page within the next month and start a Facebook group instead.

Furthermore, the committee is working to establish regional student representatives. So far, they have identified student representatives at Appalachian State University, EGS, and Expressive Arts Institute of SD. If you are from a region or school that does not currently have a regional or student representative and would like to get more involved in IEATA, please contact the committee at [students@ieata.org](mailto:students@ieata.org)

Thank you!

*Prepared by:*

*Diane LaRochelle & Aleck Kwong*

*Co-Chairs, Student & New Professional Committee*

## Membership and Administration Committee

The basic responsibility of the Membership and Administration Committee is to give responsive and attentive priority to members and those inquiring about membership, and to promote IEATA worldwide.

Our Current and Ongoing Projects Include:

- Work with administrative assistants
- Create new membership category, "Credentialed Professional"
- Work with REAT and REACE committees to include credentialed renewal with membership renewal Membership drive—we have a new membership committee volunteer working with us to reach out

## Membership and Administration Committee (continued)

- to “expired members” and will also continue to reach out to organizations
- Answer email inquiries about membership—there were many more inquiries with the conference
- We continue to send out letters to committee chairs when a member indicates that they are interested in joining a committee

We are in the process of sorting out our “Credentialed Professionals”—those with a REAT and/or REACE. These folks roughly fall into four categories:

1. Those who are up-to-date with their membership and credential
2. Those who are up-to-date with their membership but not their credential
3. Those who are up-to-date with their credential but not their membership
4. Those who are not up-to-date with either or who are not in our system

The plan is to move all of these folks into a new membership category called “Credentialed Professionals.” All folks who hold a REAT or REACE will either fall into the “Credentialed Professionals” category or the “Inactive/Expired Credentialed Professional” category, allowing us to have all of our REATs and REACEs in Memberclicks—our online database.

We are beginning to move folks over one group at a time, beginning with those who are up-to-date with their membership and credential. This is a slow process for two reasons: first, because we need to do these one at a time, and, second, because there are a bunch of issues that come up with each person! Hopefully once this migration is complete we will have worked out many issues related to other membership categories and forms.

If you have any questions regarding membership or renewal of REAT or REACE, please contact us at [membership@ieata.org](mailto:membership@ieata.org)

*Karen Estrella and Angelica Pinna-Perez, Co Chairs  
Membership and Administration Committee*

## Professional Standards Committee: REACE

New REACE Members:

Since April 1, 2015, the REACE Professional Standards Committee has approved 4 new REACE applicants. Please welcome and congratulate our newest REACE members—Karen Sjöholm, Elke Scholz, Andrea Halwas, and Theresa Benson.

## Professional Standards Committee: REACE *(continued)*

### REACE Meeting in Hong Kong:

On the final day of the Hong Kong conference, a meeting was held for approximately twenty-five conference participants who were seeking guidance and information on how to become a REAC (Registered Expressive Arts Consultant Educator). The topics for the meeting included historical information of REACE, information on the application process, and the current standards. Participants also participated in a visioning session for IEATA.

### REACE Mentor Guidelines:

There is a need for a REACE mentor who has at least 5 years post-graduate experience as an expressive arts educator. It is recommended that if a REACE/REAT committee member is a mentor that he/she declines reviewing the application, and also that mentors would not write the letter of recommendation.

### Website Update:

There have been suggestions to update the Educational Resources webpage, adding a category that reflects the growing trend of using creative expression and expressive arts in professional applications other than therapy. This would serve the REACE category especially well. For example, there are Master's degrees and certificates in expressive arts for professional application.

*Warm regards,  
Terri Goslin-Jones and Susan O'Connell, Co-Chairs  
Professional Standards Committee: REACE*

## Publications Committee

Please welcome Roselle O'Brien officially to the IEATA board as Co-Chair to the Publications Committee. She comes to us with a wealth of experience in expressive arts therapy, teaching, designing—and she is a REAT! You can see from her beautiful design on the last Newsletter & eNews that you are in good hands.

Claire is ending her term this spring and Roselle has been taking over Claire's tasks under Claire's guidance in order to make a smooth transition. These tasks include designing the Newsletter and the eNews, sending out submission reminders, organizing submissions, sending out the Newsletter and the eNews, maintaining correspondence. Roselle has also updated the publications guidelines in order to tighten the submission and design process.

## Committee Reports

### **Publications Committee** *(continued)*

#### Current Projects:

- Publications Gallery to showcase members' creative work in Language Arts is underway. This is a collaborative project with the Artists Committee

Input is welcome!

*Prepared by Claire Polansky*



A Cross-Cultural Perspective on  
Trauma and Resiliency

### **Master of Arts in Counseling Psychology & Expressive Arts Therapy Program**

This new program is specifically designed to prepare the next generation of mental health professionals in the therapeutic use of expressive arts for personal, family, and community transformation. Combining expressive arts with strong counseling and trauma treatment skills can be a powerful way to help the lives of individuals, families, and communities throughout many regions of the world

The program meets the educational standards for both the International Expressive Arts Therapy Association (IEATA) for becoming a Registered Expressive Arts Therapist (REAT), and the requirements of the Massachusetts Board of Allied Mental Health and Human Services Professions to become a Licensed Mental Health Counselor (LMHC).

For more information contact: [admissions@williamjames.edu](mailto:admissions@williamjames.edu)  
by telephone at 617-327-6777 ext.1056 & ext.1057  
or contact the program director: [Yousef\\_alajama@williamjames.edu](mailto:Yousef_alajama@williamjames.edu)

[www.williamjames.edu](http://www.williamjames.edu)



I made this fabric genogram of the women in my family for my assessment and evaluation course.

Using textiles as a form of creative release runs through the women on my mother's side of the family.

I chose fabrics which reminded me of the women in five generations of my family.

I used the backstitch to embroider their first and middle names on each individual's block.

Around the edges I stitched the initials of women friends who have supported and affected me throughout my life.

**ABOUT THE ARTIST:** My name is Elizabeth Walker, and I am a student in the Clinical Mental Health Counseling graduate program at Goddard College. I grew up in Maine and majored in English in my undergraduate program at the University of Kansas. I am interested in all kinds of textile art and the experiences of community and connection that are woven so deeply into healing and the Expressive Arts.



# Hong Kong

The 11th International  
Conference

## Report from the Conference Committee

### 國際表達藝術治療協會「表達藝術·順道流形」國際會議報告

The 11th IEATA Conference and pre-conference events were successfully held on 6-10 October 2015 in Hong Kong, with over 400 participants from 28 countries. We are all amazed by the East-West exchange of more than 50 lively presentations on clinical practice in a rich diversity of cultures, researches and social change projects. Thank you to each donor, sponsor, collaborator, volunteer, presenter, and participant to co-create such a great learning community!

We have submitted articles to the Creative Arts Education and Therapy (CAET) Journal and the Journal of Applied Arts and Health (JAAH) to share our insights generated from the conference about building our expressive arts community individually and globally. With the support of our presenters and volunteers, we prepared a comprehensive report in December. If you would like to have a soft copy of the report, please renew your IEATA membership.



Conference Participants from 28 Countries!

## Report from the Conference Committee *(continued)*



Keynote Speaker  
Daria Halprin—  
and her response!



## Report from the Conference Committee *(continued)*



Our Incredible Volunteers!

'Til we meet again  
in Winnipeg  
2017!



Our Closing Spiral Dance

## Report from the Conference Committee *(continued)*

The Flowing Tao of Expressive Arts Therapy, the theme of the 11th International Expressive Arts Therapy Association (IEATA) created “the way” to bridge the wisdom of the East and that of the West. This conference birthed a global village at the Wu Kwai Sha Youth Village, Hong Kong, where over 400 people gathered to honor the Eastern and Western practitioners, artists, educators and their acumen in expressive arts. As the first IEATA conference in Asia, two-thirds of the participants were from Asian countries, demonstrating the vibrancy of expressive arts in Asia as well as coupling with the West, with 26 countries represented!

The intention of the conference was to create a community that invited formal and informal dialog, as well as making the conference affordable to many who live in developing countries through the numerous scholarships offered. The choice of the Youth Village provided a setting in which we all lived, ate, played, and studied together with a taste of nature in urban Hong Kong. The feedback we received reflected our intention that the conference enhance dialog and bonding among our many international participants.

首次在亞洲舉辦的第十一屆國際表達藝術治療協會國際會議順利於二零一五年十月八日至十日在中國香港烏溪沙青年新村舉行，四百名來自二十七個國家的參加者難得聚首一堂，匯集東西方智慧，交流各地文化與表達藝術應用心得，從不同派別的理論分析、研究、臨床實踐和社區充權計劃中深入學習，擴闊視野，反思殖民化和國際化帶來的影響，在充滿挑戰和掙扎的世界裡，希望大家能夠順應善用表達藝術之道，用和平、創新和有意義的方法，建立和諧共融的地球村。

### Asian Presence

In designing the conference, the accent was on Asian presenters, with several panels highlighting more than thirty years of contributions in and from Asia. The second plenary panel introduced the participants to the ongoing contributions of some of these pioneers hailing from Japan, Malaysia, Korea, Cambodia, Singapore, and Hong Kong. These were followed by regional panels and presentation sessions that explored the particular emphasis each country contributed in greater depth, this time including India, Nepal, Philippines, and Taiwan.

### Welcoming in 26 Languages

The conference started with a rich, warm welcome to our global village with an array of cascading welcomes in 26 languages, allowing all to have their voices and mother tongue heard. Daria Halprin, founder of the Tamalpa Institute in Kentfield, California, inaugurated the first plenary with her dynamic keynote address on the power of the flow of the organic internal body and the expressive arts. Her presentation was warm, alive and interactive, which set the tone for dialog through aesthetic responses from the audience, and challenging our paradigms and ideas to expand to the larger connected embodied world-view of expressive arts.

Each major approach was presented to participants, offering a rich, well-rounded learning opportunity. Some of the different approaches offered included Person-Centered Expressive Arts with a blend of East and West practitioners including Terri Goslin-Jones, Anin Utigaard, Christine Evans,

## Report from the Conference Committee *(continued)*

Kyoko Ono, Mukti Khanna, and Maria Gonzalez-Blue; the European Graduate School model with Paolo Knill, Margo Fuchs, Ellen and Steve Levine; Collaborative Creative Process by Sally Atkins and the Appalachian State University team; Jungian-oriented Expressive Arts Therapy with Kate Donohue; The Focusing-Oriented Expressive Arts by Laury Rappaport; and Attunement in Expressive Arts by Mitchell Kossak. Other presenters highlighted their work in various Asian countries as well as the West on a variety of clinical, research, social justice, and contemporary trends. The selection offered participants the depth and breadth of the ways expressive arts is being used with individuals and communities globally.

### Highlighting Global Issues

Another emphasis of this conference was the empowerment work in Cambodia for orphans with AIDS; the Nepal project in which seven Nepalese trainers were sponsored so they could attend and share their profound work in fighting against human trafficking to save women and children. These are just two examples of the incredible work that is alive and thriving in Asia. Additional global issues focused on Palestinian concerns, as well as gender, sexual identity and issues of aging. These fifty juried workshops reflected the splendid work the expressive arts community is providing the public at large.

### The Power of the Arts

The power of the arts were abundantly evident in the evening sessions with musicians and a teenage group of the Tung Wah Group of Hospitals who use the arts for healing, bonding and addressing social issues. This group of young artists won our hearts. They danced with one of the Hong Kong officials who welcomed us to Hong Kong, celebrating their city and the fruits of their process with the expressive arts. A tender moment came with the announcement of our Shining Star Award, given to a pioneer in the field who has contributed to the development of expressive arts and IEATA. There were many of the elders there who were previous "Shining Stars" - Paolo Knill, Kate Donohue, Steve and Ellen Levine, and Anin Uitgaard. Natalie Rogers, Jack Weller, and Anna Halprin were not able to attend but were honored in our hearts and within the community that evening. The award this year was given to Maria Gonzalez-Blue. Trained by Natalie Rogers, Maria and Anin Uitgaard asked the group to sing happy birthday to Natalie as it was videoed to send to her in California for her birthday morning. This was incredibly touching as we later learned Natalie Rogers died the following week. This birthday turned out to be her last, and she left knowing we all honored her at the conference. Natalie was also our first Shining Star, and the first of the august group to pass on. IEATA is hoping to set up a scholarship in her name.

### Arts in the Community

The second evening was co-hosted by IEATA and Arts in Hospital. The shared hosting of the conference bridges another theme—arts in action—as participants were able to visit this hospital program and observe the real application of the expressive arts in use in one place in Hong Kong. The conference also offered a forum for regional groups from around the world, which encouraged members to join globally and meet locally. The regional groups will be offering symposiums in the years in-between the IEATA conferences, have local meetings for sharing, and will continue to de-

## Report from the Conference Committee *(continued)*

velop a community in their region of the world and work to have the expressive arts be recognized all over the world. The IEATA Membership Committee was very active, having recruited more than 125 new members mainly from Asia due to this conference in Hong Kong. The Asian participants are committed in further shaping the development of expressive arts in education, community projects, and clinical practice. Another wonderful aspect of this conference is how the elders of IEATA played and danced with the future leaders of IEATA. It was a wonderful sight at the closing of the conference to witness the history and the future of IEATA come alive in the flesh with our final tribal dance.

### Pre-Conference

Besides the conference itself, there were a number of pre-conference workshops in which participants could spend more time learning from the pioneers from both the East and West. Among the trainers were the Levines, Knill and Fuchs, Halprin, the East-West contingent of Person-Centered Expressive Arts, agency visits, and Dance in the Walled Village. The Centre on Behavioural Health of the University of Hong Kong provided the venue for these pre-conference events and were exceptional hosts. Participants are always hungry for depth and got more than they hoped for with wonderful results.

### Challenges and Next Steps

There were many challenges that arose from the conference theme and dialog. One of the primary concerns was effects of colonization in the East and the impacts of internationalization. We are mindful of not repeating this disproven model as we find new ways to bridge the wisdom of both East and West. In a new vision, instead of solely following the approaches of the West, each country can develop its capacity to sculpt their own version of expressive arts. As we become a much more international community, one question that emerges is how do we embrace a diversity of emerging models that preserve one's cultural identity while emphasizing the collective benefits of a global community? This will be a continuing dialog for IEATA and its future international members.

The final challenge for our professional community is how to keep the energy and enthusiasm created from this first Asian conference alive and active in both the East and West. Hopefully, the visioning session at the Chinese University of Hong Kong at the end of the conference developed by the Executive Co-Chairs, Lisa Herman, Mitchell Kossak, and Yousef Alajarma, will help the many regional groups find ways to stay active, build our global community, and address the international issues through peaceful, nonviolent, creative, and innovative approaches to expressive arts therapy. Hopefully, with the Tao coming home to China and honoring the ancient wisdom of the East, the "way" of expressive arts can evolve in a meaningful way in our struggling planet.

Our next step is to let the wind bring our conference back to the West in Winnipeg in 2017. Please visit our website for more details: [www.ieata.org](http://www.ieata.org)

*Kate Donohue, Fiona Chang, Lisa Herman,  
Grace Cheng and Pearl Tse*

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## Running with the Wild Horses by Andrea Cuellar

Being a wild horse means defying the status quo. It means vitality, energy but overall freedom; it's remembering who we really are, where we come from and reclaiming our humanity by allowing our true self to be seen, heard, and be loved.

I came to the conference hoping to get a deeper understanding of expressive arts and I certainly did. I admired the passion showed by presenters, volunteers, staff, and participants; their kindness and human warmth embodied the essence of expressive arts: connection, support, and community.

The workshops provided me with new knowledge and allowed me to experience different approaches to expressive arts. Nevertheless, the biggest lessons resulted from engaging in meaningful one-on-one conversations with amazing women who fueled my inspiration and courage to keep pursuing my goals in this field. Chi, Paulina, Graciela, and Maria, I keep your words of encouragement close to my heart.

A highlight of the conference was getting to know more about the person-centered approach. Just recently I finished reading Natalie Roger's books after being highly persuaded to do so. I have to say that besides being incredibly captivated by her work and the gracious human being that comes through her writing, I feel so privileged to have had the opportunity to celebrate her last birthday alongside her expressive arts family, and to have extended my knowledge of her work, which is now a reference for mine.

Another wonderful moment that I still remember with much emotion was getting the chance to participate in the workshop facilitated by the girls from Harambee Arts, Nepal. It was incredibly inspiring to listen to how supportive they are with each other and to witness how expressive arts has helped them heal. Something changed in the room whenever they created art together, either dancing or painting, you could tell their hope was being restored, and in that process they also restored ours.

Just like Audrey Hepburn once said: "People, even more than things, have to be restored, renewed, revived, reclaimed, and redeemed." The conference provided a space for growth, sharing, and reflection. It allowed us to go back to our daily lives with refreshed minds, bodies, and souls.

Thank you, IEATA, for this amazing opportunity!

Best of luck wild horses!

**ABOUT THE AUTHOR:** Andrea Cuellar, Salvadoran psychologist and expressive arts therapist with a great passion for social change. Scholarship awardee at the 11th IEATA conference, The Flowing Tao of Expressive Arts. Interested in incorporating expressive arts therapy in sustainable community projects focused on empowering children and youth in at-risk settings. Currently collaborating with *Save the Children* (Spain) on the project, "Building resilience in refugee teenagers through expressive arts."

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## Understanding the *Flow* by Amos V. Manlangit, Philippines

The theory of the *flow* has been investigated in numerous fields of study. We have artfully tried to capture this phenomenon into words—being completely involved in an activity wherein the whole being is engaged, with skills used to the utmost, (Meng Tan 2012)—which by far I consider is one of the best definitions to date.

It wouldn't therefore be difficult to master the method of managing the *flow*. The 11th IEATA Conference would, essentially, explain it through the science of therapy, which is what I would predict from a cast of powerhouse experts in their respective fields. I prepared myself with a comprehensive review of the fundamentals of my profession as an arts and special education practitioner, adopting a cerebral mindset to arm myself with the array of discourse that would happen in the exchange.

The conference finally commenced with much anticipation from participants the world over.

Like a twist characteristic of movie plots, it jolted us with a warm, intimate embrace—far from the “expected” storyline. This initially made me wonder if I registered at the right event. But as the hours unfolded, my expectation of a mostly lecture-oriented activity simply collapsed. The *flow* of the programme disarmed us with a highly expressive atmosphere, instantly breaking the ice between us and the organizers to share our lives with each other like long-lost colleagues, artists, friends.

I had packed my bags and left some deep, personal issues in Manila, hoping they wouldn't distract me from my grand agenda. I realized that unpacking this emotional baggage would serve as my ticket to getting a full grasp of the theme. Suddenly, I was dealing with my issues in the center of it all—definitely frightening—yet the most crucial of what was to become my beautiful creative journey guided by the workshops we customized for ourselves. I drew on my personal experienced and wrote my thoughts on paper. It released my inner tensions.

I committed to let each activity *flow* within me, baring my soul without any assurance of a closure. As I surrendered myself to each activity, my facilitators used their great expertise to save me and pull me back at just the right moment to document what I underwent and capture the framework drawn from the experience.

I was concerned when to end as the recipient and begin as the student documenter. But the risk-taker that I am, I blurred these distinguishing marks for the sake of the *flow*. The risk paid off. My submission facilitated a dual learning experience, which I saw was the strength of the conference—to let its participants benefit from the creative process and simultaneously understand the *flow's* potential in helping others.

If *flow*, then, was the icing on the cake, I experienced it on multiple levels. The *flow* made me listen to the nature of my being. The *flow* carried me under a safe environment of a very open-minded Hong Kong that was prepared for us all. I believe the way of the Tao was fully alive within us all at this side of the world.

I went home with a renewed vigor to pursue our advocacy in my country. A paradigm seemed to have shifted. I began to visualize myself not as an ordinary practitioner helping people. I became the

(continued)

primary recipient and testimony to the work that I have been doing. Through the conference, I realize this as the method of managing the *flow* that I have been looking for, the kind that streams into the very heart of the people I am helping. The way to working with somebody else's *flow* is to understand mine.

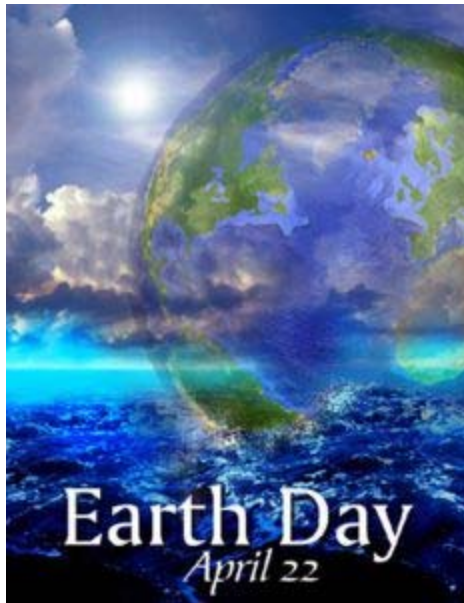
Citation:

Meng Tan, Chade (2012) *Search Inside Yourself*. USA: Harper Collins Publisher.

**ABOUT THE AUTHOR:** Amos V. Manlangit, 35, is a freelance special education and visual arts teacher to children and adults with special needs in the Philippines. Both as a teacher and principal of an inclusive school for seven (7) years, he had the opportunity to work with students having different kinds of conditions such as Autism, ADHD, and Intellectual Disability. He witnessed the tremendous benefit of the creative process to his students through the enjoyment, relaxation, and focus they experienced in an expression-oriented program he implemented.

Realizing its power as a therapeutic tool, it has fueled his passion to further build his capacity to utilize the different kinds of expressive forms of visual art, music, movement and dance in his work as a Special Education practitioner. His goal is to expand his horizon in perceiving the arts in his home country as a therapeutic tool and combine this with his background in the fine arts to maximize the client's experience of expression. In this way, he can gradually move into a new platform of using the arts as a form of intervention in the Philippines.





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**"Life is either a daring adventure or nothing!" —Helen Keller**



# A Housewife who got her Wings through Natalie Rogers and Person-Centered Expressive Arts

by Setsuko Miura, Japan

In 1985, when I was 50 years old, I began to learn counseling in Ofukai Counseling Institute, which was founded by Haruko Tsuge who had studied under Carl Rogers, as my life-long learning.

In January of 1989, I read *Emerging Woman*, written by Natalie Rogers, which had been translated into Japanese, and took part in a book group held by a member of the institute. I was deeply impressed with Natalie in the book. "How honest she is to herself!" "What an independent woman!" "I would like to meet her!" When I read through it, I decided I would go meet her. But I knew it was not so easy. It seemed difficult, as if passing through the eye of a needle. The reasons were that she lived in America, that I had never traveled even my country by myself, and that I could not speak English very well.

Little by little, I made an effort to realize my difficult decision that my family, (husband, son, and daughter who were university students,) thought impossible. At first I began to go to an English conversation class once a week after supper. And I did piecework of proofreading to make money. Then in February I traveled to Kyoto for three days by myself. While traveling, I felt uneasy but I experienced traveling alone for the first time. In October I was blessed with the good fortune that one of my friends was looking for a traveling companion who wanted to go to California. She wanted to visit her daughter who was a student of UCSD, but she was afraid of going alone. This was a good opportunity to go to La Jolla in California with her. There, I visited Carl Rogers Memorial Library and the house where he had once lived. It was a wonderful experience for me. I learned how to go abroad through this trip.

Next autumn I went to La Jolla and visited the Memorial Library again, with my husband. The director of the library welcomed us and brought us to the house standing on the hill with a nice view, Carl Rogers' family home. After this trip, my husband began to learn about counseling for his managerial position. Our common topics increased and he began to understand why I wanted to see Natalie. In July of 1982 I went to California alone to attend "The La Jolla Program" and "Living Now Program" held by the Center for Studies of the Person. This experience was literally the first step of my self-reliance. I could enjoy the programs in the person-centered environment. It had been three years since I read *Emerging Woman*.

On the opening day, when I entered the theater, I was amazed at the sight. Colorful costumes and art materials were displayed. Music was flowing. Some people were dancing. Some were beating drums. It was a strange world to me. I was standing by the wall like a timid turtle pulling out her head a little and looking around under her shell. I was the only Japanese.

The opening session began by Natalie's facilitation. I concentrated on her words and followed her directions that were person-centered. She said that we did not have to do the exercise if we were not comfortable. I was not uncomfortable, but I hardly spoke.

The next session's facilitator was Patricia Waters. We drew three pictures. I remember the third picture, "Whatever you want." When I finished it, a purple round thing covered with needles where were surrounded with a lot of jabs, was on the paper. I felt it was me who had been inside for a long time. I wrote the word *obedience* on the picture. I was disciplined under a controlling father and I got sufficient protection from my parents. Actually, I was dependent and obedient but I did not recognize that my inner self was so hurt by it. I had become accustomed to it. A person who shared my piece told me that it

(continued)

looked like a beautiful flower. After that she said to me, "Setsuko, there is your flower in the restroom." I went there and saw a vase of a big purple flower like a thistle. I felt that my pain, which I did not recognize was so serious, had changed into some new power to transform myself. It was lucky for me to have such an experience at the beginning of the training program.

Though I attended the program to meet Natalie, I enjoyed new experiences in each session through expressive arts in safe and comfortable environment. And I made some friends. I remember that Maria Gonzalez-Blue, the facilitator of Level II, offered us Haiku session. I was glad for her thoughtfulness and enjoyed English Haiku. By the way, coming back from California, I joined a Haiku group and extended my world.

I remember that one person who I spent the two programs together with said to me, "I enjoyed seeing you blossom like a cherry tree in spring." Yes, I felt I changed. I felt as if I had wings on my back instead of a shell. But they faded away within a few days after I came back home. Since then, every time I went to California, I felt this feeling of wings. I knew how much I was released through doing artwork in the person-centered and comfortable environment.



I continued PCETI's programs. I attended the Level III program in January of 1996 and the Level IV program in July of 1996. I remember many things that I experienced in these programs. Above all, I remember that Patricia encouraged me by the exercise called "Yes, I can—Yes, you can" before counseling triads. I was very nervous because of my poor English. When I face a difficult problem, I still use this exercise in my mind, thinking of Patricia. Thanks to a lot of support of faculty and members, I finally graduated from PCETI in 1997. In those days, expressive arts therapy was not familiar to Japanese. So, I wanted to introduce it to them.

In May of 1998, I opened the first playshop of expressive arts therapy, which I called "Kokoro-no-Atorie," at the community center. It was a small group I limited to 10 persons. I held it each month for a half year. Then I continued it every other month 'til January of 2000.

After that I suffered from a serious disease and I spent two months in the hospital. Fortunately, as I could move, I spent much time doing expressive artwork while in bed: drawing, folding paper, writing, creating new arrangements from the flowers I received as get well gifts. Thanks to expressive arts, I did not feel depressed about the disease. I just experienced "*Creativity is healing.*"

In May of 2001, I reopened "Kokoro-no-Atorie" and continued 'til June of 2007 every other month. After that, I have held it irregularly. I also did person-centered expressive arts therapy workshops for a large group at the Ofukai Counseling Institute.

Since July of 2007 I have offered "Kokoro-no-Atorie" to the elderly persons at the day service center once a month as a volunteer. When I make a program of my playshop, I try to take a sense of the season. I close with tea, giving participants a chance to share informally and relax before leaving. I enjoy spending time

*(continued)*

with them, and I am encouraged so much by them. I am old myself, but the oldest person is 90 years old and most of them are older than I am. Some of them say that doing arts work is useful in dementia prevention. I definitely agree.

It was necessary for me to release myself and to study more about expressive arts therapy. And I wanted to see Natalie and other faculty members, so I attended the workshop of expressive arts in California and Japan again and again after graduation. As previously stated, I was released and felt as if having wings on my back in California. But they faded away when I came home. But when I attended the workshop facilitated by Shellee Davis and Sue Ann Heron, which was held at Westerbeke Ranch in March of 2010, I felt that my wings had gotten much stronger without my noticing. And they did not fade away after I came back to Japan. Since then, sometimes I feel wings spread on my back when I am at home. But I cannot yet feel flying high in the sky leisurely. I will continue expressive arts from now on, aiming to fly in the sky with my wings freely.

### An IEATA Tribute to Natalie Rogers



Natalie Rogers spent her life advancing the work of her father, (Carl Rogers, the father of modern counseling,) to include the Expressive Arts. She co-founded the Person-Centered Expressive Arts Therapies Institute, the International Expressive Arts Therapy Association, and was committed to positive change in the individual and the world.

[Click here to watch IEATA's tribute to Natalie Rogers video](#)

### *At the Altar of my Senses*

Back door porch  
Early October morn  
Sun peeking through the  
Tall tree readying  
To turn

I breathe in the  
Mild air, still  
Fragrant with a  
Hint of smoke from  
Last night's dinner

Sipping of coffee  
Following a hearty  
Breakfast of seed, grain  
And green  
I listen in the distance

A piece of lawn equipemnt  
Tries to drown out the  
Chirping of the birds  
But is not successful  
The bird's signal God's presence

My flannel top  
Keeps me snuggly  
and warm for this  
Blessed morning ritual  
Just being here with God.

■ Jamie Marich





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## PROFESSIONAL EXCHANGE

### Reflection and a Question: Where are we Headed?

by Nina "Anin" Utigaard, MFT, REAT

It has been 23 years since IEATA was first rocked in that cradle of promise. 22 years since its inauguration at its first conference in San Francisco in 1994. As Co-Chair for that first conference in 1994, I found myself reflecting back on the differences between IEATA's first and our 11th in Hong Kong this past October. And, as I looked around the room in Hong Kong and viewed the diverse, global crowd around me, I could not help but pinch myself. I felt an immense pride and sense of accomplishment as a community and as one of the original founders. What an incredible and amazing journey it has been since that first year in 1993.

It was the energized passion of a small collective of people who brought us to where we are today. And while it has grown substantially from those first 40+ people who all shouted, "Let's go for it!" some aspects and foundations remain the same. Or, that is my hope.

As one of the first 4 Interim Executive Co-Chairs, along with Jack Weller, Stephen K. Levine, and Phillip Speiser, I felt the rumble and the excitement of what our community and field was hungry for: representation. Having been the one who requested the fictitious business name at City Hall in San Francisco; and the one collecting names of founding members along with their emails, phone numbers, and contact information; while also conversing with these same individuals about their passion behind what we were doing. I knew the value and importance of what we were embarking on.

Our founding members longed for an organization that truly represented what they offered to their clients and community. They wanted an organization that was inclusive and honored the artists who provided support in their community, along with therapists who used it in their therapeutic sessions, as well as the teachers and consultants who used it in their classrooms and with groups. Those early members knew distinctly what set us apart from Art Therapists, Drama Therapists, Music Therapists, and Dance & Movement Therapists: we combined the arts together. We worked multimodally, connecting the arts and using the modalities like layers of an onion, to further explore the issues that were challenging those we supported.

In Natalie Rogers' early book, *The Creative Connection: Expressive Arts as Healing*, that came out in 1993, the same year as our first gathering that fueled this dream, she described clearly the philosophy and foundation of Expressive Arts Therapy. With her method, which she called the "Creative Connection," one began with one modality that the individual selected and then the facilitator or counselor, sensitively and following the needs of the client(s), offered a menu of additional modalities to further explore the drawing or the written words or the movement. So, the client would then be invited to find a sound that represented the drawing, or a movement that was inspired by the painting, or a drawing that captured the movement originating from their body. Each layer provided the individual an opportunity to dig deeper into the issue to discover additional information or feelings to assist them in finding new understanding, to release and/or to find closure. Natalie Rogers was one of IEATA's founding members and her ideas and methods have long been the foundation of the International Expressive Arts Therapy Association.

As many in our founding community are aware, for many years we were considered the bastard child of the

## PROFESSIONAL EXCHANGE

*(continued)*

Creative Arts Therapy community. Much of this was due to the earlier beginnings of the field, which were handcuffed by an individual who I experienced as ungrounded, unethical, and reckless. He is exactly why the early co-founders of IEATA wanted to start this great new organization: to give the field of expressive arts therapy some validity and respect. So, we broke away from the “for profit” organization that had no board, no ethical guidelines, and no fair system for the members to speak out about some of the concerns that were coming to the forefront. The parent expressive arts organization was basically the sole money-making venture of one individual. Naturally, it was because of these earlier rough beginnings of this field that it took many years for IEATA to gain the respect of the larger Creative Arts Therapy field.

Expressive arts therapy, like all other specialties and creative arts processes for healing, is a specialty as well. In my teaching at John F. Kennedy University at the Berkeley Campus, I try to demonstrate and explain this difference and unique approach to my students. Expressive arts therapists use creativity and multiple modalities together to work with clients and individuals to improve their quality of life and to address life’s challenges. There, I said it. I hope that’s clear!

It is my hope that many in the field read this article, as I find it very confusing when I attend conferences in New York or other places or countries to try to explain this. I also find it frustrating to hear others label what they do as “expressive arts therapy” when, in fact, they are clearly a drama therapist who, once in a while, brings in art or writing but primarily focuses on drama therapy. This is not expressive arts therapy and this does not represent how our founding members worked.

While my views may not be popular with some, again, as one of the co-founders of this organization, it feels like my obligation to give voice to what was the original intention and desire of IEATA’s founders. I have heard recent discussions and rumblings that we need to be more inclusive and go with the change. I have nothing against being inclusive or growing. In fact, I was one of the ECCs that really pushed for us being an international organization because of the many individuals I was meeting in my work with the Person-Centered Expressive Therapy Institute; individuals from the Ukraine, Japan, Mexico, etc., who also worked in a similar way. We absolutely do need to consider the needs of our international community and the rest of our global family. I just want to make sure that we don’t dilute our original vision of what we are and what we represent. I don’t want us to lose sight of our uniqueness in the field.

My hope is that IEATA continues to represent and support its members without losing its initial intention and dream: to represent those of us in the creative arts therapy field who work multimodally. And it is also my hope that as we continue to honor individuals with the status of REAT (Registered Expressive Arts Therapist), we make sure that they do, in fact, work multimodally and accurately represent our organization. Otherwise it gets more confusing and our uniqueness and specialty will be lost.

I remember years ago at a conference, the ECCs at the time asked members attending a community meeting following a conference if they were wanting to change the name to “International Intermodal Expressive Arts Therapy Association,” a topic that had come to the forefront to, again, protect the original uniqueness of how we work. As it turned out, the majority did not want to change the name, but a few were edging in that direction. We moved on, standing with our original name, honoring what we offered

# PROFESSIONAL EXCHANGE

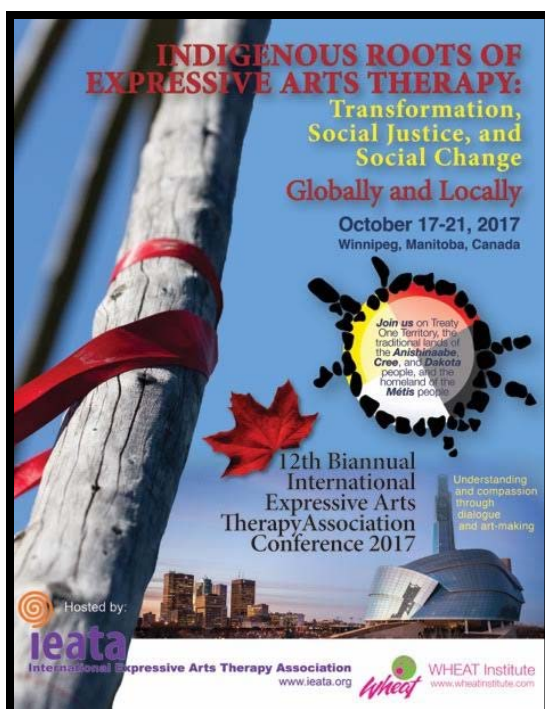
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in the world.

Whenever a major shift or question comes up in the community and/or with the board, it must be presented to the larger community in some form or fashion. Our integrity and value to our members depends on this system, trust, and awareness.

My sincere hope is that IEATA will continue to represent me and the specialty that I have based my almost 30 years of practice on. We are an amazing organization with amazing members who provide incredible service to their community in all parts of the world. Standing in that crowd in Hong Kong brought that home to me again. It would be very disappointing and sad to discover that the original vision and dream set forth by those determined and passionate individuals back in 1993, a vision that many have voluntarily worked so very hard to achieve and continue to feed, was dumped without notice to its members.

**ABOUT THE AUTHOR:** Nina 'Anin' Utigaard (AKA Nina Simon), MFT, REAT, was a co-founder and one of the first ECCs of IEATA. She was a board member with IEATA for over 20 years and was the "Shining Star" recipient in 2013. She is now an IEATA Advisory Board member. She is an adjunct professor at John F. Kennedy University and was a faculty member of the Person-Centered Expressive Therapy Institute from 1992 to 2004, with Natalie Rogers. She has a private practice in San Francisco and works with individuals, couples, children, and families offering expressive arts therapy in a person-centered approach.



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### Using Cadenced Guided Imagery Technique® with the Expressive Arts for Healing Trauma (PTSD) by Roxanne Daleo, PhD

This is the practitioner's guideline for healing trauma which includes three essential elements: (1) the rationale for the overall methodology; (2) the phases of taking someone who has been traumatized into a state of deep relaxation; and (3) the sample narration scripted with specific annotations highlighting the technical construction, wording, and healing imagery. Please note the following method, developed over 20 years of clinical experience with traumatized children, is different in language and style from imagery work for adults. This is the specific cadenced, guided imagery created for girls 7-11 years old and later, produced for a broader population.

#### RATIONALE

The neuroscience of traumatic memory distinguishes itself from everyday memories in that instead of forming specific memories of the full event, people who have been traumatized remember images, sounds, and physical sensations without much context. Researchers like Bessel van der Kolk remind us it is important to recognize that PTSD is not about the past. It's about the body that continues to behave and organize itself as if the experience is happening right now. Therefore, when we are working with children who have been traumatized, it's crucial to help them learn to feel the present as it is and to tolerate whatever goes on. The past is only relevant in as far as it stirs up current sensations, feelings, emotions, and thoughts. The story about the past is just a story that young clients tell to explain how bad the trauma was, or why they have certain behaviors. The real issue is that trauma changes people. They feel different and experience certain sensations differently.

The main focus of therapy needs to be helping people to shift their internal experience. We need to resist asking the person to talk about their traumatic experience because talking distracts from, takes them away from noticing. And the ability to notice or pay attention to what's going on within themselves fosters the shift in the internal experience.

This is why the best methods are nonverbal, multimodal where the main task is to help people notice what they notice, to see how things flow within themselves, and to reestablish a sense of time inside. To be present, in the present.

Traumatized people have developed a poor relationship to their bodies. When they have been traumatized, they shut down. Wanting to be out of their bodies becomes a conditioned response. Our natural, primal instinct is to fight or flee. This is at the core of trauma, the traumatized can't fight back or run away. Moving the body back to feeling calm, safe, and strong is an important part of dealing with trauma. Our work is to help find solutions connecting to the body/brain.

Across cultures and for thousands of years, the breath has been central to calming the autonomic nervous system through such practices as Tai Chi, Qi Gong, yoga, Mindfulness, and guided imagery relaxation. In order to learn to control your arousal system, you must learn to control your breathing. There is a clearing

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space in the breath. The more flexible your breath, the more well-regulated your heart rate and metabolic rate. Repetitive, rhythmic breathing turns the volume down on the hyper-arousal of the autonomic nervous system and allows the body to shift gears into deep rest. This shift is essential to healing. Trauma is held in the body, but recovery is about noticing your internal world and noticing your self—your internal experience—your external landscape.

How do you help people feel safe inside so they can tolerate hyper-arousal? You first set up the external conditions for listening and relaxing: (1) a quiet space free of distractions such as computers, radio, mobile devices; (2) stretch and then settle into a comfortable position. Integration is the method of treatment of trauma for becoming calm, safe, and present. Guided imagery combined with music and the expressive arts creates a state of safety, calm, and presence.

### PHASES OF CADENCED GUIDED IMAGERY RELAXATION FOR CHILDREN®

The phases of delivering Cadenced Guided Imagery Relaxation Technique® with expressive arts when taking someone who has been traumatized into a state of deep relaxation are rapport, invitation, induction, suggestion, deepening, reorientation, and affirmation. This is the progression, this is the intention, to use your voice cadence, rhyme, and music to move from one phase to the next seamlessly and rhythmically.

Many therapists have expressed to me the problems with ineffectiveness of their efforts with young clients using the “one-size fits all” scripts. If you have ever wondered why, it is because the way to use guided imagery and music with children is to understand the use of the creative, indirect method. I am referring to the child’s energetic “start point” or “vibe.” This physio/psychological/energetic state where they “hum” at a certain frequency. Matching them at this waking state/vibration is to find the line in to guide the progressive relaxation. I use the rhythm, rhyme, and melody of this waking start-point to begin imagery work with the child.

#### **Establishing Rapport:**

Any good therapeutic intervention begins with rapport. If it is possible, introduce yourself using art materials such as color pencils, crayons, water colors, or clay then invite your client time to draw, paint, scribble, or mold. I recommend the use of instrumental music during this phase to set the tone, the relaxing atmosphere. Learn about her favorite colors and shapes. Instruct her to *“Just let the crayon or brush express itself and move across the page.”* You can weave this personal information into your guided imagery journey later on. The calmer you are, the more likely the child will entrain to your energy level through your voice and be carried along.

#### **Opening the Invitation:**

The best results are achieved when the person is motivated to learn skills in self-regulation to shift their internal experience. You can use opening statements that “invite” the person to participate which optimizes a sense of choice. My favorite openings are, *“I know an awesome way for you to feel your power*

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*again, shall I show you?" and "I know a special way to help you help yourself be calm and well-supported, okay?"*

### The Induction:

Using an easy to follow count with visual imagery, you can help your client learn the body/brain connection. The stone stairway or a stairway of any kind, is an image that simply synchronizes one breath at a time, one step at a time. Add sensory cues and connect to the body, *"Maybe you'd like to sit for a bit in a quiet place to take time for yourself in a new way. Perhaps you can find some pillows or a cushion so you can be as comfortable as you can,"* [the induction phase begins with gentle suggestions to optimize a sense of choice.]

### SAMPLE CADENCED GUIDED IMAGERY NARRATION

#### The Suggestion:

*"Listen to the music. Hear a melody? It's calling you with the rhythm of waves in the sea. Feel the notes as they hum and play, gently tapping over you, waking up your Mindworks and imagination, too. The music frees your own heart song; breathe deep, breathe long,"* [this type of suggestion enables connecting to the body]. *"Breathing deep and breathing long is how you find the moment of magic; the magic of 'now';*

*"Close your eyes,"* [if you like, again, no demand]. *"Breathing in, breathing out,"* [repetition reinforces awareness of the automatic, self-soothing process of rhythmic breathing];

*"Imagine, when you open them, you are in the middle of a warm, sunny day. Hear the ocean and children play. Imagine you are standing on a pearling beach. Stretch up your arms above your head to reach,"* [features of a kinesthetic suggestion that allows the listener to drop into the body];

*"Then bend down to touch the sand. Perhaps you'd like to hold a pearl in the palm of your hand,"* [again, use of visualization to gain internal control];

*"Breathing in, stretching up, breathing out, bending down. Stretching up—in comes new, fresh air. See love coming in from everywhere. Empty the old and leave it there. See love coming in from everywhere,"* [use of metaphor to suggest a new perspective and the novel idea that breathing naturally and automatically can be easy and self-calming];

*"See love coming out of the sun and the sky. See love coming out of the rocks and shells nearby. See love coming out from everything around you. See love,"* [work with the musical melody as much as possible when delivering the story]. *"See love in this moment and this one, too,"* [suggesting the use of breath to bring a new mindset and clear mind of old disturbances].

#### Deepening Relaxation:

*"Sea love,* [use of alliteration, poetry of see and sea, the brain accepts without resistance], *creates an en*

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*ergy high in you. Refreshing your body through and through,”* [now the breath also clears the body of pain, renews and refreshes with the breath];

*“Sea love makes your heart smile,”* [a strong, visual image to connote inner strength and happier possibilities];

*“And when your heart smiles, you feel joyful and free. This is the way you were meant to be. This is your true self,”* [the core of this work is heart-centered self-love], *“as natural as the rhythm of the sea. You are full of love, accept yourself just the way you are,”* [nonjudgmental, non-critical language to the self];

*“Be a friend to the ‘You’ inside,”* [again, insight to an inner landscape, an inner experience of the true self, the one who is peace, joy, and love].

### Reorientation:

As in the beginning, reorientation has a bookends pattern to return from the relaxation bringing the listener back with a ‘gift’ of new perspective through the automatic, rhythmic breath with which she began. Allow instrumental music to play during the reorientation phase. This fosters integration of internal resources for healing.

*“Breathing in , up to the sky. Breathing out, down to the sea. I feel the rhythm of my breathing easily—gently ebb and flow. Watching the rhythm come and go. Breathing in, up to the sky. Breathing out, down to the sea,”* [use of affirmation and personal phrases to own the new perspective];

*“Walk down the beach. Feel the soft sand smooth your feet,”* [adjectives such as soft and smooth connote kindness and self-care];

*“Find a comfortable spot of sand for your seat. Sit up straight. Place your hands on your lap. Feel your breathing rise up and then down, in and out. Now imagine you focus your new eyes to see,”* [‘new eyes’ refers to new inner vision]. *“All is new, here and now,”* [this anchors the listener in the awareness of choice and insight to carry back from the guided imagery experience];

*“Be aware, you are awake not asleep. Each time you breathe, remember to keep your focus on your breathing, here and now,”* [repetition of the notion of the here and now has a kind of magic to heal yourself];

*“Calming yourself and slowing down,”* [reinforces inner knowing and sensing]. *“Feel the breathing rise up and then down. Breathing in and then out...”*;

*“Now imagine you look out and notice the surface of the sea where splashing waves are moving, changing constantly, like movies of the mind, like pictures words create, like thoughts, pesky or not, that can be bugging you. Become aware of the thoughts your mind makes for you,”* [again, no comment about the negative quality of thought, just the fact that your mind is a factory of thoughts and you are the one who

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produces them, setting the tone for an empowering return from the relaxation experience with a new coping skill];

*"Watching your thoughts, breathing in. Watching your thoughts, breathing out,"* [instructions for self-regulation of mind states];

*"Imagine you go below the surface to find the pearl, your true center place, that part of you that cannot be disturbed by a changing ripple of thought or mood above. It is your inner you, you love, the stillness that does not waver."*

### **Affirmations:**

Seal the relaxation experience with strong, positive, self-affirming messages:

*"Say to yourself—I can stay in the storm or I can go below. The choice is mine, now this I know. I can choose my peace instead of the storm."*

*"Feeling my breathing is the way to begin. Watching is the way in. When I quiet my mind, I find the pearl, the still point, the treasure within. It is my quiet self, my peaceful self, the inner me I love, where stillness, calmness, peace within is all I feel, is all I am."*

*"My peaceful center as precious as a pearl; my treasure for life."*

### **EXPRESSIVE ARTS INTEGRATION**

After the cadenced guided imagery relaxation journey, creative expression is at its peak. This is a good time for your young client to make up a story, poem, dance, or to paint. Pearling® is the creative process that allows the child to explore their own imagination and fully express the concepts introduced in the narration. Below is a selection of multi-sensory, multimodal expressive arts activities for playing with the idea of Pearling® as a metaphor, song, finger dance, body awareness exercise, artwork, and a complete children's theater production. All these creative options can also be used by the expressive arts therapist to assess the child's internalization of inner resources for coping and the child's level of mastery.

### **Metaphor of Pearling®: the Internal Shift**

For centuries, the pearl has been a symbol of great value found only in the depths of the ocean. In this musical cadenced guided imagery narration, children learn how to drop into a restful state and help themselves reframe a stressful situation. Just as the oyster turns a grain of sand into a pearl, the relaxation takes the listener on a journey of self-discovery by teaching children the art of "pearling."

Listening to rhymes, rhythms, and music of the ocean, children follow their breathing and become present in the moment. They are learning how to watch their thoughts without becoming upset and redirecting

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This effective stress management technique is designed to bring children to a new level of self-acceptance.

Pearling® is the method of becoming like an oyster who takes in a grain of sand, an irritation, turns it and grinds it into a pearl—a pearl of wisdom. Pearls have long been considered precious treasure. Pearling® becomes the method of reframing stressful situations leading to a gift. The treasure within is the new-found awareness and recognition of “my quiet self, my peaceful self, the inner me I love.”

### **Pearling®: as a Kinesthetic Learning Process**

Using objects from the natural world, in this case a real oyster shell, a grain of sand, and a pearl, activates the imagination. Kinesthetic learning fosters internalization of the concept, “turning irritation into a pearl.” And so, just as in the guided relaxation journey—watching the images and thoughts, letting them go by—so, too, inviting movement and dance keeps the body in a state of flux, change, flow thus allowing individuals to move along with what comes up. And because something else will come next and something will come to an end, the person is helped to be with the movements of shifting. This reframing is crucial in order to have a new perspective.

We respond to the vibrations of music mentally, physically, and emotionally, (Weinberger, 2006). Music “brings us along” with rhythms and moods and can shift our energy level, attitude, and overall state of being. Music not only affects our movements through dance, but it affects our inner bodily processes such as heart rate and respirations, (Krout, 2007). Slow cadenced guided imagery (Stanford study of Daleo audios, 1998) triggers the relaxation response, the term coined by Herbert Benson, (Benson 1976), and reverses the hyper-arousal state.

### **Pearling®: The Theme Song**

The use of song and music for learning and recall has been established in the literature. Intentional sound is one of the fundamentals of cadenced guided imagery. Sounds including spoken word, music, and song accentuate the tempo, meter, and mechanism tapping into the child’s imagination. The theme song can become the line-in to listening, paying attention, and making conscious contact with the young client’s inner life.

To conclude, integration is the method of treatment for trauma for becoming calm, safe, and present. Guided imagery combined with music and the expressive arts creates a state of safety, calm, and presence. Cadenced Guided imagery combined with music and the expressive arts creates a state of safety, calm, and presence.

You and your child’s energy and attention levels affect the integration of the internal shift. The natural phenomenon called entrainment plays an important role. Entrainment explains how musical rhythms can change how we feel and how it improves our efficacy as therapists by humming at the child’s frequency.

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Cadenced Guided Imagery Relaxation Technique® “brings the child along” promoting healing at the deepest levels of our being.

**ABOUT THE AUTHOR:** Roxanne Daleo, PhD, IEATA Educational Resources Co-Chair, is a Health Educator and national authority on stress reduction for children, who has extensive experience combining mind-body healing techniques with the creative arts. Renowned clinician, leader, and pioneer in health psychology, she has an unwavering passion for helping children discover their inner resources and realize their own self-worth. As a counselor in Pediatric Relaxation Therapy specializing in stress disorders, trained in relaxation and stress reduction at Harvard University Medical School, Division of Behavioral Medicine, and the Jung Institute combine evidence-based mind-body techniques with expressive arts and anchors her work in one of the most powerful methods for awakening natural healing within.

She produced a series of audio recordings of cadenced storytelling, guided imagery, and music which lead to her founding of Mindworks for Children® and hosting the Mindworks for Children® radio program. Her groundbreaking work provides children, parents, and caregivers with access to their own internal source of strength, love, and innate gifts.

Click [here](#) to listen to: *From a Grain of Sand, I Can Make Pearl*, Expressive Arts Activity

Visit her website [www.drroxannedaleo.com](http://www.drroxannedaleo.com) for a free gift!



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Niela Miller



## PROFESSIONAL EXCHANGE

**Expressive Arts Therapy Including Storytelling  
Therapy in Cultural Context**  
by Eric Miller, PhD

### **Expressive Arts Therapy**

Howard Gardener's book, *Frames of Mind: The Theory of Multiple Intelligences*, published in 1983, made a big impact in the fields of psychology and education. This work acknowledged that the human mind works in various ways, not just through abstract thought.

This kind of approach has encouraged people to connect their intellects with their emotions and their sensory experiences. It has helped people to live in more well-rounded ways involving developing and integrating various aspects of themselves.

It is interesting to consider why it is that in the modern world, soft skills, communication skills, and self-management skills need to be taught, especially to people working in fields such as finance, engineering, and information technology.

It seems there is a lack of emotional intelligence in many people in the world today. This would include the ability to express feelings and ideas in ways that others can understand. Improving this communication ability may involve developing more working knowledge of one's inner self as well as more empathy for others.

In response to these needs, in education there has been a movement towards experiential learning—activity-based and project-based learning at times occurring in small groups. This does not just concern methods of teaching. It concerns methods of teaching-and-learning, that is, enabling the unique abilities for learning in each individual.

In psychology, this movement has manifested in terms of therapeutic approaches that seek to integrate the conscious intellect with the emotions and with the experiences of the five physical senses.

A common element of all of these new approaches is a discovery, or rediscovery, of the whole self. Along with this has come the realization that the human animal has its own inherent learning and healing mechanisms. Teachers and healers can stimulate and guide these mechanisms.

The goal has come to include helping people to humanize themselves—helping them to develop their humanity. This has also involved helping people to connect with the rest of nature and to overcome those curses of modernism: alienation, loneliness, and the isolation of the individual.

Arts Therapies have arisen to help with these processes. The Arts Therapies utilize projective techniques: clients project aspects of their unconscious minds onto objects they find or create. The arts can be considered as forms of play. When a client plays or does activities in playful ways, material often spontaneously comes up from his/her unconscious. Expressive Arts Therapy can be practiced with clients of all ages.

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Play Therapy was originally developed for use with children but is sometimes used with teenage and adult clients also ([http://en.wikipedia.org/wiki/Play\\_therapy](http://en.wikipedia.org/wiki/Play_therapy)). To date, I have been unable to discern substantial differences between the approaches of Expressive Arts Therapy and Play Therapy.

Whether the process may be thought of as involving projection or as play, once material has come up from the unconscious, once inner feelings have been given a voice, a client can discuss this material and integrate it with his/her consciousness.

The Expressive Arts Therapy process typically involves using numerous art modalities in a single session. Actually, forms of drama and storytelling naturally feature all of the other arts. Participants in such sessions might work with situations, relationships (within a family, organization, community, etc.,) dreams, or other material that is on their minds.

In a session about relationships, for example, participants may draw or paint images. They may make movements and sounds relating to these images or to other aspects of the relationships. They may do individual or group dramatic enactments of the relationships. These enactments may feature speech, and possibly singing and/or other forms of stylized speech, and movement/dance as well as scenery, props, costumes, and masks the participants might make.

The Arts Therapies can be used with individuals and groups, with people who have cognitive challenges, with children, and also with “ordinary” adults.

### Storytelling Therapy

The time has come for Storytelling Therapy to take its place alongside the other Arts Therapies, such as Drama Therapy, Psychodrama, Poetry Therapy, Visual Art Therapy, Dance Therapy, and Music Therapy.

Stories and storytelling are often credited in the literature about Expressive Arts Therapy (McNiff 1981). However, Storytelling Therapy, also known as “Therapeutic Uses of Storytelling” and “Storytelling and Healing,” is only now emerging as a widely recognized and acknowledged practice, (Perrow 2008).

Stories help to give people senses of identity and direction. Self, community, and society are all conceived of and experienced largely in terms of story. Stories are manageable ways to package data and give it meaning, with relatively easy storage in and retrieval from memory.

Telling one’s stories to sympathetic others may help to empower one and give one a feeling of control over one’s life. One may find that a personal experience may involve social issues that may also have affected others. The processes of telling, listening to, and discussing such stories may lead participants to making plans designed to improve their selves and/or environments.

Globally, a social-cultural urge for intra– and interpersonal reconnection and wholeness emerged in the late 1960s. One aspect of this has been the Storytelling Revival. In the USA, the Storytelling Revival oc-

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curred in conjunction with the Civil Rights Movements, first with African-Americans (some of whom held rap sessions,) then with women (some of whom held consciousness-raising sessions and sister circles in the process of developing the Women's Movement and feminism,) and also with gay/lesbian/bisexual/transgendered people, people who have cognitive and/or physical challenges, and others.

A mode of therapy known as Narrative Therapy has been developed since the 1970s, especially in Australia. This method has primarily been used with adults and especially involves stories about personal experiences. One thing that occurs in this process is that clients' coping skills are identified and developed.

I would suggest that Storytelling Therapy could be an umbrella term for the various forms of therapy that are based on Narrative Psychology (<https://wikipedia.org/wiki/Narrative-psychology>). Story and narrative can both be defined as a series of events. Narrative may refer to a mere report of events whereas story may refer to a more processed and artful presentation. I feel it is important to include "telling" in the name of this form of therapy. This acknowledges the potential psychological and social therapeutic aspects of the storytelling process.

One way Storytelling Therapy is practiced is when the client tells a brief version of his/her Life Story. The client and therapist identify outstanding themes and turning points in this Life Story. They then recall and/or create and share with each other stories that relate to these themes and turning points. Thus, this form of Storytelling Therapy is a type of "metaphor therapy."

If need, Life Story Repair can occur. This can be done by helping the client to understand, (1) how the client's life might have gone differently, in challenging ways, from what the client might have expected; and (2) what the client might now do to live as "happily ever after" as possible.

Imagining and discussing all of this may give a client feelings and realizations regarding ways to envision and to live the balance of his/her life.

Clients' dreams (materials from the clients' unconscious) and relevant fairytales, legends, epics, and myths (material from the clients' culture) can also be used in Storytelling Therapy. One type of Storytelling Therapy is Fairytale Therapy (<http://tinyurl.com/07yxjmw>).

Two founding thinkers in the field of Storytelling Therapy are the psychologists Carl Jung, who focused on helping one to symbolically integrate aspects of one's psyche especially through the uses of images and stories, (Jung 1971), and the mythologist Joseph Campbell, who says the stages of the hero's journey as representing the inner maturation and actualization of the individual (Campbell 1949). Incidentally, both Jung and Campbell were especially fascinated by the mythology of India.

One organization that is helping to develop Storytelling Therapy is the Healing Story Alliance (HAS), ([www.healingstory.org](http://www.healingstory.org)). The HAS is a special interest group of the USA's National Storytelling Network.

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### **Expressive Arts Therapy Comes to India**

Visual Art Therapy has been taught and practiced since at least the mid-1990s in far east Asia, especially in Singapore, Thailand, Japan, Korea, and Hong Kong and other places in China (Kalmanowitz 2012). The other Arts Therapies and Expressive Arts Therapies are just now becoming popular in Asia. In October 2015, the Bi-annual Conference of the International Expressive Arts Therapy Association (IEATA) was held in Asia for the first time, in Hong Kong.

Arts Therapies and the Storytelling Revival began in the West. These movements involved helping people in those societies to reconnect with the ancient and with nature. And now these Western practices—which were in part inspired by aspects of Asian cultures—are reaching Asian shores.

In the late 1960s, three ways awareness of Asia came to people in the West were: Vietnam was invaded and occupied by the USA; the Peace Corps, a USA government program, enabled young USA people to teach and do social work in various Asian and other countries; and many young people of the West came to India searching for spiritual enlightenment. A number of the early developers of Expressive Arts Therapy in the USA were exposed to Asia in one or more of these ways.

The founders of Expressive Arts Therapy (EAT) cite shamanism as a precursor of and inspiration for EAT (McNiff 1981). Shamanism is associated with tribal society and culture remains very popular on the folk level of society throughout Asia. A shaman is a ritual specialist who communicates with spirits on behalf of human clients. Two ways this may occur are a shaman calling spirits into his/her body or a shaman going on spirit journeys to visit spirits.

Both the shaman and the Expressive Arts Therapy session leader use various sensory modes to facilitate communication between ordinary consciousness and other realms—in the case of shamanism with the realm of the divine often to ask questions of and receive guidance from divine figures, and in the case of EAT with the realm of the unconscious for the sake of psychological healing.

However, in Asia it is not just in shamanism that various art modalities are used in conjunction with each other. In Asian cultures in general, there are many ancient practices of using the arts, separately and in integrated ways, to increase well-being. For example, telling “grandmother stories” (folk tales) to give comfort and guidance; drawing kolams to help align one’s home with the divine; doing puja ceremonies, multisensory experiences that may involve song, movement, dance, the pouring of liquids, the scattering of flower petals, etc.

In Asia, the arts traditionally have also been used together not just in rituals, but also in various forms of storytelling by individuals and groups, and dance-drama. The separation and compartmentalization of the arts common in the West has not occurred as much in Asia. It will be very interesting to see how Expressive Arts Therapy develops in Asia in the coming years. As mentioned above, Asian cultures inspired numerous elements of EAT, and now EAT is being brought to Asia. In Asia, practitioners of Arts Therapies could build

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upon local ancient cultural practices, some of which are meditative, mystical, and/or devotional, combining elements of these traditions with the introspective, analytical, and secular methods and approaches supplied by the field of psychology.

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## PROFESSIONAL EXCHANGE

### **The Body as a Testament: A Phenomenological Case Study of an Adult Woman who Self-Mutilates** by E. Hitchcock Scott, PhD

There are few words in our language that adequately express pain. To express emotional or physical pain to another human being we often rely upon metaphor. Self-mutilation is generally an unspoken expression of an internal and intangible experience. This behavior makes the unseen experience concrete. In some cases the process and outcome of self-mutilation is an explicit metaphor for the mind of the individual. Self-mutilation, the cuts, burns, scars, represent fragmentation and woundedness in a graphic and pictorial fashion. The act is about pain, emotional and physical. The act is a reflection of the internal world of those who hurt themselves. This internal world represents the collective whole of each individual's life.

The act of self-mutilation often draws blood, symbolic of life and energy. As the blood crosses the broken skin barrier, the act of self-mutilation communicates pain and alienation. During the talking cure of a therapy session, the client expresses feelings verbally. The client "gets it all out." In an act of self-mutilation, gesture replaces language. What cannot be said in words becomes the language of blood and pain. Although the gestures are often performed clandestinely, they are potent expressions all the same, (Hewitt, 1007, pp. 55-56, 58).

The phenomenological approach used for this study is one that is based upon a method of analysis refined by Moustakas (1994). His methodology is structured, systematic, and it incorporates intuition as well as self-reflection. The process of phenomenological analysis includes determining meaning units, themes, clustered themes, and then a synthesis. It is a philosophy that blends well with the theoretical beliefs of this author. In addition, it is a research method that is respectful of those being studied. In the larger study, themes across all five participants were clustered to determine commonalities among the five co-researchers. The case study portrayed here embodies many of those common themes.

Weiner (1998) in her article on therapy with "psychiatric survivors" illustrates the need for professionals to enter into the realm of what is real, as well as what is imagined, without judgment. Although her article is about therapy not research, her comments are important and supportive of phenomenological research philosophies:

*If we assume that one of the goals of the therapeutic process, whether working with the psychotic or non-psychotic, is to help the client safely enter into his psychotic processes in order to promote healing, then this entry must not only include an examination of universal mythical systems, but the individual mythologies that clients may use to protect themselves and bridge communication with others, (180).*

It is the wish of this author that a phenomenological synthesis of self-mutilation will create a bridge of communication between those who hurt themselves and the world of professional counselors. A primary goal of this study is to provide an opportunity for women who self-mutilate to describe their experience in their own words. Issues of professional counter-transference with this population are often discussed in the literature. While insight and understanding alone may not be curative for mental health issues, it can

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help professionals develop rapport with isolated or alienated clients. Understanding may even help a therapist successfully navigate a potentially disruptive therapeutic impasse or double bind.

The question posed by the larger research study follows, "What is the meaning and the experience of adult women who self-mutilate?" The questions written for the interviews were open-ended to encourage dialogue. They were designed to explore, reveal, and honor the experience of the co-researcher. During the interviews the primary researcher chose to put all theoretical concepts aside, to be as present to the research participants' experience as possible. "Although the doubt of Descartes was transformed into the Epoché of Husserl, both philosophers recognized the crucial value of returning to the self to discover the nature and meaning of things as they appear and in their essence," (Moustakas, 1994, p. 26).

The open-ended prompts were:

1. Recall a vivid time of self-mutilation and describe it.
2. What dimensions of the experience stand out for you?
3. What bodily feelings were you aware of having?
4. What emotions were you aware of having?
5. What thoughts were you aware of having?
6. How was your life affected by this experience?
7. How did this experience affect others in your world?
8. Did you notice any difference in your experience of time, of other people, and/or yourself?
9. How does your adult experience relate to your childhood experience?
10. What has been the most beneficial to your healing process?
11. Is there anything else in the experience that was important which has not been presented or covered?

Art and poetry were collected as part of the phenomenological interview. The research participant was asked to bring art and poetry to the interview that most represented her experience of self-mutilation. The art and poetry is included in the final synthesis of the phenomenological analysis with a discussion of the meaning and relevance to the disorder.

Many who self-mutilate struggle with the ability to express themselves verbally. This fact and the nature of self-mutilation itself as a form of implicit communication was the justification for creating a visual method of inquiry.

### **A Brief Overview of the Case Study for Co-Researcher A**

Co-researcher A is a divorced, 41-year-old single mother with two children. One daughter lives with her and the other child, a son, lives with his father. Co-researcher A has completed a Master of Science degree in Sociology and is now working on her doctorate full-time. She volunteers as a counselor at a local mental health center and she receives disability payments which supplement her income. She describes herself as a poet-artist.

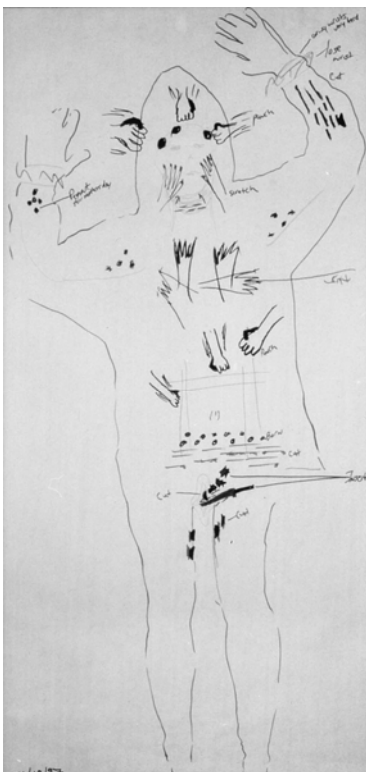
## PROFESSIONAL EXCHANGE

*(continued)*

Although she has hurt herself since childhood, her first “intense” episode of self-cutting occurred in 1988. This episode was precipitated by at least three coincidental events: her work at a child abuse intervention unit, a separation from her abusive husband, and a planned trip to a family reunion. She does not know why she began cutting her wrist on this occasion, but once she started she began making multiple slices on her wrists with a knife. She did not feel any death urges but felt that no one was concerned about her. She felt numb, isolated, and overwhelmed. Even so, she called both the crisis helpline and her therapist during the episode. She remembers that the blood on her arms drew her attention and made her feel drugged.

Although her arms were bandaged, the next day she went to work as if nothing was wrong. She was hospitalized straight from work. She does not perceive the cuts to have been deep. She remembers that both wrists had “lots of raised texture” and that most of the cuts were both up and down the length of her arm and across. This is a recurring pattern of cutting and it is a pattern or design that shows up in her artwork, as well.

### Co-Researcher A: Life-Sized Silhouette



*Figure 1*  
Co-Researcher A  
Life-Sized Silhouette

Co-researcher A approached the life-sized silhouette exercise in a very serious fashion. She looked at the wounds of her body to be sure that she was accurately representing her scars. She was not the only one in the study who did this. It appeared as if she needed to check her scars to remember. She even made a comment regarding her poor memory of the location of her wounds. Completing the silhouette brought up feelings of anger that the problem of self-mutilation is so much a part of her life. It also brought up feelings of shame.

I asked her to tell me what the colors meant. She had used different colors to represent her face, her wounds, and various types of self-mutilation. Her first response was, “Yellow is danger. Yellow is a really dangerous color for me.” It is not a coincidence that the primary areas she drew in yellow were her face and her vagina. When asked, she confirmed that she perceives herself to be dangerous, like a monster. She has outlined her whole body in purple which suggests her whole body feels bruised. There are blue lines on her wrists, “Ummm....the blue is frozen. Umm...purple is bruised.”

During her verbal interview she discovered a metaphor for her suppression/repression. She described it as a tarp that covers her emotions and subconscious so that she cannot touch her inner world. In her perception, all colors represent “The Tarp.” She described, “Black is a color that could just expand over this whole picture and cover it up.” It is with her “black” fists and pointed, sharp fingernails that she hits and scratches herself, “And the red obviously is blood; but it’s anger, it’s anguish.”

## PROFESSIONAL EXCHANGE

(continued)

When confronted with the totality of her self-mutilating history in visual form, she found that it triggered urges to self-harm. I asked her to describe how she balances the urges to hurt herself. She said, "I try to dialogue inside." She explained that there was a time when self-mutilation was all she knew. It was her coping skill. Now she reminds herself that when she self-mutilates she is reenacting an abusive dynamic or actual trauma. This seems to help her intervene on her self-destructive urges.

If she had all the time in the world she would want to add a background to her silhouette. In this case, the background is a literal reference to the silhouette. Her reference to adding a background to the silhouette is also a reference to contributing a deeper understanding of and solution to the phenomenon of self-mutilation. She wishes she could add to her interview, "A background [laugh]. A background of what fuels it; a stopping. Something that said—last time...last time...last time." She is wanting to disappear or hide from the reality of her behavior and history.

*I just wish it would implode right into itself... [implode means] to curl up and sort of go inside. I guess I'd finally get a chance to go away. I don't know. To implode and explode, there is always that; both ways. If it exploded I'd know maybe what was connected to it. I don't know.*

Her silhouette represents where and how she cuts, scratches, burns, and hits herself on various parts of her body. The most common locations of self-harm represented by her silhouette are her face, head, neck, shoulders, chest, stomach, arms, wrists, inner thighs, and vagina. The burns are represented by dots, the cuts by lines, and the hitting by fists. Her cutting and burning patterns shown here are a blend of two styles of self-mutilation, (a) systemic and geometric and (b) impulsive and random. In the larger study, one other participant exhibited a blended pattern similar to the one shown here, a third revealed a rigidly systematic and geometric pattern, and the fourth and fifth participants revealed patterns of self-mutilation that were random in form.

Co-researcher A expressed satisfaction that her silhouette accurately represented her experience of self-mutilation which, for her, feels like living in the middle of a tornado.

### Findings

#### Individual Composite Textural-Structural Description

This individual has abused her body since early childhood. According to her, the self-mutilation quiets the voices in her head and pushes back the memories of childhood. She believes that the extreme acts of self-harm "protect the secrets" or keep her from knowing the truth of her childhood history. Yet, her very acts of self-mutilation may be telling the story she wishes to deny. She states that she has urges to annihilate herself to protect those who harmed her.

There are times when she perceives her physical body to be a metaphor for her inner world—as if her body

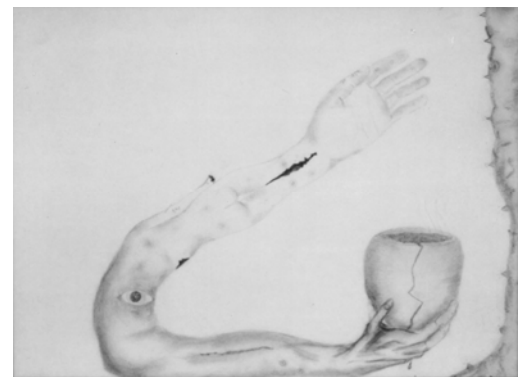
## PROFESSIONAL EXCHANGE

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is a metaphor for her mind versus her mind representing a metaphor for her body.

Her inability to connect with herself, aspects of herself, or others in an emotional way seems to push her to try to connect in a very concrete or literal fashion. Her damaged and scarred body is an accurate metaphor for her mind. She cannot touch her body pain or memories that trouble her so deeply. It may be that those who self-mutilate feel as if they need to touch their inner experience to fully understand it.

Figure 3 (right) is a representation of her experience as one who self-mutilates. Artistically, it is a representational image that is also surreal at the same time. Her floating, disembodied arms and hands represent the totality of her being. It is possible to see the back of a naked woman's torso superimposed upon her forearm. Attacking her arm is a substitute for self-annihilation. In the literature this is referred to as "partial sacrifice." On this same forearm there is a large, gaping wound. In this image the gaping wound would also represent the space between the naked woman's legs. There are double meanings here.



*Figure 3*

One hand seems to be reaching out to an unseen viewer. The other holds a cracked vessel; another representation of herself. A vessel is an ancient symbol for womanhood. Her hand is holding the cracked vessel—herself—together as she leaks fluid or blood. Blood or fluid has literal and figurative meanings.

The following poem reveals her experience of depersonalization, isolation, relationship to time, and despair. The theme of death is prominent in her poetry.

**The Writer—I**  
(For Sylvia Plath 1932 - 1963)

ONE

Kitchen clock, ice white,  
watches her like a historian,  
its worn hands wearing time away  
as she sits writing another birthday poem.

Twenty-five or forty years have gone by.  
It makes no difference.  
Leather arms of her dreams keep getting stabbed.  
Time doesn't shield scars from the  
blade's plunging.  
Time doesn't heal, only conceals scabs  
that secretly raise their hands  
ready to be lifted

## PROFESSIONAL EXCHANGE

*(continued)*

so blood may flow again,  
flow into the shaft of her pen.

Her therapist has clearly stated that she is no longer willing or able to rescue this individual from her suicidal path. Spelling out this reality was helpful for this individual and gave her a chance to be more responsible. It also makes her more lethal. She states, "I think that that really gave me a chance. That also makes me more lethal in that any thoughts of suicide would be real pure and I wouldn't tell anyone."

Cognitively she knows that self-mutilation doesn't work for her anymore. She finds that she can control her urges better if she can catch them early, especially those related to anxiety. Today she uses painting and drawing as a substitute for self-harm. She attributes her willingness to listen and honor the voices in her head as a helpful intervention. Painting and drawing provide her a safe vehicle for listening to her inner selves.

### **The Writer—II** (For Sylvia Plath 1932 – 1963)

TWO

4:45 A.M.

Blue light slips  
through squinting windows  
onto the cluttered table  
filled with tulips and veils,  
a mug full of curdled hope  
and crumbled paper dreams  
that tried to fly, to sing  
before being put to bed  
beneath her wintered covers.

Minutes move like the last spasms of night moths  
as the sunlight reaches towards her eyes.  
she looks down and sees  
her hands floating  
over another epitaph.

### **Conclusion**

One characteristic that is consistent within the experiences of self-mutilation as described by those in this study is that motivation, sensation, perception, emotions, and cognition may all change, even during one event; or that the individual parallel processes the same experience differently, simultaneously.

## PROFESSIONAL EXCHANGE

*(continued)*

One of the primary threads of self-mutilation that weaves itself through all other themes is that of paradox and double binds. These themes contribute greatly to the complexity of the disorder and our lack of understanding. The paradoxes and double binds explain why many researchers have a good understanding of one or more aspects of self-mutilation, but not the whole. They are looking at one side of the coin, one side of the paradox. The phenomenon of self-mutilation, even within one experience, is as diverse and varied as the body of an elephant.

The intensity of this research was rewarding and difficult. This research challenged the author to the core, emotionally, spiritually, and even physically. As the co-researchers literally scraped their skin down to blood, tissue, and bone, she was figuratively scraped to the bone as well. There were times when she thought she had taken on too great a task. Ultimately, she used this challenge to go deeper within herself.

At one point the author painted a portrait of herself as if she were a woman who self-mutilates. It was helpful for her to figuratively walk in the skin of one who self-mutilates. It is through the creation of personal artwork and poetry that this author was able to continue to listen with compassion and write.

*Dear Erica (sic),*

*You gave me a gift by your kindness and acceptance...*

### THANK YOU POEM

Life is a momentary  
touch  
Found when taking a chance.  
To be vulnerable is to accept  
Both gift and loss—  
the back and forth dance of life  
Because of this time together...  
I dance a little longer.  
—Co-researcher A

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Click [here](#) for full text of this research study and bibliography

The full text version of this article was previously published in:  
*The Arts in Psychotherapy*, Vol. 26, No. 3, pp. 149-164

## PROFESSIONAL EXCHANGE

### **An Introduction to the Therapeutic Spiral Model** by Kate Hudgins, PhD, TEP

The Therapeutic Spiral Model (TSM) to treat trauma (Hudgins, 2015, 2014; Hudgins & Toscani, 2014, 2013) was first presented to the expressive arts therapy community at the 2015 IEATA meeting in Hong Kong. The brief workshop demonstrating several of the TSM Safety Action Structures and the main clinical action intervention module of the Containing Double was well received and people have expressed interest in further information.

The basic premise of the Therapeutic Spiral Model is that the information taught in its 8 training modules provides anyone who uses experiential and expressive arts therapies with the solid psychological underpinning of a clinical map to all guide action methods for safety and effectiveness. Anchored into the state of the art research on affective neurobiology, attachment theory and trauma treatment (Cozolino, 2014), TSM provides action interventions drawn from an integration of clinically modified psychodrama, drama therapy, Gestalt and Focusing, and art therapy for practical purposes of change for all creative and expressive arts.

This short article is an opportunity to briefly describe the core principles of The Therapeutic Spiral Model as it integrates many aspects of expressive arts and psychological interventions to increase spontaneity and creativity to heal trauma from the individual to the collective levels. A composite example from TSM in individual therapy demonstrates the use of the Containing Double, which is the most researched clinical action intervention module in TSM. Discussion on TSM uses in education and community practice rounds out the view of the Therapeutic Spiral Model, which has been taught in 30 countries and has over 1000 people certified through the TSI International Certification Program in Trauma Therapy worldwide.

### **Change Your Brain**

Twenty-five years ago when TSM was first being developed as a clinically modified method of psychodrama and expressive arts therapy to treat vulnerable protagonists, none of the current neuroscience research had even been published. While TSM was in its formative years (1992-2001), it developed through clinical knowledge intertwined with classical psychodrama (Hudgins, 2001). It was only in 1996 that the first research studies using PET Scans to see the actual structural changes in the traumatized brain were published (Rausch et al, 1996). Today, many prominent psychological researchers and neuroscientists alike are calling for experiential and expressive methods of change for people who experienced trauma due to increasing knowledge about brain development and functioning, and the impact of trauma and healing.

There are several significant findings in the most recent research on affective or interpersonal neuroscience that are particularly relevant to support the use of all expressive arts therapies to treat trauma. When combined with the clinical map of the Therapeutic Spiral Model for safety and effectiveness, all action methods can become powerful tools of changing not only behavior, but changing the brain itself.

The first thing we now know is that the brain develops through interpersonal interaction. Actual neurobiological structures in the brain and the central nervous system, as well as the expression of neurotransmit-

## PROFESSIONAL EXCHANGE

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ters are now being shown to be the product of an individual's genetic make up, greatly influenced by interpersonal interaction from birth until death (Cozolino, 2014). As we have long known in clinical therapies, trauma disrupts cognitive processing, distorts emotional expression, and produces profound behavioral changes. Now, MRIs and other brain imaging techniques show that both positive and negative brain development is influenced by interpersonal experiences throughout life. Most importantly, the research now shows that many of the brain changes prescribe experiential and expressive therapies as the treatment of choice for people who have experienced trauma. Research shows the following significant changes:

- > Distorted lens of the thalamus
- > Amygdala always on
- > Constant drain on stress hormones
- > Smaller hippocampus
- > Disruption in decision making

As a result of these changes, the left brain that does cognitive processing is disconnected from untreated trauma memories in the sensory and relationships areas of the right brain. What this means is that much of the healing work on trauma needs to be done at the nonverbal levels of change in the right brain, which the expressive arts therapies directly address at all times. However, many practitioners of expressive arts do not come from the fields of psychology or psychiatry where the manifestations of trauma are most understood through normal processes of neurobiological and psychological attachment and development which emphasize left brain processing to control symptoms. The Therapeutic Spiral Model provides this underlying and needed knowledge and clinical action interventions to guide the safe and effective use of all action methods with trauma, integrating both the right and left brain elements of healing.

### **The Therapeutic Spiral Model**

TSM, as it is commonly called, is a system of experiential psychotherapy to treat trauma that integrates clinical psychology and expressive arts therapies to provide safe and effective treatment. As a thoroughly organized system of modified psychodrama and other action methods, the Therapeutic Spiral Model provides a clinical map, clinical action interventions, and is supported by a small but solid body of evidence-based research (Hudgins & Toscani, 2013). This article will now describe the beginning of each and every TSM session, from individual therapy to community action, and follows with a description of the use of the Containing Double.

### **The Observing Ego—Inspirational Cards**

The introduction of the visual arts opens each and every TSM session through the use of inspirational cards and brightly colored and textured scarves from around the world. In a group, large or small, people are greeted with a pile of scarves surrounded by brightly colored cards showing drawings or photographs when they arrive. In an individual therapy session, decks of cards such as our TSM Animal Cards ([www.drkatehudgins.com](http://www.drkatehudgins.com)) are offered to the client to start off the session by picking a card to mark a place for the Observing Ego Role. Scarves are available in a nearby basket.

## PROFESSIONAL EXCHANGE

*(continued)*

Clinically, in TSM, we always begin by concretizing the cognitive, neutral, and nonjudgmental role of what we call the Observing Ego. Often in client, education, or community groups it is called "My Witness." In a drama therapy group that is acting out fairytales, there is usually a character that holds this role of being a neutral observer, whether it is the narrator or another member of the story. Whatever name this role is given, it is the first role to be concretized at the beginning of all TSM sessions to bring in the nonjudgmental attitude that is necessary for change to occur with trauma symptoms that people often experience as shameful such as body memories, flashbacks, and intense affect. It is also a protective role against uncontrolled regression or intense emotion that can unexpectedly overwhelm the brain with expressive arts therapies.

### **The Circle of Safety**

The use of the visual arts continues to expand as individuals and groups find their attention directed to the pile of scarves in the middle of the room. There are many ways to use the scarves expressively, from self-presentations, to mini Playback Moments, to moving sculptures. However, the clinical reason for the scarves is to concretize and externalize the TSM Prescriptive Roles of restoration of individual, interpersonal, and transpersonal strengths through the use of sound, movement, color, and action to help people develop and increase their spontaneity as they begin to work on trauma.

Following the clinical map of TSM, trauma treatment in any experiential format must begin with the building of strengths in order to be able to face the past safely and consciously so the future can be changed through the expressive arts. For example, in a group of 100 people in Beijing, a TSM Action Healing Team broke the group down into small groups based on professions. This allowed the team to get a sense of who the audience was in such a large group TSM training, as well as to have people show the strengths they brought from their chosen profession. We had small groups made up of physicians, psychologists, social workers, educators, actors and actresses, artists, homemakers, and corporate executives, many of them expressing themselves through expressive art for the first time. Each group was given a TSM team member to help guide them in a moving sculpture where they created a scene using their bodies, sounds, and scarves to show the strengths they brought to a workshop on healing trauma using the Therapeutic Spiral Model.

There was a beautiful breadth of expression as shown by the similar yet vastly different moving sculptures shared with the large and by the small groups of physicians and artists. The physician's group offered to go first to present a moving sculpture of TSM strengths to the group. In the sculpture you saw a single person sitting cross-legged on the floor, weak and minimally responsive. Additional characters started to emerge as a young man came in with a clipboard and bowed. Someone else started poking and prodding the patient. A third character ran around the small group calling out, "Help, help, I am not sure what to do to help this person heal." Finally a group of 5 people covered in beautiful scarves with different textures came into the scene concretizing "a healing force" that bounced from character to character, twirling around each, showing in psychodrama terms the autonomous healing center that each person carries with them at all times.

## PROFESSIONAL EXCHANGE

*(continued)*

While TSM then uses spectrograms, logograms, and other forms of sociometry to establish group cohesion and provide assessment in the here and now, the most interesting use of expressive arts comes in the form of an art project that is completed over 3 or 4 days in our workshops. On the first day, people are asked to concretize their strengths in preparation for trauma work. The next day or two, people are then invited to show their traumas through whatever art medium is being used. Finally, we spiral back up to using art therapy to show transformation and future projections to carry forth the changes found in the workshop. We have used collages, clay, photographs, drawing of mandalas, and such things as the making of a talking stick or another culturally sensitive expression of different cultures. It is this thread of art therapy that provides another connection between the use of the right side of the brain to create visually what needs to be externalized, and the left brain ability to do that in a contained fashion. Often these art projects are then used to begin an action piece of work in TSM. Together, the Observing Ego, Circle of Safety, sociometry, and the art project are called the TSM Safety Action Structures and, like everything else in TSM, are guided by clinical knowledge of working with both left and right brain material at the same time, with containment and safety.

### The Containing Double

Finally, this article will present a brief example of a modified classical psychodrama technique we call the Containing Double. Like all doubles, it is an inside voice that expresses what the protagonist cannot. However, unlike the classical double it focuses on holding emotional and nonverbal information in the present through here and now focus on staying in the present with the use of cognitive information from the left brain. The demonstration is with an individual but can be used in small and large groups, couples and family therapy, and education and community work.

**Therapist:** I see you are struggling with flashbacks today. You seem to be having a hard time staying with me. I wonder if I can come sit beside you and be a supportive inner voice, which we call the Containing Double or CD. If it's okay with you, I will talk in the first person and say things to help you be in the present and help you express what you are experiencing. If what I say is correct, put it in your own words and if it isn't, then correct me.

**Client:** Sure, I'll do whatever it takes. Please help me. I am drowning in the past.

**Constant Double:** I am now sitting next to my inner voice of support. I can take a deep breath and hear what this voice says and repeat it out loud if it's useful. I can pick up a scarf of strength and hold it to my heart so that I can feel its soothing nature. I can see the color and feel the texture, knowing I am here in Dr. Kate's healing room.

**Client:** Yes, I can do that. I am picking up a gold scarf because I feel the need for my Higher Power right now, I am so scared.

**CD:** I am scared right now *and* I can also feel the strength of my Higher Power starting to flow through my heart. I can begin to tell what I am experiencing that is from the past and what is in the present. I feel a bit

(continued)

safer.

CD: Yes, I do feel a small bit safer. I can start to see that the images I have been experiencing are not happening again right now, but are memories from the past trying to overwhelm me. I can breathe and trust my Higher Power to help me stay in the present where I am supported and not so scared.

Of course this example could go on, but for the length of this article it is enough to just give the reader a brief introduction to a core TSM clinical action intervention module that can be taught in one weekend workshop.

### **TSI International Certification in Trauma Therapy**

For nearly 30 years, TSM Trainers around the world have been teaching people using expressive arts how to use clinical map of strengths, trauma, and transformation. TSI, the Institute that certifies people, has given us over 1000 people in 30 countries certified at one of three levels: Auxiliary Ego, Assistant Leader, and Team Leader. Meanwhile, each of the 8 certification modules can be used as a stand alone workshop to gain information on neurobiology, containment, defenses, and other clinical knowledge combined with an experiential intervention module that can be used immediately after the workshop. Please see [www.drkatehudson.com](http://www.drkatehudson.com) for more information. This author can be reached at [DrKateTSI@mac.com](mailto:DrKateTSI@mac.com) for further information.

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Bloom represents rebirth after cancer. Rebirth can be seen in the flowers, birds, butterflies, and red coral tattooed on her bodice.

Each representation of life and energy meticulously cut from paper napkins, patiently peeled away from each layer, and pasted on with Modge Podge. It was a messy process. But life is messy.

Coursework: Biological Basis for Behavior class.

16" x 32"

#### ABOUT THE ARTIST:

Deanne Brown is a writer, mother of three, breast cancer survivor, and lead singer in a rock band.

Deanne appeared on the Dr. Phil Show and CBS' The Talk, sharing her unique philosophy on education referred to as unschooling. She has been published in Kris Car's Crazy Sexy Life, several poem anthologies, and is a contributing writer for Esteem Yourself E-Magazine. She is currently a graduate student at Goddard College. You can read about some of her greatest adventures with her family, friends, and all-girl band "Daisy Unchained" in her blog [www.Theyesmom.com](http://www.Theyesmom.com)



# International Expressive Arts Therapy Association

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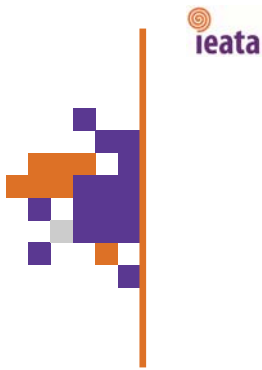
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## Notes from the Field



**Back from the Dead**, Brian Boyle | **Art is my Fix**, Elke Scholz | **Clowning Around the Globe**, Sasha Brucker | **Traveling Postcards**, Caroline Lovell | **"Life"—Means Yohanna**, Naserimah | **Counter-Transference and its Resolution via Art**, E. Hitchcock Scott | **Video and Film-making as Therapeutic Art**, Brit Davis



# Notes from the Field

## Back from the Dead

by Brian Boyle

My name is Brian Boyle, I'm 29 years old, I'm from Washington D.C., and I've been involved in Art Therapy for over a decade. My story begins one month after graduating high school in 2004. I was on my way home from swim practice and was involved in a near fatal car accident with a speeding dump truck. I lost 60% of my blood, my heart moved across my chest, lungs collapsed, and my major organs and pelvis were pulverized. I had to be brought back to life eight times on the operating table.

While in a two-month coma, I was unable to move or talk, yet I was aware and could hear, see, and feel pain. Then, with a lot of support, I clawed my way back to the living. First blinking my eyelids, then squeezing a hand, I gradually emerged from my locked-in state. My rehabilitation was not just physical, it was also psychological. My nurses recommended that I put my thoughts down on paper to help with the healing process. I would write in my journal constantly, but some experiences were beyond the written word, and this is when I discovered Art Therapy. For many hours of every day, my pen, paint brush, and camera were my psychiatrists and I spoke through these items subconsciously.

Communication can be spoken, gestured through body language, and written down in a journal. These are powerful forms of communication, but what happens when these outlets are not available? What if there are things in your mind that you would like to express, but you cannot seem to find the right words to explain exactly what you are thinking and feeling?

To bridge the gap between memories that were spoken and written down in a journal, I would also try to unite these forms into a poem to further describe my experiences:

Deathly tired,  
With the setting of the sun.

Panic begins to overwhelm me,  
And I lose touch of reality once more.

My mind wanders like a buoy in the sea,  
I feel nothing.

A breath of melancholy,  
Trembling from nature.

I scream from down deep,  
Flaming clouds arise.

The human brain is an extremely powerful tool for processing information from the world that we live in. This gelatinous lump of living tissue weighs around three pounds and contains approximately 100 billion neurons. It has the remarkable ability to remember tiny fragments from decades past, random lyrics from a song we



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have only heard once, or the feeling of déjà vu from standing in a place that we have never ventured to, not to mention it has the capability to deal with the emotional highs and lows that come as a result of our daily activities.

The mind also has the ability to create a self-defense mechanism that shields the body from experiencing fully debilitating harm or danger. The mind can quickly shut the body down in traumatic situations and tragic memories can even be repressed, which I have experienced first-hand. In order to effectively treat trauma, we must move beyond the use of words and language so that we can also incorporate the cognitive, emotional, and affective memory (TAIwar, 2007).

I do not have a memory of the day of the accident, or the first few days of being in ICU, but the memory of the 18 years of my life before the day of the accident is intact. If I piece together all the information that was given to me from my family and friends about what I was doing on the day of the accident, I can sort of imagine doing these activities because they had become a common routine of mine. I cannot truly say how much I vividly remember during the first few days, or even the first few weeks, of being in the hospital because I was in and out of so many surgeries. My memory is vague from the second that I woke up on July 6, and the concept of time seemed to stop the moment I was flown into shock trauma.

No matter how much I want to believe that the entire situation was just a nightmare, the scars that have been left behind are very real. To know if I was conscious or unconscious at the accident scene was a certain detail of July 6 that was of great importance to me when I left the hospital. I had several long conversations with my EMS providers over time, and they explained that I was conscious and coherent at the accident scene. They said that, based on my responses to their questions and commands, I knew what was taking place at the accident scene. They explained that I many have been in an altered state of mind, on the verge of going into shock, but I was aware of my situation. The same response was also given me by my care providers regarding my awareness of what was taking place during the first couple of days in the hospital.

They said that I knew what was taking place at the accident scene and in the early stages of being in the hospital. No matter how hard I tried to concentrate, I still cannot recall these events. I overheard conversations in the hospital about suffering a concussion and experiencing amnesia, and I also heard that these repressed memories were lurking deep within my mind. Would I ever remember the traumatic events, I repeatedly asked, and the answer was startling—at any time these hidden memories had the potential of vividly returning. I could be awake or asleep and these experiences could be relived, flashed across my consciousness in real time.

As horrible as these experiences must have been, I felt incomplete without these memories being accounted for. I needed understanding of how the events unfolded, and I needed to obtain these memories to help complete the psychological healing process.

On July 6, my life was turned upside down, shattered, and then sort of mended together the way you put a small ceramic statue back together after you accidentally knock it off the shelf. A little bit of glue here, a little bit of tape there, and it is back together, but not completely in the original position. The cracks in the statue are still there, and you can see them if you look close enough. Even if I was provided with all the answers to my questions about what happened the day of the accident, I still could not truly acquire these memories to be included in my vault of lived experiences. Even though I could not get the memories back, I still needed some form of closure to find a sense of peace with the entire ordeal.



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My closure started to develop when I began communicating to others and to myself about the entire recovery process, by openly talking about my experiences of being in the hospital, through writing my thoughts down in a journal, through the artwork that I created to connect the disconnected fragments of my past. As time went on, I realized that I may not be able to get these memories back, but I could gradually arrange these past experiences into a new stream of memories that would effectively fill in the missing details in a realistic and therapeutic way. It became a way of “tricking” my mind through talking, writing and creating art about my experiences of going through the recovery process.

My self-expression came from a variety of methods. When I was not talking or writing in my journal about everything I was going through, I was artistically exploring my past to further understand what happened to me. Even when I tried to write about certain things that I had no recollection of, I felt like I was just running in circles around the same issue. How do you explain something that you cannot actually remember experiencing first-hand? It was often through my artwork that I was able to find the most suitable medium of self-expression when it came to dealing with some of my incomprehensible experiences.

Ever since I was little, I always enjoyed drawing pictures and working on various art projects. It was a relaxing hobby of mine that allowed me to temporarily escape into a different world, the same way you can easily get lost in a good book. I tapped into this hobby again after a few weeks of building up enough strength to where I could skillfully draw while sitting upright. Not only was it good for the psychological healing process, but it was also a way for me to strengthen the muscles and nerves in my hands, forearms, and lower back. Having the ability to artistically put my thoughts and memories down on paper was very therapeutic for many reasons, but especially because it allowed me to embark on an internal quest in search of understanding my past memories. Once I located these memories, I was able to process the traumatic events and integrate them into my life history (Pifal0, 2007).

I was not quite sure where to start, so I drew lines and random shapes for an extended period of time. Some of my first few projects were very abstract and I would spend days drawing lines, especially with the colors red, white, and black. I do not know why I chose these colors to work with, but I felt like I was being guided by instinct. I also was not sure where I was going with this type of abstract composition, but it was my way of scratching the surface of the memories trapped within.

I continued with the exploration, similar to the process an archaeologist takes when they stand over a piece of earth that potentially holds a historically significant artifact. They carefully scrape away the dirt, looking for clues, reacting to pieces of the mysterious object until it is finally unveiled. Like the archaeologist, I kept digging further into my memories. Over time, these random shapes that were made up of continuous lines evolved into representative imagery.

The intense concentration that took place while illustrating the subject matter helped me focus on the subconscious memories that lay beneath the surface of my mind. What started out as abstract developed into more realistic depictions with surrealistic attributes.

Most of my content was based on recreating scenes of being in a coma, or the hallucinations that I had from the heavy medication. I also explored the limited line of sight that I had as a patient, along with the experience of waking up after the operations, the scenarios that unfolded during the day of the accident, the near-fatal collision, the numerous CAT scans, and the dismal atmosphere that made up my reality.

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To illustrate these various scenes, I would often use symbolic colors and imagery that included disorienting compositions of blurred first-person perspectives that would recreate the memories. This is what makes art therapy so extraordinary—an image that appears to be a blotch of colors to someone else is actually a highly detailed expression of how I interpreted my world.

When I began a new project, I rarely had a starting place or final product in mind. The initial goal would be to just start drawing, and it would lead to an exploration of the haunting and fascinating visions of my past. After the first mark on the paper was made, I would be instantly flooded with memories that were visual representations of my subconscious. I would be able to witness these little details that had been concealed behind the shadows the entire time. The method of reaction would always vary, but my aim was to confront these images on a visible scale in order to fully comprehend them, and then eventually accept them as a part of my past. In the delicate balance between life and death that I had existed, my thoughts were often colliding with the living nightmare that I found myself trapped in. It became a challenge to decipher what was actually taking place versus the chemically induced visions I was having, which I explored in not only drawings but paintings, photography, and short film.

When you are comatose, you are neither living nor dead. The physical state of your body is dependent on the pumps and beeps of medical equipment. The only certainty is that it is uncertain whether you will survive. Every time your heart struggles to contract, an artificial beep emanates from the cardiorespiratory machine that sits next to your hospital bed. You wait for that next beep and usually it comes, but when it does not, the machine rapidly sounds an alarm and then the care team pumps life into your fragile body. Hopefully, the vital signs return to normal, but normal never lasts and the process is often repeated. This is the routine, day in and day out, and my art tried to convey what this routine was like.

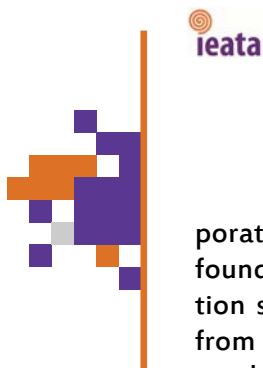


*Time is of the Essence, 2006*  
graphic pen and charcoal on paper  
24 x 36 inches

This work of art is a visual narrative of some of my vivid memories in the hospital. My motivation to make this specific piece came at a time when I felt that talking and writing only went so far in explaining what I was going through, both to myself and to those around me.

I wanted to focus on the randomness of my surroundings throughout the different states of consciousness. The scattered placement of images in the overall composition is meant to represent how, in a comatose state, the body seems to hover with no real order or position. There is no sense of time when you are comatose. The chronological order in which things usually take place is completely absent and random occurrences become the new pattern.

To gain an understanding of the duration of time when my life was on standby, I incor-



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porated some of the various events that I could recall while being comatose. Starting with the foundation of the overall composition, the first thing that I created was the cross on the intersection sign that contrasts with the harsh background. The symbol is a reference to the road sign from the intersection where my accident occurred, which connects with the cross on the helicopter that ominously lingers over the accident scene; the extremely small cross on the floating helicopter also establishes a religious significance. The placement of the eye within the clock is a

reference to the time that is lost while in a coma, and the eye relates to both the watchful surveillance of my family, friends, and care providers as they patiently wait for a sign of survival. My "eye" also represents my visual perspective of the world revolving around me while I remain stationary, fixated on the blur of my surroundings. The vital sign below the eye clock shows the viewer that life still exists through the pulse, which is further represented by a strong will to live that is constantly being tested throughout the entire journey back to life.

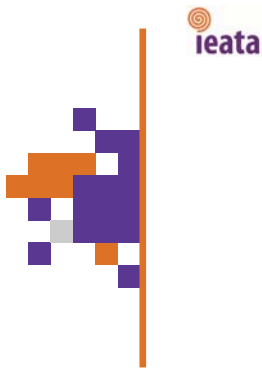
In addition to these images, I also used color as part of my symbolic language with white representing life, black representing death, and red representing the essential life-giving substance of blood linked between life and death. The cross on the intersection sign is not only the focal point of the entire composition, but also a vital link to the medical function of the large amount of blood that I lost at the accident scene and the 36 blood transfusions that kept me alive. The distorted body, glowing white, hovers over a dark background that represents how the figure is floating between realms of existence and the memories of what is taking place. The black background indicates that death is always near, while the white lines that drip from the white body symbolize the act of losing life. The body consists of only a white outline because there is a limited amount of life that is remaining in the body. The black and white spiraling pattern that takes up most of the space on the right side of the composition represents the escalating stages of struggle that are continuously taking place between life and death.

Before I discovered the psychological power of art therapy, I would wake up most mornings and feel as if I were still the figure in this artistic composition, trapped in an inescapable mental prison, and paralyzed on the hospital bed in room 19. Every time I look at this specific drawing, I discover something new about what these images represent, which allows even more understanding and healing to take place. This artistic composition is more than a symbol of coming back to life; it represents a tragic memory that I have come to understand better over the years. I may not be able to fully remember all the details of July 6, but my art therapy was an important factor that helped with the healing.

Art therapy is a very effective way to explore the psychological components of our conscious and subconscious. We are able to take the focus away from the self and project it onto the artwork, which allows the artist to fulfill the need for stability and control. Through this visual realm, similar to writing in a journal, we are able to confront our past and take a step closer to understanding and overcoming our traumatic backgrounds and tragic memories.

**ABOUT THE AUTHOR:** Brian Boyle graduated from St. Mary's College of Maryland with a degree in Studio Art with a concentration in Art Therapy. He is currently completing his Master's Degree in Communication with a concentration in Health Communication, and is interested in becoming credentialed in Art Therapy, "because I have experienced the healing powers from this process first-hand and it has greatly impacted my life for the better." Click here for a short video about Brian: <http://youtu.be/tuY4y1MQrhA>

Brian's website: [ironheartbrianboyle.com](http://ironheartbrianboyle.com)



# Notes from the Field

## Art is my Fix by Elke Riëlan Scholz, MA, EXAT

Without art I am sure I would be dead, metaphorically and/or in reality. I'm addicted to art.

Art is my passion, my intimate craving. It is the water in my mouth for desire. Art is my silent healing. It's my obsession. It has helped me balance my unbalanced world. Art is my private partner and my hero. It led me to explore other possibilities in my life. Art taught me compassion and other points of view. It opened up my thinking to meditation and gave me hope and peace of mind.

For so long I did not know that art was my salvation. I just did it, showed up and was agonized by it. Shows and public performances were a surface torment. Was I pleasing or being pleased? A struggle that I was barely aware of on occasion. There were times I wanted to quit or thought I should get a regular job and other times I was so stubborn. Could not my art be my job and my inner passion? Did they meet? Or were they separate? Did it even matter? My inner demons never left me alone. Yet in this lonely sport I feel alone. If I took a break or got distracted too long, the urges, the niggling, the nagging, the drive was haunting. I don't know, I can't help myself, I have to do it.

As a youth I was fanatical about intense and long hours of solitary physical exercise. That added fuel to my fire and helped me survive but I stayed puzzled about any kind of inner resolve. An early drama class and creative writing class relieved some of my turmoil. It was an opening of a creative introspective journey. A new hobby, dangerously close to narcissism.

Even though I took many detours, even though I created to please, there was part of the process that evolved silently with or without me. I did not see it. Years later I saw how my play had changed, how my language had changed and despite myself, my art had changed and I was changing. It's only after time that patterns and developments reveal themselves. Only then could I see where I had gone. And then I could decide where else I wanted to go.

What I noticed is in the act of creating, commercially or purely ecstatically, one transcends one's self. With or without trying, character, vision and perspective change. Emotional blocks become unblocked.

For all of us the increments of change come differently. Some happen gradually, some suddenly like a storm raging in. Sometimes the change moves back and forth. Where is my highest creativity? under stress? duress? deadlines? tragedies? commissions? pure unleashed hot passion and pleasure? For me, it's all of them.

As I am beginning to savor more in my vintage, the passion flows deeper, purer. Do we come to this as we mature? Has it been because of the time spent creating over and over again? How do I please the obsessive creative urging? How do I entertain passion? Do I even know at any moment, maybe I hope to know. I try different things.

Only questions, no answers. No right or wrong way, only a rightness in the moment. For that's I know, one artful moment at a time.

# Notes from the Field

## Clowning Around the Globe

by Sasha (Sally) Brucker, CAGS, ATR-BC, LCSW



Anyone who has seen the clown personas of Steve and Ellen Levine first-hand will know what I mean when I say that clowning is profoundly moving and healing.

Since I first donned my clown nose with them in a Spring Symposium class in Italy many years ago, I secretly longed to express my inner clown.

I am happy to report that she is now alive and well, having participated in two Humanitarian Clown workshops with Patch Adams, MD, in Guatemala and, most recently, Ecuador.



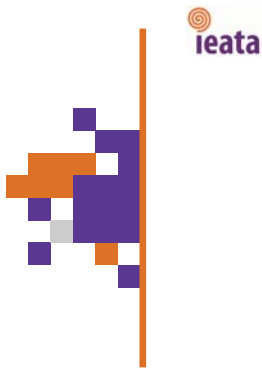
I am now teaching Humanitarian Clown workshops and bringing the beauty of this expressive arts form to others.

This clown would welcome the opportunity to come teach this to you!

**ABOUT THE AUTHOR:** Sally Brucker is a US educator, consultant, workshop leader, certified SoulCollege practitioner, artist, and life-cycle celebrant. She has worked in over 10 countries. Her artwork tells stories of inner worlds utilizing found materials, handmade books, and collaborations with community groups. Website: [www.theartfulceremony.com](http://www.theartfulceremony.com)



**GOOD READ:** *Green Studio: Nature and the Arts in Therapy*, by Kopytin and Rugh (Eds), Nova Science Publishers, NY. This book is 207 pages long with 9 separate chapters written by arts therapists and educators from Israel, Russia, Finland, Scotland, Germany, and the US. Its focus is how music, photography, visual art, and ritual combine with the natural environment to promote healing. I was very pleased to have a chapter in the book, "The Tonic of Wilderness: An Evolving Eco-Arts Therapy Model: From Theory to Practice."



## Notes from the Field

### Expressive Arts & Social Action: A Traveling Postcards Workshop by Caroline Lovell, MA

*“Art does not profess to rid the world of suffering and wounds. It does something with them realizing that the soul is truly at a loss when afflictions cannot be put to use.” — Shawn McNiff*

As a healing artist I have focused on using the creative process as a tool for personal growth and community awareness. I believe that by encouraging self-expression and global connections we can learn from our commonalities and create opportunities for everyone to become agents of change in their own community. I know that our innate wisdom holds great power and our personal expression of that wisdom can cross borders and reach far beyond ourselves to grow and affect change for generations to come.

In my effort towards nurturing and sharing our collective voices and for our right to be fully expressed, I created, first, the *Traveling Postcards* workshop and then I created the *Women’s Wisdom Initiative*.

The *Women’s Wisdom Initiative* is a Bay Area nonprofit whose mission is to empower women through the healing arts and to bring awareness to humanitarian inequities facing women worldwide. By tapping into women’s traditional methods of community building and creative self-expression, we seek to empower survivors to heal from their experiences, speak their truth, and ultimately to be inspired to take action to end gender based oppression in their lives and communities. Our signature healing arts workshop is *Traveling Postcards*.

After leading hundreds of *Traveling Postcards* workshops in communities all over the world, I have seen the enormous power of creativity to heal and transform lives. This article is about the benefits of a *Traveling Postcards* workshop and I hope it will both inspire and encourage others to use art for social change.

*Traveling Postcards* is deceptively simple and it is this simplicity that opens doors worldwide. Making art that is the size of a 4x6 postcard appears as an easy, non-threatening activity that everyone can enjoy, and it is, but a *Traveling Postcard* contains the most powerful tool we have to combat social injustice; our heart’s wisdom.

Designed after the old fashioned sewing circle where women gathered in creative circles to make something with their hands to give away to a local community member in needs, I created a workshop for women to share their voices of wisdom, compassion, and solidarity with a *global* community of women. My intention was to provide a creative and safe opportunity that would access our hearts and gather the wisdom that lies there.

Working within communities of women, advocating for women’s rights and the right to be free of violence, and empowering women to be leaders has long been a personal goal and a driving force for me. After graduating from JFK University’s Master in



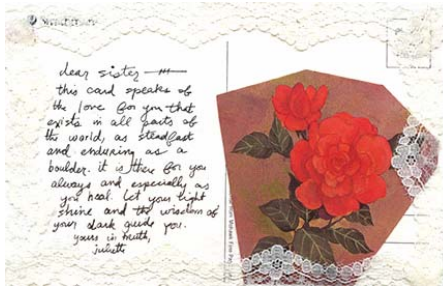


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Transformative Art and the Leadership for Sustainable Change programs, I saw a unique opportunity to merge my love of art, my degree in psychology, and my innate need to make a difference in the world.

I have witnessed that traditionally women pass on their most important wisdom from mother to daughter and between close friends. I saw the need to share this wisdom beyond the confines of immediate family and to break down the social barriers of generations of women being told that their voices didn't matter and that their intuitive knowledge was unimportant.

Traveling Postcards are handmade art the size of a postcard, used as a reminder of self-worth and connection. Each postcard contains images, symbols, and words that express compassion, love, and hope. They are hand-delivered around the world (never mailed) bringing awareness and voice to women and girls whose lives have suffered from isolation, violence, or repression.



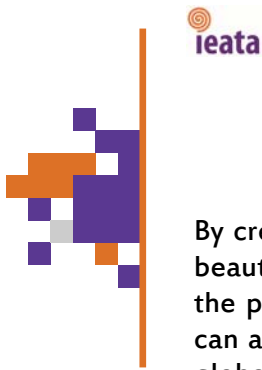
We ask women to share their resiliency in the face of oppression as a gift for another woman they will never meet but who needs this wisdom. Every woman who receives a card is invited to make one. Everyone is empowered by the experience. Thus far, *Traveling Postcards* has collected over 3000 handmade cards carrying voices to and

from the Congo, Rwanda, Uganda, Costa Rica, Niger, Peru, Haiti, United States, Afghanistan, and more. Traveling Postcards travel and are distributed via workshops and through our *Traveling Heart Bag* program. Every card is unique and in all the years I have been leading workshops, I have never seen two postcards that looked alike!

*Traveling Postcards* also creates a non-threatening opportunity for personal connection to humanitarian issues that may seem overwhelming or geographically separate from our own lives. By providing personal connection, we create the possibility for every individual to become socially active in his or her community. Men are welcome in our workshops and their voices are needed as part of the solution to the insidious nature of violence against women. We need more than ever to change the discourse that men need to be strong and silent, that gender issues only mean women, and that men cannot be victims of sexual assault.



We bring our workshop to domestic violence shelters, rape crisis centers, college campuses, refugee centers, military bases, community centers, homes and church basements, and even once...the jungle! We work with existing aid communities to provide one more tool to combat violence and to aid in healing and transformation.



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By creating a sacred space in which to hold a workshop, one that is filled with an abundance of beautiful art materials spread out amongst tables with everyone sitting together, we are creating the possibility to find the inherent beauty in all things. In our workshops, women find that they can appreciate their own unique beauty and have that beauty witnessed by their peers and by a global community of women who care.

Each woman is asked to share her voice, her innate wisdom, and her resiliency when she makes a postcard; her expression will not only serve as a gift for another survivor, but she will share her voice with a global community of women worldwide. She will be seen and valued.

Allowing each workshop participant to experience choice and autonomy increases her sense of self. Each time she has the option to choose a shape or color and decide where to place it on her card, she is empowered.

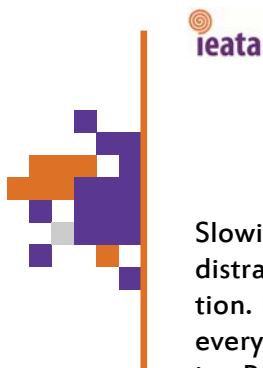
Art making can give us a new language in which to express ourselves. The creative process breaks through old patterns of behavior and can create new ones. She may think that she is “not an artist” or can’t do it because she is “not enough,” but she finds that she can. She discovers pride in her creation and in herself.



Trauma from violence shatters your sense of self and creates a need for personal exploration and expression. So many participants have not had an opportunity to use scissors, paints, sewing materials, markers, etc., since they were in third grade! We provide the opportunity to create with their hands and healing comes from intuitively designing anew map from what begins as a blank postcard and turns into a beautiful portrait of one’s best self.

I have worked with women who were living in transitional housing in several different communities both in the Bay Area and throughout the United States. We traveled over 8000 miles in 2013 on a trip we called *Shelter to Shelter*, visiting women’s safe houses and shelters across rural America. We have worked with refugees and immigrants within the US bringing voices of wisdom from women who have suffered the trauma of both violence and displacement. I traveled to New York to facilitate a workshop within the Afghan population living in Queens. We made cards for women living in Afghan shelters and for women living in local shelters in California. I saw over and over again how resilient they are and how willing they were to share their pain and joy on their cards. They told me that no one had ever brought them such an abundance of art materials before. We talked about their children, their dreams and their suffering, and the suffering of women around the world, but mostly we were silent and engaged in a quiet process of choosing colors, shapes, and textures that tell our stories. Afterwards, one woman told me that she had not felt anything for so long and that today she felt happy.

The group process creates a witnessing and validation of each participant’s experience. She discovers she is not alone and has the ability to affect positive change for herself and for others. Through our workshops, she also has a global connection to women who care for one another. She is no longer isolated.



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Slowing down and making something with our hands connects us to our hearts. Letting go of daily distractions helps anyone to open up to the creative process and the process of personal reflection. Even when resistance to the process is experienced, the workshop is simple enough to have every woman succeed. Strength comes from having a conversation or dialoging with the Traveling Postcard, She can now “see” her beauty and resilience. Many participants find relief in finding their truest selves this way: a self that can hold pain with both power and potential.

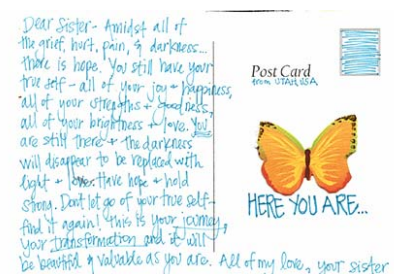
Finally, sending her postcard into the world acknowledges her strength and gives her courage to speak. She sees that her voice is a powerful gift not only for another survivor, but also for a global community that will benefit from hearing voices of solidarity and resilience in the face of violence. Everyone is excited to give their cards away and often somewhat reluctant to let go of their beautiful creation. Yet they see this as an act of power and service. In the workshop, we ask them to write: “If you could hear what the woman who received your postcard was thinking, what would she say?” One woman responded, “This card represents what I have to do for myself, my family, my future. Everything is going to be okay. There is hope.” So many women speak of wanting to feel peaceful, safe, and free. Everyone speaks of love.

Creativity is a bridge to our authentic wisdom and our ability to heal ourselves. It is available to everyone. It is a universal language that cannot be restricted due to ethnicity, education, or economics. Art provides a much needed opportunity to see that we are not limited by our immediate circumstances and that by accessing and seeing our unique wisdom, we can choose to be fully expressed in our own communities and create a better life for ourselves and for those around us. I see art as a healing tool not to “fix” someone but to engage with them clearly and without judgment as they walk in their own process. Our stories can become guidance and wisdom for one another as we are faced with new challenges. Often I see a letting go process that stops self-blame and shame and instead engages us to the present and to what is possible. Creative action allows for a mindful interaction with whatever circumstances we find ourselves in. Throughout this interaction we are finding our authentic wisdom and can begin to recognize its shape and character. *Traveling Postcards* does all that!

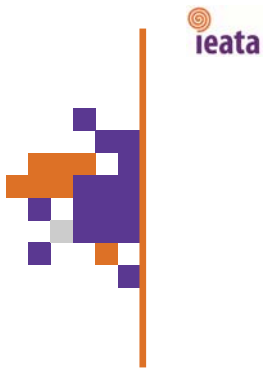
*In the process of healing, not everything can be spoken or explained. The process of art allows for feelings and thoughts that are stuck in a special or lost place to be expressed in another way or medium that so often is not accessed in regular therapeutic options. The postcard allowed me to share my feelings and thoughts with another person, even without knowing who that person is, in a way that was intimate, without feeling exposed. After the workshop, I felt freer, like I had done something for someone that day and for myself — Workshop Participant*

If you would like more information,  
please visit: [womenswisdominitiative.org](http://womenswisdominitiative.org)  
or [www.travelingpostcards.org](http://www.travelingpostcards.org)

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**Creatively Sharing Wisdom, Leading from the Heart.**



## Notes from the Field

### "Life"—Means Yohanna

by Naserimah

*When I paint,  
I paint with my soul.*

Recipient: a dear friend who who has been challenged with Bipolar Disorder for more than 15 years.

She is Bipolar Type 1, prone to mania.

She keeps a mood chart to capture her daily moods ranging from 0=Catatonically Depressed to 10=Out of this World Manic.

Favorite color: purple, orange, turquoise

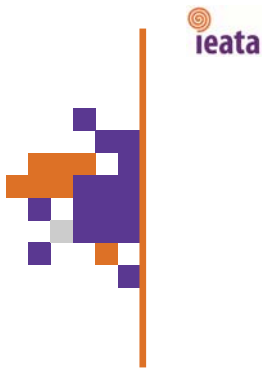
Favorite quote: "The wound is the place where the light enters you," —Rumi

Title: "Life"—Means Yohanna  
Size: 20 x 20



(What runs through my heart when I painted this piece) Dark purple texture defines the wound of her soul, orange represents the light penetrating from within. Deep turquoise on the bottom left shows the intensity of her depressive gloomy moods. Light purple depicts her manic, elated, high moods.

The word LIFE is where she aims to be, right in the middle...perhaps slightly towards the higher side, not too high, just enough to keep her elated and happy in life. She is a talented writer who has co-authored many best sellers. She studied English Language, Sociology, and Philosophy at university. She is a very intelligent and beautiful lady inside and out.



## Notes from the Field

### Counter-Transference and its Resolution via Art

by E. Hitchcock Scott, PhD, MEd, LPC, REAT

Completing research on the topic of self-mutilation by women who have a dissociative identity disorder was fraught with the normal challenges of research and research writing. Yet, due to the complex trauma and profound dissociation experienced by the research participants, there were additional mirrors of complexity reflected in the process of data analysis.

The terms self-harm and self-mutilation are often used interchangeably for those who self-injure. Due to the extreme forms of self-harm by those in my study, self-mutilation was determined to be the more correct term. This term is not a judgment, but the correct nomenclature for the experiences described by my research participants.

I have worked with those who present with a history of profound trauma, dissociation, and often co-occurring self-harm or self-mutilation since 1987. Even so, I was not prepared for the unfiltered impact of listening. Every interview in my study lasted four to five hours. In each interview, I heard explicit, detailed, and often excruciating truths about how people physically hurt themselves. I listened to their stories uninterrupted for four to five hours at a time.

I had not realized how helpless I would feel in the role of researcher. As a researcher, versus seasoned therapist, I was not able to intervene, offer treatment or soothing statements, or even (the lowest form of counseling) a temporary quick fix solution. My job was to be an objective listener, to record, and document. I listened to women describe scraping their skin, sometimes down to bone. I felt scraped down to the core of myself. I had no defense.

I collected the visual and verbal data. I then listened to the tapes and read the transcripts of each co-researcher's interview, revisiting again and again the detailed descriptions of self-mutilation. I lost patience. I felt saturated with blood.

I lost interest and motivation for my study. I began to procrastinate. For the first time in over a decade, I experienced counter-transference regarding the topic of self-mutilation. I felt the helplessness of my co-researchers and at the same time I felt helpless, as well. While I felt the intense emotions as my own, I also projected my sense of helplessness outward—the phenomenon of counter-transference.

Counter-transference—a therapist's or researcher's projecting of their uncomfortable emotions outward to a client or research participant—is a defense and, therefore, biased. The inspiration for my study was my hope that a description of self-mutilation in the words of those who suffer would help promote compassion in service providers. One co-researcher described a medical doctor withholding anesthesia while sewing up her wounds stating, "If you could do this to yourself without it, you don't need it now," which is untrue. Once the trance has faded, the pain increases.

I was running out of time and money. Tension was building, I knew that my stance of procrastination was not sustainable. Time, a significant element for those who self-mutilate, was beginning to be a critical element for



## Notes from the Field

me, as well. I decided to paint a self-portrait as if I was a person who engaged in self-mutilation, to walk in the shoes of the women in my study—my overt attempt to achieve epoché, a time when all judgments are suspended.

I chose my art supplies carefully with the goal of epoché in mind. I decided to use clay-board instead of canvas. Clay-board is made with layers of earth clay adhered to a masonite panel and then sanded to a very smooth finish. The smooth, fine-grained clay surface is not unlike the texture of skin. The hardened clay can be etched and scraped.

I used a blind contour drawing process first used by European artists such as Rodin and Picasso: I drew without looking at the paper. I was surprised, and not surprised at all, at the intensity of emotion I channeled into the brush strokes. I painted and then rubbed out the image, left shadows to be seen. I painted again; my strokes were more bold. I painted again and scraped cuts into the clay board with an exacto knife, replicating even the same instrument often used for self-harm. I painted over the scrapes but that was not satisfying enough...so I cut again.

I consciously placed the ancient symbol for psychology at my throat. I focused on my eyes and I left what looked like drops of blood amid the whirl of an energy storm.

I sat back, looked, and felt relief.

Over the next few days my energy returned. I felt a renewed interest in the topic. I began reading academic articles again. I was able to read the transcripts of the interviews carefully with analysis in mind. My compassion returned. Most importantly, I felt an embodied sense of the elusive epoché.

This was a phenomenological research study and I was allowed to include the art and poetry, as well as the verbal text, created by those who participated. The primary guideline was that the art and/or poetry collected was to be closely related to the research topic. Everyone in my study drew a life-sized body map tracing ("life-sized silhouette mandala," Scott and Ross, 1999) with detailed drawings depicting self-harm, the location on the body, and the type of self-harm. The body map was done in addition to other artwork and poetry.

Poem—June 14  
*Co-Researcher B*

I am terrified...  
I am terrified in a way that one can only be if one is woken  
in the middle of the night  
with a slowly growing pool of one's own blood.  
If one has looked down the shredded skin of one's own arm  
To find a razor blade held bloody and dripping in one's own hand.  
If one has looked in the mirror of the dark of the night  
And seen the haunted face of the other.  
(Scott, 1999a, p. 136)

# Notes from the Field



*Author Self-Portrait*



# Notes from the Field

## CASE STUDY *Co-Researcher E*

### Individual Composite Textural-Structural Description

Self-mutilation happens over periods of time rather than as isolated, encapsulated incidents. These periods of time are often progressive. The paradox: self-mutilation seems to happen over long periods of time and long periods of time seem like moments. Time is not measured in traditional ways. Timeframes are measured by the number of wounds rather than by a clock. Even so, time blends together. Time can be so constricted that it is lost.

At times the individual is disconnected from physical pain. On other occasions she suffers greatly. Even when the burns are third degree, the experience of pain is variable. The same experience of burning may engender a wide range of expressions of physical pain or emotions, including denial. Burning is an outward manifestation of inward pain. Pain is experienced as something that can be moved, not alleviated. Pain or guilt is moved from an internal experience to an external experience. Moving the pain detracts from the original source of pain and guilt.

Self-mutilation scars are used to prevent sexual intimacy. These marks soothe feelings of vulnerability. The individual is terrified of her sexuality. She feels vulnerable to her own desires. Her body is marked with wounds and scars which she experiences as ugly, thus informing abstinence. The individual uses self-mutilation to set sexual boundaries. She will not let others see her wounded body and so she is less likely to engage in sexual activity.

Her desire to keep her behavior secret creates barriers beyond the sexual boundaries and encourages isolation. She keeps her behavior a guarded secret due to embarrassment and shame. Her methods of secret keeping include hyper-vigilance, pretending to be "normal," or overt lying even though lying is not part of her value system. She spends a lot of time and energy hiding her wounds.

Self-mutilation is an attempt to control the inner world of feelings and thoughts. There are actions, such as rules, which are created to control the self-mutilation. This is like the lion chasing his tail. The greatest fear is loss of control. Yet, loss of control is common. The individual relates more to her behavior of self-mutilation than to herself. She interacts with her behavior as if it were a live entity, a personification of her behavior. She has rules to control "it". Her control mechanisms have not worked and she has failed to stop her behavior. She feels hopeless about establishing control. Control seems to be in the hands of this "live entity" which is outside of herself. The behavior has control of her, not the other way around.

Self-mutilation is experienced as a method to burn away all of the filth and impurities. The individual feels punished by herself. Her self-punishment is closely related to her sexual thoughts and feelings. She feels deep shame and guilt. Her guilt is focused on her thinking and behavior while her shame is about her sense of worthlessness. She feels hopeless about breaking the cycle of self-harm and self-punishment. She also perceives her self-mutilation as a way to express her sadness and grief.

She does not try to excuse or defend her behavior. Feelings of hopelessness are heavy and pervasive. There is hopelessness about stopping the behavior and about life in general. The individual perceives her behavior to



## Notes from the Field

be about the reenactment of an abusive experience and dynamic. As a child her caretakers were disrespectful to her body. She believes that her self-mutilation is always related to her childhood, just not always in the same way. This reenactment includes self-punishment. Her communications to God include desperate cries for help and relief. She is willing to surrender all for Divine intervention. In this case, the term “sacrifice” may be a correct label for her intense forms of self-harm.

The decision to take personal responsibility is important if significant changes are to be made. It is also important for the individual to know that others care. Telling others of her secrets and knowing they care is an essential component of healing. Conflicts regarding disclosure are based upon the fear of influencing or frightening another. There is also fear of rejection and judgment. Yet, disclosure is a primary factor in healing. There is much to grieve before the self-mutilation starts. Once the actions have become entrenched, the consequences add to the existing grief. Any relief self-mutilation offers is temporary. The long-term negative ramifications of self-mutilation are profound (Scott, 1999a, pp. 243-245).

Although this case of a person actively engaging in self-harm at the time of the study is profoundly despairing, as with those who have chemical addiction, people recover no matter how far the road of trauma reenactment has taken them.

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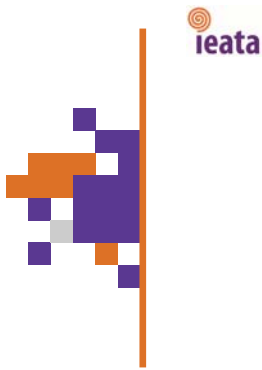
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**ABOUT THE AUTHOR:** Dr. Ericha Scott, licensed as E. Hitchcock Scott, PhD, LPCC917 in California, has 31 years of professional experience working with those who have co-occurring addictions and complex trauma. She has published research in peer review journals, in the United States and abroad, on self-mutilation by dissociative disordered individuals and her theory of creative arts therapy for trauma and addiction. Her contribution to the book, *Integrative Therapies for Addiction Treatment*, will be published by Oxford University Press by 2017. Dr. Scott has run a graduate program in counseling psychology, worked as the clinical director for several treatment centers, and has hosted her own TV show for 2 years. Dr. Scott, who is also an artist and a certified interfaith spiritual director, continues to contribute to the fields of addiction and trauma with a deep sense of passion and commitment. Dr. Scott has six licenses in four states and is a Board Certified Registered Art Therapist and Registered Expressive Arts Therapist.



# Notes from the Field

## Video and Filmmaking as Therapeutic Art

by Brit Davis



Video and filmmaking as methods of therapeutic art engage individuals with a sensory experience that may provoke self-discovery, self-awareness, and self-expression (Malchiodi, 2015, p. xv).

Utilizing video and filmmaking as therapeutic tools can provide an opportunity for individual growth that is not found solely through words.

This project explored the use of 8mm motion picture filmmaking as a therapeutic resources for an individual diagnosed with intellectual/

developmental disabilities (I/DD). The participant was a 24 year old male who has an affinity for black and white silent movies. He carries a portable DVD player with him at all times and watches old movies as a coping mechanism for his experience with anxiety. I offered him the opportunity to create his own black and white silent film, in an effort to encourage him to improve his communication skills and fine motor skills. With my guidance, the participant and I wandered around an urban environment capturing footage of the community which presented an opportunity for him to converse with patrons that he might want to include in his film. The process of making an 8mm motion picture film fostered a therapeutic environment for the participant to improve communication skills and fine motor skills.

**ABOUT THE AUTHOR:** Brit Davis (b. 1988) is a photographer based in Western North Carolina. She teaches photography and other media to adults with intellectual and developmental disabilities. Brit is working on her Master of Arts in Clinical Mental Health Counseling and Expressive Arts Therapy through a low-residency program at Goddard College in Plainfield, VT. Over time, Brit's photography has become psychological in nature. She is drawn to photographing personal, environmental, and conceptual projects.



*In 2015, she was diagnosed with Major Depression, Epilepsy, and Stevens Johnson Syndrome.*

*Through the beauty of Expressive Art she overcame her condition and switched on her mind power to achieve success in all areas of her life—mentally, spiritually, emotionally, physically, financially.*

*She now aims to spread the Healing Power of Art Therapy which helps in her Personal Self Discovery and Life Transformation.*

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In this supportive space, new images, metaphors, questions and choices spring forth, becoming companions and guides to embolden us in cultivating a passionate, artful life. Awaken your heart and celebrate spring!

Fri, April 8th, 6-9PM & Sat, April 9th,  
10:30AM-6PM with Jena Leake PhD, REAT

More info & to register: [jenaleake.com](http://jenaleake.com)



# Tamalpa Institute News



## Join Us For Our Upcoming Programs

### Tamalpa Training Program

The next Level 1 Weekend Training Program begins this April and the Level 1 Immersion Training Program begins in September. [Learn more](#)

### Weekend Workshop with Daria Halprin *Body Ensouled, Enacted, & Entranced*

Drawing upon her life and work, this workshop will be a creative exploration on returning home to the body and to the heart of what matters in your life through art making. March 19 & 20. [Register](#)

### Meet the Work

With Maria Luisa Diaz de Leon  
Free open house workshop.  
May 20 / 7pm - 9pm. [Register](#)

### Tamalpa Experience Workshop

With Rosario Sammartino  
Join us for an introduction into Tamalpa's approach to Movement-Based Expressive Arts.  
May 21 & 22. [Register](#)

### Creative Embodiment: Exploring the Landscape of the Body, Nature, and Imagination

With Elisabeth Osgood-Campbell  
A special 5-day workshop at Earthdance Retreat Center in Massachusetts.  
May 30 - June 4. [Register](#)

### Anna Halprin's Planetary Dance - Restore

Mt. Tamalpais State Park, CA.  
June 5. [Learn more](#)

### Summer Workshop with Anna Halprin: Empowering Creativity through Movement & Dance

June 20 - 24. [Register](#)

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# My Mother's Trunk



When my mother died I inherited the responsibility of taking care of the belongings of three generations stored in the family home. As an only child the responsibility was all mine.

Among the contents of the garage was an imposing very old trunk. My aunt explained that it was my mother's trunk from her time at college.

My mother and her sister struck out from the village of Scottsville, New York, by train headed for Wilberforce University, an historically black college in Ohio founded after the abolition of slavery. The two secured scholarships. I remember my mother's story that she found a wealthy patron in the village to buy her train ticket. This was in 1941.

I needed to keep the trunk but my grief was too deep to open it.

I had it moved to the basement of my home in Atlanta, Georgia, where it sat for almost thirty years.

We moved from our house to an apartment. I had the trunk shipped to my studio.

The trunk arrived. I began photographing the exterior. It took me several days to open it. My mom died when I was a very young adult. We didn't have the opportunity to talk about her own young adult and college life. I was not sure what I would find buried inside.

I opened it and began photographing the contents, layer by layer.

I found handwritten class assignments for her courses in social work written in beautiful penmanship in blue ink. I found books and doodles and sketches I imagine she made when she was bored in class. The next layer was clothing. The trunk had built-in drawers.



I found skirts and blouses inside—even her undergarments.

Below the built-in drawers were mementoes and letters and gifts from her sweethearts.

I made still lifes of the objects: film, silver gelatin prints on fiber, toned with selenium.

■ Wendy Phillips, PhD, LMFT, REACE



The nature of growing up is covering over that which we once were.

I chose to remake an old children's book with collage and text. I wanted to incorporate childhood with horrors. Childhood is not an escape from the horrors of life. It is often the time when what will go on to be diagnosed begins.

The book contains images and text of silence, of drugs, of starvation, desperation, and pills—that which is soporific.

What to do with all that ails us? The only thing to do is to create from the wreckage. The consequences of being shut up are everywhere, tainting everything, fouling rivers, leaving humans silent and unwanted, named sick, mad, categorizable.



**ABOUT THE ARTIST:** Christine Isherwood, BA Hons UK, Dip Assert Tr, VMT-R, is director of the Voice Movement Therapy Training, "Singing the Psyche," and has taught trainings in Europe and the USA. She works with individual clients, teaches workshops internationally, and supervises VMT students and practitioners. Prior to VMT, she worked with homeless people and as a mental health counselor, group facilitator, and trainer. She has written and performed in political musicals, toured with theatre groups and bands, and recorded. Christine has lectured and taught at Liverpool Institute for Performing Arts, Western Australia Academy of Performing Arts, and the International School of Interdisciplinary Studies, Canada. She is currently a graduate student at Goddard College, completing her Master's Degree in Clinical Mental Health Counseling, concentration in Expressive Therapy.

## Using the Creative Therapies to Cope with Grief and Loss

by Stephanie L. Brooke, PhD & Dorothy A. Miraglia, PhD (Eds)

A Book Review by Judson Davis, PhD

Stephanie Brooke and Dorothy Miraglia have compiled an impressive collection of essays pertaining to the use of creative therapies in the healing arts. In addition to their own respective contributions, the work of nineteen experienced and highly skilled practitioners is included in this book, which variously covers the applications of art, music, dance/movement, drama, and animal-assisted therapies in the treatment of loss and grief.

The purpose of this publication is to provide therapists, students, educators, and mental healthcare administrators with an overview of various treatment approaches to a broad spectrum of grief, and not simply the deep sense of loss that is associated with the death of a loved one. This includes an array of emotional conditions, such as the distress relating to the end of romantic relationships (as both non-initiator and initiator), grieving adults in hospice care, and children dealing with unresolved trauma of various types.

The introduction begins by providing a firm theoretical basis for attachment theory and the attendant forms, both secure and insecure, that attachment can take in various relational contexts during the course of the human lifespan. It is followed by chapters that specifically focus on the different forms of creative therapy listed above, with each chapter consisting of between two and four case studies. In chapter two, for example, the initial essay deals with the use of art therapy in response to the suicide of a father. Other examples include the use of music therapy in addressing childhood trauma (chapter four), the application of dance and movement therapy in relation to women suffering from perinatal loss (chapter five), and the integration of drama therapy into the treatment of grief pertaining to drug and alcohol problems in the family (chapter six).

In reading this compilation of essays/case studies, one can immediately discern that a great deal of time and planning has been put into the well-organized and highly structured format. The respective articles typically include relevant theoretical overviews relating to the specific affliction, combined with a presentation of research objectives, treatment methods, subsequent outcomes, and recommendations for future research. Each case study is thus grounded in a solid mixture of applied theory, creative techniques, and treatment outcomes along with an indication of where a given therapeutic approach may be headed in its ongoing line of development.

It goes without saying that the particular structure and content of the essays have the notable benefit of combining psychological theory with real case studies and outcomes, and this naturally provides invaluable insight on various levels to students and practitioners alike. However, there is a distinctly clinical feel to many of the essays that at times inhibits or depersonalizes the unique sense of personhood and individuality of the client, and although this perceived deficiency may reflect the inclinations of the reviewer, I think it's fair to say that bringing the client to life in a full and thorough manner and clearly articulating his or her particular sense of human *being* can only further benefit a well-researched psychological study.

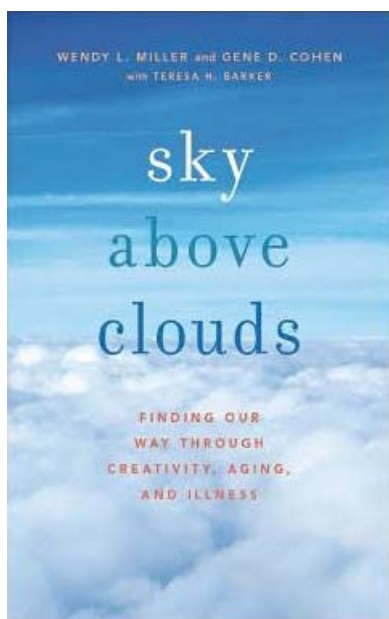
In sum, Brooke's and Miraglia's book *Using the Creative Therapies to Cope with Grief and Loss* represents an important contribution to the field of expressive arts therapy. And although a more personalized approach to the subject matter would in some cases have created a more balanced and holistic analysis, all in all this well-crafted compilation of case studies stands as an essential synopsis and instructional tool for all those interested in the healing arts.

## **Sky Above Clouds: Finding Our Way through Creativity, Aging, and Illness**

by Wendy L. Miller and Gene D. Cohen, with Teresa H. Barker

Oxford University Press Publisher's Review

Through their scientific research and clinical practice, husband and wife team Gene D. Cohen and Wendy L. Miller uncovered new clues about how the aging mind can build resilience and continue growth, even during times of grave illness, thus setting aside the traditional paradigm of aging as a time of decline



Cohen, a founding father of geriatric psychiatry, describes what happens to the brain as it ages and the potential that is often overlooked. Miller, an expressive arts therapist and educator, examines creative growth in the midst of illness and loss encountered through her clinical practice. Together, Cohen and Miller show that with the right tools, the uncharted territory of aging and illness can, in fact, be navigated.

In this book, the reader finds the real story of not only Cohen's belief in potential, but also how he and his family creatively used it in facing his own serious health challenges. With Miller's insights and expressive psychological writing, *Sky Above Clouds* tells the inside story of how attitude, community, creativity, and love shape a life, with or without health, even to our dying.

Cohen and Miller draw deeply on their own lessons learned as they struggle through aging, illness, and loss within their own family and eventually Cohen's own untimely death. The result is a richly informative and emotional journey of growth.

### **ABOUT THE AUTHORS:**

Wendy L. Miller is the Co-founder of the Create Therapy Institute, an Integrative Arts Medicine Studio, and the Executive Director of Projects on Intergenerational Communication at the Washington D.C. Center on Aging.

Gene D. Cohen was the founding director of the Center on Aging, Health and Humanities at George Washington University in Washington D.C. where he held the positions of Professor of Health Sciences and Professor of Psychiatry.

*Sky Above Clouds*—Available April 2016  
Order online at [OUP.COM/US](http://OUP.COM/US)

## Dancing Mindfulness: A Creative Path to Healing & Transformation

by Jamie Marich, PhD, LPCC-S

A Book Review by Theresa Benson

Mindfulness has evolved from a practice originating within the Buddhist religious community into an intervention in the field of counseling and psychology. As research continues to support mindfulness as an effective intervention for a variety of psychological concerns ranging from anxiety and depression to personality disorders, mindfulness has moved from the periphery to center stage. Mindfulness interventions typically focus on a sitting practice where a person pays attention to the present moment without judgment. Then along came Jamie Marich asserting that any activity, and dance in particular, done with the intention of paying attention to the present moment without judgment has the potential to be a mindful act. Thus dancing mindfulness as an expressive art form was born.

In this book, Marich provides a blueprint for taking a dance practice and transforming it into a dancing mindfulness practice. She takes the foundations of mindfulness as defined by Jon Kabat-Zinn and adds seven core elements to transform dance into a mindfulness practice. Once providing the core elements of dancing mindfulness within the introduction, she offers an in-depth exploration by devoting a chapter to each core element. Within each chapter, she incorporates a variety of ways to engage in the practice including:

- “Try this” section that offers practices to explore
- Jamie’s music box that provides tips on music selection
- Tips for personal practice
- Tips for facilitating
- Further readings and resources

Then reflective questions at the end of each chapter offer encouragement to utilize a variety of creative expressions to deepen practice.

Strengths of this book include the intermodal expressive arts approach that is emphasized in the practices to try. Also, Marich takes cultural considerations into account throughout her book and shares examples of how dancing mindfulness practice has impacted individuals from diverse cultural backgrounds. Additionally, I appreciate the way Marich embraces the counseling psychology value of giving psychology away. She makes dancing mindfulness accessible and available to anyone interested in engaging in dance as a mindful practice.

In *Dancing Mindfulness: A Creative Path to Healing & Transformation*, Jamie Marich offers a pathway to spirit through the body. Each chapter offers a doorway to dancing mindfulness as personal as well as professional practice. She skillfully weaves personal stories and research throughout the book making it a must read for anyone interested in developing an expressive arts mindfulness practice through dance.

## A Hand in Healing: The Power of Expressive Puppetry

by Marge Schneider

A Book Review by Judson Davis, PhD

In her book, *A Hand in Healing: The Power of Expressive Puppetry*, Marge Schneider has assembled a collection of extremely moving stories in which the use of puppetry brings solace, comfort, and hope to people struggling with some of life's most challenging circumstances. The author reveals a unique ability to animate the life conditions and attendant emotions of the often distressed and disillusioned individuals she encounters, and her work brings much needed caring and compassion to the people with whom she communes.

Schneider's approach to this very sensitive subject matter is direct and straightforward, but in a soulful, heartfelt sense rather than a theoretical one. She deals head on with the myriad of emotions (or lack thereof) that her patients contend with in line with their respective conditions, and her ability to deeply empathize with their circumstance while at the same time accepting them exactly as they are is one of the truly essential messages of her work. Although she works with all ages, much of her therapeutic activity involves meeting with elderly patients who are suffering from depression, dementia, or other forms of cognitive impairment, and many, being in the very last stages of their lives, are undergoing hospice care. Often such circumstances greatly inhibit their ability to express themselves, and at other times the conditions in which patients find themselves are so disheartening and seemingly hopeless that they can no longer express emotion. And that's where puppets come in, as Schneider revealed in the following passage:

I have found that puppets can sometimes be magical in their ability to connect hearts, minds, and spirits—and to provide moments of joy. Something from deep within emerges, and a profound, sometimes startling link can take place...A puppet can break the ice and lead the way to establishing a trusting, nonthreatening relationship. A puppet can help a client, patient, or loved one connect to a genuine sense of self, promoting spontaneity, openness, and honesty. A puppet can provide a creative outlet, helping patients express their pain and struggles, make sense of their situation, and come to some resolution about a problem in a creative and loving manner, (pp. 25-26).

As the above passage clearly suggests, Schneider received training in spiritual counseling in correlation with her broader education in the healing arts, and this aspect exudes a constant presence throughout the book. The text is divided into eight succinct chapters that variously articulate the healing power of love and the role of laughter (chapters two and three), the selection and animation of different puppet characters and types (chapters four and five), and both the rewards and challenges of dealing with different age groups and circumstances, (e.g., chapter six addresses the elicitation of child and adolescent emotions, while chapter eight focuses on the emotional healing process in hospice care). Throughout these various sections she weaves together a deeply compassionate appreciation for her clients with the therapeutic application of a particular puppet type in an effort to mirror their emotions and/or conditions. Inhibition, withdrawal, or boundary issues, for example, may be represented by a turtle, snail, or hermit crab, all of which can move their heads in and out of their shells. Patients, in identifying with these playful, furry figures, very often feel that their own circumstances are now shared and understood by the puppet, which in turn can become a vehicle through which the patient is able to express acutely repressed or intensely daunting emotions. Other examples include the use of wolf puppets in dealing with issues of vulnerability, the use of lion, shark, and alligator puppets when addressing severe anger, and the adoption of a kangaroo mother and its baby (in her pouch) in response to separation anxiety. All of

## A Hand in Healing: The Power of Expressive Puppetry by Marge Schneider

A Book Review by Judson Davis, PhD

(continued)

these figures ultimately serve a most profound purpose, that of "enabling the person to share what lies deep within," (p. 28). A given puppet thus provides a vital experiential metaphor as an extension of the patient's inner world.

Marge Schneider's book represents an important and innovative contribution to the field of expressive arts therapy, and may well serve as a pioneering work that expands the use of this dynamic discipline into mainstream psychotherapeutic practice. More information can be accessed at: [www.expressivepuppetry.com](http://www.expressivepuppetry.com)

### Books Reviewed:

#### ***Using the Creative Therapies to Cope with Grief and Loss***

by Stephanie L. Brooke, PhD & Dorothy A. Miraglia, PhD (Eds)  
Charles C. Thomas Pub Ltd - July 2015  
ISBN 13: 978-0398090777

#### ***Sky Above Clouds: Finding Our Way through Creativity, Aging, and Illness***

by Wendy L. Miller and Gene D. Cohen  
Oxford University Press - April 2016  
ISBN 13: 978-0199371419

#### ***Dancing Mindfulness: A Creative Path to Healing & Transformation***

by Jamie Marich, PhD, LPCC-S  
Skylight Paths Publishing - October 2015  
ISBN 13: 978-1594736018

#### ***A Hand in Healing: The Power of Expressive Puppetry***

by Marge Schneider  
September 2015  
ISBN 13: 978-1514383889

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This series is inspired by experiences of meditation, exploring integration and assimilation, the concept of “monkey mind,” and the relationship of memory with the present moment: the ambiguity and dualism of separating past, present, and future events.

In this artistic expression, I committed myself to remaining present with the work the process, allowing the images to unfold through the process itself rather than as preconceived expressions.



Concentration on images which represent the past can have an integrative effect on the present.

I was inspired by the research and writing of Daniel Siegel, showing how pronounced an impact parents can make on their children by making sense of their own experiences and integrating the past into the present. These images are also reflections on the relationship of human illusion and its relationship to memory, the relationship of these processes to minor forms of PTSD, and exploring reintegration through visual storytelling.

**ABOUT THE ARTIST:** Reuben Travis was raised in southeast Pennsylvania on 150-acres of rolling hills, forest streams, and sheep pasture, and maintains a deep connection to wilderness and trans-species experience. With a bachelor's degree in Art, concentration in Ceramics, and with certification in Biodynamic Agriculture and Anthroposophical Social Therapy, Reuben has managed a variety of therapeutic horticulture and animal husbandry programs for adults with disabilities and mental illness, and hosted farm-based educational activities for students and apprentices of all ages. Reuben has homeschooled/unschooled his three daughters for 6 years on a 65-acre homestead and family goat dairy deep in the Blue Ridge Mountains, practicing permaculture and deep ecology. Reuben is currently a graduate student in the Master of Arts program in Clinical Mental Health Counseling at Goddard college in Plainfield, Vermont.

# International Expressive Arts Therapy Association

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## Rituals

lilies.  
incense.  
small flames.  
candle wax.

*en el nombre del padre  
y del hijo  
y del spirito sancto*

my breath.  
branches across the skylight.  
my mother and I  
and no one else.

*ahora  
y en la hora  
de nuestra muerte*

a shepherd  
of the silence  
*how sweet the sound*  
I sang.

■ R.P. O'Brien



## Newsletter Submission Guidelines

The Newsletter is a forum for IEATA professional, student, and supporting members to connect, exchange ideas, network, and stay current on the latest developments in the field of expressive arts. It is published bi-annually by the IEATA Publications Committee. Submissions are welcome from any current IEATA member and from those in the larger expressive arts community upon committee approval.

**Submission deadlines:** edition 1 | March 1st ◇ edition 2 | September 1st

We accept submission for:

- **Notes from the Field** - reflections or commentaries concerning the process of engaging in the expressive arts from the viewpoint of artist, student, intern, consultant, educator, therapist, client, activist, etc.
- **Student News, Views & More** - reflections or commentaries concerning issues, views, and the perspectives of those currently enrolled as students in expressive arts programs.
- **Professional Exchange** - professional reflections or commentaries concerning new approaches, certification, professional development, trends, historical reflections, ethics, and other developing issues from practitioners, educators, and consultants.
- **Book Reviews** - short reviews of new books in the field of expressive/creative arts and related topics that provide both descriptive and critical commentary concerning books' relevance to expressive arts practice.
- **Ripening Seeds** - column highlights different approaches to expressive arts as depicted by those nested within particular cultures or regions of the world. Diverse perspectives from around the world are included in order to promote intercultural understanding. >> If you are submitting to Ripening Seeds, contact Kate Donohue, Ripening Seeds editor, at [kate@kate-donohue.com](mailto:kate@kate-donohue.com) for submission guidelines.

We welcome artistic contributions in single or multiple modalities that inform or depict expressive arts work. Contributions may include: visual artwork, poetry, creative writings, audio, video.

### How to send us your work:

All submissions must be digital. We do not accept hardcopy submissions. Email your submission as a .doc/.pdf/.jpg attachment to: [publications@ieata.org](mailto:publications@ieata.org)

All submissions must have "Newsletter" and the category of submission (e.g., "Book Reviews") as the subject line of the email.

Specifics: length (maximum of 3000 words); images (must be submitted a jpg); audio/video (provide URL); language (written submissions must be in English)

Editing: all submissions are subject to editing for length and content at the Editors' discretion. However, if a submission requires a more extensive edit, contributors shall be notified by the Editor prior to finalization.

Simultaneous submissions: contributors must notify the Editors if a submission to the IEATA Newsletter has simultaneously been submitted to another publication or if a submission has been previously printed in another publication.



## Advertising:

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Payment is due at time of submission. Remit to: International Expressive Arts Therapy Association (IEATA), P.O. Box 40707, San Francisco, CA 94110-9991

## eNews Submission Guidelines

IEATA's eNews is a forum designed to promote connections within the expressive arts community and to share news and upcoming events. The eNews is published twice a year, in June and December, and is distributed by email to members and friends of IEATA.

We accept submissions for:

- **Regional Group News** - regional networking events and announcements from regional groups.  
Committee News - announcements from the committees including openings for IEATA Board of Directors Co-Chair positions.
- **Career News** - job postings, internships, career fairs, networking events  
Professional Development News - postings of workshops, classes, group therapy, programs, grant information, calls for papers/submissions.
- **Good Reads** - book release information
- **Other News** - any other time-sensitive information that may benefit the IEATA community.  
>> Announcements are limited to 175 words and may be edited for clarity and placement purposes

## How to send us your submissions:

- All submissions must be digital. We do not accept hardcopy submissions
- Email your submission as a .doc/.pdf/.jpg attachment to: [publications@ieata.org](mailto:publications@ieata.org)
- All submissions must have "eNews" and the category of submission (e.g., "Career News") as the subject of the email.

## Important submission information:

- Due to space constraints only a very limited number of images can be published in any eNews edition. URLs can be submitted with text for associated visual content.
- Video and audio content will be published as embedded links in the text of a message only
- Please make sure to include complete URLs
- Some submissions may be redirected to the website bulletin board, MemberClicks forum, or the IEATA Newsletter as appropriate





**ieata**

International Expressive Arts Therapy Association

## Mission Statement

The International Expressive Arts Therapy Association (IEATA) exists to support the professional use of integrative, multimodal arts processes for personal and community transformation. Expressive Arts are those activities in which creative expression fosters psychological, physical, and spiritual wellness. We strive to establish recognition and growth of the field of expressive arts. We provide a global forum for professional dialogue and promote guiding principles for professional practice among expressive artists, educators, consultants and therapists.

## STAND OUT from the Crowd Get REGISTERED with IEATA

**Registered Expressive Arts Therapist (REAT):** The REAT track is designed for those who use the expressive arts in therapy. To become a REAT, an IEATA member must meet rigorous criteria including education, experience, demonstrated competencies, and letters of reference—and agree to abide by our REAT Code of Ethics. [Click Here to Learn More...](#)

**Registered Expressive Arts Consultant/Educator (REACE):** The REACE designation includes expressive arts consultants and educators who use the expressive arts in a broad range of approaches. The REACE candidate may have formation training or acquired experience through work situations. The applicant chooses one of two tracks that best fit his/her education and experience. [Click Here to Learn More...](#)

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