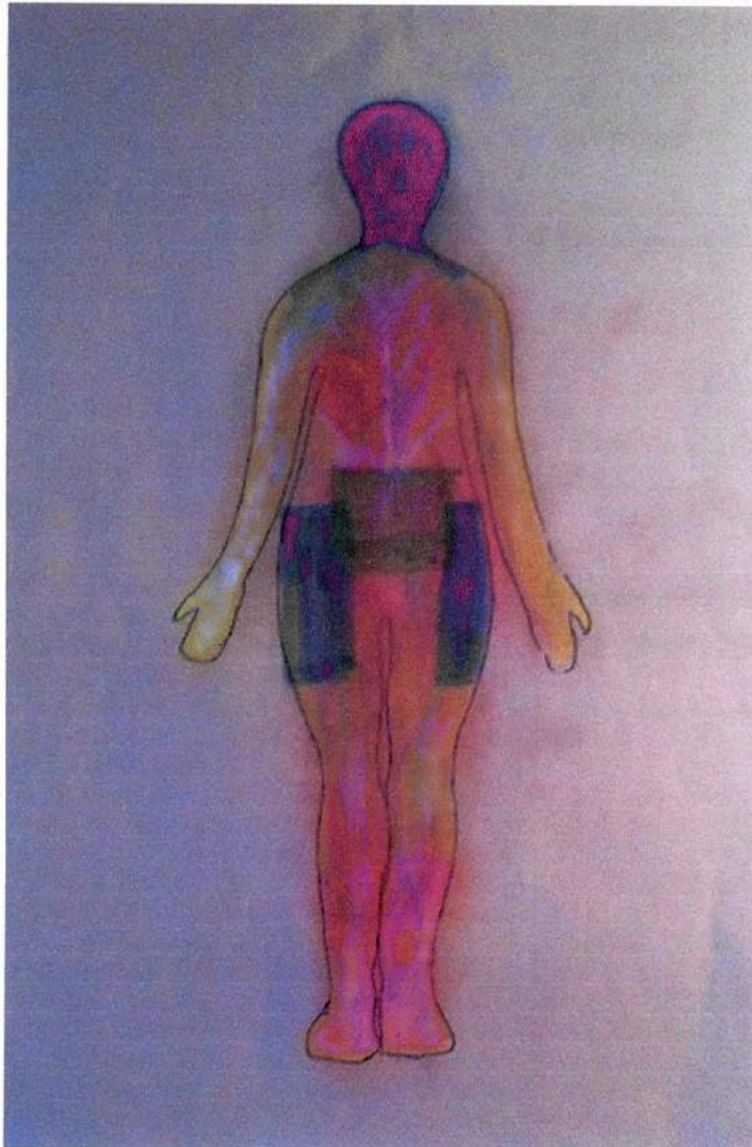


# 3

## **A Phenomenological Study of the Lived-Experiences of Art Therapists Integrating Self-Portraiture**

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This research sought to explore the process of therapists who created self-portraits and answered questions about whether this method could serve as a monitoring tool as well as a tangible link between the therapeutic process and monitoring for the therapist. Creation of the self-portraits were either quick and simple acts of the art therapists making images of themselves or complex tasks. The therapists could make an image of themselves by looking in the mirror or by imagining themselves and drawing images that come to mind. The researcher's assumption is that an art therapist draws upon her or his own artistic process within the art psychotherapy process as they work with their clients. As such, art therapists have a need to monitor their own therapeutic relationship with themselves.

This study contributed to the research on the experiences of art therapists using the self-portrait method as a weekly self-reflective process over the period of four weeks. The findings from these experiences provided a rich context to explore the balance between the external and internal situations of therapists.

Providing a framework to address client-identified problems as well as inner conflict can be a challenging balancing act that needs to take into consideration many factors: how knowledge of self-development can impact change in therapy (Erikson, 1963; Duncan et al., 2010); how using drawings in assessment can aid in monitoring change in therapy (Oster & Crone, 2004); how the theory of mirroring and self-psychology based on the work of Kohut (1977) can help explain the dynamics in use of self-portraiture, as described by Scheverien (1995); and finally, how the identification of constraints, as described by Breunlin (1999), can serve as an anchor for progress in therapy. This framework also applies to the therapist's sense of well-being in relation to their ability to monitor themselves. However, the researcher has found no literature linking self-portraiture to theories of mirroring and constraints, as well as the lived experience of creating self-portraits by art therapists themselves.

Others have written about self-portraiture in therapy (Alter-Muri, 2007); Backos, 1997; Cox & Lothstein, 1989; Glaister, 1996; Hanes, 2007; Kroll, Mikhailova and Serdiouk, 1995, Polley, 2003; Smith, 2008; and Weiser, 1999). This paper is a theoretical exploration of the effectiveness of self-portraiture in mirroring and understanding changes and lived



experiences of therapists within the theory of constraints. A range of research illuminates the need for art therapists to continue to use their own art and self-reflection processes. Brown (2008) outlined in her research findings that imperative that individual creative arts therapists keep the spark lit within themselves by continuing to embody the creative spark during professional practice. Brown (2008) discussed Aliaga's (2003) and Allen's (1992) concerns about burnout, stress, clinification and career drift, which they surmised would be potential consequences for art therapists who do not regularly make art. Brown quoted McNiff (1998) who asserted that there is pressure for therapists to develop clinical identity rather than artistic identity. Brown (2008) identified that there is a relationship between working as a creative arts therapist and art making outside of their work; these include; wholeness, completion, spiritual depth, balance and enrichment, transformation, finding tranquility in chaos, and containment, to name a few. Brown (2008) also found that art therapists who did not engage in their own art-making experienced depletion, leading to disconnection. Brown (2008) recommended that more research is needed about what happens when creative art therapists stop making art and how it could impact clients.

## **Method**

The participants for this research were drawn from an exclusive population of people; they were art therapists or art psychotherapists, either Registered or Professional in designation, with either the Canadian Art Therapy Association or the Ontario Art Therapy Association. The raw data for this study consists of four self-portraits created by 15 participants over a four week period and reflection journal entries written after each portrait was created by the participants. Either a phone call or a skype session was set up once the art works and journals were emailed to the researcher. A description of the participants' process of making self-portraits from in the participants' own words was then obtained in an hour long interview.

This phenomenological inquiry consisted of open-ended questions asked during interviews with the participating therapists and an analysis of what they related about their lived experiences in relation to producing the self-portraits. Analysis of the narratives included the following; artistic changes, changes in self-concept as well as in the artwork itself, and whether therapists became more comfortable with the work and process, more

detailed about how this process informed their work and whether it led them to integrate what they learned from this process into their work with their clients. Although the questions were scripted, conversations with participants were also flexible and adaptable.

The descriptive phenomenological method in psychology is based on four essential aspects of phenomenological philosophy (Giorgi, 1985 as discussed in Sprenkle and Piercy, 2010). Giorgi (1997) described the psychological attitude as being different from the everyday way of understanding the world. In the phenomenological attitude, the research brackets everyday knowledge to take a fresh look at the data. The researcher therefore, has to put aside their presuppositions, but assumes the phenomenological attitude to analyse the description with special sensitivity towards the researcher's discipline. The description provided by the participant was taken in the natural attitude in the way it was described as experienced in the mode of everyday living from the common-sense perspective. This was done with a critical reflection on the experience. The researcher remained in the phenomenological attitude in order to conduct a critical reflection about the participants' experience in order to describe how it was experienced (Giorgi, 1997).

## **The Study**

Each art therapist was engaged in creating their full bodied self-portrait and journaling at the end of their work week, over a four week period. The study was based on one overarching research question:

What is the therapist's lived experience of integrating self-portraiture?

The primary theme in this study revealed that through the weekly reflective practice over four weeks of the full-bodied self-portrait, participants were able to experience creative self-reflection which led to insight. Six additional themes surfaced. One was that participants expressed the enjoyment of the art and creative processing. Another was that the repeated process allowed for participants to identify constraints within their resulting artwork. Another was that participants expressed a revealing of change and the need for rebalancing that could then be identified within their life and work. Participants also reported that over the duration of the process they were able to experience an increase in self-understanding, and in growth and development within their art work and art



processes. The final theme was that an interaction does take place and participants expressed integration taking place on many levels. The lived experience of art therapists' in integrating the self-portrait exercise over a four week period encouraged "creative self-reflection while engaging in art and creative processing and by identifying constraints led to change and the need for rebalancing and self-understanding that enabled growth and development and integration". The essential themes individually offer a glimpse into the experience of art therapists and their use of the self-portrait. To comprehend the nuances of the lived experience the themes must be interpreted together as a whole.

One theory informed the analysis of the themes from the lived experiences of art therapists involved in creating their full body self-portrait over a four week period. The theory of constraints developed by Breunlin (1999) provided insight into how constraints and inner conflicts that subtly control obstacles standing in the way of problem solving directly affect the functioning of the whole person and is not only revealed within the artwork but, also responded to by the artist who experiences the need for change.

## **Discussion**

A review of the literature reveals evidence of a rise in art therapy research within the last few decades. While some research discussed a variety of strengths and stressors of art therapists, and revealed the usefulness of the self-portrait with client's experience of being able to connect past and present aspects of themselves, no research examined the experiences of art therapists involved in the weekly reflection practice of a full-bodied self-portrait art practice that used the lens of constraints theory (Breunlin, 1999). This study is unique in the fact that it is focused on art therapists experiencing life and work within the context of a weekly reflection practice over the duration of four weeks.

Phenomenological studies up to this date centre on the serial use of the self-portrait focused on a client's capabilities to work through abuse (Bacos, 1997; Glaister, 1996; Polley, 2003; Smith, 2008). While such research does not investigate the same population as the current study, useful structure to guide the implications for research was drawn from the former study.

Aspects of art as therapy emerged in all themes in the present study. In *Creative self-reflection* and *Art and Creative Processing*, the overwhelming expression was self-reflection. In *Constraints Identified* and *Change and Need for Rebalancing*, insight was gained through self-reflection. In *Self-understanding* and *Growth and Development*, the ability to self-reflect and gain insight allowed for alleviation of constraints and change to occur as did *Integration*. Intentional and comprehensive introspection leads from unconscious to conscious awareness and has implications in regards to personal wholeness and professional competency (Hocoy, 2007).

Gilroy (2004) described the concern that if an art therapist's identity is associated solely with their clinical setting, then their activities and their gaze may be limited, however if their identity is also associated with art, then art will expand their vision. Participants in the current study expressed their lack of self-care and self-reflection as having important implications and that the opportunity to participate in the self-reflection process "provided the opportunity to think about it, talk about it and dialogue with it" and "evokes emotion and evokes a feeling of compassion for myself" and a "feeling of looking into myself and taking care of myself". It was revealed throughout the course of each interview most did not allow or appreciate how essential time for self, art making and self-reflection was for their own health and well-being.

Research suggested (Duncan et al., 2010) that in order for change to occur the client needs to be open and willing to engage with an ongoing evaluation of progress and feedback. A participant stated in this study "It got me thinking, more aware of how I was being, in my work and mental state". As outlined in her study of the use of self-portrait as a tool for self-reflection, Glaister (1996) found that drawing serial self-portraits for resolving issues, restructuring sense of self, developing a sense of self and assessing self-concept, were important goals.

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