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Mental Health-Creating Program that Integrates Text in the Art Image

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Abstract

This study was undertaken in response to a need, identified during the COVID-19 pandemic, for the provision of life enriching visual arts experiences to facilitate member well-being in an Albury/Wodonga medical, mental healthcare setting. An art therapy group was subsequently formed to fill this need-gap, and as the group's art therapist I created a program that integrated cathartic text within the art image to improve well-being. To inform my program process I exercised critical post-structural insight into professional associations' research on the use of text and of art-making to enhance mental health. Using myself as the subject I initiated creative, practice-based research on 'text in image' art-making to deal with my negative affect caused by the pandemic. A subsequent memory mind-map drawing was undertaken to 'open up' a creative arts psychoeducational dialogue on the efficacy of the process. Two case studies further informed my evaluation, the first being a 'text in image' secondary document analysis of artist and trauma survivor Tracey Emin's 'lived experience' artwork. The second case study recorded the art-making response of a program participant experiencing pandemic stress (written consent was given). My study identified stages in the art-making process when 'text in image' was used to externalise an individual's issues of concern. I concluded that seven cathartic stages were explored in the creation of a safe art receptacle for such concerns. The resulting art psychoeducational program based on 'text in image' stages enable an individual to improve self-regulation and achieve positive mental health outcomes.

Introduction

Government response is important when addressing pandemic trauma and the acknowledgement of the value of opening up an arts pathway for a mental health creating society is pivotal. Griffin believes a systemic, trauma-informed response is needed for the population's exposure to the Covid-19 virus by the acknowledgement of the following three factors: the Covid-19 pandemic event, an individual's experience of it and their resulting affect (2020, p. 279). Art therapy has

the capacity to help open a communication 'dialogue' to relieve distress and reduce the negative effect an individual can experience (Avrahami, 2006, p. 36; Malchiodi, 2020, p. 14). In order to alleviate what Kalin (2021, p. 105) identified as increased levels of stress, anxiety, trauma and fear individuals experienced due to this unprecedented event I was commissioned to start an art therapy group. Barnett et al., advocate for the arts to be used as a healing modality in an arts and health care delivery model (2022.) This integration of arts with healthcare as a model for change can equally be applied to developing mental health and well-being arts education initiatives within our pandemic affected communities.

My 'text in image' psychoeducational program initiative is motivated by the need to improve our collective mental health. To this end I synthesise existing knowledge insights on trauma for a mixed modality program. I am informed by a post-structural epistemology which calls for transformative, creative and critical thought for change in our formal and informal institutions (Larsson, 2018, p. 329; William, 2014, p. 21). Hence, I deconstruct accepted knowledge constructs within psychiatry, psychology and psychotherapy associations' journals to develop an arts-based model as a composite way of knowing.

This evolving 'text in image' model informs my own creative practice-based art-making research. During the creation of my artwork, I explore the psychological impact the pandemic has on my mental health and evaluate how the 'text in image' process assists well-being. It is however, through my experiential art-making where, "the creative act is an experiment" (Skains, 2018, p. 86), that hidden meanings are revealed. A hand drawn mind-map was used as a method to view and communicate the relationships between thoughts and associated free-form creative visualisations (Davies, 2011, p. 281).

To gain an understanding of the personal impact trauma has had on an artist's artworks and 'lived experience' I research secondary documents to explore the art-making and life narrative of British artist Tracey Emin. Through this process I make a subjective, emotional and heuristic connection with this trauma story (Moustakas, 2001, p. 310). An analysis of this confessional writing combined with art-making enhanced my knowing of 'text in image' expression.

A case study participant shared the ways in which the 'text in image' psychoeducational program worked for them; they gave permission to have their answers and photograph of their artwork included in this study. Navigating unobtrusive research in the art therapy group session in an ethically safe and non-disruptive way was not possible in the healthcare group setting. Instead, I worked with a participant who was not from that setting. The case study participant attended an individual, person-centred inquiry session at my private practice.

While there was considerable research into visual arts therapy and into creative writing there was however, a gap in research into the effectiveness of combining text within the art image, and the potential this might bring to improving psychological well-being. Therefore, this study investigates how the psychological well-being and recovery, of individuals experiencing negative mental health impacts from the COVID-19 pandemic, can be improved through the integration of text in the art image in an art psychoeducational program.

Background

Literature Review

Importantly, for my trauma-informed approach to pandemic recovery, Kalin in *The American Journal of Psychiatry* states, "the COVID-19 pandemic represents the perfect storm of stressors and traumatic events" (2020, p. 103). Griffin in the *American Psychological Association Journal* calls for governments, through the public health system, to take a trauma informed approach to the pandemic and calls for behavioural health support care (2020, p. 280). The approach Griffin advocates has a recovery and resilience focus (life enriching arts support are not part of this resilience discourse). I turn to pre-existing research into the benefits of art therapy in trauma treatment in the *Journal of the American Art Therapy Association* (AATA), thus informing my art psychoeducational program process. When undertaking this review, I emotionally connect with the discourse by entering as a speaking, feeling subject (Moustakas, 2001). When experiencing trauma if I cannot find ways to externally symbolize it then I will suffer intense and overpowering anxiety. I will also encounter an intrusive re-experiencing of the traumatising event. Spring's 2004 (AATA) study identifies three critical factors necessary for processing this; emotional engagement with trauma memory, organization, and then correction of dysfunctional thinking following trauma (p. 200). By incorporating these principles with art psychoeducational tasks, I can access the images locked into my psychology. I use art expression to simultaneously reconstruct the trauma narrative and sooth anxiety. Art-making assists me to integrate these events through the bilateral stimulation of my brain hemispheres to synthesise the "visual and verbal narratives into a coherent autobiographical memory" (Spring, 2004, pp. 205-207).

The 'text in image' program is influenced by a 2004 study by Judith Pizarro who examined whether; art therapy was as effective as writing therapy in improving psychological presentation (p. 5). Pizarro, (AATA), uses the research methods of the randomized control trial empirical model (RCT) that compares the value of therapy writing about stress, and therapy drawing about stress. An objective, standardised and quantifiable analysis of instruments scores is used to tell us that participants (university students) in just the writing exhibited a decrease in social dysfunction, while participants in just the artwork report enjoyment and a wish to continue therapy. What fascinates me for my 'text in image' research is Pizarro's conclusion of "combining writing and art therapy" as a mixed modality to improve mental health outcomes (2004, p. 10). Both Spring and Pizarro present art-making practice as a way to move towards mental health. A need for further research into the benefits of combining the two modalities to form a mixed design approach in treating psychological distress was called for by Pizarro. Due to the fact that Pizarro's same study is cited by Chan and Hornneffer I look into their article in *The Arts in Psychotherapy* (2006). They, I find, do not explore the combined use of the two modalities but compare writing about trauma with drawing about trauma. Their findings conclude that the writing group shows a more marked decrease in psychological symptoms, than those in the drawing group or the control group. Chan and Hornneffer (p. 34) give less time to the tasks (than Pizzaro) and use one art-making tool, a pencil, for comparative purposes in journaling. Fortunately, they also conclude that participant comfort level in using a particular modality, stripping away the expressive value of art materials, and short engagement time may be important factors in determining art therapy's effectiveness in the future. An article by Khatib and Potash in *The Arts in Psychotherapy* also cites Pizarro's study and the authors present visual

journaling as a way to disclose refugees' written biographical trauma narrative in concert with image making (2021, p. 2). However, in their study art therapy 's role is cast as an augmenter to the written, rather than as text integrated into the artwork (reflecting their psychotherapy talk focus). I return to the final observation of Chan and Hornneffer, namely, drawing about trauma in a more narrative, sequential manner might give cognitive benefits for working through trauma with the advantage of using a more creative medium of expression. This has implications for the 'text in image' program.

Analysis

I have recognised the three critical stages necessary for a person to process trauma and mental health issues i.e., emotional memory engagement, organisation of events, and correction of dysfunctional thinking. These findings will be translated into program strategies to provide a visual language that accesses an individual's trauma images, feelings and concerns. Research has shown that art therapy is an enjoyable experience, that writing therapy improves social function, and that mental health outcomes could be improved by combining the two. An individual's comfort level in using a particular modality was also found to be important. The research concluded that manipulating art materials could be important for the healing value of art, while increased engagement time in art-making may also be an important factor in determining art therapy's effectiveness. Utilising directed narrative and sequential drawing as a creative medium of expression may also have cognitive benefits for working through trauma and mental health issues (Spring, 2004). Adapting this process to 'image and text' to deepen our meaning making by accessing our different right and left-brain intelligences can heighten the production of knowledge about ourselves, and can unload unconscious fears of loss, lack of control, threat, and anxiety when experiencing a pandemic.

Methods

Methods Overview

The focus was to acquire information on trauma treatment through mental health research into professional associations' publications to inform an art based 'text in image' program. This research follows a post-structural epistemology which questions the manner in which our social structure responds to creative and critical thought for change and so I take a perspective of "seeing against the grain of those usual ways" (Davies et al., 2006, p. 100). As the subject of my own creative, practice-based research I explored, through an art response, whether, art-making that integrated the tactile and emotional application of mediums, with the use of cathartic text and visual metaphor could enable one to, externalise feelings and work through concerns for healing expression in our COVID impacted environment. I deferred to the agency of this artwork (power of the image) to reveal hidden thought processes. These thoughts were recorded in a hand-drawn mind-map. This mind-map was a tactile 'hands on' vehicle that utilised collaged imagery with associated colours to facilitate thought recollection (Buzan & Buzan, 2006, p. 154). My mind-map was a visible thinking way of recognising, evaluating and communicating creative art-making pathways for a well-being program. Tracey Emin was selected as a case study method of inquiry to highlight the use of 'text in image' self-therapy art expression. I consulted academic publications, autobiographies and published diaries to gain knowledge insights into Tracey's work and life. The case study participant, who had exhibited heightened negative affect

because of the pandemic, consented to attend a private practice session and share their experience of the 'text in image' program design.

Myself as the subject in creative, practice-based research

The program stages to be considered were memorised beforehand thus enabling immersion in the creative 'flow.' Skains believes one should "maintain the in situ research log and observation notes throughout" (2018, p. 95). A mind map at the end of the session did record my observations of self. In my case it was necessary to experience the cathartic, uninterrupted creative process and hence notes in situ were not undertaken. The experiential, memorised process is outlined:

> I began by dribbling paint and glue onto a canvas to depict the flow of the Murray River along the NSW/Victorian border. Then I sponged water paint onto the canvas for tactile anxiety management. From that soothing point I focused on feelings and emotions around concerns such as anger and sadness for ongoing isolation from family due to the pandemic. Through gestural brushstrokes I actively painted dark colours onto this canvas to express these issues. The next stage of self-expression was to overlay text and visual metaphor to unburden these concerns. Words "To No Where" were added to illustrate the 'stay at home' orders. Identified barriers to well-being were the COVID virus and the resulting enforced travel restrictions. Unconscious barrier metaphors emerged in the work via 'the beast' and fence line markings. Text was added to identify personal strengths as a positive affirmation of self through the word "here" which was a mindful acceptance of my situation; I added brighter colours (Callaghan, 2021).

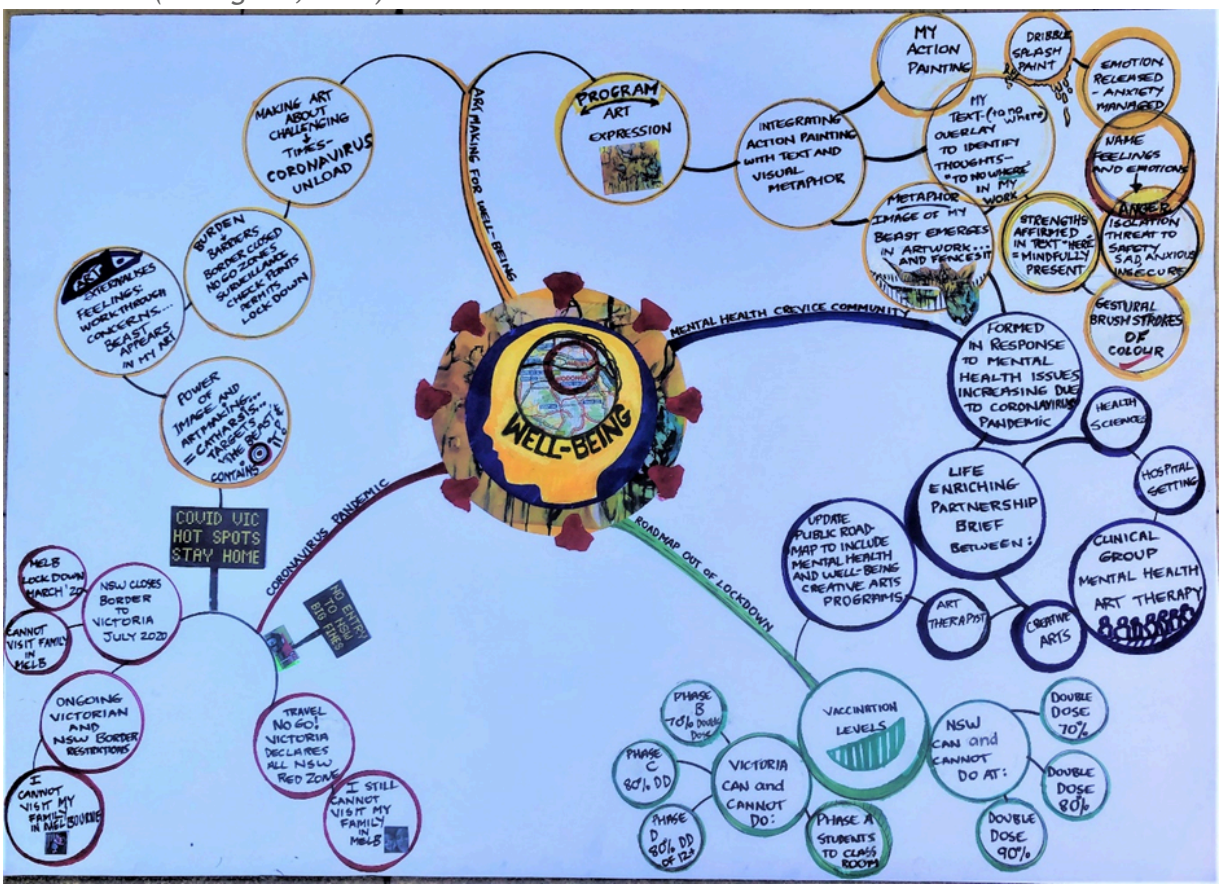
Figure 1. Lynette Callaghan: Well-being, 2021, mixed media on canvas, H81xW102cm (Callaghan, 2021).

See Figure 1. An unexpected visual metaphor solution appeared in my work taking the symbolic form of a fence which contained 'the beast.' Spiegel et al., see the controllable container (artwork) as a safe place to hold difficult emotions (2006, p. 160).

Memory mind-map

I documented my cognitive, active making process through a memory mind-map drawing immediately after completing the artwork. This mapping opened up a dialogue about the efficacy of the process. To visually engage my thoughts an aesthetically appealing collaged central image was depicted on a large sheet of cardboard. Onto this cardboard I then scribed radiating flow lines laden with exploratory ideas, colours and pictures. The incubation and reconstruction of my art-making processes via this mind-map led to an integration of insights and solutions for my program (Buzan & Buzan, 2006, p. 160). See Figure 2.

Figure 2. Lynette Callaghan: Well-being Hand Drawn Mind-Map, 2021, on cardboard, H60xW87cm (Callaghan, 2021)



Analysis of results

Process steps and thoughts were revealed through experiential stages of knowing when 'text in image' would be most beneficial for anxiety relief during art-making. Time spent resolving the artwork had extended beyond expectation and perhaps this demonstrated the depth of pandemic frustrations. A personally expressive artwork was created for my COVID-19 narrative (documented via a memory mind-map). This mind-map articulated the notion of a redirected public roadmap out of lockdown and communicated the need for a mental health-creating society with the addition of life enriching creative arts community programs.

Tracey Emin Case study

In an engagement with the artworks and life story of Tracey Emin I see the use of 'text in image' to work through trauma. Tracey seems to use art to understand the many manifestations of self, with the works a hyper charged fusion of image and text "Keeping secrets is one of the most dangerous things you can do" says Tracey (Emin et al., 1998, p. 34). Smith writes that Tracey's art is a means of exorcising life events, is confessional and autobiographical storytelling which is evidenced in emotive titles such as *Exploration of the Soul*, 2003, a published text of prose (2017, p. 297). Tracey's confused sense of self is demonstrated in a figurative monoprint line drawing questioning self-identity called *Untitled*, which contains the text "ME REALLY ME"

(Emin, 2002, p. 17). Writing lies at the heart of Tracey's monoprint works which are like a stream of consciousness (Elliot, 2008, p. 27). Each visual diary artwork with narrative entries are revelations achieved through self-therapy to free blocked, painful recollections. Tracey uses an abundance of swear words, explicit descriptions of bodily functions, sex act references and words that are symptomatic of body abuse in these drawings. Equally charged images are fused with these words in a powerful concoction rendered more so by the childlike script and frail nervous nature of the sketches (Emin et al., 1998). Simultaneous 'text in image' art-making emotionally express and cognitively explore issues of concern, "I'm left with a lot more freedom afterwards" reports Tracey (Emin et al., 1998, p. 34).

Analysis of results

Self-therapy art-making emotionally engages trauma memory and is worked through to declare an emancipating private and public narration. Drawings are created with text integrated into the works to reinforce cathartic messages and self. Tracey Emin's commitment to art-making combined with meaning making text 'opens up' the empowering potential for an art psychoeducational 'text in image' program. Self-therapy is made possible if individuals have personal agency and are comfortable using these two arts modalities.

Participant Case Study

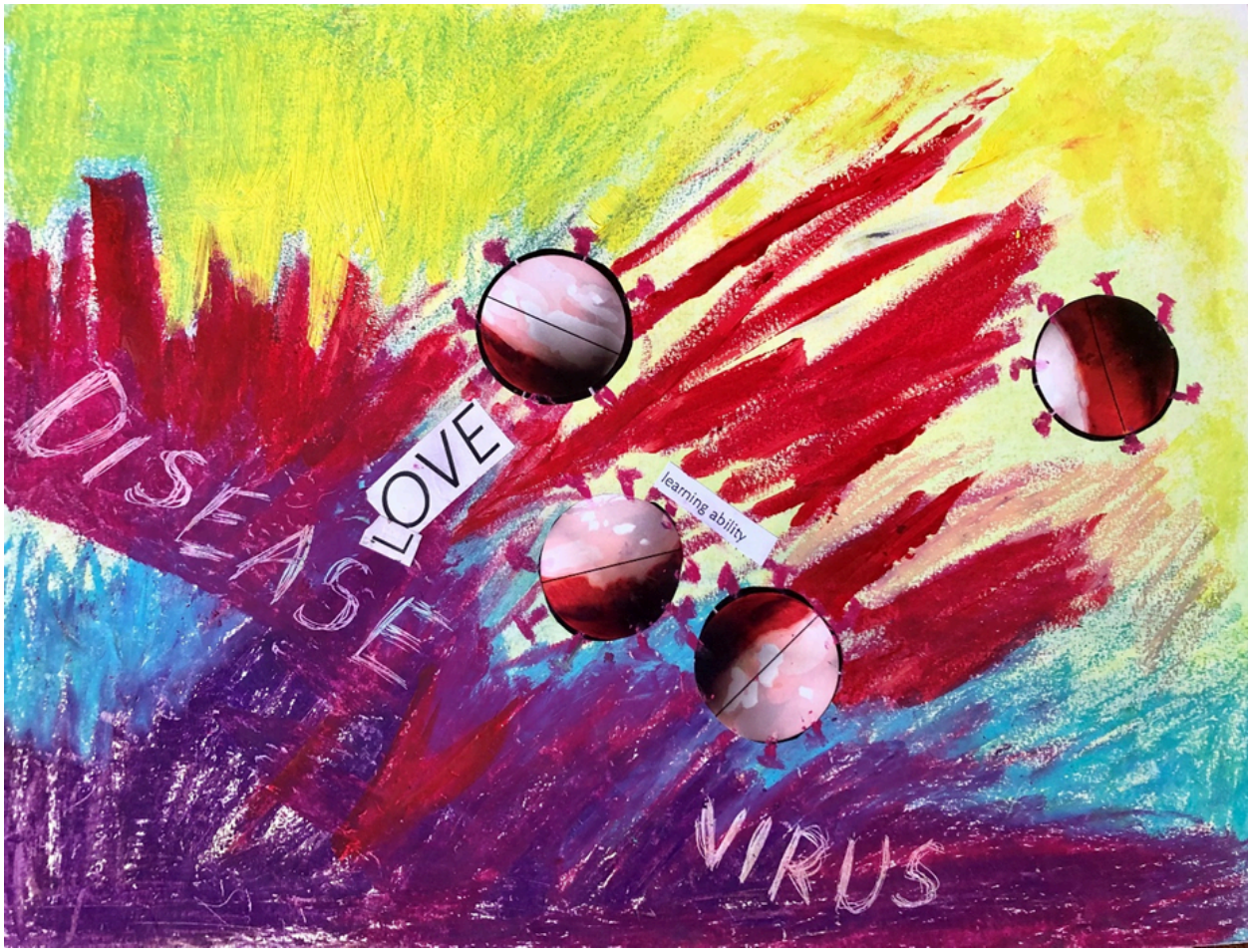
A case study participant attended my private practice for a 90-minute individual art psychoeducational program session, The participant had experience of heightened negative affect because of the pandemic (written consent was given to include a photograph of their artwork and their answers to well-being questions). A Practice Based Person-Centred Model of process collaboration was undertaken with the participant (Gilroy, 2009; Miller, 2018, pp. 73-74).

Procedure

I enter into an empathic and heartfelt connection with the participant and their story. Their general demeanour at this time was anxious and uncertain. Support questions that measure the degree of distress a person is feeling on a scale of nought (being not at all) to five (being very severe) were asked to track their progress. The question asked pre-session was to gauge their level of distress over the past week. I then guided them through the art-making program stages only when they indicated their readiness to progress to the next stage. An array of materials was made available for the activity e.g., acrylic paint, watercolour paint, water colour paper, oil crayons, coloured pencils, magazines, word stencils, strengths word list, etching tool, scissors, ruler, eraser, brushes and sponges.

See Figure 3 photograph of participant's completed artwork.

Figure 3. Anonymous: Untitled, 2022, mixed media on paper, H30xW40cm.



Two post session progress questions using a scale of nought to five were then asked. The participant was also invited to articulate any feeling responses about the activity.

Analysis of results

Pre-art-making:

Question one: How much has the identified problem of stress and anxiety affected you over the last week? The answer they gave was four out of five which registered as severe.

A guided stages artwork was created by the participant for an hour.

Memorised observations of the participant's art-making hour of engagement

They sponged light yellow paint diluted with water onto watercolour paper, then focused on expressing their pandemic feelings through gestural brush strokes of paint and heavy application of oil pastels. Next, they scratched into the pastels with their words, disease and virus. Physically active, automatic mark making was added with the chosen colour red to help identify well-being barriers which were turned into images of flames; then they added cut-outs of planets. Collaged

text was selected from a provided strengths list; love and learning ability were chosen to affirm the positive self. Extra time was taken to resolve their artwork in order to come to terms with pandemic feeling of anger. Resolution was achieved by adding spikes to the planets that transformed them into the COVID-19 virus. "This ability to change the symbol leads to a greater sense of control over the traumatic experience itself" (Avrahami, 2006 p. 10). The virus images appeared to be chased by the red flame marks.

The following post session questions using the same scale of nought to five were asked:

Question two: How much has the problem of stress and anxiety affected you after our art-making session? Their answer was two which demonstrated a substantially reduced level of distress from the start of the session where four, equalling severe was registered.

Question three: Was the activity you participated in worthwhile? Their answer on a scale of nought to five where nought was not worthwhile and five very worthwhile was four and a half. This revealed they found the art-making to be worthwhile to very worthwhile.

The participant was asked to articulate how they found the session. They answered that it was relaxing, creative and satisfying.

Progress in their affect was identified after the 'text in image' program by their acknowledgement of feeling more relaxed.

Results

Program stages in art making when 'text in image' can be implemented to externalise an individual's issues of concern were identified. An adjustment made to stage seven was the addition of more time for resolution. Changes needed to be made to the symbolic forms in the artwork during this stage in order to gain a sense of control over the images/issues.

These Art Psychoeducational Program Stages are:

1. tactile anxiety management through soothing sponging and dribbling of mediums onto surface. Calming the way for the unconscious memory phase.
2. focus on feelings and emotions around concerns e.g., loneliness and anger expressed through active painting or gestural strokes. The emotional feeling stage of construction.
3. overlay and etch text into work to unburden concerns e.g., TO NO WHERE; VIRUS, DISEASE. Breaking down the hold issues have on the person by writing emotive text. Left brain hemisphere cognition through language and right brain visualisation/active imagination. The conversion stages when language and understanding combine continue throughout all the following art-making stages.
4. experiment with automatic/active mark making to identify barriers to well-being e.g., COVID-19 virus/sickness and travel restrictions. Knowledge about ourselves is heightened as we unload and externalise unconscious fears.
5. discover and complete projective, imagined images from these ambiguous marks e.g., appearance of 'the beast', visual metaphor fence barriers; magazine images of planets and painted flames.

6. add text to identify personal strengths as a positive affirmation of self-e.g., text was added to identify strengths as a renewal of the positive self (collaged text-love; text-here; demonstration of psychological acceptance and mindfulness).
7. resolution of the process for healing e.g., metaphor of the beast is contained by the fence. Feelings and understanding merge with extra time taken to assist making changes to symbols leading to reduced anxiety and an improvement in self-regulation e.g., planets were turned into COVID-19 virus engulfed by flames. The rate of completion time for an individual at this stage cannot be dictated by time formulas.

Discussion and Implications

A parallel process that emerges from analysis of the critical features of trauma and distress is a person's relationship to it. How to free oneself from its grip is the difficulty and stages of release can be implemented through strategies to loosen its hold. These strategies can contribute to helping individuals gain control of the 'beast' and in so doing find some peace of mind. It is with integrity of purpose that I have extrapolated and applied insights from research findings for my program process. 'Text in image' is a step to help support the removal of trauma's hold by encouraging the individual to write words in art images in a conscious thought process to break down the distress. Spiegel et al. see the value of scripting affirmative, empowering and emotive words in an image to express feelings and thoughts as a way to reactivate positive emotions, self-esteem and healing (2006, p. 161). Integrated 'text in image' art-making allow feelings and understandings to merge thus assisting resolution, reducing stress and helping the individual to form a coherent COVID-19 pandemic narrative in a safe container (artwork).

From this analysis I did find out that 'text in image' art-making in my own art practice enabled an externalisation of pandemic issues of concern. Tracey Emin revealed the use of art-making with text when trauma, anger and despair were triggered. An acceptance of self was made possible by implementing this strengths-based approach. Program stages for an assertive release of pandemic feelings were used to defuse a case study participant's pandemic anger. Through their engagement in the art psychoeducational program, they were able to acknowledge, name and express feelings in the safety of their artwork.

This mental health targeted 'text in image' program can assist recovery outcomes and promote resilience for adults experiencing pandemic distress or trauma. "In recent times, the arts have had greater impact and engagement within healthcare, notably through some art councils having programs devoted to arts and health with accompanying policy documents." (Edwards, 2019, p. 1136). I did use my research tested art psychoeducational program to fill the healthcare facility's need for life enriching visual arts experiences however, the space allocated to our eight-member group was small and physically restricting for the program's needed experimentation with experientially enriching art materials.

Conclusion

One pathway advocated for population pandemic recovery is to incorporate trauma-informed principles in an art psychoeducational program that can be implemented in healthcare, education and community settings. I have integrated mixed modality stages in a program design to improve well-being. Initially I used myself as the subject to test out the efficacy of this program by

conducting creative, practice-based research on my own 'text in image' art-making. The process was supported by an analysis of publications on trauma treatments. This program design gives 'voice' to pandemic experiences and assists in emotional expression and cognitive processing of that experience. As an artist I expressed anguish through 'text in image' art-making and compared this process to the 'text in image' art-making of artist Tracey Emin. The information I was after in relation to the validity of the program was 'tested' in concert with a volunteer participant who created an art receptacle for their COVID narrative. They self-reported a marked improvement in well-being after this experience. This program can also be implemented in self-therapy for those with personal agency. I acknowledge the worth of Brown's 2004 study that stresses responsiveness to the human need to help empower the individual, who in this case was the program participant (p. 469). A question to consider is whether it is just my program that specifically helps in healing when variables come into play such as, the psychoeducational relationship, and the person themselves being the empowering element through doing something about their recovery. Our relational connection with, and support from, community can impact our well-being. Such a program within a clinical or educational setting should be relationally supported and would have a positive effect on a person's struggle, which in turn could create change in the broader social mental health context. While governments can be powerful agents in institutional change "transformation of informal institutions requires gradual change that includes transforming the ways in which most people think and act" (Larsson, 2018. p. 333). Opening up 'space' for creative change in our educational and healthcare communities through the facilitation of arts practice is the expectation for our communities' pandemic recovery and ongoing resilience.

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