



**American Art Therapy Association
Research Committee
Art Therapy Outcome Bibliography**

Revised and Updated – May 30, 2014

Contributors:

Amy Backos, PhD, ATR-BC, Donna Betts, PhD, ATR-BC, Diana Bermudez-Rodriguez, PhD, ATR-BC, Kate Collie, PhD, ATR-BC, Sarah Deaver, PhD, ATR-BC, Nancy Gerber, PhD, ATR-BC, Donna Kaiser, PhD, ATR-BC, Penelope Orr, PhD, ATR-BC, Megan Robb, MA, ATR-BC, Patricia St. John, EdD, ATR-BC, and Renee van der Venet, PhD, ATR-BC

Note

We hope you will find this listing of art therapy outcome and single subject studies useful for purposes of research, grant writing, demonstrating support for your art therapy program, and as evidence of the effects of art therapy with various client populations. Listings are grouped primarily by client populations. Abstracts are provided for the two journals that gave copyright permissions without a fee: *Art Therapy: Journal of the American Art Therapy Association* and *American Journal of Art Therapy*. Abstracts written or modified by Research Committee members appear for some listings.

Links to the abstracts or articles are provided for some articles. The AATA Research Committee plans to update this listing annually. When time permits we hope to also write abstracts to provide the best assessment of the contents, strengths, and weaknesses of each study. We welcome input from art therapists who become aware of studies that we may have missed. Please direct any corrections or additions to: rvander3@naz.edu.

TABLE OF CONTENTS

1.	ATTENTION DEFICIT DISORDER (ADD) AND ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)	3
2.	AGING, ELDERLY, GERIATRIC.....	3
3.	AUTISM SPECTRUM DISORDER / ASPERGER'S	6
4.	CHEMICAL DEPENDENCY / SUBSTANCE ABUSE	6
5.	FORENSIC	7
6.	GRADUATE EDUCATION.....	9
7.	GRIEF / BEREAVEMENT	10
8.	INTELLECTUALLY DISABLED	11
9.	MEDICAL.....	13
10.	NORMAL AND OUTPATIENT	19
11.	POSTTRAUMATIC STRESS DISORDER AND TRAUMA	27
12.	PSYCHIATRIC AND INPATIENT RESIDENTIAL TREATMENT	30
13.	SCHOOL / ACADEMIC.....	33
14.	SEXUAL ABUSE / ABUSE	36
15.	TRAUMATIC BRAIN INJURY (TBI).....	39
16.	QUANTITATIVE STUDIES (BEGINNING 2004)	39
17.	QUALITATIVE STUDIES	43
18.	COMBINED RESEARCH METHODOLOGIES: QUANTITATIVE & QUALITATIVE	48
19.	COMBINED CREATIVE OR EXPRESSIVE ARTS THERAPIES (BEGINNING 2006)	49
20.	META-ANALYSES OF INTEREST (BEGINNING 2007)	50
21.	RELATED RESEARCH ARTICLES	51

1. Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD)

Smitheman-Brown, V., & Church, R. P. (1996). Mandala drawing: Facilitating creative growth in children with ADD or ADHD. *Art Therapy: Journal of the American Art Therapy Association, 13*(4), 252-262.

Aim & Method: Using a single-subject, multiple-baseline research design, this study investigates the creative growth and behavioral changes precipitated by the work done in art therapy through employment of the mandala as an active centering device with children (N = 8: 4 experimental and 4 control, ages 10-13) who have been diagnosed with Attention-Deficit Disorder (ADD) or Attention-Deficit Hyperactivity Disorder (ADHD), accompanied by a history of impulsivity. During specified intervals of treatment, a drawing was requested. "Draw a person picking an apple from a tree" was rated according to the guidelines of the *Formal Elements Art Therapy Scales (FEATS)* (Gantt & Tabone, 1998). Four scales were used: #5 Integration, #8 Problem Solving, #9 Developmental, and #10 Details of Objects & Environment. "Baseline data were gathered from historical and observable patterns of behavior, use of the Child Behavioral Checklist (Attenbach, 1979), general artwork produced before the intervention, and the repeated drawing task...produced prior to the introduction of the intervention" (p. 253). "Ongoing behavioral data were charted through direct observation. The [5-minute-minimum, mandala-drawing] intervention was considered to begin during the art therapy sessions in which the mandala drawing was first introduced" (p. 253).

Results: Through examination of the drawings by three independent trained raters, and objective findings of this scale, it appears that a visual measurement of creative growth was achieved. Preliminary findings indicate that the mandala exercise has the effect of increasing attentional abilities and decreasing impulsive behaviors over time, allowing for better decision making, completion of task, general growth in developmental level, and an interest in personal aesthetics. (Smitheman-Brown & Church, 1996, p. 252; P. St. John, 8/14/05)

2. Aging, Elderly, Geriatric

Alders, A., & Levine-Madori, L. (2010). The effect of art therapy on cognitive performance of Hispanic/Latino older adults. *Art Therapy: Journal of the American Art Therapy Association, 27*(3), 127-135.

This article presents the results of a pilot study investigating the efficacy of art therapy to enhance cognitive performance in a sample of 24 elderly Hispanic/Latina members of a community center who participated in a weekly structured thematic therapeutic arts program. A 12-week, quasi-experimental, pretest/posttest, nonrandomized, controlled design evaluated outcomes using the Clock Drawing Test (CDT) and the Cognitive Failures Questionnaire (CFQ). Participants who attended the art therapy sessions outperformed those who did not on both cognitive evaluation tests. "The findings suggest that the combination of self-initiated art making with art therapy session attendance may be most beneficial for enhancing a person's perception of cognitive ability, which in turn positively affect overall cognition performance." The Therapeutic Thematic Arts Programming (TTAP Method), a 9-Step multimodal approach was used. (P. St John; R. van der Venet)

Beard, R. (2012). Art therapies and dementia care: A systematic review. *Dementia, 11*(5), 633-656. (SD)

Bergland, C. (1982). The life review process in geriatric art therapy: A pilot study. *The Arts in Psychotherapy, 9*(2), 121-130.

Beuchet, O., Remondiere, S., Mahe, M., & Repussard, F. (2012). Geriatric inclusive art and length of stay in acute care unit: A case-control pilot study. *Journal of the American Geriatrics Society*, 60(8), 1585-1587. (SD)

Doric-Henry, L. (1997). Pottery as art therapy with elderly nursing home residents. *Art Therapy: Journal of the American Art Therapy Association*, 14(3), 163-171.

Aim & Method: An art therapy intervention using an eight-session pottery class based on Eastern Method throwing technique was implemented with 20 elderly nursing home residents, with the aim of improving their psychological well-being. Quantitative evaluation was based on Hebl & Enright (1993) and employed a quasi-experimental design measuring the participants' self-esteem (Coopersmith, 1981), depression (Beck Depression Inventory, Beck et al., 1961), and anxiety (State-Trait Anxiety Inventory, Spielberger et al., 1983) compared with 20 nonparticipating elderly residents of the nursing home. Qualitative evaluation included client self-evaluations (a subjective measure, designed for this study), case progress notes, journal notes, and photographs.

Results: Following the intervention, the participating group showed significantly improved measures of self-esteem, and reduced depression and anxiety at posttest ($p < .05$) relative to the comparison group. However, it should be noted that those with high self-esteem and low anxiety at the beginning of the study did not make significant gains; conversely, those with low self-esteem and high anxiety, pre-intervention, benefited the most. Implications for art therapy intervention with institutionalized elderly and further research are discussed. (Doric-Henry, 1997, p. 163; P. St. John, 8/14/05)

Elkis-Abuhoff, D. L., Goldblatt, R. B., Gaydos, M., & Corrato, S. (2008). Effects of clay manipulation on somatic dysfunction and emotional distress in patients with Parkinson's disease. [*Art Therapy: Journal of the American Art Therapy Association*, 25\(3\), 122-128.](#) (Aging, Elderly, Geriatric/Quantitative) (PSJ)

The focus of this outcome study was on art therapy as a support for medical treatment and palliative care. A total of 41 patients were placed in 2 matched groups: 22 patients with Parkinson's disease and 19 patients without Parkinson's disease. Each participant completed the Brief Symptom Inventory (BSI) (Derogatis, 1993) pre- and post-test session, and was asked to manipulate a ball of clay and to respond to follow-up questions on the experience. Quantitative and qualitative results showed a positive outcome with significant decrease in somatic and emotional symptoms in both groups. This research supports the value of an art therapeutic clay program for patients diagnosed with Parkinson's disease and recommends future studies addressing art therapy with caregivers. (p. 122)

Hannemann, B.T., (2006). Creativity with dementia patients. Can creativity and art stimulate dementia patients positively? *Gerontology*, 52(1), 59-65. (DK)

Hattori, H., Hattori, C., Hokao, C., Mizushima, K., & Mase, T. (2011). Controlled study on the cognitive and psychological effect of coloring and drawing in mild Alzheimer's disease patients. *Geriatrics Gerontology International*, 11, 431-437. (SD, RV)

This quasi experimental study randomly assigned 39 patients with Alzheimer's disease between an art therapy group and a control group. The art therapy involved several techniques with the primary task to color abstract patterns with crayons or water based paint (N = 20). The control group involved using simple mathematical calculations (N = 19). Groups were conducted for twelve weeks. Group sizes were a maximum of 5 people. Family members and Caretakers accompanied the participants. The cognitive function and memory was evaluated using MMSE and logical memory subscale of the Wechsler Memory Scale. Mood and vitality were evaluated using the Geriatric Depression scale (GDS) and Apathy Scale (Japanese version). The quality of life (QOL) was evaluated using the short form (SF-

8) that included physical and mental viewpoints. Behavior abnormalities were evaluated using the Dementia Behavior Disturbance Scale (DBD). Caregiver burden was addressed.

The results supported significant improvement in the Apathy scale for the art therapy group in comparison to the control group ($p = 0.014$) and in the minimal state examination score ($p = 0.015$). There were no significant differences between the groups in the other items. Patients in all groups showing a 10% improvement were then compared between the two groups and significant improvement in quality of life (QOL) was observed in the art therapy group over the control group ($p = 0.038$, odd ratio, 5.54). An ANOVA compared each method showed no significant difference in any item. The results support that these art therapy interventions improve vitality and QOL for patients with mild Alzheimer's disease versus mathematical calculation interventions. (RV)

Kim, S. K. (2013). A randomized, controlled study of the effects of art therapy on older Korean-Americans' healthy aging. *The Arts in Psychotherapy, 40*(1), 158-164. (RV).

McElroy, S., Warren, A., & Jones, F. (2006). Home-based art therapy for older adults with mental health needs: Views of clients and caregivers. *Art Therapy: Journal of the American Art Therapy Association, 23*(2), 52-58. (Aging, Elderly, Geriatric/Qualitative) (PSJ)

The value of art therapy for older people with mental health problems is well documented although there is a paucity of research for people who are home bound. This study, based in England, involved five clients all older people with mental health problems, receiving art therapy sessions at home. The clients and caregivers were then interviewed to ascertain their views. This study indicated that clients and caregivers do feel that art therapy can be of benefit in the home environment. These benefits include an increase in confidence and motivation, with emotional support also being valued. The study concludes that an art therapist can work in the home environment as long as he/she is flexible, organized and assertive. (p. 52)

Noice, H., Noice, T., & Staines, G. (2004). A short-term intervention to enhance cognitive and affective functioning in older adults. *Journal of Aging and Health, 16*(4), 562-585.

Rusted, J., Sheppard, L., & Waller, D. (2006). A multi-centre randomized control group trial on the use of art therapy for older people with dementia. *Group Analysis, 39*(4), 517-536. (SD)

Stallings, J. W. (2010). Collage as a therapeutic modality for reminiscence in patients with dementia. *Art Therapy: Journal of the American Art Therapy Association, 27*(3), 136-140.

Traditional therapy, with its emphasis on verbal communication between therapist and client, may not be appropriate for patients with dementia due to impaired cognitive and verbal abilities. This brief report presents a qualitative study on the use of collage in art therapy to aid in the process of reminiscence in individuals with dementia. Data were collected and analyzed using a modified Magazine Photo Collage assessment (Landgarten, 1993) with three participants. Findings support the hypothesis that collage allows older adults with dementia an opportunity to convey information that they might not be fully capable of verbalizing. Participants' interactions with collage as a therapeutic modality also were examined, as well as their interactions with the art therapist researcher. (P. St John)

Wilkstrom, B. M., Theorell, T., & Sandstrom, S. (1993). Medical health and emotional effects of art stimulation in old age: A controlled intervention study concerning the effects of visual stimulation provided in the form of pictures. *Psychother. Psychosom, 60*, 195-206.

Wilkstrom, B. M. (2000). Visual art dialogues with elderly persons: Effects on perceived life situation. *Journal of Nursing Management*, 8, 31-37.

3. Autism Spectrum Disorder / Asperger's

Epp, K. (2008). Outcome-based evaluation of a social skills program using art therapy and group therapy for children on the autism spectrum. *Children & Schools*, 30(1), 27-36. (Autism/Quantitative) (SD)

Kearns, D. (2004). Art therapy with a child experiencing sensory integration difficulty. *Art Therapy: Journal of the American Art Therapy Association*, 21(2), 95-101.

Aim & Method: An increasing number of students diagnosed with difficulties such as attention deficit hyperactivity disorder and Asperger's syndrome are being seen in schools. Sensory integration difficulties may be part of the symptomatology of these disorders. These difficulties may result in difficulties with both classroom behaviors and academic performance. This single-case study investigated the effectiveness of art therapy with a 5-year old white male with sensory integration difficulties. Art therapy focused on preart activities using three media. The pre/post test measurement tool was the *Formal Elements Art Therapy Scales (FEATS)* (Gantt & Tabone, 1998) to assess a "person picking an apple from a tree". Scales were rated for "changes in various qualities over the course of the research period": Prominence of Color, Color Fit, Implied Energy, Use of Space, Integration, Realism, Details of Objects & Environment, and Developmental Level. Teacher ratings, based on observation, assessed classroom behavior for improvement. A recording form "had a series of boxes, one for each 30-minute segment of Michael's school day" (p. 97). Ratings were "positive" or "negative." Each of the varied media sessions was compared to control sessions where a nonart experience was offered.

Results: Results indicated an increase in positive behaviors after art sessions as well as postponement of the first incidence of negative behaviors. Art therapy was found to be a useful intervention. (Kearns, 2004, p. 95; P. St. John, 8/14/05)

4. Chemical Dependency / Substance Abuse

Julliard, K. (1995). Increasing chemically dependent patients' belief in Step One through expressive therapy. *American Journal of Art Therapy*, 33(4), 110-119.

Aim: Step One of a Twelve Step Program (the addict admits powerlessness over the addiction) is considered fundamental to chemical dependency treatment in that belief in this step supports sobriety after treatment. This study was based on the premise that art therapy and role-play intervention will increase belief in Step One among individuals who are chemically dependent.

Method: Six outpatient adult clients participated in the art therapy intervention, each of whom made a collage expressive of addiction and recovery. An AB design was used. Gilbert's (1991) *Steps Questionnaire* measured belief in the steps. It was "administered just before group members started the collages and again 9 days later after the collages had been discussed" (p. 113). A factor analytic method was used for scoring along with a Rasch. A "direct measure, the Daily Check-In" was "administered at 5 pm to assess the previous 24 hours" (p. 112). "Patients estimated the percentage of time they spent thinking about using their drug or about their addictive behavior and indicated whether drugs seemed intensely or mildly appealing, neutral, or intensely or mildly unappealing" (p. 112). (The instrument is provided in the article). Patients began using the Daily Check-In "one week before the collage activity and...[was] continued for at least a week. The Steps Questionnaire was...administered once immediately before the collage activity and again after group

processing” (p. 113). The Post-Treatment Interview, a Likert-type scale, consisted of “a questionnaire exploring denial and the importance of various Step One experiences” (p. 113).

Results: Their belief in the first three of the Twelve Steps increased as measured by the Steps Questionnaire (Gilbert, 1991), but only the increase in belief in Step Two (a higher power can restore the addict to sanity) was statistically significant ($p = .03$, $t = -2.3$; $p = .04$, $t = 2.2$; one-tailed). Higher power factor scores (pre/post test) showed increases for five of the six individuals (data analysis was not done). In post-study interviews, the clients perceived that they had experienced a significant decrease in denial of their addiction during treatment ($p = .01$, $F = 6.4$, ANOVA) and rated both collage making and role plays as important to their First Step work. (Julliard, 1995, p. 110; P. St. John, 8/14/05)

Springer, J. F., Phillips, J. L., Phillips, L., Cannady, L. P., & Kerst-Harris, E. (1992). CODA: A creative therapy program for children in families affected by abuse of alcohol or other drugs. *Journal of Community Psychology*, 55-74.

5. Forensic

Ackerman, J. (1992). Art therapy intervention designed to increase self-esteem in an incarcerated pedophile. *American Journal of Art Therapy*, 30(4), 143- 149.

Aim: Art therapy was introduced into the treatment program of an incarcerated sex offender.

Hypothesis: The hypothesis of this A-B-A single case study design states that art therapy would (a) increase the subject’s self-image and body image, and (b) decrease somatic complaints.

Method: “During the first observation (A1) period, pretest measures were administered. The treatment phase (B) consisted of 10 intervention sessions with self-monitoring assessments. Post-test assessments were completed during the second observation period (A2)” (p. 145). Four measures were used: “Two of these measures [were] the *Tennessee Self –Concept Scale* and *Human Figure Drawings (HFD)*[for both genders]” and “evaluated by Ogdon’s (1977) analysis” (p. 146). The other two measures: “Daily Log Sheet” and “Self-Monitoring of Somatic Complaints” were designed for this study. The art therapy sessions focused on improving the subject’s view of self and strengthening self-identify (Nucho, 1982).

Results: Visual analysis of graphed results showed a decrease in physical complaints from Sessions 1 – 4 with maintenance of “1” through Session 7, decrease to “0” in Session 8, increase to “4” in Session 9, and return to “1” in the last session. Ratings of pre-post test HFDs showed “an increase in figure integration on both male and female figures. Much more attention to detail was evident in the post-treatment drawings” (p. 147). No quantitative results were provided. The Daily Log “contained an increase in positive feeling statements about self and body....improved personal hygiene....and making it to pill call time....failures included being tardy for work and smoking too much” (p. 147). No quantitative results were provided for these findings. Results indicated improvement in self-concept, self-efficacy, and body image, with a decrease in somatic complaints. (Ackerman, 1992, p. 143; Abstract modified by St. John, 8/14/05)

Ferszt, G. G., Hayes, P. M., DeFede, S., & Horn, L. (2004). Art therapy with incarcerated women who have experienced the death of a loved one. *Art Therapy: Journal of the American Art Therapy Association*, 21(4), 191-199.

Aim: Although the number of women entering prison has continued to soar over the past two decades, little attention as been paid to them in health care research. Research with incarcerated women who are grieving has received even less attention. This pilot study was

based on the results of previous studies as well as the authors' combined clinical experience in the prison setting and with art therapy.

Method: Individual 1-hour art therapy sessions were offered to eight incarcerated bereaved women for a period of eight weeks. A variety of materials were used with a specific purpose. The women were interviewed before and after the art therapy was implemented. Prior to treatment, each woman participated in a 1 ½ to 2-hour semi-structured interview that was audiotaped. "The women were encouraged to tell about their experiences in their own voices and to take an active role in the interview process itself" (p. 193). About two weeks after treatment, a 45-minute interview provided the women with "the opportunity to describe their personal experiences and responses in regard to the art therapy sessions" (p. 193).

Results: Methods of data analysis were not reported. According to the authors, seven of the women described positive outcomes following the art therapy intervention and recommended that the program be continued and increased in length. (Ferszt, Hayes, DeFedele, & Horn, 2004, p. 191; Abstract modified by St. John, 8/14/06)

Gussak, D. (2009). The effects of art therapy on male and female inmates: Advancing the research base. [The Arts in Psychotherapy, 36\(1\), 5-12.](#) (Prison/Incarceration/Quantitative) (PSJ)

Gussak, D. (2006). Effects of art therapy with prison inmates: A follow-up study. [The Arts in Psychotherapy, 33\(3\), 188-198.](#) (Prison/Incarceration/Quantitative) (PSJ)

Gussak, D. (2004). Art therapy with prison inmates: A pilot study. [The Arts in Psychotherapy, 31\(4\), 245-259.](#)

Hartz, L., & Thick, L. (2005). Art therapy strategies to raise self-esteem in female juvenile offenders: A comparison of art psychotherapy and art as therapy approaches. [Art Therapy: Journal of the American Art Therapy Association, 22\(2\), 70-80.](#) (Prison/Incarceration/Quantitative) (DB & PSJ)

Aim & Method: This exploratory, quasi-experimental study compared the impact of two art therapy approaches on the self-esteem of 27 female juvenile offenders. Participants took part in an art psychotherapy or art as therapy group intervention. Self-esteem was measured post-treatment with a questionnaire of 20 questions designed by the authors (Hartz AT-SEQ). Pre and post intervention, the measure was the *Harter Adolescent Self-Perception Profile* (Harter, 1988), a 45-item, Likert scale, that consisted of eight domains of self-esteem and Global Self-Worth, as a separate domain.

Results: After intervention, no significant differences were found on the Hartz AT-SEQ. Both groups reported increased feelings of mastery, connection, and self-approval. Only scores for participants who scored low on pretest for the *Profile* were calculated for post-test differences. On Harter's *Profile* both groups showed an increase in global self-worth ($p < .05$). However, the art psychotherapy group showed a significant increase in domains of close friendship ($p < .05$) and behavioral conduct ($p < .05$), whereas the art as therapy group did so in the domain of social acceptance ($p < .05$). Measures of appearance and of behavioral conduct approached significance ($p < .10$). Findings suggest that for these low-self-esteem participants, art therapy can be an effective treatment intervention to raise self-esteem. This implies an approach can be selected to build greater trust and self-disclosure or to foster general group cohesion, based on client needs. (Hartz, 2005, p. 70; Abstract modified by St. John, 8/14/05)

Persons, R. (2009). Art therapy with serious juvenile offenders: A phenomenological analysis. [International Journal of Offender Therapy and Comparative Criminology, 53, 433-453.](#)

Smeijsters, H., & Cleven, G. (2006). The treatment of aggression using arts therapies in forensic psychiatry: Results of a qualitative inquiry. [*The Arts in Psychotherapy*, 33\(1\), 37-58.](#) (PSJ)

6. Graduate Education

Deaver, S., & McAuliffe, G. (2009). Reflective visual journaling during art therapy and counseling internships: A qualitative study. [*Reflective Practice*, 10\(5\), 615-632.](#) (School/Academic/Qualitative) (SD)

Elkis-Abuhoff, D., Gaydos, M., Rose, S., & Goldblatt, R. (2010). The impact of education and exposure on art therapist identify and perception. *Art Therapy: Journal of the American Art Therapy Association*, 27(3), 119-126.

Students who enter a creative arts therapy program without prior exposure to a patient population experience a complex developmental journey towards creating their own identities as art therapists. In this study, 21 graduate students were asked to draw how they saw their patients and how their patients saw them. The directive was repeated 3 times throughout the course of their graduate degree education. Participants completed a qualitative questionnaire that documented their decision to pursue an education in art therapy, their population of interest, how their perception of these two areas changed over time, and a post-graduation quantitative questionnaire. A within-group repeated measures ANOVA was conducted; results showed an increase in the importance of supervisory relationships, self-awareness, and professional identity. The article addresses how educators and site supervisors can enhance the professional identity development of future generations of art therapists. (P. St John)

Feen-Calligan, H. R. (2005). Constructing professional identify in art therapy through service-learning and practica. [*Art Therapy: Journal of the American Art Therapy Association*, 22\(3\), 122-131.](#) (School/Academic/Qualitative) (PSJ)

Fish, B. J. (2008). Formative evaluation research of art-based supervision in art therapy training. [*Art Therapy: Journal of the American Art Therapy Association*, 25\(2\), 70-77.](#) (School/Academic/Combined Methodologies) (DB & PSJ)

Image making is a common component of art therapy supervision but its use has not yet been formally evaluated. This article describes formative evaluation research used to investigate student responses to art-based supervision in which response art was used as a primary method to contain explore, or express clinical work. Art-based supervision, as provided by one art therapy supervisor teaching in a graduate art therapy training program, was evaluated by 19 students in 3 consecutive semesters. Quantitative and qualitative data indicated general agreement that art-based supervision is a useful method. Specific examples of response art in supervision are provided. (p. 70)

Mercer, A., Warson, E., & Zhao, J. (2010). Visual journaling: An intervention to influence stress, anxiety and affect levels in medical students. *The Arts in Psychotherapy*, 37(2), 143-148. (Experimental) (PSJ)

Orkibi, H. (2012). Students' artistic experience before and during graduate training. *The Arts in Psychotherapy*, 39(5), 428-435. (NG).

Walsh, S. M., Chang, C. Y., Schmidt, L. A., & Yoepp, J. H. (2005). Lowering stress while teaching research: A creative arts intervention in the classroom. [*Journal of Nursing Education*, 44\(7\), 330-333.](#) (School/Academic/Quantitative) (DB)

Professional identify is a term used to describe both the collective identify of a profession and an individual's own sense of the professional role. This article draws from the literature exploring professional identify with attention to the issues of developing professional identity in fields such as art therapy where lower wages, fewer jobs, and the frequent need to earn additional practice credentials exist. A qualitative research project was conducted during which students participated in service-learning in conjunction with an art therapy practicum assignment. Service-learning was introduced as a pedagogy to facilitate the identity construction of art therapy students, and was found to nurture aspects of professional identity described in the literature. (p. 122)

7. Grief / Bereavement

Graham, M., & Sontag, M. (2001). Art as an evaluative tool: A pilot study. *Art Therapy: Journal of the American Art Therapy Association, 18(1), 37-43.*

Aim & Method: The effectiveness of an art therapy support group for grieving children (number not reported) was assessed using artwork to qualitatively measure their perspective of their experiences in the group.

Results: Evaluation of perceptions of their grief was conducted retrospectively at a "reunion" of the group one year after completion of a 10-session treatment program. Three themes emerged: the vulnerability of grieving children, the importance of maintaining memories, and the contribution of the group to the process of grieving. Findings indicate that art can be an effective qualitative tool to evaluate children's grief groups. (Graham, & Sontag, 2001, p. 37; P. St. John, 8/14/05)

Orton, M. (1994). A case study of an adolescent mother grieving the death of her child due to Sudden Infant Death Syndrome. *American Journal of Art Therapy, 33(2), 37-44.*

Aim: The death of a child is one of the most traumatic losses with which to cope (Bernstein, Duncan, Gavin, Lindhal, & Ozonoff, 1989). In this paper I present a single subject study illustrating how I used art therapy with an adolescent mother grieving the death of her child due to Sudden Infant Death Syndrome (SIDS).

Hypothesis: I hypothesized in this B-design single-subject study that the use of expressive therapy interventions within the framework of grief counseling would assist the mother's grieving process by increasing her awareness of coping resources.

Method: The *Coping Resources Inventory (CRI)* (Hammer & Marting, 1987), was given during the third and ninth sessions and "...rated by a blind rater" (p. 38). The *Grief Scale: Self Help* (Graves & Gibson, 1985), was given as a pre- and post-test measure, as was the CRI. (All tools are provided in the article, pp. 38 - 40). A *Self-Monitoring Report* was also used by the client "to record daily information...to score occurrences ranging from crying and anger to identification and acceptance of her feelings" (p. 40). Treatment consisted of "10 therapy sessions primarily focused on the emotional state of the client upon her arrival, and included themes of support, awareness and identification of emotions,...the acceptable expression of these feelings, and themes of self-nurturance" (p. 40).

Results: Results on the CRI "indicate that the client improved her cognitive and emotional coping resources" (p. 41) (two of the five categories) by a few points, but did not improve in three categories: Social, Spiritual/Philosophical, and Physical. Results on the Grief Scale showed improvement in areas of sadness, guilt, humor, and hopefulness. That is, declines were apparent in sadness, anger, and guilt. "These results appear to correspond with the CRI results" (p. 42). "The results of the self-monitoring were consistent with the results of the Grief Scale" (p. 42). The treatment protocol is given and discussed. Limitations of the study

and recommendations for further research are given. (Orton, 1994, p. 37; P. St. John, 8/14/05)

Ponteri, A., K. (2001). The effect of group art therapy on depressed mothers and their children. *Art Therapy: Journal of the American Art Therapy Association*, 18(3), 148-157.

Aim & Method: This study examined the effect of eight consecutive sessions of group art therapy on maternal self-image and self-esteem as well as on the quality of interactions between mother and child. The participants were four mother-child pairs in which the mothers were experiencing depressive symptoms that affected their care giving capacities.

Hypothesis: It was hypothesized that group art therapy would improve maternal self-esteem and self-image and, in turn, foster positive mother-child interactions. The research design was pre-experimental, one-group pretest posttest. A mother-and-child drawing (Gillespie, 1994), a 20-minute videotaped play session (Interaction Rating Scale [Perez, 1998]), and two self-reports (a 20-item Mother Questionnaire [MQ] that self-assessed parenting skills and a 26-item Maternal Self-Report Inventory-Short Form [MSI-SF] designed to assess adaptation to being a mother and maternal self-esteem [Shea & Tronick, 1988]) were used as pre- and post treatment assessments. Mother-and-Child drawings were scored using 14 items on an adapted FEATS (Gantt & Tabone, 1998).

Results: Results showed that mothers reported higher levels of self-esteem and a more positive self-image following treatment. All participants depicted more mature and/or more self-assured other-child relationships in their mother-and-child drawings following the group. Only half, however, were able to integrate their more optimistic attitudes and self-beliefs into their behavior and interactions with their children by the end of the study. Because the sample size was so small, statistical analyses of the data was not conducted. (Ponteri, 2001, p. 148; P. St. John, 8/14/05)

Salzano, A. T., Lindemann, E., & Tronsky, L. N. (2013). The effectiveness of a collaborative art-making task on reducing stress in hospice caregivers. *The Arts in Psychotherapy*, 40(1), 45-52. (NG).

Schut, H. W., De Keijser, J., Van Den Bout, J., & Stroebe, M. S. (1996). Cross-modality grief therapy: Description and assessment of a new program. *Journal of Clinical Psychology*, 52, 357-365.

8. Intellectually Disabled

Banks, S., Davis, P., Howard, V. F., & McLaughlin, T. F. (1993). The effects of directed art activities on the behavior of young children with disabilities: A multi-element baseline study. *Art Therapy: Journal of the American Art Therapy Association*, 10(4), 235-240.

Aim & Method: The effects of directed art activities on the behavior of two preschool children and one kindergarten child with developmental delays, as measured by The Vineland Adaptive Scale (Sparrow, Balla, & Ciccheit, 1984) in a rural classroom were examined. A multi-element baseline design across participants was used to compare directed art activities with typical preschool art activities. The target behaviors measured were aggression, eye contact, and social initiation. Each art activity directed by the teacher focused on an affective concept such as anger or happiness. The control condition used the same art materials as the directed art activity, and the children chose how they would use the materials. Baseline data was collected 1-hour per day for five days. During the control and experimental conditions, "data were collected [by a trained paraprofessional] 5 minutes

after the art lesson, and again 30 minutes later....as the target behaviors were more likely to occur at that time” (p. 237).

Results: Data analysis was conducted by visual analysis of graphed results. Results indicated that the directed art activity had a larger effect than the control condition on the social condition of two children, while the control condition generated little effect. However, “both experimental and control art activities resulted in therapeutic improvement of social behaviors, across individuals” (p. 238). Neither art activity had a measurable effect on the targeted behavior of the third child. Implications for use by preschool and other teachers were suggested. (Banks, Davis, Howard, & McLaughlin, 1993, p. 235; abstract modified by St. John, 8/14/05)

Bowen, C., & Rosal, M. (1989). The use of art therapy to reduce the maladaptive behaviors of a mentally retarded adult. *The Arts in Psychotherapy*, 16(3), 211-218.

Got, I. L. S., & Cheng, S-T. (2008). The effects of art facilitation on the social functioning of people with developmental disability. [*Art Therapy: Journal of the American Art Therapy Association*, 25\(1\), 32-37.](#) (Intellectually Disabled/ Quantitative) (PSJ)

A randomized control trial investigated the effects of art facilitation on the quality of life for Chinese adults with developmental disabilities. The outcome study participants were recruited from day activity centers in Hong Kong and were randomly assigned into an experimental group (n = 19) and a no-treatment control group (n = 18). The 19 experimental group participants completed 12 art facilitation sessions. At posttest, they showed enhanced social relationship and language comprehension based on parent and staff ratings, as compared to control participants. No subjective gain was obtained in the participants' self reports. The potential benefits of art facilitation for people with developmental disabilities are discussed. (p. 32)

Hiltunen, S. S. (1989). The effects of art/drama therapy experiences on rigidity, body concept and mental maturity in graphic thinking of adolescents with mental retardation. *Art Therapy: Journal of the American Art Therapy Association*, 6(1), 18-25.

Aim & Method: Subaverage and rigid cognition is the primary dysfunction in mental retardation. This study focuses on the decreasing of rigidity and consequent enhancement of receptive/expressive cognitive functioning in order to clear the channel of and prepare the groundwork for communication of thoughts and ideas in the further therapeutic intervention. Only the cognitively oriented preparatory phase was the focus of this article. An art and drama therapy program was designed for 21 Mentally-Retarded (MR) students (divided into groups of 5 or 6) at the Kennedy Institute, a private special education facility, in Washington, DC. For this study, a 15-week art and drama therapy curriculum (3 sessions per week; total = 29 sessions) using Piaget's theoretical framework of cognitive development was implemented. The curriculum was designed to bombard the cognition of MR participants through graphic, movement, visual and auditory thinking as alternative modalities for verbal thinking. Drawings were assessed regarding body concept, rigidity, and mental maturity to determine the effects of the ...Program on participants' graphic thinking. The pre/post measurement tools were the Goodenough-Harris *Draw-A-Person* test (1963), and the *Bender-Gestalt Test for Young Children* (Koppitz scoring, 1964; 1975) “administered and scored by an outside school psychologist” (p. 20) using “the perseveration score to identify changes in visual-motor rigidity” (p. 20). “The second self drawing (Self 2) was drawn during class evaluation period in-group settings...immediately after the mirror self-confrontation” (p. 20). A “Body-Concept Check List” was used to record the participants' ability to name body parts “during mirror-confrontation” (p. 20). Cognitive abilities were measured using the Silver scales (Silver, 1975a, 1975b, 1977); two raters scored the assessment.

Results: Data show movement from rigidity toward flexibility (“no significant change in either visual-motor maturity or perseveration” ($p > .05$) (p. 20)). Significant differences were found on the Body-Concept Check List ($p < .001$). Significant differences were also found on the *Silver* test: Rater 1 – on ability to select, represent, and artistic/creativity abilities ($p < .001$); Rater 2 scores did not reach significance ($p > .05$). The *Silver* test was later revised to assess “smaller steps in progress” (*Silver Cognitive Evaluation Scale –Form III*) (p. 21). Statistical analysis in general suggested that the subjects had reached the oscillatory stage, fluctuating between rigid and flexible responses. It was conjectured that longer art and drama therapy intervention might firmly establish the acquired new flexible responses. Significant differences in body concept in graphic thinking were observed. This suggests that the art and drama therapy experiences improved students’ conceptual knowledge of the body. Some improvement in mental maturity was also measured in Female Figure and Self 2 drawings. (Hiltunen, 1989, p. 18; abstract modified by St. John, 8/14/05)

Miller, P., & Miller, S. (1982). The relationship of task difficulty to mentally retarded students' interest in art. *Studies in Art Education*, 23(2), 22-26.

Schrade, C., Tronsky, L., & Kaiser, D. H. (2011). Physiological effects of mandala making in adults with intellectual disability. *The Arts in Psychotherapy*, 38(2), 109-113. (Experimental, Adults with Intellectual Disability) (PJS)

Trzaska, J. D. (2012). The use of a group mural project to increase self-esteem in high-functioning, cognitively disabled adults. *The Arts in Psychotherapy*, 39(5), 436-442. (NG)

9. Medical

Anschel, D.J., Dolce, S., Schwartzman, A., & Fisher, R.S. (2005). A blinded pilot study of artwork in a comprehensive epilepsy center population. *Epilepsy and Behavior*, 6(2), 196-202.

Anzules, C., Haenni, C., & Golay, A. (2007). An experience of art therapy for patients suffering from obesity. *European Diabetes Nursing*, 4(2), 72-76.

Bar-Sela, G., Atid, L., Danos, S., Gabay, N., & Epelbaum, R. (2007). Art therapy improved depression and influenced fatigue levels in cancer patients on chemotherapy. [Psycho-Oncology](#), 16, 980-984. (SD)

Beebe, A., Gelfand, E. W., & Bender, B. (2010). A randomized trial to test the effectiveness of art therapy for children with asthma. [The Journal of Allergy and Clinical Immunology](#), published online 12 May 2010, Corrected Proof. DOI:10.1016/j.jaci.2010.03.019. (DK)

Collie, K., Bottorff, J. L., & Long, B. C. (2006) A narrative view of art therapy and art making by women with breast cancer. *Journal of Health Psychology*11(5), 761-775.

Colwell, C. M., Davis, K., & Schroeder, L.K. (2005). The effect of composition (art or music) on the self-concept of hospitalized children. *Journal of Music Therapy*, 42 (1), 49-63.

Deane, K., Fitch, M., & Carman, M. (2000). An innovative art therapy program for cancer patients. *Can Oncol Nurs J*, 10(4), 147-51, 152-157.

Dolgin, M. J., Somer, E., Zaidel, N., & Zaizov, R. (1997). A structured group intervention for siblings of children with cancer. *Journal of Child & Adolescent Group Therapy*, 7(1), 3-18.

Elkis-Abuhoff, D. L., Goldblatt, R. B., Gaydos, M., & Convery, C. (2013). A pilot study to determine the psychological effects of manipulation of therapeutic art forms among patients with Parkinson's disease. *International Journal of Art Therapy: Inscape*, 18(3), 113-121. (AB)

Favara-Scacco, D., Smirne, G., Schiliro, G., & Di Cataldo, A. (2001). Art therapy as support for children with leukemia during painful procedures. *Medical Pediatric Oncology*, 36(4), 478-480.

Background: Painful procedures endured by children with leukemia may be alleviated by art therapy. It is thought that this nonverbal, creative modality can help children develop coping skills for dealing with pain.

Aim: To test whether art therapy prevents anxiety and fear during painful interventions such as lumbar puncture and bone marrow aspiration.

Method: Design—Experimental design comparing a group who received art therapy protocol with a previous treated group of children who received no services.

Setting—Medical.

Study Participants—32 children aged 2-14 years with leukemia.

Results & Conclusions: Art therapy appeared to promote more cooperative behavior during painful interventions. (D. Kaiser, 8/14/05)

Field, W., & Kruger, C. (2008). The effect of an art psychotherapy intervention on levels of depression and health locus of control orientations experienced by black women living with HIV. *Psychological Journal of South Africa*, 38(3), 467-478. (SD)

Forzoni, S., Perez, M., Martignetti, A., & Crispino, S. (2010). Art therapy with cancer patients during chemotherapy sessions: an analysis of the patients' perception of helpfulness. *Palliative and Supportive Care*, 8(1), 41-48. (SD, DK)

Gabriel, B., Bromberg, E., Vandenbovenkamp, J., Walka, P., Kornblith, A., & Luzzatto, P. (2001). Art therapy with adult bone marrow transplant patients in isolation: A pilot study. *Journal of Psycho-Oncology*, 10, 114-123.

Geue, K., Goetze, H., Buttstaedt, M., Kleinert, E., Richter, D., & Singer, S. (2010). An overview of art therapy interventions for cancer patients and the results of research. *Complementary Therapies in Medicine*, 18, 160-170. (SD)

Geue, K., Richter, R., Buttstadt, M., Brahler, E., & Singer, S. (2013). An art therapy intervention for cancer patients in the ambulant aftercare: Results from a non-randomised controlled study. *European Journal of Cancer Care*, 22(3), 345-352. (SD).

Guillemin, M. (2004). Embodying heart disease through drawings. *Health (London)*, 8(2), 223-239.

A study of 32 middle-aged women with heart disease. Drawings were used to understand the women's experiences with health and illness (RV).

Haltiwanger, E., Rojo, R., & Funk, K. (2011). Living with cancer: Impact of expressive arts. *Occupational Therapy in Mental Health*, 27, 65-86. (SD)

Herman, P. M., & Larkey, L. K. (2006). Effects of an art-based curriculum on clinical trials attitudes and breast cancer prevention knowledge. *Health Education and Behavior*, 33(2), 664-676. (Medical/Quantitative) (DB)

Hughes, E. (2010). Art therapy as a healing tool for sub-fertile women. *Journal of Medical Humanities, 31*, 27-36. (SD)

Hughes, E. G., & da Silva, A.M. (2011). A pilot study assessing art therapy as a mental health intervention for subfertile women. *Human Reprod., 26*(3),611-615. (SD, DK)

Italia, S., Favara-Scacco, C., DiCataldo, A., & Russo, G. (2008). Evaluation and art therapy treatment of the burnout syndrome in oncology units. *Psycho-Oncology, 17*, 676-680. (Medical/Quantitative) (SD)

Kim, S-K., Kim, M.-Y., Lee, J.-H., & Chun, S.-I. (2008). Art therapy outcomes in the rehabilitation treatment of a stroke patient: A case report. *Art Therapy: Journal of the American Art Therapy Association, 25*(3), 129-133. (Medical/Quantitative) (DB & PSJ)

This case report discusses the potential for art therapy to aid in the recovery of early-chronic stroke patients. The patient was diagnosed with having a subarchnoid hemorrhage from a cerebral aneurysm rupture 1 year prior to hospitalization. Therapies used as part of the patient's treatment included 10 weeks of art therapy conducted twice a week, resulting in improvements in the patient's emotions and cognition. The patient's artwork provides an especially valuable opportunity for tracking improvements in cognition not easily detected in standard rehabilitation therapy. Results from the MMSE, MVPT, and psychological tests conducted before and after art therapy treatment showed improved scores in visual perception and cognition, as well as an increase in motor activity and function as a secondary effect. This case report suggests that art therapy may have a positive therapeutic effect on chronic stroke patients. (p. 129)

Madden, J. R., Mowry, P., Gao, D., Cullen, P. M., & Foreman, N. (2010). Creative arts therapy improves quality of life for pediatric brain tumor patients receiving outpatient chemotherapy. *Journal of Pediatric Oncology Nursing, 27*(3), 133-145. (SD, DK)

Mindell, N. (1998). Children with cancer: Encountering trauma and transformation in the emergence of consciousness. *The Arts in Psychotherapy, 25*(1), 3-20.

Aims & Method: Design--Discovery-oriented qualitative study; *Setting*—Swiss oncology center; *Study Participants*—two children with cancer.

Results: Symbols of transformation are described for two children to show the “intense symbolic process...was created to encompass and channel psychic energy as it moved towards life and death” (pp.18-19).

Conclusions: to understand the emergence of archetypal symbols.

Limitations: lacks utility for practitioners; not written so that reader can understand procedures of research process; lacks interpretation of the meaning of study findings.

Strengths: use of triangulation of therapists and supervisors to reduce bias; analysis of weekly reports over a long period of time. (D. Kaiser, 8/14/05)

Monti, D. A., & Peterson, C. (2004, July). Mindfulness based art therapy: Results of a two year study. *Psychiatric Times, 21*(8), 63-65.

Monti, D., Peterson, C., Shakin Kunkle, E., Hauck, W., Pequignot, E., Rhodes, L., & Brainard, G. (2006). A randomized, controlled trial of Mindfulness-based Art Therapy (MBAT) for women with breast cancer. [*Psycho-Oncology, 15*, 363-373.](#) (Medical/Quantitative) (SD)

Mueller, J., Alie, C., Jonas, B., Brown, E., & Sherr, L. (2011). A quasi-experimental evaluation of a community-based art therapy intervention exploring the psychosocial

health of children affected by HIV in South America. *Tropical Medicine and International Health*, 16(1), 57-66. (SD)

Nainis, N., Paice, J., Ratner, J., Wirth, J., Lai, J., & Shott, S. (2006). Relieving symptoms in cancer: Innovative use of art therapy. *Journal of Pain and Symptom Management*, 31(2), 162-169. (Medical/Quantitative) (SD)

Oster, I., Astrom, S., Lindh, J., Magnusson, E. (2009). Women with breast cancer and gendered limits and boundaries: Art therapy as a “safe space” for enacting alternative subject positions. *The Arts in Psychotherapy*, 36(1), 29-38). (Medical/Qualitative) (PSJ)

Oster, I., Magnusson, E., Thyme, K. E., Lindh, J., & Astrom, S. (2007). Art therapy for women with breast cancer: The therapeutic consequences of boundary strengthening. *The Arts in Psychotherapy*, 34(3), 277-288. (Medical/Qualitative) (PSJ)

Oster, I., Svensk, A. C., Magnusson, E., & et al. (2006). Art therapy improves coping resources: A randomized, controlled study among women with breast cancer. *Palliative & Supportive Care*, 4(1), 57-64. (DK)

Palmer, K., & Shepard, B. (2008). An art inquiry into the experiences of a family of a child living with a chronic pain condition: A case study. *Canadian Journal of Counseling*, 42(1), 7-23. (Medical/Qualitative) (SD)

Predeger, E. (1996). Womanspirit: A journey into healing through art in breast cancer. *ANS Adv. Nurs. Sci.*, 18(3), 48-58.

Rao, D., Nainis, N., Williams, L., Langner, D., Eisin, A., & Paice, J. (2009). Art therapy for relief of symptoms associated with HIV/AIDS. *AIDS Care*, 21(1), 64-69. (Medical/Quantitative) (SD)

Reynolds, F., & Prior, S. (2003). A lifestyle coat-hanger: A phenomenological study of the meaning of artwork for women coping with chronic illness and disability. *Disability and Rehabil*, 25(14), 785-794.

This study was a qualitative phenomenological study that involved 30 patients with chronic illness. Health and well-being were evaluated. The results supported that the art filled voids in occupation and distracted thoughts related to illness. The art provided participants with improvements in expression of grief and being spontaneous, and positive identity. The art provided an avenue for socializing and networking (RV).

Reynolds, F., & Lim, K. H. (2007). Contribution of visual art-making to the subjective well-being of women living with cancer: A qualitative study. *The Arts in Psychotherapy*, 34(1), 1-10. (Medical/Qualitative) (PSJ)

Reynolds, F., Lim, K., & Prior, S. (2008). Images of resistance: A qualitative enquiry into the meanings of personal artwork for women living with cancer. *Creativity Research Journal*, 20(2), 211-220. (Medical/Qualitative) (SD)

Ross, E. A., Hollen, T. L., & Fitzgerald, B.M. (2006). Observational study of art-in-medicine program in an outpatient hemodialysis unit. *American Journal of Kidney Disease*, 47(3), 462-468.

This study involved a pre and post tests that looked at medical outcomes, depression, dialysis times, weight gain, and laboratory data. Forty-six hemodialysis patients participated. The results demonstrated improved medical outcomes, trends towards reductions in hemodialysis parameters and depression (RV).

Singer, S., Gotze, H., Buttstadt, M., Geue, K., Momenghalibaf, A. , & Bohler, U. (2010). The effects of an art education program on competencies, coping, and well-being in outpatients with cancer: Results of a prospective feasibility study. *The Arts in Psychotherapy, 37*(5), 363-369. (Experimental and Qualitative) (PJS)

This study investigated an art education program for patients with cancer (N = 23) over 22 weeks. Pre- and post-measures of anxiety and self-confidence revealed improvements on these measures however, measures of depression and coping did not improve. The researchers noted that recruitment into the study was difficult initially and recommended highly structured sessions designed to ensure feelings of safety for exploration and expression be included in future research. (Donna Kaiser, 2011)

Singh, B. (2011). The therapeutic effects of art making in patients with cancer. *The Arts in Psychotherapy, 38*(3), 160-163. (Qualitative; Women Artists) (PJS)

Stafstrom, C., Havlena, J., & Krezinsky, A. (2012). Art therapy focus groups for children and adolescents with epilepsy. *Epilepsy & Behavior, 24*(2), 227-233. (SD)

Stafstrom, C. E., & Havlena, J. (2003). Seizure drawings: Insight into the self-image of children with epilepsy. *Epilepsy & Behavior, 4*(1), 43-56. (SD)

Strand, S., & Waller, D. (2010). The experience of Parkinson's: Words and images through art therapy- A pilot research study. *International Journal of Art Therapy: Inscape, 15*(2), 84-93. (AB)

Stuckey, H. (2009). Creative expression as a way of knowing in diabetes adult health education: An action research study. [*Adult Education Quarterly, 60*\(1\), 46-64.](#) (Medical/Qualitative) (SD)

Stuckey, H., & Tisdell, E. (2010). The role of creative expression in diabetes: An exploration into the meaning-making process. [*Qualitative Health Research, 20*\(1\), 42-56.](#) (Medical/Qualitative) (SD)

Svensk, A., Oster, I., Thyme, K., Magnusson, E., Sjodin, M., Eisemann, M., Astrom, S., & Lindh, J. (2008). Art therapy improves experienced quality of life among women undergoing treatment for breast cancer: A randomized controlled study. [*European Journal of Cancer Care, 18*, 69-77.](#) (Medical/Quantitative) (SD)

Symons, J., Clark, H., Williams, K., Hansen, E., & Orpin, P. (2011). Visual art in physical rehabilitation: Experiences of people with neurological conditions. *British Journal of Occupational Therapy, 74*(1), 44-52. (SD)

Theorell, T., Konarski, K., Westerlund, H., Burell, A-M., Engstrom, R., Lagercrantz, A-M., Teszary, J., & Thulin, K. (1998). Treatment of patients with chronic somatic symptoms by means of art psychotherapy: A process description. *Psychotherapy & Psychosomatics, 67*(1), 50-56.

Thompson, L. J. M., Ander, E. E., Menon, U., Lanceley, A. & Chatterjee, H. J. (2012). Quantitative evidence for wellbeing benefits from a heritage-in-health intervention with hospital patients. *International Journal of Art Therapy: Formerly Inscape, 17*(2), 63-79. (DB, SD)

This study involved 152 in-patient general health care patients. The Pre and post tests were the Positive Affect Negative Affect Scale and the Visual Analogue Scale. Semi structured interviews were also employed. Two groups were compared where the experimental group handled objects from museums (tactile condition) and the comparison group looked at pictures of these objects (visual condition). The results revealed significant increases in wellbeing and happiness and an advantage for the tactile condition over the visual one (RV).

Thyme , K. E., Sundin, E.C., Wiberg, B., & et al. (2009). Individual brief art therapy can be helpful for women with breast cancer: A randomized controlled clinical study. *Palliative & Supportive Care*, 7(1), 87-95. (DK)

Wallace, J., Yorgin, P. D., Carolan, R., Moore, H., Sanchez, J., Belson, A., Yorgin, L., Major, C., Granucci, L., Alexander, S., & Arrington, D. (2004). The use of art therapy to detect depression and post-traumatic stress disorder in pediatric and young adult renal transplant recipients. *Pediatr Transplant* 8(1), 52-59.

Walsh, S., Martin, S., & Schmidt, L. (2004). Testing the efficacy of a creative-arts intervention with family caregivers of patients with cancer. [*Journal of Nursing Scholarship*, 3, 214-219.](#) (Medical/Quantitative) (SD)

Weldt, C. (2003). Patients' responses to a drawing experience in a hemodialysis unit: A step towards healing. *Art Therapy: Journal of the American Art Therapy Association*, 20(2), 92-99.

Aim & Method: Qualitative Research. People on hemodialysis live longer because of advances in technology; however, there are concerns about the diminished quality of life and the emotional problems these patients experience. During hemodialysis, patients rarely engage in any meaningful activity. The purpose of this study is to investigate eight patients' (volunteers who were right-handed, ages 30 – 75 years, three men and five women, all African-American) responses to drawing experiences while in a hemodialysis unit. "Duration of hemodialysis treatment varied from less than one year to 10 years" (p. 92). The inquiry involved a series of drawings and a series of interviews conducted before and after the drawings. By introducing a meaningful activity such as drawing, it was postulated that patients would be stimulated to talk about issues and experiences and improve their confidence and self-esteem. "Data were collected on two forms: a series of drawing activities [(1) Free drawing; (2) Self-portrait; (3) Draw what you most like)] and a series of [two] interviews" (p. 94). Materials were 9 x 12" white paper, standard pencils with erasers and colored pencils for tasks 1 and 2, and watercolor crayons for task 3. "To increase the validity and reliability of interpretation, all drawings were named and dated and colors were standardized" (p. 92). Interviews were audiotape. The predrawing interviewed "provided information about education, background, demographics, art experience, and views about the patient's sense of self. A post-drawing interview discussed the participants' responses to the drawings tasks. Information was gathered on aspects that were enjoyable or difficult, ideas and topics drawn, and what the drawings represented" (p. 92). "Interpretative protocols such as those advocated by Adamson, Cousins, Bach (1990), and Furth (1988) were used in conjunction with analytical inductive reasoning to interpret the outcomes" (p. 92). This inquiry describes how patients perceived the situation before and during hemodialysis and explores the relationship between drawing and feelings of well being.

Results: The results indicate that all patients enjoyed the experience of drawing; they became focused on doing the drawings and the hours passed more quickly. (Weldt, 2003, p. 92; abstract modified by St. John, 8/14/05)

Wilk, M., Pachalska, M., Lipowska, M., Herman-Sucharska, I, Makarowski, R., Mirski, A., & Jastrzebowska, G. (2010). Speech intelligibility in cerebral palsy children attending an art therapy program. *Medical Science Monitor*, 16(5), CR 222-231. (SD)

Wood, M., Molassiotis, A., & Payne, S. (2011). What evidence is there for the use of art therapy in the management of symptoms in adults with cancer? A systematic review. *Psycho-Oncology*, 20, 135-145. (SD)

Woods, A., & Springham, N. (2011). On learning from being the in-patient. *International Journal of Art Therapy*, 16(2), 60-68. (SD)

10. Normal and Outpatient

Aaron, R. E., Ringhart, K. L. & Ceballos, N. A. (2011). Arts-based interventions to reduce anxiety levels among college students. *Arts & Health, 3*, 27-38. (DK)

Randomized within-subjects design with 90 participants in three groups of 30 each: individual art project, group art project, or non-art control condition (academic activity). Using state version of State/Trait Anxiety Inventory found significantly reduced levels of anxiety post-intervention for individual and group condition but not for control.

Arroyo, C., & Fowler, N. (2013). Before and after: A mother and infant painting group. *International Journal of Art Therapy, 18*(3), 98-112. (SD).

Belkofer, C. M., & Konopka, L. M. (2008). Conducting art therapy research using quantitative EEG measures. [Art Therapy: Journal of the American Art Therapy Association, 25](#)(2), 56-63. (Normal & Outpatient/Quantitative) (PSJ)

This study presents a modified, single subject design that measured the patterns of electrical activity of a participant's brain following an hour spent painting and drawing. Paired t tests were used to compare pre and post art-making electroencephalograph (EEG) data. The results indicated that neuro-biological activity after drawing and painting was statistically different ($p < .05$) from activity measured at a rate of rest. In general, the higher frequency bands (alpha and beta) were characterized by increases in brain activity, whereas the lower frequency bands (delta and theta) showed decreases. This study suggests that the EEG is a useful and innovative tool for conducting art therapy research. (p. 56)

Bell, C. E., & Robbins, S. J. (2007). Effect of art production on negative mood: A randomized, controlled trial. [Art Therapy: Journal of the American Art Therapy Association, 24](#)(2), 71-75. (Normal & Outpatient/Quantitative) (DB & PSJ)

Art therapists have long held that art production causes reductions in stress and elevations in mood (Rubin, 1999). The authors examined this claim in a randomized, controlled trial. Fifty adults between the ages of 18 and 30 were randomly assigned to either create an art work or to view and sort a series of art prints. Three measures of overall negative mood and of anxiety were collected before and after each intervention. Two-way ANOVAs (Group by Time) demonstrated significantly greater reductions in negative mood and anxiety in the art production group compared with the art viewing control group on all three measures (all p-values $< .005$). These results demonstrate that the simple act of creating a work of art can produce dramatic reductions in negative mood and that these reductions can be attributed specifically to the production of art rather than to its viewing. (p. 71)

Caddy, L., Crawford, F., & Page, A. (2012). 'Painting a path to wellness': Correlations between participating in a creative activity group and improved measured mental health outcome. *Journal of Psychiatric and Mental Health Nursing, 19*(4), 327-333. (SD)

Choi, S., & Goo, K. (2012). Holding environment: The effects of group art therapy on mother-child attachment. *The Arts in Psychotherapy, 39*(1), 19-24. (NG).

Coholic, D. (2011). Exploring the feasibility and benefits of arts-based mindfulness-based practices with young people in need: Aiming to improve aspects of self-awareness and resilience. *Child Youth Care Forum, 40*, 303-317. (SD)

Collie, K., Čubranić, D., & Long, B. C. (2002). Audiographic communication for distance counselling: A feasibility study. *British Journal of Guidance & Counselling, 30*(3), 269-284.

Collie, K., & Čubranić, D. (1999). An art therapy solution to a telehealth problem. *Art Therapy: Journal of the American Art Therapy Association*, 16(4), 186- 193.

Aim & Method: Telehealth refers to the use of telecommunications technologies to increase equality of access to healthcare, for example to people in remote and rural regions, to people with mobility or energy limitations, and to people whose ability to travel to receive care is limited by responsibilities at home. In this paper, we describe a gap that exists in the area of behavioral telehealth (the delivery of mental health and psychological support services from a distance) and propose that computer-supported distance art therapy can fill the need for behavioral telehealth delivery methods that, like text-only Internet services can reach people in their own homes, and, like videoconferencing can include both audio and visual communication. We worked collaboratively to design and evaluate a computer system that supports distance group art therapy in real time. We argue that art therapy is uniquely suited to behavioral telehealth and provides a low-cost solution to the problems of spanning “the last mile” to individuals’ own homes and of compensating for the absence of visual or non-verbal communication information when communication is conducted with text only.

In art therapy, the therapy is conducted in relation to the images made during the therapy sessions as well as in relation to the art therapist. Images can easily be sent from one location to another and can be discussed and viewed simultaneously by people in different locations. Art images can span geographical distances that may separate consumers from care providers.

Ten co-researchers from the community were invited to use the system we designed, which supports synchronous group Internet art therapy using voice communication and sharable hand-drawn computer drawings, and to discuss their experience during focus groups. The co-researchers were counselors, art therapists, and educators, each with professional and/or personal experience relevant to the topic. A complete description of our participatory design process can be found in the proceedings of the 1998 Participatory Design conference (Collie, Čubranić, & Booth, 1998).

Results: A qualitative analysis of the focus group discussions was conducted to identify main topics. Five key themes that emerged were: ease-of-use and lack of inhibition when using the computer system for making and sharing art; social protocols for talking during an Internet art therapy session and strategies for handling and limiting periods of silence; protection against misrepresentation when there is no direct face-to-face contact; qualities of computer images that may help or hinder art therapy; and feelings of mastery and control stemming from using a simple, easy-to-learn computer system. The overall consensus was that distance art therapy is viable and could indeed provide solutions to outstanding problems related to distance delivery of mental health and psychological support services. (Collie & Cubranic, 1999, p. 186; abstract modified by St. John & Collie, 8/16/05)

Curl, K. (2008). Assessing stress reduction as a function of artistic creation and cognitive focus. *Art Therapy: Journal of the American Art Therapy Association*, 25(4), 164-169. (Normal & Outpatient/Quantitative) (PSJ)

In this outcomes study (N = 40), changes in stress levels were compared across two participant conditions for a period of artistic activity with a cognitive focus on either a personally stressful or positive situation. Results indicated that participants in the positive-focus condition demonstrated a significant decrease in stress, whereas participants in the negative-focus condition demonstrated a slight increase in stress ($p < .05$). These findings on stress reduction give strength to the hypothesis that art making is a means of receiving a “creative high” (Foster, 1992), although long-term follow-up is necessary to adequately assess this phenomenon as it may pertain to art therapy. (p. 164).

Curry, N. A., & Kasser, T. (2005). Can coloring mandalas reduce anxiety? *Art Therapy: Journal of the American Art Therapy Association, 22(2)*, 81-85. (Normal & Outpatient/Quantitative) (PSJ)

Aim & Method: This study examined the effectiveness of different types of art activities in the reduction of anxiety. After undergoing a brief anxiety-induction, 84 undergraduate students were randomly assigned to color a mandala, to color a plaid form, or to color on a blank piece of paper.

Results: ANOVA results demonstrated that anxiety levels declined approximately the same for the mandala- and plaid-coloring groups ($p < .32$). Both of these groups experienced more reduction in anxiety than did the unstructured-coloring group ($p < .001$). "Follow-up t tests revealed again that the mandala group showed larger decreases in anxiety than did the free-form group... ($p < .003$)" (p. 83), as was also the case when plaid- and free-form groups were compared ($p < .03$). These findings suggest that structured coloring of a reasonably complex geometric pattern may induce a meditative state that benefits individuals suffering from anxiety. (Curry & Kasser, 2005, p. 81; abstract modified by St. John, 8/14/05)

DePetrillo, L., & Winner, E. (2005). Does art improve mood? A test of a key assumption underlying art therapy. *Art Therapy: Journal of the American Art Therapy Association, 22(4)*, 205-212. (Normal & Outpatient/Quantitative) (DB & PSJ)

We investigated whether artmaking improves mood, and if so, whether this effect is best explained by "catharsis" or "redirection." In Experiment 1, participants viewed tragic images and then either drew a picture based on their feelings or copied shapes. Those who drew exhibited more positive mood after drawing; those who copied shapes did not. Mood improved equally for those who drew negative and nonnegative images, suggesting that for some, catharsis led to improved mood and that for others, redirection led to improved mood. In Experiment 2, to test whether artmaking improved mood simply because people were distracted by making a drawing, we gave participants a word puzzle to complete, a task that does not allow expression of feeling through symbolic content. Completion of a word puzzle did not improve mood. These results suggest that artmaking increases the pleasure dimension of mood and does so via either catharsis or redirection. (p. 205)

Drake, J., & Winner, E. (2012). Confronting sadness through art-making: Distraction is more beneficial than venting. *Psychological of Aesthetics, Creativity, and the Arts, 6(3)*, 402-409. (SD)

Drake, J. E., Coleman, K., & Winner, E. (2011). Short-term mood repair through art: Effects of medium and strategy. *Art Therapy: Journal of the American Art Therapy Association, 28(1)*, 26-30.

This study examined the effects of expressive media (drawing versus writing) and emotion regulation strategy (coping by venting versus coping by distraction) on short-term mood repair. After inducing a sad mood in 40 participants, the researchers randomly assigned them to one of two conditions: drawing or writing. Mood valence was assessed before and after the activity, and participants reported whether they used the activity to vent or to distract themselves. Findings indicated that mood valence was significantly more positive after drawing than writing, and more positive when individuals reported using distraction rather than venting to regulate their emotions. Drawing in this study was a more effective means of immediate mood repair than writing; both activities repaired mood more effectively through distraction than through venting. (Experimental; Adults) (PJS)

Ellenbecker, T., & King, A. (1990). The effects of gender and college major on mood state changes induced through artistic expression. *American Journal of Art Therapy, 28(4)*, 106-110.

Aim: A basic tenet of art therapy is that the process of creating art is associated with positive mood change. The present research set out to test this hypothesis and, further, to provide predictors concerning the kind(s) of individuals most likely to derive such benefit from creative art therapy.

Method: A total of 59 undergraduate college students (22 men and 37 women; 19 art majors, 33 non-art majors, and 7 new art majors, "i.e., students who became art majors during the course of the semester" (p. 106)) were administered the *Multiple Affect Adjective Checklist-Revised (MAACL-R)* (Zuckerman & Rubin, 1985) before and after visual art classes at three different periods during a semester (weeks one, seven, and fourteen). The effects of gender and college major on mood state changes were examined, along with relationships between attitudes/beliefs about art (as measured by the ABC-ART Questionnaire) and the magnitude of mood state changes. Students from four different studio art classes, each 150 minutes long, created art during the sessions.

Results: Evidence emerged that the process of art induced positive mood state changes in most subjects. Anxiety was reduced significantly ($F_{1, 53}=7.52, p<.01$) during the initial testing period and the initial art period. Depression was significantly reduced during the first and second data collection sessions ($F_{1,53}=5.02, p<.05$) and ($F_{1,63}=4.89, p<.05$). "There was a significant gender main effect for the second testing period ($F_{1,53}=7.21, p<.01$), with males showing more depression than females exposed to the three hour art session" (p. 107). On the measure of hostility, no "significant main effect or interaction differences" were found (p. 107). This also was the finding for the measures of Sensation Seeking and Positive Affect. For the ABC-ART Analysis, an "analysis of variance revealed...changes in Cluster C [feelings of self-efficacy regarding artistic talent] over the course of the semester"....and a "gender-by-test interaction ($F_{1,53}=5.03, p<.05$) was found" (p. 108). Men showed increased responsiveness to the art process, with the positive effects tending to increase over time. Curiously, men also showed significantly enhanced self-efficacy in their artistic abilities as the semester proceeded. Mood alteration was not associated with scores derived from the ABC-ART measures of attitudes and beliefs regarding the art process. (Ellenbecker & King, 1990, p. 106; abstract modified by St. John, 8/14/05)

Evans, G. S., & Corbit, I. E. (1989). Visual transitions as therapy. *Art Therapy: Journal of the American Art Therapy Association*, 6(2), 57-66.

Aim: The study describes a multimodal art therapy procedure using photography, art, movement, video and verbal discussion, *Visual Transitions*, and attempts to provide a theoretical rationale for the procedure as well as statistical evidence for its effectiveness.

Method: A group of volunteers (N = 11; 9 women, 2 men, ages 34 – 58, mean = 46) took part in a seven-week program and filled out questionnaires before and after the experience. Three instruments were used: (1)The *Adjective Check List (ACL)* that "assess[es] personality needs and traits..." consisting "of 300 adjectives, organized into 24 basic scales" (p. 60), (2) the *Personal Orientation Inventory (POI)* "a self-report instrument designed to measure personal maturity as based on Maslow's concepts of self-actualization" consisting "of 150 paired-opposite items of antithetical, self-characterizing statements concerning value and behavior judgments" (p. 60); and (3) a self-report critique designed for this study to "measure the extent of participants' satisfaction and their comments regarding effectiveness of *Visual Transitions*, consisting of 11 questions and a rating scale from 1 – 5 plus a request for a "brief comment".

Results: Data show moderate but positive results for the program. On the *POI*, pre-post test results "show that 'Spontaneity' and 'Capacity for Intimate Contact' were significant at the .07 level...and 'Existentiality' showed significance at the .11 level" suggesting tendencies toward improvement (p. 61). On the *ACL*, pre-post test comparison of Favorable Adjectives

checked reached the $p > .25$ level; for Personal Adjustment, pre/post test differences reached the level of $p = .16$, both in a positive directions, but not reaching significance. On the Self-Report Critique, the “mean rating per questions was 4.203” (of a possible 5), and a mean of 71.458 of a possible 85 points (p. 62). An appendix provides the “Self-Report Critique” (pp. 65-66). (Evans & Corbit, 1989, p. 57; abstract modified by St. John, 8/14/05)

Feen-Calligan, H., & Nevedal, D. (2008). Evaluation of an art therapy program: Client perceptions and future directions. *Art Therapy: Journal of the American Art Therapy Association, 25(4), 177-182.* (Normal & Outpatient/Qualitative) (PSJ)

Program evaluation has the potential to offer many useful benefits to the field of art therapy, yet little has been published in this area. This brief report presents a practical strategy for art therapy program evaluation based on participant evaluations (N = 120) of a 10-week community based art therapy workshop. The evaluations consisted of self-reports by participants to open ended questions: (a) whether expectations were met, (b) likes and dislikes, (c) suggested changes for the workshop, (d) perceived personal changes, and (e) interest in continued participation. The report describes a participant-led evaluation tool, the evaluation findings, planned revisions in the questionnaire, and considerations for future program development, evaluation, and art therapy research. (p. 177)

Fenner, P. (2011). Place, matter and meaning: Extending the relationship in psychological therapies. *Home & Place, 17, 851-857.* (SD)

Fryear, J. L., & Stephens, B. C. (1988). Group psychotherapy using masks and video to facilitate interpersonal communication. *The Arts in Psychotherapy, 15, 227-234.*

Greenwood, H., Leach, C., Lucock, M., & Noble, R. (2007). The process of long-term art therapy: A case study combining artwork with clinical outcome. *Psychotherapy Research, 17(5), 588-599.* (Normal & Outpatient/Combined Methodologies) (SD)

Greenwood, H. (2011). Long term individual art psychotherapy. *International Journal of Art Therapy: Inscape, 16(1), 41-51.* (AB)

Heenan, D. (2006). Art as therapy: An effective way of promoting positive mental health? *Disability & Society, 21(2), 179-191.* (Normal & Outpatient/Qualitative) (SD)

Henderson, P., & Rosen, D. (2007). Empirical study on the healing nature of mandalas. *Psychology of Aesthetics, Creativity, and the Arts, 1(3), 148-154.* (Normal & Outpatient/Quantitative) (SD)

Higenbottam, W. (2004). In her image: A study in art therapy with adolescent females. *The Canadian Art Therapy Association Journal, 17(1), 10-16.* (Normal & Outpatient/Quantitative) (SD)

Hosea, H. (2006). “The brush’s footmarks”: Parents and infants paint together in a small community art therapy group. *International Journal of Art Therapy, 11(2), 69-78.* (Normal & Outpatient/Qualitative) (SD)

Huss, E. (2008). Shifting spaces and lack of spaces: Impoverished Bedouin women’s experience of cultural transition through arts-based research. *Visual Anthropology, 21, 58-71.* (Normal & Outpatient/Qualitative) (SD)

Julliard, K., Intilli, N., Ryan, J., Vollmann, S., & Seshadri, M. (2002). Stress in family practice residents: An exploratory study using art. *Art Therapy: Journal of the American Art Therapy Association, 19(1), 4-11.*

Aims & Method: Design—An exploratory study investigating themes and characteristics of artwork; *Setting*—Medical education; *Study Participants*—Family practice residents (N=16).

Results: Results of the 48 drawings analyzed indicated common themes of psychological pressure, anxiety, a sense of being overwhelmed, and in many cases, depression. Drawings of international graduates contained more negative themes. Each participant created three drawings with the first expressing feelings about the last year of residence, the second expressing stress felt in that year, and the third expressing sources of support and rejuvenation. Drawings were evaluated by art therapists blind to the nature of the study; they identified positive and negative themes relevant to stress.

Limitations: small sample size and lack of random assignment reduce generalizability; only one measurement used; no comparison group was used; and author noted problems with drawing directives that may have influenced results.

Strengths: artwork analysis. (Abstract by Kaiser, 8/14/05)

Kimport, E. R., & Robbins, G. (2012). Efficacy of creative clay work for reducing negative mood: A randomized controlled trial. *Art Therapy: Journal of the American Art Therapy Association, 29*(2), 74-79. (RV)

Malone, S. N., & Rosal, M. L. (1993). Journey toward integration: The use of collages to assess the separation and individuation process as an adult identical twin. *Art Therapy: Journal of the American Art Therapy Association, 10*(1), 16-22.

Aim & Method: In this paper, a single subject (AB) design using art therapy to facilitate the separation-individuation process of an adult identical twin is presented. The client was self-referred to a university counseling center. After initial crisis intervention sessions, the problems of dependency and identity were addressed through art therapy. The uniqueness of this study rests with its innovative measurement tool, an inner circles collage that allowed the therapist to chart the client's intrapsychic move toward separation from her identical twin. The client used collages as a means of discovering differences between herself and her twin sister and to identify her own separate and unique sense of self. Hypotheses were: (1) the client would "become less enmeshed with her twin sister at the intrapsychic level", and (2) the client would "become less enmeshed with other family members" (p. 18). The baseline phase was one session in which "the client created the inner circles collage, consisting of a drawing of concentric circles on 12" x 18" white paper on which collage symbols of significant others could be placed, but not affixed" (p. 18). To establish progress, "movement of symbolic shapes of the twin and husband from the inner core of the client" was measured in millimeters from 0 to 8 for each of 11-week treatment sessions. Prior to this treatment, the client also was assessed using the *House-Tree-Person (HTP)* test (Buck, 1981), and the *Kinetic Family Drawing (KFD)* (Burns & Kaufman, 1972). No posttest was conducted using these measures.

Results: Visual analysis of the graphed results show increase in separation for both the twin and husband symbols beginning in the 5th session. By the 11th session, both symbols were about 6.5 millimeters apart, and away from her inner core. (Malone & Rosal, 1993, p. 16; abstract modified by St. John, 8/14/05)

Manheim, A. R. (1998). The relationship between the artistic process and self-actualization. *Art Therapy: Journal of the American Art Therapy Association, 15*(2), 99-106.

Aim: This study explores the role creativity plays in personal growth and development and responds to Maslow's (1963) call for practical techniques that promote health. A literature review and qualitative study were conducted to examine possible parallels between creativity, self-actualization, and the three-dimensional art experience.

Method: At the beginning or midway through the 8-week courses, a 16-item questionnaire, designed for the study, “was distributed to students [N = 65] in seven continuing education art classes at three local art schools” (p. 102) where instruction focused on three-dimensional media. Questionnaires measured “students’ perceptions regarding the impact of the creative process in the studio and in their daily functioning” (p. 102).

Results: Most (98.4%) reported, “art enhanced their lives” (p. 103). Results suggested a relationship between creating three-dimensional artwork and self-actualizing growth, with the most frequently reported residual effects being an increased sense of openness (68.3%) and self-acceptance (65.1%). While the majority of those surveyed reported that this creative realm enhanced their lives, findings suggested that those who were particularly motivated found their life more globally enriched beyond the walls of the art studio ($p = .00134$). (Manheim, 1998, p. 99; abstract modified by St. John, 8/14/05)

Mercer, A., Warson, E., & Zhao, J. (2010). Visual journaling: An intervention to influence stress, anxiety, and affect levels in medical students. *The Arts in Psychotherapy*, 37(2), 143-148.

Oggins, J. (2007). “Reversing vandalism”: Coping themes in a library’s community art exhibit. *The Arts in Psychotherapy*, 34(3), 263-276. (Normal & Outpatient/Qualitative) (PSJ)

Omizo, M. M., & Omizo, S. A. (1989). Art activities to improve self-esteem among native Hawaiian children. *Journal of Humanistic Education and Development*, 27, 167-176.

Pizarro, J. (2004). The efficacy of art and writing therapy: Increasing positive mental health outcomes and participant retention after exposure to traumatic experience. *Art Therapy: Journal of the American Art Therapy Association*, 21(1), 5-12.

Aim: Is art therapy treatment of trauma-exposure as or more effective than writing therapy in improving psychological and health outcomes?

Method: Forty-five undergraduate students were randomly assigned to one of three conditions: write-stress, art-stress, and art-control. A baseline questionnaire was used to record demographic information. Three measurement tools were used in pre/post testing: The General Health Questionnaire-28 (Goldbert & Hillier, 1979) and the global Measure of Perceived Stress (Cohen, Kamarck, & Mermelstein, 1983), the Physical Symptoms Inventory (Wahler, 1968), and the Shortened Version of the Profile of Mood States (Shacham, 1983). In addition, a Participant Satisfaction Questionnaire was used to assess satisfaction after the last session and one month later. Efficacy questions assessed how “enjoyable” and “helpful” participating in the study had been. Treatment consisted of two one-hour sessions, scheduled from 1 – 10 days apart.

Results: Results showed a decrease in social dysfunction under the writing condition as compared to the art therapy conditions ($p < .01$). However, satisfaction (related to retention) was better in the art-stress and art-control groups ($p < .01$). (Pizarro, 2004, p. 5; P. St. John, 8/14/05)

Limitations: only two sessions were held; ability to generalize was limited by use of college students who were volunteers; self-report measures used are sometimes unreliable.

Strengths: The study used four measures that have at least good psychometric characteristics. The GHQ-28 consists of scales that have concurrent validity ranging from .70 to .73, has good reported internal consistency. The FMPS has demonstrated internal consistency and test-retest reliability of .85 at 2 weeks and .55 at 6 weeks. The PSI has good internal consistency, has been standardized on a variety of adult populations, and has established test-retest reliability. The shortened POMS has high internal consistency and a

high correlation with the original version. The study also used a participant satisfaction form after the final session and at a one-month follow-up. (D. Kaiser, 8/14/05)

Saunders, E. J., & Saunders, J.A. (2000). Evaluating the effectiveness of art therapy through a quantitative, outcomes-focused study. *The Arts in Psychotherapy*, 27, 99-106.

Limitations: no control group, no randomization, no psychometric properties reported for Initial Therapeutic Relationship, methods of statistical analysis not reported.

Strengths: good sample size, extended period of time for data collection. (Abstract by Kaiser, 8/14/05)

Spaniol, S. (2005). "Learned hopefulness": An arts-based approach to participatory action research. *Art Therapy: Journal of the American Art Therapy Association*, 22(2), 86-91. (Normal & Outpatient/Qualitative) (PSJ)

This paper describes a 2-day conference at Lesley University for art therapists and people with mental illness who have experienced art therapy or make art for self-expression. Designed as a "participatory dialogue," the conference was a form of participatory action research (PAR) developed by the Center for Mental Health Services in Washington, DC, to foster collaboration between mental health professionals and consumers. Although a number of such dialogues have been held since 1997, this was the first to use artmaking to help disparate groups share perceptions as equals and begin to build partnerships. The arts-based approach to PAR enabled diverse participants to build trust and begin to create mutual understanding; art therapists began to integrate new perspectives into their professional attitudes and practices. (p. 86)

Temple, M., & McVittie, C. (2005). Ethical and practical issues in using visual methodologies: The legacy of research-originating products. *Qualitative Research in Psychology*, 2, 227-239. (Normal & Outpatient/Qualitative) (SD)

Titus, J. E., & Sinacore, A. L. (2013). Art-making and well-being in healthy young adult women. *The Arts in Psychotherapy*, 40(1), 29-36. (NG)

Van der Vennet, R. , & Serice, S. (2012). Can coloring mandalas reduce anxiety? A replication study. *Art Therapy: Journal of the American Art Therapy Association*, 29(2), 87-92. (Normal & Outpatient/Quantitative) (RV)

This experimental study replicated Curry and Kasser's (2005) research that tested whether coloring a mandala would reduce anxiety. After inducing an anxious mood via a writing activity, participants were randomly assigned to three groups that colored either a mandala, a plaid design, or on a blank paper. Anxiety level was measured with the State Anxiety Inventory at baseline, after the writing exercise, and after coloring. Results support the hypothesis that coloring a mandala reduces anxiety to a significantly greater degree than coloring a plaid design or coloring on a blank paper. Implications for the field of art therapy are discussed.

Van Lith, T. (2008). A phenomenological investigation of art therapy to assist transition to a psychosocial residential setting. *Art Therapy: Journal of the American Art Therapy Association*, 25(1), 24-31. (Normal & Outpatient/Qualitative) (PSJ)

This study sought to investigate the use of art therapy to assist a young person with mental illness making a transition from long-term inpatient care to a psychosocial residential, rehabilitation setting. An art-based phenomenological case study method was used to investigate a lived experience of this transition. The participant attended 11 art therapy sessions and used a visual journal daily over a six-week period shortly after the move to the

new setting. Data analysis identified themes and visual features that appeared repeatedly in the images and enhanced the description of the participant's experience. Results showed that the transitional process of moving into a community setting involved a journey of learning, self-development, and maturation. Art therapy helped the process of life style transition, especially through the use of a visual journal that functioned as a continuous outlet for guiding self expression and self-identity. (p. 24)

11. Posttraumatic Stress Disorder and Trauma

Chapman, L. M., Morabito, D., Ladakakos, C., Schreier, H., & Knudson, M. M. (2001). The effectiveness of art therapy interventions in reducing Posttraumatic Stress Disorder (PTSD) symptoms in pediatric trauma patients. *Art Therapy: Journal of the American Art Therapy Association, 18*(2), 100-104.

Aim: Although posttraumatic stress disorder (PTSD) in children as been extensively studied during the past 15 years, little research exists regarding the efficacy of treatment interventions.

Method: This report describes an outcome-based art therapy research project currently conducted at a large urban hospital trauma center. Included are the theoretical rationale and overview of an art therapy treatment intervention called the Chapman Art Therapy Treatment Intervention (CATTI) designed to reduce PTSD symptoms in pediatric trauma patients. Use in this study, the CATTI was evaluated for efficacy in measuring the reduction of PTSD symptoms at intervals of 1 week, 1 month, and 6 months after discharge from the hospital. "The study is a prospective, randomized cohort design. Subjects were [58] [31 in the art therapy treatment group; 27 in the control group] children 7 to 17 years [mean = 10 years] who had been admitted to a Level I Trauma Center for traumatic injuries...of sufficient severity to require" a minimum hospitalization of 24 hours (p. 101) [mean length of stay = 4.4 days] and who scored ≤ 12 on the PTSD-I. Exclusion criteria were admissions for "burns, child abuse, and severe head injury...(Abbreviated Injury Scale ≥ 3 " (p. 101). Baseline measurement tools were: (1) University of California at Los Angeles Post Traumatic Stress Disorder Index (PTSD-I) Child or Adolescent Version (Rodriguez, Steinberg, & Pynoos, 1997), (2) University of California at Lost Angeles Post Traumatic Stress Disorder Index (PTSD-I) Parent Version (Rodriquez, Steinberg, & Pynoos, 1997), (3) Post traumatic Stress Disorder Diagnostic Scale (Foa, 1995), (4) Family Environment Scale (Moos & Moos, 1994), and (5) Nursing Checklist (three shifts) (modified version of PTSD RI-Parent Version).

Results: An early analysis of the data does not indicate statistically significant differences [statistics were not reported in the article; visual examination of graphs was provided] in the reduction of PTSD symptoms between the experimental and control groups. However, there is evidence [no statistics provided in article] that the children receiving the art therapy intervention did show a reduction in acute stress symptoms. Graphed results (no statistics) were provided for mean PTSD-RI Scores at baseline, 1 week, and 1 month. Mean scores for 6 months were not given. Percent of change in each group was given comparing baseline to 1 week and baseline to 1 month. It was difficult to determine the exact percentage based on the graphs and numerical data was not provided in the article. However, it was apparent that the mean PTSD-RI scores decreased for both the control and intervention groups, although more so for the intervention group. (Chapman, Morabito, Ladakakos, Schrerer, & Knudson, 2001, p 100; abstract modified by St. John, 8/14/05)

Limitations: only preliminary data was reported; data was only reported for one measure; it used a fairly small sample size; only mild to moderate injuries were reported for the sample.

Strengths: use of multiple measures, random assignment, measurements at three points in time. (Limitations & Strengths by Kaiser, 8/14/05)

Cicione, R.M., Fontaine, L.A., Williams, C.N. (2002). Trauma Relief Unlimited: An outcome study of a new treatment method. *Trauma and Loss: Research and Interventions*, 2(2), 25-33.

Gantt, L., & Tinnin, L. W. (2007). Intensive trauma therapy of PTSD and dissociation: An outcome study. [*The Arts in Psychotherapy*, 34\(1\), 68-80.](#) (Normal & Outpatient/Quantitative) (PSJ)

Greenwood, H. (2011). Long term individual art psychotherapy. Art for art's sake: The effect of early relational trauma. *International Journal of Art Therapy*, 16(1), 41-51. (SD)

Grigsby, J. P. (1987). Single case study: The use of imagery in the treatment of posttraumatic stress disorder. *The Journal of Nervous and Mental Disease*, 175(1), 55-59.

Howard, R. (1990). Art therapy as an isomorphic intervention in the treatment of a client with Post-traumatic Stress Disorder. *American Journal of Art Therapy*, 28(3), 79-86.

Aim: This paper describes the use of art therapy with a woman who developed traumatic neurosis or Post-traumatic Stress Disorder (PTSD) subsequent to childhood victimization through physical and sexual assault.

Hypothesis: It was hypothesized that art therapy could be used as an isomorphic intervention in the treatment of PTSD. Isomorphism is defined as a match of the style of therapeutic intervention to the style of the problematic pattern manifest in PTSD; both involve imagery and distancing processes. As such, art therapy could be an effective tool for increasing the client's ability to connect historic imagery and current feelings, with the attendant benefits of an increased level of comfort in dealing with the original trauma as well as heightened self-esteem.

Method: The observation/treatment/observation (ABA) was the single-subject research design used. The *Beck's Depression Inventory* was the pre-post-test assessment instrument. In addition, instruments developed to monitor feelings and imagery were used over the 9-week treatment period. These were the *Feelings Inventory (FI)* (used three times weekly), the *Imagery Inventory (II)* (used as needed), and the *Construct Chart (CC)* (used daily by both the client and therapist); these are provided in the article (pp. 82-93). Materials were "easily controlled media like markers, collage, and construction paper, and fluid media like tempera paints" selected by the client.

Results: indicated a reduction in stress and increased self-awareness. Pre-test BDI score was 17 (borderline clinical depression); post-test was 13 (mid-range mild mood disturbance). Graphed results of the FI, II, and CC are not given. (Howard, 1990, p. 79; Abstract modified by St. John, 8/14/05)

Lahad, M., Farhi, M., Leykin, D., & Kaplansky, N. (2010). Preliminary study of a new integrative approach in treating post-traumatic stress disorder: SEE FAR CBT. *The Arts in Psychotherapy*, 37(5), 391-399. (Experimental, Adults, PTSD) (PSJ)

Lyshak-Stelzer, F., Singer, P., St. John, P., & Chemtob, C. M. (2007). Art therapy for adolescents with Posttraumatic Stress Disorder symptoms: [*A pilot study. Art Therapy: Journal of the American Art Therapy Association*, 24\(4\), 163-169.](#) (Posttraumatic Stress Disorder & Trauma/Quantitative) (DB & PSJ)

This study examined the efficacy of an adjunctive trauma-focused art therapy intervention in reducing chronic child posttraumatic stress disorder (PTSD) symptoms in an inpatient psychiatric facility for youth. We compared 2 treatment conditions, each delivered in one 1-hour group sessions over 16 weeks: (a) a trauma-focused expressive art therapy protocol (TF-ART) and (b) a treatment-as-usual (TAU) control condition, the standard arts-and-craft-making activity used as the two participating facilities. Youths were randomized to either treatment condition, and assessed before and after treatment. The principal outcome measure was the UCLA PTSD Reaction Index, administered as an interview. There was a significant treatment-by-condition interaction indicating that the adolescents in the TF-ART condition had greater reduction in PTSD symptom severity than youths in the TAU condition. TF-ART was not found to be associated with more behavioral problems during the treatment period. Results indicate that TF-ART may be a promising adjunctive treatment for inpatient adolescents with PTSD symptoms. (p. 163)

Morgan, C. A., & Johnson, D. R. (1995). Use of a drawing task in the treatment of nightmares in combat-related Post-traumatic Stress Disorder. *Art Therapy: Journal of the American Art Therapy Association*, 12(4), 244-247.

Aim: Treatment of nightmares in two Vietnam veterans who met DSM-III-R criteria for post-traumatic stress disorder (PTSD) (established by Spitzer & Williams [1985] Structured Clinical Interview for Diagnosis) was conducted comparing a drawing task with a writing task.

Hypothesis: The hypothesis was that the isomorphism between visual imagery and the visual modality of nightmares would provide a more effective means of transforming and integrating the traumatic material into normal cognitive schemas.

Method: In a 12-week intervention in which drawing and writing were alternated (ABAB or BABA), both subjects reported reduction in frequency and intensity of their nightmares under the drawing condition. Each week participants rated four variables: "Frequency of the recurrent nightmare, Intensity of the nightmare, and Startle upon awakening from the nightmare were rated on 5-point Likert scales (0 – 4). Difficulty going back to sleep after a nightmare (more than one hour) was indicated by a yes/no response. An overall measure of Nightmare Severity was created by multiplying frequency by intensity of nightmares" (p. 245).

Results: When writing and drawing conditions were compared there was a significant decrease under the drawing condition for both participants (Frequency: $p < .01$; Intensity: $p < .01$; Severity: $p < .01$; Sleep Problem: $p < .001$; Startle: $p < .001$). Findings provide support for more extensive study of art therapy methods in post-traumatic stress disorder. (Morgan & Johnson, 1995, p. 244; Abstract modified by St. John, 8/14/05)

Morgan, K. E., & White, P. R. (2003). The functions of art-making in CIsD with children and youth. *Int J Emerg Ment Health*, 5(2), 61-76.

Orr, P. P. (2007). Art therapy with children after a disaster: A content analysis. *The Arts in Psychotherapy*, 34(4), 350-361. (Posttraumatic Stress Disorder & Trauma/Meta-Analyses) (PSJ)

Pepin-Wakefield, Y. (2008). The use of projective drawings to determine visual themes in young Kuwaiti women impacted by the Iraq invasion. [*International Journal of Art and Design Education*, 27\(1\), 70-82.](#) (Posttraumatic Stress Disorder & Trauma/Qualitative) (SD)

Samoray, J. (2006). The healing effects of creative expression experienced by people who identify themselves as having compassion fatigue: A phenomenological study. *Dissertation Abstracts International*, 66(9-B), 5103.

Semi-structured interviews were used to collect qualitative phenomenological data from 11 trauma patients to explore their experience with the effects of creative expression on their stress and fatigue. The study results supported that creative expression helped in reducing stress and symptoms of compassion fatigue, increasing in healing, a sense of well-being and purpose (RV).

Schreier, H., Ladakakos, C., Morabito, D., Chapman, L., & Knudson, M. M. (2005). Posttraumatic stress symptoms in children after mild to moderate pediatric trauma: A longitudinal examination of symptom prevalence, correlates, and parent-child symptom reporting. *Journal of Trauma-Injury Infection & Critical Care*, 58(2), 353-363. (<http://www.jtrauma.com/pt/re/jtrauma/abstract.00005373-20052000-00021> 6/29/05).

12. Psychiatric and Inpatient Residential Treatment

Borchers, K. K. (1985). Do gains made in group art therapy persist? *American Journal of Art Therapy*, 23(3), 89-91.

Aim: Over the past two decades treatment of the chronically mentally ill has shifted from long hospital stays to short stays coupled with aftercare in a community setting. Rapid discharge policies on the part of hospitals dictate effective community-based outpatient services to minimize readmissions to the hospital, the “revolving-door” phenomenon.

Aftercare (post-hospital) services for persons with severe and chronic mental illness are designed to enhance—or at least, maintain—patients’ level of functioning and thereby prolong their stay in the community. A combination of supportive therapy, psychotherapy, socialization, interdisciplinary therapies, and psychotropic medications characterize aftercare.

Art therapy seems particularly suited for aftercare patients since many of them have trouble communicating in words. Also, since art therapy can focus on the expression of reality, it may counteract the tendency of chronically mentally ill patients to withdraw into fantasy. However, not all therapists recognize art therapy as a form of treatment with long term benefits (Richardson & Gnanapragasam, 1979). The research described below addresses itself to the value of art therapy as a method of treatment in aftercare and attempts to determine whether the gains made in such treatment have a lasting effect.

Original Study – Method: “In the latter part of 1979 group art therapy was instituted as a treatment adjunctive to the medical support services of a large central psychiatric clinic in a large metropolitan area. The clinic’s forty patients were randomly assigned to one of two groups, those selected to receive art therapy, constituted the Experimental group. The remaining half of the patients were designated the Control group. A total of ten art therapy sessions were held, with each session lasting an hour and a half. Most of the clinic’s patients had been hospitalized earlier for a major psychiatric illness and were now relatively stabilized on psychotropic medicines” (p. 89). Participants were pre and post-tested. The *Rosenberg Self-Esteem Scale* (Rosenberg, 1965) was used to measure self-esteem. The *Progress Evaluation Scales* (Ihilevich & Gleser, 1979) were used to measure social interaction, as seen in “personal, social, and community adjustment” (p. 89). “In addition, the therapists of the patients in both groups were asked to evaluate each client (using the Progress Evaluation Scales) at the beginning and at completion of the group art therapy program. A one-way analysis of variance was used “to determine if there were significant differences between the pre- and post-test scores for both the Progress Evaluation Scales

(PES) and the Rosenberg Self-Esteem Scale...[F]or the Experimental group...patients' scores on the 'Attitude Toward Self' scale of the PES show[ed] significant improvement ($p > .01$) from pre- to post-test" (p. 89). No significant change was found for the Control or Dropout groups. "The Experimental group (unlike the Control and Dropout groups) also was rated *by the therapists* as significantly improved in terms of the 'Getting Along with Others' scale of the PES ($p > .01$). A slight, but not significant improvement in self-esteem was found for the Experimental group; the Control and Dropout groups also showed slight improvements on this measure.

Follow-Up Study – Aim: Follow-up Study of Wehling and others' research (1980). Do benefits of art therapy continue after treatment itself?

Hypothesis: "the gains of the Experimental group as determined at the conclusion of the first study (that is, improved self-esteem as rated by the patients and better social adjustment as rated by the therapists) would still be evident nine months after the art therapy sessions had ended" (p. 89).

Method: The sample consisted of 24 of the original 28 patients who had completed the pre- and post-tests on the original study. These patients completed the PES, as did their therapists. Means were reported for two variables: "Getting Along with Others (GET)" and "Attitude Toward Self (ATS)". Only patients, not therapists, completed the *Rosenberg Self-Esteem Scale*.

Results: Only "the Experimental group registered higher scores for the variables ATS and GET on the post-test at the conclusion of the art therapy sessions than they registered at the beginning (pre-test), in the follow-up trial nine months later their scores still exceeded those of the pre-test trial, although not at a statistically significant level...for both the patients' self-ratings and the therapists' ratings" (pp. 89-91). However, the hypothesis was supported because the Experimental group maintained its gains over time. "[O]n the Rosenberg Self-Esteem scale, *all three* groups showed improved self-esteem both as measured in the post-test and the follow-up test. Thus all findings must be interpreted with caution" (p. 90). Means are reported on tables but outcomes of calculations of significance level are not provided. (Borchers, 1985, p. 89; Abstract modified by St. John, 8/14/05)

Crawford, M., Killaspy, H., Kalaitzaki, E., Barrett, B., Byford, S., Patterson, S., ...Waller, D. (2010). The MATISSE study: A randomized trial of group art therapy for people with schizophrenia. *BMC Psychiatry*, 10(65), 1-9. Available from <http://www.biomedcentral.com/1471-244X/10/65>. (SD)

Crawford, M. J., Killaspy, H., Barnes, T.R., Barrett, B., Byford, S., Clayton, K., ...Waller, D. (2012). Group art therapy as an adjunctive treatment for people with schizophrenia: A randomized controlled trial (MATISSE). *Health Technology Assessment*, 16(8), (ISSN 1366-5278). Retrieved from Health Technology Assessment NIHR HTA programme www.hta.ac.uk . (RV)

Dere-Meyer, C., Bender, B., Metz, E., & Diaz, K. (2011). Psychotropic medications and art therapy: Overview of literature and clinical considerations. *The Arts in Psychotherapy*, 38(1), 29-35. (NG).

Fragar, D. C., Coyne, L., Lyle, J., Coulter, P. L., Graham, P., Sargent, J., & Allen, J. G. (1999). Which treatments help? The patient's perspective. *Bulletin of the Menninger Clinic*, 63(3) 388-400.

Green, B. L., Wehling, C., & Talsky, G. J. (1987). Group art therapy as an adjunct to treatment for chronic outpatients. *Hospital & Community Psychiatry*, 38(9), 988-991.

- Holttum, S. & Huet, V. (2014). The MATISSE trial-A critique: Does art therapy really have nothing to offer people with a diagnosis of schizophrenia? *Sage Publications*. Retrieved from <http://sgo.sagepub.com/content/4/2/2158244014532930>.
- Green, B. L., Wehling, C., & Talsky, G. J. (1987). Group art therapy as an adjunct to treatment for chronic outpatients. *Hospital & Community Psychiatry*, 38(9), 988-991.
- Hoshino, J., Silbert, R., Knapp, N., & Weaver, K. A. (1998). A comparative analysis of pre- and post-electroconvulsive therapy drawings. *Arts in Psychotherapy*, 25(3), 189-194.
- Kymissis, P., Christenson, E., Swanson, A. J., & Orlowski, B. (1996). Group treatment of adolescent inpatients: A pilot study using a structured therapy approach. *Journal of Child & Adolescent Group Therapy*, 6(1), 45-52.
- Miller, C. (1993). The effects of art history-enriched art therapy on anxiety, time on task, and art product quality. *Art Therapy: Journal of the American Art Therapy Association*, 10(4), 194-200.

Aim & Method: The effects of an art history enrichment art therapy task on anxiety, time on task, and at product quality among 13 chronic adult psychiatric day hospital patients were investigated using a repeated-measures, quasi-experimental design. State-anxiety was measured with the *State-Trait Anxiety Inventory* (Spielberger, 1983). Art product organization level was assessed with the *Art Description Scales* (Miller & Miller, 1992). The author to the nearest 5 minutes measured time on task. Two 1 ½ hour sessions were conducted one week apart to reduce the “practice effect.” Under the control condition, participants were asked to “paint freeform shapes” (p. 196). Under the experimental conditions, participants were given a short lecture on Kandinsky and viewed his work, then asked to structure the painting: draw “three curving lines across the paper that intersect with each other at a few points” (p. 196).

Results: The results indicated the art history enrichment task reduced anxiety ($p < .05$) and increased time on task ($p < .002$). Art organization level tended toward a significant increase ($p = .075$) compared with a control condition. The findings are congruent with the literature concerning supportive art therapy and suggest that the use of art history enrichment in art therapy may be helpful with this population. (Miller, 1993, p. 194; Abstract modified by St. John, 8/14/05)

- Patterson, S. Crawford, M., Ainsworth, E., & Waller, D. (2011). Art therapy for people diagnosed with schizophrenia: Therapists’ views about what changes, how and for whom. *International Journal of Art Therapy: Inscape*, 16(2), 70-80. (AB)
- terson, S., Debate, J., Anju, S., Waller, D., & Crawford, M. (2011). Provision and practice of art therapy for people with schizophrenia: Results of a national survey. *Journal of Mental Health*, 20(4), 328-335. (SD)
- Richardson, P., Jones, K., Evans, C., Stevens, P., & Rowe, A. (2007). Exploratory RCT of art therapy as an adjunctive treatment in schizophrenia. [*Journal of Mental Health*, 16\(4\), 483-491.](#) (Psychiatric/Quantitative) (SD)
- Ruddy, R., & Milnes, D. (2003). Art therapy for schizophrenia or schizophrenia-like illnesses. *Cochrane Database Syst Rev.* (2), CD003728.
- Schindler, V. P., & Pletnick, C. (2006). Role development applied to art therapy treatment of an artist diagnosed with schizophrenia. [*Art Therapy: Journal of the American Art Therapy Association*, 23\(3\), 126-131.](#) (Psychiatric/Qualitative) (PSJ)

Role Development is a theory-based, individualized intervention developed for health care practitioners, including art therapists, to assist individual diagnosed with schizophrenia to

learn roles and their underlying task and interpersonal skills. The role of artist is particularly suited to this intervention. This paper describes the role development model and methods for implementation, two evidence-based research studies examining the effectiveness of Role Development, and the application of role development to art therapy. A case study specifically describing the process of role development in art therapy treatment is provided. (p. 126)

- Shennum, W. (1987). Expressive therapy in residential treatment: Effects on children's behavior in the treatment milieu. *Child & Youth Care Quarterly*, 16(2), 81-90.**
- Smeijsters, H., & Cleven, G. (2006). The treatment of aggression using arts therapies in forensic psychiatry: Results of a qualitative inquiry. *The Arts in Psychotherapy*, 33(1), 37-58. (Psychiatric/Qualitative) (PSJ)**
- Stickley, T., & Hui, A. (2012). Arts-in-Residence: Taking 'bricks off shoulders' in adult mental health inpatient care. *Journal of Psychiatric and Mental Health Nursing*, 19(5), 402-409. (SD)**
- Tibbetts, T. J., & Stone, B. (1990). Short-term art therapy with seriously emotionally disturbed adolescents. *The Arts in Psychotherapy*, 17, 139-146.**
- Thyme, K., Sundin, G., Lindstrom, H. & Wiberg, B. (2007). The outcome of short-term psychodynamic art therapy compared to short-term psychodynamic verbal therapy for depressed women. *Psychoanalytic Psychotherapy*, 21(3), 250-264. (SD)**

13. School / Academic

- Chin, R. J., Chin, M. M., Palumbo, P., Palombo, C., Bannasch, G., & Cross, P. M. (1980). Project Reach Out: Building social skills through art and video. *The Arts in Psychotherapy*, 7, 281-284.**
- Darrell, E., & Wheeler, M. (1984). Using art therapy techniques to help underachieving seventh grade junior high school students. *The Arts in Psychotherapy*, 11(4), 289-292.**
- *Freilich, R., & Shechtman, Z. (2010). The contribution of art therapy to the social, emotional, and academic adjustment of children with learning disabilities. *The Arts in Psychotherapy*, 37(1), 8-12.**
- *Harvey, S. (1989). Creative arts therapies in the classroom: A study of cognitive, emotional, and motivational changes. *American Journal of Dance Therapy*, 11(2), 85-100.**
- Jang, H., & Choi, S. (2012). Increasing ego-resilience using clay with low SES (Social Economic Status) adolescents in group art therapy. *The Arts in Psychotherapy*, 39(4), 245-250. (NG).**
- Mankauskiene, J., & Vaitkeviciene, A. (2009). Changes in creativity in junior high school students after applying art therapy methods. *Special Education*, 2(21), 131-137. (Normal & Outpatient/Quantitative) (SD)**
- Pleasant-Metcalf, A. M., & Rosal, M. L. (1997). The use of art therapy to improve academic performance. *Art Therapy: Journal of the American Art Therapy Association*, 14(1), 23 – 29.**

Aim: The increased divorce rate in the United States has become a source of concern for children and adolescents. It is estimated that in 1990, one out of every three children under the age of 18 years will have divorced parents (Hargreaves, 1991). Recent research found

that children and adolescents from divorced families might experience decreased academic performance.

Method: In this paper, the effectiveness of individual art therapy with a 12-year-old female whose academic performance decreased after her parents divorced is examined. An AB single subject design was implemented. To study changes in self-concept the Piers-Harris Children's Self-Concept Scale (CSCS) was administered as a pre/post test. Academic performance was based on "three trimester report card periods...: (1) the final report card of the sixth grade, (2) the first trimester of the seventh grade, and (3) the second trimester of the seventh grade" (p. 25). Ten individual art therapy treatment sessions over a 5-week period focused on problem-solving skills and self-concept as a means of improving school performance.

Results: Results indicate a notable increase (data analysis was based on visual analysis of graphed raw scores) on all seven self-concept subtests and in academic performance. Art therapy was found to be a useful school-based intervention for this client. (Pleasant-Metcalf & Rosal, 1997, p. 23; Abstract modified by St. John, 8/14/05)

Pond, S. St. C. (1998). Acceptance and belonging: The promotion of acceptance and belonging within group art therapy: A study of two lonely third grade students. *American Journal of Art Therapy, 36*(3), 81-89.

Aim & Method: Two third grade students, one boy and one girl, participated in an eight-week art therapy intervention plan designed to address their reported loneliness. Both were members of a seven-member art therapy social skills group in a school setting, designed to help children examine their attitudes and beliefs about relationships. Three art therapy interventions, employing a variety of media, focused on relationships in general, relationships within the group, and on strategies for meeting personal needs within the group. Both participants completed Asher's *Children's Loneliness Scale (CLQ)* (Corcoran & Fisher, 1994), before and after the intervention. In addition, they completed a direct measure, the *Self Inventory of Loneliness (SIL)* (developed for this study; presented on p. 84 of article; 5-point Likert self-report scale), on a bi-weekly basis to assess feelings of connectedness with others. Co-led, group art therapy was designed to promote "social skills and self esteem" and treatment focused "on understanding relationships and communication" (p. 84). "...eight forty-minute sessions held...a ninth sessions was added...to complete the final group intervention" (p. 85). Treatment was based on cognitive-behavioral theory.

Results: Results were mixed for both children. On the CLQ, both children's scores increased, suggesting "feelings of increased loneliness" (p. 86). On the SLQ, "Michelle's ratings fluctuated throughout the assessment period" (p. 86) with a final rating improving by 1 point. "The ratings for Charles were inconsistent, but indicated improvement in some areas" (p. 86) with a final rating improving by 2 points. (Pond, 1998, p. 81; Abstract modified by St. John, 8/14/05)

Roghanchi, M., Mohamad, A. R., Mey, S. C., Momeni, K. M., & Golmohamadian M. (2013). The effect of integrating rational emotive behavior therapy and art therapy on self-esteem and resilience. *The Arts in Psychotherapy, 40*(2), 179-184. (NG).

Rosal, M. L. (1993). Comparative group art therapy research to evaluate changes in locus of control in behavior disordered children. *The Arts in Psychotherapy, 20*, 231-241.

Rosal, M. L., McCullouch-Vislislis, S., & Neece, S. (1997). Keeping students in school: An art therapy program to benefit ninth-grade students. *Art Therapy: Journal of the American Art Therapy Association, 14*(1), 30-36.

Aim & Method: The pilot study discussed in this article involved the integration of art therapy into the ninth-grade English classroom of an urban high school. The three goals of the study were to reduce dropout rates, to decrease school failure, and to improve students' attitudes about school, family, and self. The data from three measures indicated that the pilot project was successful in reaching its goals. The discussion of artwork illustrates the success of the program, and ideas for future programming and research are outlined. Participants were "50 students... from two ninth-grade English classes at an urban public high school" ages 13 – 15 years. Students were pre/post tested using the 52-item *Jefferson County Public Schools Student Attitude Inventory (SAI)* to measure issues related to school, family dynamics, and perception of self. Data also were gleaned from reports cards and number of dropouts per academic year.

Results: A *t*-test analysis showed significant changes from pre to post test ($p \leq .001$) "in the attitudes of the students" (p. 32). "None of the 50 students dropped out or failed ninth grade" (p. 33). (Rosal, McCullough-Vislisel, & Neece, 1997, p. 30; Abstract modified by St. John, 8/14/05)

Rousseau, C., Drapeau, A., & Lacroix, L. (2005). Evaluation of a classroom program of creative expression workshops for refugee and immigrant children. [*The Journal of Child Psychology and Psychiatry and Allied Disciplines*, 46\(2\)](#), 180-185. (School/Academic/Quantitative) (DB)

***Silver, R. A., & Lavin, C. (1997). The role of art in developing and evaluating cognitive skills. *Journal of Learning Disabilities*, 10, 416-424.**

Spier, E. (2010). Group art therapy with eight-grade students transitioning to high school. *Art Therapy: Journal of the American Art Therapy Association*, 27(2), 75-83.

This study examined the effectiveness of a group art therapy intervention within a school setting to increase coping skills and decrease disruptive behaviors in a group of 6 eighth-grade students at risk for making a poor transition to high school. The mixed-method AB single-case experiment measured each individual's changes in behavior and coping from baseline (A-phase) to post-intervention (B-phase). Changes in pre- and post-intervention "Me in Ninth Grade" drawings also suggested improved ability to anticipate social roles and an increased sense of school belonging. Results partially supported the hypothesis that the school art therapy group can be beneficial in decreasing disruptive behaviors and increasing coping skills for the transition to high school. (Experimental; School) (PSJ)

Stanley, P., & Miller, M. (1993). Short-term art therapy with an adolescent male. *The Arts in Psychotherapy*, 20(5), 397-402.

Wallace-DiGarbo, A., & Hill, D. C. (2006). Art as agency: Exploring empowerment of at-risk youth. [*Art Therapy: Journal of the American Art Therapy Association*, 23 \(3\)](#), 119-125. (School/Academic/Quantitative) (PSJ)

This report describes an art-based intervention program with at-risk youth that was inspired by the Project Self-Discovery model (Milkman, Wanberg, & Robinson, 1996). Twelve middle-school students from a small city in a mid-Atlantic state participated in the program. The program goals included making art in order to empower the participants through self-expression and community building. Complete data were obtained for six of the participants. The probabilities (not chance) that the program produced positive trends in change ranged from 70% to 80%. Two dimensions – attitudes and psychological adjustment – reached the highest probabilities ($p = .078$). The small sample size and the brief nature of the intervention (10 hours total) limited both the ability to generalize and the statistical power of the analysis. (p. 119)

White, K. & Allen, R. (1971). Arts counseling in an educational setting: Self-concept change among pre- adolescent boys. *Journal of School Psychology, 9*, 218-224.

14. Sexual Abuse / Abuse

Brooke, S. L. (1995). Art therapy: An approach to working with sexual abuse survivors. *The Arts in Psychotherapy, 22*, 447-466.

Limitations: small sample size and lack of random assignment reduce generalizability, only one measurement used, only one variable examined. (D. Kaiser, 8/14/05)

Strengths: Evidence suggesting that art therapy improves aspects of self-esteem. (D. Kaiser, 8/14/05)

Carr, M. B., & Vandiver, T. A. (2003). Effects of instructional art projects on children's behavioral responses and creativity within an emergency shelter. *Art Therapy: Journal of the American Art Therapy Association, 20*(3), 157- 162.

Aim & Method: The effects of instructional art projects on children's behavioral responses and creativity were compared in a sample of ten 4- to 13-year-old children residing in an emergency shelter. Children participated in three art projects selected to elicit self-expression, empathy, and mastery. The projects differed in the amount of instructions and materials. One project involved multiple instructions and materials; another involved few instructions; and the third involved no preliminary stimulation or instructions and allowed the children to choose their subject and materials. Measurement tools were: (1) "A checklist, [that] included the dependent variables, [that] recorded the children's behavioral responses and creative/design elements (Figure 1)" (p. 109). Presence or absence of responses and elements were recorded (1 = presence; 0 = absence); possible range = 0 – 11 positive for behavioral and artistic elements; 0 – 2 for negative behavioral responses. Behavioral observation was during the three 1-hour, weekly art therapy sessions. Artwork produced during each session was analyzed using a Design Elements scale, based on Torrance (1988) and Lauer (1979).

Results: "Correlated *t* tests were performed to compare the differences in means on positive and negative outcome of children's behavioral responses and creative/design elements among the three projects" (p. 160). It was found that children produced more formed expressions and creative/design elements and less chaotic discharge and stereotypic art through the art project that involved few instructions and few materials ($p < .04$, one-tailed) versus involved, "multiple instructions and materials" (p. 161). The same effect was found for measures of "less chaotic discharge and stereotypic art" ($p < .03$) and when compared with "no instructions and allowed for the child's choice of materials" ($p = .04$, one-tailed). (Carr & Vandiver, 2003, p. 157; P. St. John, 8/14/05)

Limitations: small sample, lack of randomization, lack of control group, use of only one rater who was not blind to the study.

Strengths: provide preliminary evidence on degree of structure, amount of media leading to positive behaviors and by implication resilient attributes. (Abstract by Kaiser, 8/14/05)

Hunter, S. V., & Rosevear, S. (2011). Evaluating a creative arts program designed for children who have been sexually abused. *ANZJATA: The Australian and New Zealand Journal of Arts Therapy Journal, 6*(1), 39. (DB, RV)

Peacock, M. E. (1991). A personal construct approach to art therapy in the treatment of post sexual abuse trauma. *American Journal of Art Therapy, 29*(4), 100-109.

Aim: Individual art therapy was introduced into the treatment of a 40-year-old woman suffering from Post Sexual Abuse Trauma (PSAT) (Briere & Runtz, 1987).

The hypothesis in this A-B-A single subject study states that art therapy would facilitate increased awareness and expression of feelings, and would alleviate anxiety, depression, and low self-esteem. Personal construct psychology provided a framework for assessment and treatment.

Method: Through art experiences the client addressed intrusive imagery, released affect related to childhood trauma, reframed and integrated abreacted intrusive imagery, and achieved increased self-awareness and control. "Three standardized measures were used to assess changes in levels of self-esteem, anxiety, and depression. In addition, a repertory grid was administered pre- and posttreatment, and a daily self-report form was used throughout treatment" (p. 101). The pre-post test instruments were: (1) *The Index of Self-Esteem (ISE)* (Hudson, 1982), the *Self Rating Anxiety Scale (SAS)* (Zung, 1971), and the *Self-Rating Depression Scale (SDS)* (Zung, 1965). (All instruments are provided in the article, pp. 102-103). Treatment consisted of daily art therapy sessions (excluding Sunday) "for the remaining 10 days of Jane's hospitalization" (p. 103). Nine treatment tasks are given in the article (p. 104). "During the early sessions, collage and markers were provided for structured cognitive tasks. As treatment progressed, the art materials and tasks were adjusted to allow engagement with traumatic memories"...alternating "fluid expression with controlled problem solving tasks" (p. 104).

Results: Results indicated positive change in all areas except depression; art changes and subjective observation suggested positive changes in that area as well. This study demonstrated the effectiveness of art therapy and personal construct theory. (Peacock, 1991, p. 100; Abstract modified by St. John, 8/14/05)

Pifalo, T. (2006). Art therapy with sexually abused children and adolescents: Extended research study. [Art Therapy: Journal of the American Art Therapy Association, 23\(4\), 181-185.](#) (Sexual Abuse/Abuse/Quantitative) (DB & PS)

This article reports the outcome of a four-year follow-up of a pilot study using a combination of art therapy, cognitive behavioral therapy, and group process to address the therapeutic issues related to childhood sexual abuse. All group participants were evaluated using the Trauma Symptom Checklist for Children (Briere, 1995), commonly used in trauma centers, before and after their participation in an 8-week group cycle. The results of this extended study support the combined use of art therapy (AT) and cognitive behavioral therapy (CBT) as an effective intervention to reduce symptoms most often associated with childhood sexual abuse. (p. 181)

Pifalo, T. (2002). Pulling out the thorns: Art therapy with sexually abused children and adolescents. *Art Therapy: Journal of the American Art Therapy Association, 19(1), 12 – 22.*

Aim & Method: A 10-week treatment that integrated art therapy and group process was designed to target short- and long-term effects of sexual abuse in child and adolescent victims. The *Trauma Symptom Checklist* (TSCC) (Briere, 1995) was used for pre and post testing. Three groups of girls (ages 8-10 years; 11 – 13 years; and 14 – 17 years) (total N = 13) were tested for level of dysfunction. Treatment targeted symptoms associated with trauma: anxiety, depression, posttraumatic stress, anger, dissociation, and sexual preoccupation and distress.

Results: Results show a reduction in symptoms commonly associated with sexual abuse. Significant differences were found on three of the 12 subscales: Anxiety ($p < .03$), Posttraumatic Stress ($p < .02$), and Dissociation-Overt ($p < .03$). All other subscales show a

decrease in symptomatology in total group scores, but not large enough to reach significance. (Pifalo, 2002, p. 12; Abstract modified by St. John, 8/14/05)

Limitations: small sample size and lack of random assignment reduce generalizability, only one measurement used, no comparison group was used. (D. Kaiser, 8/14/05)

Strengths: all participants had reduction in trauma symptoms with 3 scales showing statistically significant reduction. (Limitations & Strengths by Kaiser, 8/14/05)

Pretorius, G., & Pfeifer, N. (2010). Group art therapy with sexually abused girls. [South African Journal of Psychology, 40\(1\), 63-73.](#) (Sexual Abuse/Abuse/Quantitative) (SD)

Waller, C. S. (1992). Art therapy with adult female incest survivors. *Art Therapy: Journal of the American Art Therapy Association, 9(3), 135-138.*

Aim: "Very little systematic research has compared different types of treatment for adult victims of sexual assault" (Resnick & Schnicke, 1990, p. 488). Art therapy research in the treatment of sexual abuse has mainly been concerned with the content of art expressions produced by clients (Spring, 1984); Ticen, 1990). Therefore, comparative studies of art therapy and group verbal therapy have the potential of aiding therapists in treating this population.

Method: Fifteen adult female incest survivors participated in this study that employed a control group (individual psychotherapy) (n = 3) and two experimental groups: verbal techniques (n = 7) and art therapy (drawing, painting, and verbal processing) (n = 5). Each group "met for eight weeks in 90 minute sessions" (p. 135). "After two and eight weeks all participants..." rated the significance of the curative factors of catharsis, cohesion, and insight in their treatments using "The Curative Climate Instrumental Instrument (Fuhriman, 1986)" (p. 136). "This instrument is a 14-item, five-point Likert Scale..." (p. 136) "...developed by Fuhriman based on Yalom's Q Sort (1975). A one-way ANOVA compared control and experimental groups' ratings and "[t]he Sandler's A-Statistic was used to determine changes in each group's ratings of the subscales after the six-week period.

Results: "Hypothesis 1 stated that art therapy will increase the value of insight in adult female incest survivors"; it was confirmed (p<.005); Hypothesis 2, that value of catharsis would increase was confirmed (p<.025); Hypothesis 3, that value of cohesion would increase was confirmed (p<.025); and Hypothesis 4, "that the art therapy group would value insight more than either the control or the verbal group after eight weeks" was *not* confirmed (p. 136). The results of this study indicate that group art therapy, using a series of structured tasks, increased the value assigned to each of these curative factors. On the rating of insight, there was little change in either the verbal or control group. On the rating of catharsis, there was increase in the verbal group but little change in the control group. On the rating of cohesion, the verbal group decreased its value and the control group increased its value. "Further research can aid clinicians in formulating additional treatment interventions and understanding more about how the process of art therapy functions" (p. 138). (Waller, 1992, p. 135; Abstract modified by St. John, 8/14/05)

Limitations: small sample size and lack of random assignment reduce generalizability, only one measurement used.

Strengths: used control and 2 experimental groups. (Limitations & Strengths by Kaiser, 8/14/05)

15. Traumatic Brain Injury (TBI)

Lazarus-Leff, B. (1998). Art therapy and the aesthetic environment as agents for change: A phenomenological investigation. *Art Therapy: Journal of the American Art Association*, 15(2), 120-126.

Aim & Method: Although most social scientists are likely to agree with the idea that the environment influences behavior and vice versa, in practice people are often considered as if they were independent of their environment. This article describes a phenomenological investigation of environmental art therapy as an agent for change. The study tested the hypothesis that improving the aesthetic quality of the environment of a 29-year old, functionally dependent person with traumatic brain injury shows a corresponding positive effect in the attitudes and behaviors of the resident's family system. The family's purposeful manipulation of the environment and creation of a "Talking Book" appears to enhance adjustment to their son. The latter was assessed to have made gains in cognitive functioning. Study interventions may have contributed to these gains through alternations in the human and nonhuman environment. Measurement tools were the Kinetic-Family-Drawing (KFD), administered to the participant's parents (with whom he lived) during the second meeting and at the end of the study to "detect what changes had occurred in the family dynamics specific to" the participant (p. 123).

Results: Subjective comparisons were made between the two sets of drawings. (Lazarus-Leff, 1998, p. 120; Abstract modified by St. John, 8/14/05)

16. Quantitative Studies (beginning 2004)

Aaron, R. E., Ringhart, K. L. & Ceballos, N. A. (2011). Arts-based interventions to reduce anxiety levels among college students. *Arts & Health*, 3, 27-38. (DK)

Arroyo, C., & Fowler, N. (2013). Before and after: A mother and infant painting group. *International Journal of Art Therapy*, 18(3), 98-112. (SD)

Bar-Sela, G., Atid, L., Danos, S., Gabay, N., & Epelbaum, R. (2007). Art therapy improved depression and influenced fatigue levels in cancer patients on chemotherapy. *Psycho-Oncology*, 16, 980-984. (SD)

Belkofer, C. M., & Konopka, L. M. (2008). Conducting art therapy research using quantitative EEG measures. *Art Therapy: Journal of the American Art Therapy Association*, 25(2), 56-63. (PS)

Bell, C. E., & Robbins, S. J. (2007). Effect of art production on negative mood: A randomized, controlled trial. *Art Therapy: Journal of the American Art Therapy Association*, 24(2), 71-75. (DB & PS)

Choi, S., & Goo, K. (2012). Holding environment: The effects of group art therapy on mother-child attachment. *The Arts in Psychotherapy*, 39(1), 19-24. (NG).

Crawford, M., Killaspy, H., Kalaitzaki, E., Barrett, B., Byford, S., Patterson, S., ...Waller, D. (2010). The MATISSE study: A randomized trial of group art therapy for people with schizophrenia. *BMC Psychiatry*, 10(65), 1-9. Available from <http://www.biomedcentral.com/1471-244X/10/65>. (SD)

Crawford, M. J., Killaspy, H., Barnes, T.R., Barrett, B., Byford, S., Clayton, K., ...Waller, D. (2012). Group art therapy as an adjunctive treatment for people with schizophrenia: A randomized controlled trial (MATISSE). *Health Technology Assessment*, 16(8), (ISSN 1366-5278). Retrieved from Health Technology Assessment NIHR HTA programme www.hta.ac.uk . (RV)

- Curl, K. (2008). Assessing stress reduction as a function of artistic creation and cognitive focus. *Art Therapy: Journal of the American Art Therapy Association*, 25(4), 164- 169. (PS)
- Curry, N. A., & Kasser, T. (2005). Can coloring mandalas reduce anxiety? *Art Therapy: Journal of the American Art Therapy Association*, 22(2), 81-85. (PS)
- DePetrillo, L., & Winner, E. (2005). Does art improve mood? A test of a key assumption underlying art therapy. *Art Therapy: Journal of the American Art Therapy Association*, 22(4), 205-212. (DB & PS)
- Drake, J. E., Coleman, K., & Winner, E. (2011). Short-term mood repair through art: Effects of medium and strategy. *Art Therapy: Journal of the American Art Therapy Association*, 28(1), 26-30.
- Elkis-Abuhoff, D. L., Goldblatt, R. B., Gaydos, M., & Convery, C. (2013). A pilot study to determine the psychological effects of manipulation of therapeutic art forms among patients with Parkinson's disease. *International Journal of Art Therapy: Inscape*, 18(3), 113-121. (AB)
- Elkis-Abuhoff, D. L., Goldblatt, R. B., Gaydos, M., & Corrato, S. (2008). Effects of clay manipulation on somatic dysfunction and emotional distress in patients with Parkinson's disease. *Art Therapy: Journal of the American Art Therapy Association*, 25(3), 122-128. (PS)
- Epp, K. (2008). Outcome-based evaluation of a social skills program using art therapy and group therapy for children on the autism spectrum. *Children & Schools*, 30(1), 27-36. (SD)
- Field, W., & Kruger, C. (2008). The effect of an art psychotherapy intervention on levels of depression and health locus of control orientations experienced by black women living with HIV. *Psychological Journal of South Africa*, 38(3), 467-478. (SD)
- Forzoni, S., Perez, M., Martignetti, A., & Crispino, S. (2010). Art therapy with cancer patients during chemotherapy sessions: an analysis of the patients' perception of helpfulness. *Palliative and Supportive Care*, 8(1), 41-48. (SD, DK)
- Freilich, R., & Shechtman, Z. (2010). The contribution of art therapy to the social, emotional, and academic adjustment of children with learning disabilities. *The Arts in Psychotherapy*, 37(2), 97-105. (Experimental) (PSJ)
- Gantt, L., & Tinnin, L. W. (2007). Intensive trauma therapy of PTSD and dissociation: An outcome study. *The Arts in Psychotherapy*, 34(1), 68-80. (PS)
- Geue, K., Richter, R., Buttstadt, M., Brahler, E., & Singer, S. (2013). An art therapy intervention for cancer patients in the ambulant aftercare: Results from a non-randomised controlled study. *European Journal of Cancer Care*, 22(3), 345-352. (SD).
- Got, I. L. S., & Cheng, S-T. (2008). The effects of art facilitation on the social functioning of people with developmental disability. *Art Therapy: Journal of the American Art Therapy Association*, 25(1), 32-37. (PS)
- Gussak, D. (2009). The effects of art therapy on male and female inmates: Advancing the research base. *The Arts in Psychotherapy*, 36(1), 5-12. (PS)
- Gussak, D. (2006). Effects of art therapy with prison inmates: A follow-up study. *The Arts in Psychotherapy*, 33(3), 188-198. (PS)

- Hartz, L., & Thick, L. (2005). Art therapy strategies to raise self-esteem in female juvenile offenders: A comparison of art psychotherapy and art as therapy approaches. *Art Therapy: Journal of the American Art Therapy Association*, 22(2), 70-80. (DB & PS)
- Hattori, H., Hattori, C., Hokao, C., Mizushima, K., & Mase, T. (2011). Controlled study on the cognitive and psychological effect of coloring and drawing in mild Alzheimer's disease patients. *Geriatrics Gerontology International*, 11, 431-437. (SD, RV)
- Henderson, P., & Rosen, D. (2007). Empirical study on the healing nature of mandalas. *Psychology of Aesthetics, Creativity, and the Arts*, 1(3), 148-154. (SD)
- Herman, P. M., & Larkey, L. K. (2006). Effects of an art-based curriculum on clinical trials attitudes and breast cancer prevention knowledge. *Health Education and Behavior*, 33(2), 664-676. (DB)
- Higenbottam, W. (2004). In her image: A study in art therapy with adolescent females. *The Canadian Art Therapy Association Journal*, 17(1), 10-16. (SD)
- Hughes, E. G., & da Silva, A.M. (2011). A pilot study assessing art therapy as a mental health intervention for subfertile women. *Human Reprod.*, 26(3), 611-615. (SD, DK)
- Hunter, S. V., & Rosevear, S. (2011). Evaluating a creative arts program designed for children who have been sexually abused. *ANZATA: The Australian and New Zealand Journal of Arts Therapy*, 6(1), 39. (DB, RV)
- Italia, S., Favara-Scacco, C., DiCataldo, A., & Russo, G. (2008). Evaluation and art therapy treatment of the burnout syndrome in oncology units. *Psycho-Oncology*, 17, 676-680. (SD)
- Jang, H., & Choi, S. (2012). Increasing ego-resilience using clay with low SES (Social Economic Status) adolescents in group art therapy. *The Arts in Psychotherapy*, 39(4), 245-250. (NG).
- Kim, S. K. (2013). A randomized, controlled study of the effects of art therapy on older Korean-Americans' healthy aging. *The Arts in Psychotherapy*, 40(1), 158-164. (RV)
- Kim, S.-K., Kim, M.-Y., Lee, J.-H., & Chun, S.-I. (2008). Art therapy outcomes in the rehabilitation treatment of a stroke patient: A case report. *Art Therapy: Journal of the American Art Therapy Association*, 25(3), 129-133. (DB & PS)
- Kimport, E. R., & Robbins, G. (2012). Efficacy of creative clay work for reducing negative mood: A randomized controlled trial. *Art Therapy: Journal of the American Art Therapy Association*, 29(2), 74-79. (RV)
- Lahad, M., Farhi, M., Leykin, D., & Kaplansky, N. (2010). Preliminary study of a new integrative approach in treating post-traumatic stress disorder: SEE FAR CBT. *The Arts in Psychotherapy*, 37(5), 391-399. (Experimental, Adults, PTSD) (PSJ)
- Lamont, S., Sutton, D., & Brunero, S. (2009). A brief report of art therapy in an inpatient mental health unit: Consumer feedback and experience. *ANZATA: The Australian and New Zealand Journal of Arts Therapy*, 4(1). (DB, RV)
- Lyshak-Stelzer, F., Singer, P., St. John, P., & Chemtob, C. M. (2007). Art therapy for adolescents with Posttraumatic Stress Disorder symptoms: A pilot study. *Art Therapy: Journal of the American Art Therapy Association*, 24(4), 163-169. (DB & PS)
- Madden, J. R., Mowry, P., Gao, D., Cullen, P. M., & Foreman, N. (2010). Creative arts therapy improves quality of life for pediatric brain tumor patients receiving outpatient chemotherapy. *Journal of Pediatric Oncology Nursing*, 27(3), 133-145. (SD, DK)

- Mercer, A., Warson, E., & Zhao, J. (2010). Visual journaling: An intervention to influence stress, anxiety and affect levels in medical students. *The Arts in Psychotherapy*, 37(2), 143-148. (Experimental) (PSJ)
- Monti, D., Peterson, C., Shakin Kunkle, E., Hauck, W., Pequignot, E., Rhodes, L., & Brainard, G. (2006). A randomized, controlled trial of Mindfulness-based Art Therapy (MBAT) for women with breast cancer. *Psycho-Oncology*, 15, 363-373. (SD)
- Mueller, J., Alie, C., Jonas, B., Brown, E., & Sherr, L. (2011). A quasi-experimental evaluation of a community-based art therapy intervention exploring the psychosocial health of children affected by HIV in South America. *Tropical Medicine and International Health*, 16(1), 57-66. (SD)
- Nainis, N., Paice, J., Ratner, J., Wirth, J., Lai, J., & Shott, S. (2006). Relieving symptoms in cancer: Innovative use of art therapy. *Journal of Pain and Symptom Management*, 31(2), 162-169. (SD)
- Oster, I., Svensk, A. C., Magnusson, E., & et al. (2006). Art therapy improves coping resources: A randomized, controlled study among women with breast cancer. *Palliative & Supportive Care*, 4(1), 57-64. (DK)
- Pifalo, T. (2006). Art therapy with sexually abused children and adolescents: Extended research study. *Art Therapy: Journal of the American Art Therapy Association*, 23(4), 181-185. (DB & PS)
- Rao, D., Nainis, N., Williams, L., Langner, D., Eisin, A., & Paice, J. (2009). Art therapy for relief of symptoms associated with HIV/AIDS. *AIDS Care*, 21(1), 64-69. (SD)
- Richardson, P., Jones, K., Evans, C., Stevens, P., & Rowe, A. (2007). Exploratory RCT of art therapy as an adjunctive treatment in schizophrenia. *Journal of Mental Health*, 16(4), 483-491. (SD)
- Roghanchi, M., Mohamad, A. R., Mey, S. C., Momeni, K. M., & Golmohamadian M. (2013). The effect of integrating rational emotive behavior therapy and art therapy on self-esteem and resilience. *The Arts in Psychotherapy*, 40(2), 179-184. (NG)
- Rousseau, C., Drapeau, A., & Lacroix, L. (2005). Evaluation of a classroom program of creative expression workshops for refugee and immigrant children. *The Journal of Child Psychology and Psychiatry and Allied Disciplines*, 46(2), 180-185. (DB)
- Rusted, J., Sheppard, L., & Waller, D. (2006). A multi-centre randomized control group trial on the use of art therapy for older people with dementia. *Group Analysis*, 39(4), 517-536. (SD)
- Salzano, A. T., Lindemann, E., & Tronsky, L. N. (2013). The effectiveness of a collaborative art-making task on reducing stress in hospice caregivers. *The Arts in Psychotherapy*, 40(1), 45-52. (NG)
- Schrade, C., Tronsky, L., & Kaiser, D. H. (2011). Physiological effects of mandala making in adults with intellectual disability. *The Arts in Psychotherapy*, 38(2), 109-113. (Experimental, Adults with Intellectual Disability) (PJS)
- Singer, S., Gotze, H., Buttstadt, M., Geue, K., Momenghalibar, A., & Bohler, U. (2010). The effects of an art education program on competencies, coping, and well-being in outpatients with cancer: Results of a prospective feasibility study. *The Arts in Psychotherapy*, 37(5), 363-369.
- Snir, S., & Wiseman, H. (2010). Attachment in romantic couples and perceptions of a joint drawing session. *The Family Journal*, 18, 116-126. (DK)

- Spier, E. (2010). Group art therapy with eight-grade students transitioning to high school. *Art Therapy: Journal of the American Art Therapy Association*, 27(2), 75-83.
- Svensk, A., Oster, I., Thyme, K., Magnusson, E., Sjodin, M., Eisemann, M., Astrom, S., & Lindh, J. (2008). Art therapy improves experienced quality of life among women undergoing treatment for breast cancer: A randomized controlled study. *European Journal of Cancer Care*, 18, 69-77. (SD)
- Thompson, L. J. M., Ander, E. E., Menon, U., Lanceley, A. & Chatterjee, H. J. (2012). Quantitative evidence for wellbeing benefits from a heritage-in-health intervention with hospital patients. *International Journal of Art Therapy: Formerly Inscape*, 17(2), 63-79. (DB, SD)
- Thyme, K. E., Sundin, E.C., Wiberg, B., & et al. (2009). Individual brief art therapy can be helpful for women with breast cancer: A randomized controlled clinical study. *Palliative & Supportive Care*, 7(1), 87-95. (DK)
- Trzaska, J. D. (2012). The use of a group mural project to increase self-esteem in high-functioning, cognitively disabled adults. *The Arts in Psychotherapy*, 39(5), 436-442. (NG)
- Van der Vennet, R., & Serice, S. (2012). Can coloring mandalas reduce anxiety? A replication study. *Art Therapy: Journal of the American Art Therapy Association*, 29(2), 87-92. (Normal & Outpatient/Quantitative) (RV)
- Wallace-DiGarbo, A., & Hill, D. C. (2006). Art as agency: Exploring empowerment of at-risk youth. *Art Therapy: Journal of the American Art Therapy Association*, 23 (3), 119-125. (PS)
- Walsh, S. M., Chang, C. Y., Schmidt, L. A., & Yoepp, J. H. (2005). Lowering stress while teaching research: A creative arts intervention in the classroom. *Journal of Nursing Education*, 44(7), 330-333. (DB)
- Walsh, S., Martin, S., & Schmidt, L. (2004). Testing the efficacy of a creative-arts intervention with family caregivers of patients with cancer. *Journal of Nursing Scholarship*, 3, 214-219. (SD)
- Westwood, J., Keyzer, C., & Evans, J. (2010). Art therapy, children 0-6 years and their families: A research project surveying the Sydney region of New South Wales, Australia. *ANZATA: The Australian and New Zealand Journal of Arts Therapy*, 5(1), 17.

17. Qualitative Studies

- Alders, A., & Levine-Madori, L. (2010). The effect of art therapy on cognitive performance of Hispanic/Latino older adults. *Art Therapy: Journal of the American Art Therapy Association*, 27(3), 127-135.
- Assoulin, E. (2010). 'I see what I am – I am what I see'- Photography and the inner self: A discussion and reflection on a heuristic art therapy final project. *ANZATA: The Australian and New Zealand Journal of Arts Therapy*, 5(1), 45. (DB, RV)
- Czamanski-Cohen, J. (2010). "Oh! Now I remember": The use of a studio approach to art therapy with internally displaced people. *The Arts in Psychotherapy*, 37(5), 407-413. (Qualitative) (PSJ)
- Davis, B. (2010). Hermeneutic methods in art therapy research with international students. *The Arts in Psychotherapy*, 37, 179-189.

This phenomenological study used hermeneutic grounded theory to study the experiences of 19 international students who participated in a 10-week art therapy group. The researcher concluded that based on the artwork and participants' writing about the art making experiences in the group that art provided a means of organizing their thinking about their cross-cultural experiences and expressing feelings about it as well. Through imagery participants addressed autonomy, identity, and personal growth related to their sojourn in a foreign culture. (Donna Kaiser, 2011)

Deaver, S., & McAuliffe, G. (2009). Reflective visual journaling during art therapy and counseling internships: A qualitative study. [Reflective Practice, 10\(5\), 615-632.](#) (SD)

Elliott, B. (2011). Arts-based and narrative inquiry in liminal experience reveal platforming as basic social psychological process. *The Arts in Psychotherapy, 38(2)*, 96-103. (Qualitative) (PJS)

Feen-Calligan, H. R. (2005). Constructing professional identify in art therapy through service-learning and practica. [Art Therapy: Journal of the American Art Therapy Association, 22\(3\), 122-131.](#) (PSJ)

Professional identify is a term used to describe both the collective identify of a profession and an individual's own sense of the professional role. This article draws from the literature exploring professional identify with attention to the issues of developing professional identity in fields such as art therapy where lower wages, fewer jobs, and the frequent need to earn additional practice credentials exist. A qualitative research project was conducted during which students participated in service-learning in conjunction with an art therapy practicum assignment. Service-learning was introduced as a pedagogy to facilitate the identity construction of art therapy students, and was found to nurture aspects of professional identity described in the literature. (p. 122)

Feen-Calligan, H., & Nevedal, D. (2008). Evaluation of an art therapy program: Client perceptions and future directions. [Art Therapy: Journal of the American Art Therapy Association, 25\(4\), 177-182.](#) (PSJ)

Program evaluation has the potential to offer many useful benefits to the field of art therapy, yet little has been published in this area. This brief report presents a practical strategy for art therapy program evaluation based on participant evaluations (N = 120) of a 10-week community based art therapy workshop. The evaluations consisted of self-reports by participants to open ended questions: (a) whether expectations were met, (b) likes and dislikes, (c) suggested changes for the workshop, (d) perceived personal changes, and (e) interest in continued participation. The report describes a participant-led evaluation tool, the evaluation findings, planned revisions in the questionnaire, and considerations for future program development, evaluation, and art therapy research. (p. 177)

Gray, B. (2011). Autoethnography and arts therapy: The arts meet healing. *ANZATA: The Australian and New Zealand Journal of Arts Therapy, 6(1)*, 67. (DB, RV)

Heenan, D. (2006). Art as therapy: An effective way of promoting positive mental health? [Disability & Society, 21\(2\), 179-191.](#) (SD)

Hosea, H. (2006). "The brush's footmarks": Parents and infants paint together in a small community art therapy group. [International Journal of Art Therapy, 11\(2\), 69-78.](#) (SD)

Huss, E. (2008). Shifting spaces and lack of spaces: Impoverished Bedouin women's experience of cultural transition through arts-based research. [Visual Anthropology, 21, 58-71.](#) (SD)

Kapitan, L., Litell, M., & Torres, A. (2011). Creative art therapy in a community's participatory research and social transformation. *Art Therapy: Journal of the American Art Therapy Association, 28*(2), 64-73.

When people come together in community to practice critical inquiry, they develop a capacity to see, reflect, and become subjects of their own development. This article describes arts-based participatory action research in partnership with a nongovernmental organization in Central America. Creative art therapy was culturally adapted and practiced on the macro level to facilitate a community's art-based research, achieving outcomes that contributed to social action and transformation. Popular education, a grassroots pedagogy that aims to transform oppressive power structures, reinforced group norms and facilitation. The results showed that community-based creative arts therapy in participatory action research strengthened the personal, spiritual, and social development of the co-researchers, which in turn multiplied broader impacts on their communities. (P. St John)

Lo, P. Y. I. (2011). A heuristic and art-based inquiry: The experience of combining mindfulness practice and art-making. *ANZATA: The Australian and New Zealand Journal of Arts Therapy, 6*(1), 51. (DB, RV)

McElroy, S., Warren, A., & Jones, F. (2006). Home-based art therapy for older adults with mental health needs: Views of clients and caregivers. [*Art Therapy: Journal of the American Art Therapy Association, 23*\(2\), 52-58.](#) (PS)

The value of art therapy for older people with mental health problems is well documented although there is a paucity of research for people who are home bound. This study, based in England, involved five clients all older people with mental health problems, receiving art therapy sessions at home. The clients and caregivers were then interviewed to ascertain their views. This study indicated that clients and caregivers do feel that art therapy can be of benefit in the home environment. These benefits include an increase in confidence and motivation, with emotional support also being valued. The study concludes that an art therapist can work in the home environment as long as he/she is flexible, organized and assertive. (p. 52)

Oggins, J. (2007). "Reversing vandalism": Coping themes in a library's community art exhibit. [*The Arts in Psychotherapy, 34*\(3\), 263-276.](#) (PSJ)

Orkibi, H. (2012). Students' artistic experience before and during graduate training. *The Arts in Psychotherapy, 39*(5), 428-435. (NG)

Oster, I., Astrom, S., Lindh, J., Magnusson, E. (2009). Women with breast cancer and gendered limits and boundaries: Art therapy as a "safe space" for enacting alternative subject positions. [*The Arts in Psychotherapy, 36*\(1\), 29-38.](#) (PSJ)

Oster, I., Magnusson, E., Thyme, K. E., Lindh, J., & Astrom, S. (2007). Art therapy for women with breast cancer: The therapeutic consequences of boundary strengthening. [*The Arts in Psychotherapy, 34*\(3\), 277-288.](#) (PSJ)

Palmer, K., & Shepard, B. (2008). An art inquiry into the experiences of a family of a child living with a chronic pain condition: A case study. *Canadian Journal of Counseling, 42*(1), 7-23. (SD)

Patterson, S. Crawford, M., Ainsworth, E., & Waller, D. (2011). Art therapy for people diagnosed with schizophrenia: Therapists' views about what changes, how and for whom. *International Journal of Art Therapy: Inscape, 16*(2), 70-80. (AB)

Pepin-Wakefield, Y. (2008). The use of projective drawings to determine visual themes in young Kuwaiti women impacted by the Iraq invasion. [International Journal of Art and Design Education, 27\(1\), 70-82.](#) (SD)

Persons, R. (2009). Art therapy with serious juvenile offenders: A phenomenological analysis. *International Journal of Offender Therapy and Comparative Criminology, 53*, 433-453.

Potash, J., & Ho, R. T. H. (2011). Drawing involves caring: Fostering relationship building through art therapy for social change. *Art Therapy: Journal of the American Art Therapy Association, 28(2)*, 74-81.

The art therapist's ability to foster the creative process in service of relationship can be a foundation for infusing a social change paradigm into existing practice. For clients affected by discrimination and stigma, art therapy can promote empathy and understanding of the societal forces involved. In this qualitative study, 46 people participated in a guided viewing experience of artworks by individuals who were living with mental illnesses. After providing data on their familiarity with mental illnesses, their attitudes, and their level of empathy, viewers created an art image in response to an exhibiting artist and participated in a discussion. Results indicated that the facilitated experience helped to foster empathy, allowed viewers to relate to the exhibiting artists, and promoted attitudinal change. By facilitating meaningful art-viewing and art-making experiences art therapists can attend both to individuals in need and to community structures that hamper full participation in society. (P. St John)

Reynolds, F., & Lim, K. H. (2007). Contribution of visual art-making to the subjective well-being of women living with cancer: A qualitative study. [The Arts in Psychotherapy, 34\(1\), 1-10.](#) (PSJ)

Reynolds, F., Lim, K., & Prior, S. (2008). Images of resistance: A qualitative enquiry into the meanings of personal artwork for women living with cancer. [Creativity Research Journal, 20\(2\), 211-220.](#) (SD)

Samoray, J. (2006). The healing effects of creative expression experienced by people who identify themselves as having compassion fatigue: A phenomenological study. *Dissertation Abstracts International, 66(9-B)*, 5103. (RV)

Schindler, V. P., & Pletnick, C. (2006). Role development applied to art therapy treatment of an artist diagnosed with schizophrenia. [Art Therapy: Journal of the American Art Therapy Association, 23\(3\), 126-131.](#) (PSJ)

Role Development is a theory-based, individualized intervention developed for health care practitioners, including art therapists, to assist individual diagnosed with schizophrenia to learn roles and their underlying task and interpersonal skills. The role of artist is particularly suited to this intervention. This paper describes the role development model and methods for implementation, two evidence-based research studies examining the effectiveness of Role Development, and the application of role development to art therapy. A case study specifically describing the process of role development in art therapy treatment is provided. (p. 126)

Singh, B. (2011). The therapeutic effects of art making in patients with cancer. *The Arts in Psychotherapy, 38(3)*, 160-163. (Qualitative; Women Artists) (PJS)

Smeijsters, H., & Cleven, G. (2006). The treatment of aggression using arts therapies in forensic psychiatry: Results of a qualitative inquiry. [The Arts in Psychotherapy, 33\(1\), 37-58.](#) (PSJ)

Spaniol, S. (2005). "Learned hopefulness": An arts-based approach to participatory action research. [Art Therapy: Journal of the American Art Therapy Association, 22\(2\), 86-91.](#) (PSJ)

This paper describes a 2-day conference at Lesley University for art therapists and people with mental illness who have experienced art therapy or make art for self-expression. Designed as a "participatory dialogue," the conference was a form of participatory action research (PAR) developed by the Center for Mental Health Services in Washington, DC, to foster collaboration between mental health professionals and consumers. Although a number of such dialogues have been held since 1997, this was the first to use artmaking to help disparate groups share perceptions as equals and begin to build partnerships. The arts-based approach to PAR enabled diverse participants to build trust and begin to create mutual understanding; art therapists began to integrate new perspectives into their professional attitudes and practices. (p. 86)

Strand, S. & Waller, D. (2010). The experience of Parkinson's: Words and images through art therapy—a pilot research study. [International Journal of Art Therapy, 15\(2\), 84-93.](#) (Parkinsons Disease, Qualitative) (MR)

This pilot study was designed to look at the impact of art therapy on individuals with Parkinson's Disease (PD) and their carers over 24 one-hour sessions of individual art therapy over six months. The individuals with PD (n = 9) and their carers averaged 16 sessions. The authors also utilized interviews after the end of art therapy treatment as a whole to both the patients and their carers (n = 5) in this qualitative study. The authors used narrative and discourse analysis approach.

Three key aspects were generated from the art therapy and interview time: relaxation, enjoyment and reflectiveness; physical engagement and control; and communication of emotion. Finally the importance of being part of research was a driving factor for some participants. The authors also reported on the need for a flexible therapeutic stance when working with individuals with PD.

Stuckey, H. (2009). Creative expression as a way of knowing in diabetes adult health education: An action research study. [Adult Education Quarterly, 60\(1\), 46-64.](#) (SD)

Stuckey, H., & Tisdell, E. (2010). The role of creative expression in diabetes: An exploration into the meaning-making process. [Qualitative Health Research, 20\(1\), 42-56.](#) (SD)

Temple, M., & McVittie, C. (2005). Ethical and practical issues in using visual methodologies: The legacy of research-originating products. [Qualitative Research in Psychology, 2, 227-239.](#) (SD)

Thomas, Y., Gray, M., McGinty, M., & Ebringer, S. (2011). Homeless adults engagement in art: First steps towards identity, recovery, and social inclusion. [Australian Occupational Therapy Journal, 58, 429-436.](#) (Adults, Qualitative) (SD, RV)

This qualitative study uses participant observation and in-depth interviews to understand the homeless adults experience in a non-government agency that uses art. The thematic results demonstrate that the art activities helped the participants engage in the community, develop new identities, routines and roles. The art experiences also provided the participants alternative activities from their typical problems of homelessness, mental health, and substance abuse which then allowed for public recognition of their artwork in art shows resulting in a sense of social inclusion. The program is described. (RV)

Titus, J. E., & Sinacore, A. L. (2013). Art-making and well-being in healthy young adult women. [The Arts in Psychotherapy, 40\(1\), 29-36.](#) (NG).

Van Lith, T. (2008). A phenomenological investigation of art therapy to assist transition to a psychosocial residential setting. [Art Therapy: Journal of the American Art Therapy Association, 25\(1\), 24-31.](#) (PSJ)

This study sought to investigate the use of art therapy to assist a young person with mental illness making a transition from long-term inpatient care to a psychosocial residential, rehabilitation setting. An art-based phenomenological case study method was used to investigate a lived experience of this transition. The participant attended 11 art therapy sessions and used a visual journal daily over a six-week period shortly after the move to the new setting. Data analysis identified themes and visual features that appeared repeatedly in the images and enhanced the description of the participant's experience. Results showed that the transitional process of moving into a community setting involved a journey of learning, self-development, and maturation. Art therapy helped the process of life style transition, especially through the use of a visual journal that functioned as a continuous outlet for guiding self expression and self-identity. (p. 24)

18. Combined Research Methodologies: Quantitative & Qualitative

Anzules, C., Haenni, C., & Golay, A. (2007). An experience of art therapy for patients suffering from obesity. [European Diabetes Nursing, 4\(2\), 72-76.](#) (Medical/Combined Methodologies) (SD)

Fish, B. J. (2008). Formative evaluation research of art-based supervision in art therapy training. [Art Therapy: Journal of the American Art Therapy Association, 25\(2\), 70-77.](#) (School/Academic/Combined Methodologies) (DB & PSJ)

Image making is a common component of art therapy supervision but its use has not yet been formally evaluated. This article describes formative evaluation research used to investigate student responses to art-based supervision in which response art was used as a primary method to contain explore, or express clinical work. Art-based supervision, as provided by one art therapy supervisor teaching in a graduate art therapy training program, was evaluated by 19 students in 3 consecutive semesters. Quantitative and qualitative data indicated general agreement that art-based supervision is a useful method. Specific examples of response art in supervision are provided. (p. 70)

Goldblatt, R., Elkis-Abuhoff, D., Gaydos, M., Rose, S., & Casey, S. (2011). Unlocking conflict through creative expression. *The Arts in Psychotherapy, 38(2), 104-108.* (NG)

Grodner, S., Braff, D. L., Janowsky, D. S., & Clopton, P. L. (1982). Efficacy of art/movement therapy in elevating mood. *Arts in Psychotherapy, 9(3), 217- 225.*

Greenwood, H., Leach, C., Lucock, M., & Noble, R. (2007). The process of long-term art therapy: A case study combining artwork with clinical outcome. [Psychotherapy Research, 17\(5\), 588-599.](#) (Normal & Outpatient/Combined Methodologies) (SD)

McNamee, C. M. (2006). Experiences with bilateral art: A retrospective study. [Art Therapy: Journal of the American Art Therapy Association, 23\(1\), 7-13.](#) (Normal & Outpatient/Combined Methodologies) (PSJ)

Recent advances in neuroscience describe the effect of experience on neural architecture. Paralleling these advances in neuroscience, recent explorations in the field of art therapy speculate on the relationship between specific therapeutic interventions and neuroplasticity, which underlines the changes in neural architecture. One such intervention, bilateral art, purposefully engages both left and right hemispheres of the brain, as well as multiple sensory systems, in responding to client-identified conflicted elements of experience. This paper summarizes experiences using bilateral art over an eighteen-month period with

individuals at a university family therapy center. The bilateral art intervention was applied to a range of presenting problems including relationship issues, depression, anxiety, and trauma. Outcome measures include client-reported scalings, as well as client-reported and/or therapist-observed changes in behavior over time. Additionally, this paper presents indicators for the use of bilateral art as an intervention, as well as contraindications for its use. (p. 7)

Odell-Miller, H., Hughes, P., & Westacott, M. (2006). An investigation into the effectiveness of the arts therapies for adults with continuing mental health problems. [*Psychotherapy Research*, 16\(1\), 122-139.](#) (Normal & Outpatient/Combined Methodologies) (SD)

Persons, A. (2009). Art therapy with serious juvenile offenders: A phenomenological analysis. [*International Journal of Offender Therapy and Comparative Criminology*, 53\(4\) 433-453.](#) (Prison/Incarceration/Combined Methodologies)

Prescott, M. V., Sekendur, B., Bailey, B., & Hoshino, J. (2008). Art making as a component and facilitator of resiliency with homeless youth. [*Art Therapy: Journal of the American Art Therapy Association*, 25\(4\), 156-163.](#) (Normal & Outpatient/Combined Methodologies) (PSJ)

Homelessness among youth is a serious societal problem in the United States. Treatment efforts have approached the problem from a damage model that focuses on pathology and deficits instead of strengthening coping skills and resiliency. This study utilized both quantitative (N = 212) and qualitative (n = 3) measures to examine the function of creativity and art making with respect to resiliency in homeless youth who were attending a drop-in art center. Quantitative methods identified a strong correlation between an individual's engagement in creative activity and his or her achievement. Individual stories derived from interviews and drawings illustrate how participants valued the role of art in making healthy lifestyle choices. Creativity may be a critical component of resiliency in the lives of homeless youth. (p. 156)

Singer, S., Gotze, H., Buttstadt, M., Geue, K., Momenghalibaf, A. , & Bohler, U. (2010). The effects of an art education program on competencies, coping, and well-being in outpatients with cancer – Results of a prospective feasibility study. *The Arts in Psychotherapy*, 37(5), 363-369. (Experimental and Qualitative) (PJS)

19. Combined Creative or Expressive Arts Therapies (beginning 2006)

Bornman, B. A., Mitelman, S. A., & Beer, D. A. (2007). Psychotherapeutic relaxation: How it relates to levels of aggression in a school within inpatient child psychiatry: A pilot study. [*The Arts in Psychotherapy*, 34\(3\), 216-222.](#) (School/Academic/ Combined Arts Therapies) (PSJ)

Haltiwanger, E., Rojo, R., & Funk, K. (2011). Living with cancer: Impact of expressive arts. *Occupational Therapy in Mental Health*, 27, 65-86. (SD)

Horwitz, E. B., Kowalski, J., Theorell, T., & Anderberg, U. M. (2006). Dance/movement therapy in fibromyalgia patients: Changes in self-figure drawings and their relation to verbal self-rating scales. [*The Arts in Psychotherapy*, 33\(1\), 11-25.](#) (Medical/Combined Arts Therapies) (PSJ)

McMeikan, N. (2008). A bag for the journey: Dramatherapy with adolescent girls who are not engaging with others. *ANZATA: The Australian and New Zealand Journal of Arts Therapy*, 3(1). (DB, RV)

- Puig, A., Lee, S. M., Goodwin, L., & Sherrad, P. A. D. (2006). The efficacy of creative arts therapy to enhance emotional expression, spirituality, and psychological well-being of newly diagnosed Stage I and Stage II breast cancer patients: A preliminary study. [*The Arts in Psychotherapy*, 33\(3\), 218-228.](#) (Medical/Combined Arts Therapies) (PSJ)
- Smeijsters, H., Kil, J.,k Kurstjens, H., Welten, J., & Willemars, G. (2010). Arts therapies for young offenders in secure care – A practice-based research. (2011). *The Arts in Psychotherapy*, 38(1), 41-51. (Description of Project; Expressive Art Therapies) (PJS)
- Stuart, K., & Tuason, M.T. (2008). Expressive group therapy with at-risk African American adolescent girls. [*International Journal of Adolescence and Youth*, 14, 135-159.](#) (Normal & Outpatient/Combined Arts Therapies) (SD)

20. Meta-Analyses of Interest (beginning 2007)

- Eaton, L. G., Doherty, K. L., & Widrick, R. M. (2007). A review of research and methods used to establish art therapy as an effective treatment method for traumatized children. [*The Arts in Psychotherapy*, 34\(3\), 256-262.](#) (Post Traumatic Stress Disorder & Trauma/Meta-Analyses) (PSJ)
- Kaiser, D., & Deaver, S. (2009). Assessing attachment with the Bird's Nest Drawing: A review of the research. [*Art Therapy: Journal of the American Art Therapy Association*, 26\(1\), 26-33.](#) (Related Research Articles/Meta-Analyses) (SD)
- The Bird's Nest Drawing (Kaiser, 1996) is an art-based assessment that was developed to assess attachment security. In the past 10 years, several articles have further tested this art therapy directive with various populations. This paper briefly reviews attachment theory, delineates the significant findings from five of the studies, and provides information from four others. Implications for clinical use of the Bird's Nest Drawing and need for future research are discussed. (p. 26)
- Metzl, E. S. (2008). Systematic analysis of art therapy research published in Art Therapy: Journal of the American Art Therapy Association between 1987 and 2004. [*The Arts in Psychotherapy*, 35\(1\), 60-73.](#) (Related Research Articles/Meta-Analyses) (PSJ)
- Orr, P. P. (2007). Art therapy with children after a disaster: A content analysis. [*The Arts in Psychotherapy*, 34\(4\), 350-361.](#) (Post Traumatic Stress Disorder & Trauma/Meta-Analyses) (PSJ)
- Silver, R. (2009). Identifying children and adolescents with depression: Review of the Stimulus Drawing Task and Draw A Story research. [*Art Therapy: Journal of the American Art Therapy Association*, 26\(4\), 174-180.](#) (Related Research Articles/Meta-Analyses) (PSJ)

This paper reviews a body of research on the author's Silver Drawing Test (SDT) and Draw A Story (DAS) art-based assessments, which span 40 years of development. The original impetus for the assessment is described and studies are reviewed that examined relationships between depression, abuse, and aggression; cognitive skills; interrater and retest reliability; normative data; and treatment outcomes in the United States, Thailand, and Russia. Findings from these studies suggest that drawing responses that are strongly negative (receiving a score of 1 out of total possible 5 points) on both the Emotional Content and the Self-Image scales can provide early identification of children and adolescents who may be at risk for depression. (p. 174)

Slayton, S. C., D'Archer, J., & Kaplan, F. (2010). Outcome studies on the efficacy of art therapy: A review of findings. *Art Therapy: Journal of the American Art Therapy Association, 27*(3), 108-118.

21. Related Research Articles

Anderson, F. E. (2001a). Needed: A major collaborative effort. *Art Therapy: Journal of the American Art Therapy Association, 18*(2), 74-78.

Anderson, F. E. (2001b). Benefits of conducting research. *Art Therapy: Journal of the American Art Therapy Association, 18*(3), 134-141.

Arteche, A., Bandeira, D., & Hultz, C. S. (2010). Draw-A-Person test: The sex of the first-drawn figure revisited. *The Arts in Psychotherapy, 37*(1), 65-69.

Bergland, C., & Gonzalez, R. M. (1993). Art and madness: Can the interface be quantified? The Sheppard Pratt Art Rating Scale – An instrument for measuring art integration. *American Journal of Art Therapy, 31*(3), 81-90.

Burt, H. (1996). Beyond practice: A post-modern feminist perspective on art therapy research. *Art Therapy: Journal of the American Art Therapy Association, 13*(1), 12-19.

Carolan, R. (2001). Models and paradigms of art therapy research. *Art Therapy: Journal of the American Art Therapy Association, 18*(4), 190-206.

Deaver, S. (2002). What constitutes art therapy research? *Art Therapy: Journal of the American Art Therapy Association, 19*(1), 23-27.

Deaver, S. P. (2011). Research ethics: Institutional review board oversight of art therapy research. *Art Therapy: Journal of the American Art Therapy Association, 28*(4), 171-176.

By having their research proposals reviewed and approved by Institutional Review Boards (IRBs), art therapists meet important ethical principles regarding responsibility to research participants. This article provides an overview of the history of human subjects protections in the United States; underlying ethical principles and their applications to research practice; and a discussion of concerns nonmedical, post-positivist art therapy researchers need to consider in the IRB approval process. Aspects of ethical human subjects research of particular importance to art therapy researchers, such as working with vulnerable populations of research subjects and the use of art in research reports, are discussed. Recommendations to help further art therapy research through IRB oversight are offered. (PSJ)

Dere-Meyer, C., Bender, B., Metz, E., & Diaz, K. (2011). Psychotropic medications and art therapy: Overview of literature and clinical considerations. *The Arts in Psychotherapy, 38*(1), 29-35. (NG).

Gantt, L. (1986). Systematic investigation of art works: Some research models drawn from neighboring fields. *American Journal of Art Therapy, 24*(4), 111-118.

Hogan, S. (2012). Ways in which photographic and other images are used in research: An introductory overview. *International Journal of Art Therapy: Inscape, 17*(2), 54-62. (AB)

Huet, V. (2012). Creativity in a cold climate: Art therapy-based organisational consultancy within public healthcare. *International Journal of Art Therapy: Inscape, 17*(1), 25-33. (AB)

- Julliard, K. (1998). Outcomes research in healthcare: Implications for art therapy. *Art Therapy: Journal of the American Art Therapy Association*, 15(1), 13-21.
- Kaplan, F. F. (2001). Areas of inquiry for art therapy research. *Art Therapy: Journal of the American Art Therapy Association*, 18(3), 142-147.
- Knapp, N. M. (1992). Tabulated review of diagnostic use of art as a preliminary resource for research with Alzheimer's Disease. *American Journal of Art Therapy*, 31(2), 46-62.
- Musham, C. (2001). The potential contribution of art therapy to social science research. *Art Therapy: Journal of the American Art Therapy Association*, 18(4), 210-215.
- Shaer, D., Beaven, K. Springham, N. Pillinger, S., Cork, A. Brew, J., & ...'S.', C. (2008). The role of art therapy in a pilot for art-based information prescriptions at Tate Britain. *International Journal of Art Therapy: Inscape*, 13(1), 25-33. (AB)
- Slayton, S. C., D'Archer, J., & Kaplan, F. (2010). Outcome studies on the efficacy of art therapy: A review of findings. *Art Therapy: Journal of the American Art Therapy Association*, 27(3), 108-119.
- In response to a review by Reynolds, Nabors, and Quinlan (2000) of the art therapy literature prior to 1999, this review article identifies studies from 1000 – 2007 that measured outcomes of art therapy effectiveness with all ages of clinical and nonclinical populations. Although numerous studies blend art therapy with other modalities, this review is limited to studies that isolate art therapy as the specific intervention. The results of this review suggest that there is a small body of quantifiable data to support the claim that art therapy is effective in treating a variety of symptoms, age groups, and disorders. (Literature Review)(PSJ)
- Tinnin, L. W. (1994). Transforming the placebo effect in art therapy. *American Journal of Art Therapy*, 32(3), 75-78.
- Van Lith, T., Schofield, M., & Fenner, P. (2013). Identifying the evidenced-base for art-based practices and their potential benefit for mental health recovery: A critical review. *Disability and Rehabilitation*, 35(16), 1309-1323. (SD).
- Vick, R. M. (2001). Introduction to special section on research in art therapy: Where does an idea begin? *Art Therapy: Journal of the American Art Therapy Association*, 18(3), 132-133.
- Wadson, H. (1978). Some uses of art therapy data in research. *American Journal of Art Therapy*, 18(1), 11-18.