



Effectiveness of creative arts therapies in supporting individuals impacted by eating disorders

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The complex and enduring nature of eating disorders (EDs) and the associated experiences of shame and guilt are often seen as hurdles to treatment success (Griffin et al., 2021; Griffin et al., 2023). While psychological interventions (e.g., Cognitive Behaviour Therapy – Enhanced) are the first-line approach to treating EDs, their effectiveness is considered modest, with remission rates ranging from 40% to 60% in anorexia, bulimia, and binge eating disorder (Eddy et al., 2017; Linardon, 2018; Monteleone et al., 2022) and attrition rates ranging from 20% to 51% (inpatient) and from 29% to 73% (outpatient) (Fassino et al., 2009).

Have you therefore wondered if art, a common interest shared by many, might be an effective adjunct or alternative to traditional therapies for individuals impacted by EDs?

Over the past few decades, arts have been extensively used in health interventions across various disciplines, including medicine, nursing, psychology, and occupational therapy (Kim & Lor, 2022). Unlike traditional talk therapy, arts serve as a non-verbal communication tool that allows individuals to express their challenging experiences, feelings, or thoughts more freely (Bucharová et al., 2020). While art therapy is a relatively new field and more comprehensive, rigorous trials are required due to methodological limitations, such as variable study quality and small sample sizes, in previous studies (Griffin et al., 2021; Griffin et al., 2023), the evidence available for its effectiveness in supporting individuals living with EDs appears promising and warrants further attention.

OVERVIEW OF CREATIVE ARTS THERAPIES

Creative arts therapies, as a form of experiential therapy, utilize the expressive and creative process of art-making to promote well-being and personal growth among individuals of all ages (Shafir et al., 2020). Creative arts therapists may also incorporate certain aspects of psychoanalytic theory (e.g., transference and countertransference) to explore the relationship between the client, the therapist, and the artwork (Case & Dalley, 2014; Cheng et al., 2023).

The literature often identifies four major specializations – art therapy, music therapy, drama/film therapy, and dance/movement therapy – each of which can play a unique role in one’s recovery journey (Griffin et al., 2021). For example, a study conducted by Ceccato and Roveran (2022) demonstrated that group-based music therapy, which involves active engagement in singing and improvisational music-making, significantly reduced pre-meal anxiety among inpatient clients with anorexia. A scoping review by Bucharová et al. (2020) also revealed that drama therapy provided clients with a broader perspective on mind and body and reduced body dissatisfaction using dramatizing content and psychodramatic concepts.

Given the breadth of each discipline, this article focuses on visual art therapy, which includes painting, drawing, and craft, and its potential benefits for individuals living with EDs.

ROLES OF ART THERAPISTS

Anyone can learn and use arts to distract themselves from their hectic lives, and arts have been increasingly used in healthcare interventions. However, there are three key distinctions between art therapy and art classes/activities, whether performed individually or facilitated by an art instructor/a healthcare professional:

1. Art therapy can only be ethically practiced in Canada by registered art therapists who hold at least a master's degree, adhere to the professional standards established by the Canadian Art Therapy Association/ any Art Therapy Credential Board, and are well-equipped with skills in using therapeutic art and clinical approaches gained through intensive training to help clients achieve their personalized goals (Webster, 2024);
2. Art therapists plan the sessions and select the appropriate materials based on their clients' therapeutic goals and objectives (Shukla et al., 2022); and
3. Art therapists value establishing a sound therapeutic relationship and creating a safe space to foster clients' self-discovery, self-exploration and self-reflection through art-making (Kim & Lor, 2022; Shafir et al., 2020).

TYPES OF ARTS USED IN ART THERAPY

Techniques or art materials employed in therapeutic sessions are tailored to the individual's unique needs and goals. The primary media used include painting, drawing, collage, and sculpting, with common exercises such as blind drawing (i.e., drawing the contour of an object placed in front of you without looking at the paper), spiral drawing (i.e., starting at a single point on the paper, then curving around and around), drawing moods, and self-portraits (Hu et al., 2021; Schouten et al., 2014). Art therapists may also examine the elements of clients' art products (e.g., line, shape, and mixture of colours) to assess the severity of the presenting concern or mental health status and decide whether art therapy, or which art interventions, may be beneficial to them (Pénzes et al., 2018).

The Expressive Therapies Continuum model proposed that the properties of art media could stimulate different levels of visual and cognitive processing, and that certain art materials might have unique soothing effects on one's emotions (Lusebrink, 2004; Malik, 2021). Furthermore, Haiblum-Itskovitch et al. (2018) suggested that the fluidity

of art materials (i.e., pencil, oil pastels, and gouache paint) might influence the emotional responses elicited during the art-making process, highlighting the importance of thoughtfully selecting the materials used in art therapy based on the client's needs and therapeutic outcomes (Griffin et al., 2021).

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PROMISING EFFECTIVENESS OF ART THERAPY AND ITS CONNECTIONS TO OUR BRAINS

Art therapy, though relatively new, has shown benefits in treating various psychological and physical conditions, such as mood disorders (Hu et al., 2021); schizophrenia (Richardson et al., 2007); trauma symptoms (Schouten et al., 2014); chronic pain (O'Neill & Moss, 2015); and improvement in depression, anxiety, and fatigue symptoms among cancer patients undergoing chemotherapy (Bar-Sela et al., 2007). Art therapy is particularly helpful for individuals who struggle to fully express their inner voices through verbal communication (Cheng et al., 2023).

Why do arts have such a powerful healing potential? Drawing from the assumptions of neuroplasticity and sensorimotor engagement in which the art therapy discipline is rooted (King & Kaimal, 2019, p.2), King (2016) proposed a theoretical framework to explain the potential link between neurobiology and art: (1) The art-making process and the artwork itself are crucial elements of treatment for understanding and eliciting verbal and non-verbal communication within an attuned therapeutic relationship; (2) the materials and methods used affect self-expression, support self-regulation, and are applied in specialized ways; and (3) the process of creativity is healing and life-enhancing (p.6).

Neuroimaging studies may be helpful in understanding the brain processes involved and exploring why and how art therapy may work. For instance, Belkofer and Konopka (2008) found significant differences in neurobiological activity patterns (i.e., increases in alpha and beta waves and decreases in delta and theta waves¹) after drawing and painting. A subsequent electroencephalogram (EEG) study conducted by Belkofer et al. (2014) observed a significant increase in alpha waves before and after the artist and non-artist participants drew with oil pastels, demonstrating that art-making might be associated with relaxation, creativity, and self-regulation. Despite having small sample sizes, these neuroimaging studies lay a groundwork for discussing the potential neurobiological underpinnings of art therapy.

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ART THERAPY AND ITS CONNECTIONS TO EDS

Art therapy can help improve some specific dimensions of EDs. It allows one to bypass verbal barriers and thereby lessen one's defence mechanisms and rationalizations, which often arise in individuals with EDs when describing their symptoms and experiences verbally (Bucharová et al., 2020). This then helps facilitate self-discovery, empowering individuals to feel their feelings (Wolf et al., 1985) and understand themselves better, especially when it is difficult to describe what they are experiencing in words.

Of note, conflicts between the internal and external worlds of individuals with EDs are often reflected in their artwork. With the facilitation of art therapists, individuals can increase their self-awareness and challenge their psychological conflicts that may contribute to their ED symptoms or undermine their recovery efforts (Eren et al., 2023; Griffin et al., 2021). A case study conducted by Acharya et al. (1995) explained how the psychopathology of anorexia can be explored through artworks – one

significant example includes the client's use of black colour to express her deep-seated depressed and isolated moods.

Art therapy also promotes self-exploration and new learning opportunities, encouraging individuals to actively use and reconnect with their bodies in a respectful manner, and form healthier relationships with them (Griffin et al., 2021; Griffin et al., 2023). It is important to note that artistic skills are not required, as the focus is on the meaning and emotions evoked, rather than aesthetics. Observing their own artworks may enhance their self-esteem and sense of accomplishment as well since the process of art-making may allow them to cultivate their inventive talents (Griffin et al., 2021; Griffin et al., 2023; Shukla et al., 2022).

In addition, when group art therapy sessions are conducted in ED-specific inpatient and outpatient settings, some group-specific therapeutic factors, such as group cohesion, self-disclosure, peer support, and interpersonal learning, may positively impact the recovery journey of individual group members (Johnson & Parkinson, 1999; Sporild & Bonsaksen, 2015).

WHAT ART THERAPISTS CAN DO FOR THE ED COMMUNITY

Rooted in social constructivist perspectives, creative arts therapists are encouraged to utilize their skills to advocate and become “agents of change” in supporting individuals, particularly among marginalized communities, and promoting social justice through community education (Gipson, 2015; Potash, 2011). Some have taken the initiative to creatively facilitate advocacy for the ED community. For instance, Misluk-Gervase (2020) organized the Imagine Me Beyond What You See art competition, in which members from her art therapy group were invited and tasked with reimagining a mannequin that reflects a more realistic version of female body figures to be shared on a website. Additionally, Bechtel et al. (2020) hosted an interdisciplinary workshop integrating drama and visual art therapy to create life-size tape sculptures, which were then publicly displayed to encourage open discussions on body image.

¹ Our thoughts, feelings, and behaviours are the result of the communication between neurons in our brains, and the frequency of their communication determines our brainwave states: **Beta waves** (12 - 35Hz) are linked to alertness, concentration, and thinking; **Alpha waves** (8 - 12 Hz) are involved in meditation, creativity, and relaxation; **Theta waves** (4 - 8 Hz) are associated with dreaming and visualization; and **Delta waves** (0.5 - 4 Hz) are connected to deep sleep and restoration (Abhang et al., 2016).

Both examples showcase how creative arts therapists help drive systemic changes through community engagement in two ways – first, the participatory, creative nature of these events can empower individuals impacted by EDs, who often feel marginalized or voiceless due to self and social stigma (e.g., weight stigma and fatphobia), to advocate for themselves and share their narratives with a broader audience; second, these events may foster public discussion about the potential harms of implicit biases and social prejudices to the ED community, while educating the public about EDs and promoting body acceptance.

CURRENT LIMITATIONS OF CREATIVE ARTS THERAPIES

There are several limitations of art therapy that need consideration and further investigation.

One major limitation is the lack of comprehensive evidence on the effectiveness of art therapy in treating EDs. With limited funding for research on EDs, most related studies are case reports or case series studies, which are considered relatively weak within evidence-based practice due to their small sample sizes and lack of control comparison groups (Edwards, 2019; Griffin et al., 2023). Considering the methodological limitations and the high heterogeneity of research findings, more rigorous trials are needed to evaluate its efficacy and to draw reliable conclusions and recommendations for practice (Griffin et al., 2021; Griffin et al., 2023).

Another issue is the need for standardization within arts-based therapies (Frisch et al., 2006), including certain therapeutic elements (e.g., types of art activities and materials used, delivery methods, and the roles of facilitator/therapist) (Haiblum-Itskovitch et al., 2018; Kim & Lor, 2022). Art-making processes can look different to each individual (Konopka, 2014), and treatment options can vary according to the specific type of ED. To date, studies have mostly explored its effectiveness in treating anorexia, bulimia, and binge eating disorder. Future research should explore which art-based interventions work best for different types of EDs and their unique needs or concerns (Frisch et al., 2006; Kim & Lor, 2022).

CONCLUDING WORDS

While creative arts therapies are relatively new and require further research, their efficacy as a treatment or an adjunct treatment for individuals struggling with and/or in recovery from EDs is promising.

To move forward, well-controlled, valid, and reliable studies (e.g., randomized controlled trials) with large samples and the involvement of a certified art therapist need to be conducted. It is also important to explore the effectiveness of art therapy on its own and in combination with other treatments (e.g., cognitive behavioural therapy, psychotherapy, and medication), as well as other disciplines of creative arts therapies (e.g., music and drama therapy), in treating various types of EDs.

TIPS FOR DRAWING

As a certified Pastel Nagomi Art Advanced Instructor (an art form that originated in Japan and uses soft pastel as its primary medium), I would like to share some tips with you for your next art activity. Please note that I am not a registered art therapist – these tips are intended to enhance your creative experience and should NOT be considered as a substitute for art therapy or any form of therapeutic intervention:

- **Practice being mindful:** Focus more on the process and meaning of your artwork than just the artwork itself. Every drawing is unique, and you don't have to give your artwork a label.
- **Feel free to experiment and let your imagination guide you:** Choose the colour or materials you like. There are no restrictions – the only rule is to have fun!

Resources

You may search for the **Professional or Registered members of the Canadian Art Therapy Association** (CATA) here: <https://www.canadianarttherapy.org/art-therapist-directory>.

If you are interested in finding an **ED-informed art therapist**, search NEDIC's Service Provider Directory (<https://nedic.ca/find-a-provider/>) and click on the credential filter, "Art Therapist." If you have private insurance/extended work benefits, it might also be helpful to check whether art therapy is covered.

A number of **ED support organizations** in Canada offer art therapy groups. Visit NEDIC's Community Group page to learn more: <https://nedic.ca/community-groups/>.

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