

Art therapy: In the heart of pain, acceptance via creativity

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Abstract

Art therapy has been shown to be of positive impact in patients with cancer and in major psychiatric disorders. It may help patients to cope with disease and is also used in chronic pain patients. We present here an experience of art therapy in patients suffering from chronic pain, the individual expression of suffering and metamorphosis of pain through creativity, and the group session of art therapy.

Keywords: Pain, art, therapy.

Introduction

Art therapy has been shown to be beneficial in patients with cancer and in major psychiatric disorders. Art therapy improves depression and fatigue levels (1) and it may help patients to cope with this pathology (2,3). A large number of techniques can be used including painting, collage, sculpture ... Although art therapy is commonly used today in complementary and alternative medicine, there are very few studies in chronic pain patients. Art therapy, as a therapeutic source, opens a free space where it is possible to go back to oneself and exchange with others. We present here an experience of art therapy in patients suffering from chronic pain.

Methods

An experience of art therapy has been effected with 12 patients in the Pain Clinic of the Regional Hospital of Clermont-Ferrand in France with a multidisciplinary group including pain specialists, nurses, psychologists and an art therapist. This experience is part of the ongoing personal cross-

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cultural program carried out by the art therapist in Europe (Spain, France) and South America (Panama, Argentina). The main objectives were to diminish the emotional consequences due to pain, to develop creative capacity and de-focalize the mind from pain. The other objectives were to facilitate expression without judging, without expectations in order to develop a proactive attitude towards pain, and help the patient to find a way to accept pain. Patients came once a fortnight for three hours to the pain clinic and evaluations were effected during the six months (11 sessions) of the program. We report here two clinical cases and the experience of the group.

Case study 1

Paul, a 38 years old male had been suffering from fibromyalgia for the last three years. "Pain rejects man outside his world, outside his activities, even the activities he enjoyed to do, loosing little by little the elementary trust in his body. He withdraws within himself and away from others. Pain is a forced and violent experience at the limits of human condition. It is not only the body in pain but suffering of the whole human being". The team of the Pain Clinic and the art therapist helped in providing trust when the patient was confronted to suffering induced by the disease. The patient had to feel the world and its senses, and express this physical/body sensation into an artistic representation. The expression of suffering and pain is achieved with the body and with the senses. Paul's autoportraits sign his profound suffering and "misery" (see figures 1 and 2).



Figure 1. Autoportrait of advanced misery (Indian ink).



Figure 2. The Beast of Pain (Indian ink).

Art –therapy helped him to formulate the devastating effect of his pathology, and his artistic language has an informative alarm function for the multidisciplinary team. This autoportrait of advanced misery has been for him a tool where concentration helped him to “de-focalize from pain and brought him an appreciable well-being”. In the last sessions, he painted a mask with bright and even violent colours where he expresses his strength and the distance he takes with his pain. He also painted a pastel (figure 3) representing half a face, which witnesses of his re-construction process. (see figure 3).



Figure 3. Re-construction process (acrylic on mask and pencil).

Case study 2

Sophie, a 35 years old female had suffered from low back pain for the last four years and has had two major back surgeries. Low back pain coincided with disruption in her family, her divorce and she wanted to put her past away, in a box, so that “it could not get out, by sticking it firmly and for ever”: she put into a wooden box letters from her children, elements from her past, a wire vertebral column she built during the previous summer. The approach was however too demanding for her and she could not cope with it all. She decided to adopt a new approach, with much emotion, in this construction-deconstruction process. She followed the essential and among all the objects she chose, one survived : the wire thread. She transformed it into a golden wire silhouette standing in the centre of a sphere (see figure 4).

It had to find its equilibrium despite the heaviness of the past and of pain : this equilibrium was unstable, mobile, it could move in time and could evolve. With this sculpture she finally accepted that the past could not be irreversibly fixed and realised she had to return to the resources of her own body to express her intuitive creativity.

She observed that her creative work and the progressive steps of de-focalization from pain followed her physiology and her respiratory rate. On the suggestion of the art therapist, at the last session, working on a mandala, she focused on the representation of a bright ball of energy to generate an expression of harmonisation and mental strength (see figure 5), signalling this way her positive acceptance of the situation and dynamism towards the future.



Figure 4. Moving equilibrium.



Figure 5. The energy ball (Mandala/Pastel).

Case study 3

The 12 patients that constituted the art therapy group worked together (in two groups of six persons) on an artistic project at the first and last sessions. At the first session, the objective is to explore the involvement of all the patients in this group with the common denominator of pain. The artistic pastel on wood by one group shows the communion between the participants, with hands linked in a chain of pain around the sun (see figure 6).



Figure 6. Hands linked in a chain of pain (pastel on wood).

In the last session, the choice of the same group goes to a special Pandora's box, the Pandora's pain box (see figure 7). In this final piece of art the patients have put a skydiver flying towards freedom and the sun, poppies representing power given by the group, the hand of the art therapist coming out of the water to help swimming, a tree as a symbol of hope for the curing of pain, and the flight of butterflies for the achievement of the group work.



Figure 7. The Pandora's pain box (painting, felt pen and pastel on wood).

The evolution of the group between the first and last sessions is obvious in the development of creativity and in realising their ability to achieve it.

Conclusions

Art therapy, with the guidance of the art therapist, is a real therapeutic help in patients suffering from chronic pain to start a process of de-focusing from pain, a process of concentration and acceptance, in order to express and diminish pain and suffering. We have presented here successful experiences, but the success varies with individuals and factors involved in success or failure would need to be studied further in relation with the aetiology of pain. The group and the art therapist are both essential components to help the patients to overcome difficulty in communication and in isolation associated with chronic pain.

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