

*International Research in the Arts Therapies*

# ARTS THERAPIES IN THE TREATMENT OF DEPRESSION

Edited by  
Ania Zubala and Vicky Karkou

**ICRA**  
INTERNATIONAL CENTRE FOR  
RESEARCH IN ARTS THERAPIES

**ECATE**  
EUROPEAN CONSORTIUM FOR ARTS THERAPIES EDUCATION



“This inspiring and comprehensive volume written by esteemed experts in the fields of art, music, dance/movement, drama, and phototherapies successfully navigates the topic of the global crisis of depression. Through current research, evidence-based practice, case studies and clinical vignettes this book richly weaves together how creative arts disciplines address the challenge of working with a variety of populations with depression across the lifespan and across cultures. With the goal of demonstrating proof of effectiveness with this challenging crisis of depression, the authors present an engaging compilation of studies using a myriad of creative and diverse clinical approaches, research designs and methods, and perspectives. The study designs are well-suited to the arts therapies and clients and chapters provide both breadth as well as depth. Authors are self-reflective and culturally aware presenting a variety of work with individuals, groups, and short-term and long term treatment. The book as a whole is well organized, balanced, readable and well grounded in research. I anticipate that the impact of this book will be far-reaching and appreciated by arts therapy clinicians and researchers and anyone who works with individuals with depression.”

**Susan Loman**, MA, BC-DMT, NCC, Certified KMP analyst, professor emerita, adjunct faculty was director of the Dance/Movement Therapy and Counseling Program, Department of Applied Psychology, Antioch University New England



**Taylor & Francis**

Taylor & Francis Group

<http://taylorandfrancis.com>

---

# Arts Therapies in the Treatment of Depression

---

*Arts Therapies in the Treatment of Depression* is a comprehensive compilation of expert knowledge on arts therapies' potential in successfully addressing depression. The book identifies ways of addressing the condition in therapy sessions, shares experience of tools and approaches which seem to work best and guides towards a conscious and confident evidence-based practice.

Including contributions from international experts in the field of arts therapies, the book presents some of the most recent, high-profile and methodologically diverse research, whether in the form of clinical trials, surveys or case studies. The three sections of this volume correspond to particular life stages and explore major topics in arts therapies practice and the nature of depression in children, adults and in later life. Individual chapters within the three sections represent all four arts therapies disciplines. The book hopes to improve existing arts therapies practice and research by encouraging researchers to use creativity in designing meaningful research projects and empowering practitioners to use evidence creatively for the benefit of their clients and the discipline.

*Arts Therapies in the Treatment of Depression* is an essential resource for arts therapies researchers, practitioners and arts therapists in training. It should also be of interest to other health researchers and health professionals, particularly those who work with clients experiencing depression and in multidisciplinary teams.

**Ania Zubala, PhD**, is a health researcher who explores the role of arts and arts therapies for holistically-understood wellbeing, particularly in the context of remote communities and aging populations. She is a research fellow in health psychology and digital health at the University of the Highlands and Islands, Scotland.

**Vicky Karkou, PhD**, is a professor at Edge Hill University leading the research theme of arts and wellbeing. She is an educator, researcher and dance movement psychotherapist, widely published in peer-reviewed journals and books, and a co-editor of the international journal *Body, Movement and Dance in Psychotherapy*

---

# **International Research in the Arts Therapies**

*A Routledge Book Series*

**Series Editors: Diane Waller and Sarah Scoble**

---

This series consists of high-level monographs identifying areas of importance across all arts therapy modalities and highlighting international developments and concerns. It presents recent research from countries across the world and contributes to the evidence-base of the arts therapies. Papers which discuss and analyse current innovations and approaches in the arts therapies and arts therapy education are also included.

This series is accessible to practitioners of the arts therapies and to colleagues in a broad range of related professions, including those in countries where arts therapies are still emerging. The monographs should also provide a valuable source of reference to government departments and health services.

*Diane Waller and Sarah Scoble*

## **Titles in the Series**

### **1 International Arts Therapies Research**

*Edited by Ditty Dokter and Margaret Hills de Zárate*

### **2 Arts Therapies and New Challenges in Psychiatry**

*Edited by Karin Dannecker*

### **3 Arts Therapies in the Treatment of Depression**

*Edited by Ania Zubala and Vicky Karkou*

For more information about the series, please visit [www.routledge.com](http://www.routledge.com).

---

# Arts Therapies in the Treatment of Depression

---

Edited by Ania Zubala  
and Vicky Karkou

 **Routledge**  
Taylor & Francis Group  
LONDON AND NEW YORK

  
EUROPEAN CONSORTIUM FOR ARTS THERAPIES EDUCATION

 **ICRA**  
INTERNATIONAL CENTRE FOR  
RESEARCH IN ARTS THERAPIES

First published 2018  
by Routledge  
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

and by Routledge  
711 Third Avenue, New York, NY 10017

*Routledge is an imprint of the Taylor & Francis Group, an informa business*

© 2018 selection and editorial matter, Ania Zubala and Vicky Karkou; individual chapters, the contributors

The right of the editor to be identified as the author of the editorial material, and of the authors for their individual chapters, has been asserted in accordance with sections 77 and 78 of the Copyright, Designs and Patents Act 1988.

All rights reserved. No part of this book may be reprinted or reproduced or utilised in any form or by any electronic, mechanical, or other means, now known or hereafter invented, including photocopying and recording, or in any information storage or retrieval system, without permission in writing from the publishers.

*Trademark notice:* Product or corporate names may be trademarks or registered trademarks, and are used only for identification and explanation without intent to infringe.

*British Library Cataloguing-in-Publication Data*

A catalogue record for this book is available from the British Library

*Library of Congress Cataloging-in-Publication Data*

Names: Zubala, Ania, editor. | Karkou, Vassiliki, editor.

Title: Arts therapies in the treatment of depression /  
edited by Ania Zubala and Vicky Karkou.

Description: Abingdon, Oxon ; New York, NY : Routledge, 2018. |  
Series: International research in the arts therapies | Includes  
bibliographical references and index.

Identifiers: LCCN 2018003032 (print) | LCCN 2018004109

(ebook) | ISBN 9781315454412 (E-book) |

ISBN 9781138210769 (hardback : alk. paper) |

ISBN 9781315454412 (ebk)

Subjects: | MESH: Depression—therapy | Sensory Art Therapies

Classification: LCC RC489.A72 (ebook) | LCC RC489.A72 (print) |

NLM WM 171.5 | DDC 616.89/1656—dc23

LC record available at <https://lccn.loc.gov/2018003032>

ISBN: 978-1-138-21076-9 (hbk)

ISBN: 978-1-315-45441-2 (ebk)

Typeset in Bembo

by Apex CoVantage, LLC

---

# Contents

---

<i>List of contributors</i>	x
 <b>Introduction: Arts therapies’ response to the global crisis of depression: current research and future developments</b>	 1
ANIA ZUBALA AND VICKY KARKOU	
 <b>PART I</b>	
<b>Arts therapies with children and adolescents experiencing depression</b>	<b>11</b>
 1 Music therapy and prevention of depression in primary-aged children: reflections on case work and assessment in a residential child and family psychiatric unit	13
AMELIA OLDFIELD	
 2 Art therapy to address emotional wellbeing of children who have experienced stress and/or trauma	30
UNNUR OTTARSDOTTIR	
 3 Reducing depressive symptoms in adolescents with posttraumatic stress disorder using drama therapy	48
ELIZABETH MCADAM AND DAVID READ JOHNSON	
 4 Movement-based arts therapy for children with attention deficit hyperactivity disorder (ADHD) in the Kingdom of Saudi Arabia	68
BADR ALRAZAIN, ANIA ZUBALA AND VICKY KARKOU	

## **PART II**

### **Arts therapies with adults experiencing depression 85**

- 5 Collaborative discourse analysis on the use of drama therapy to treat depression in adults 87**

NISHA SAJNANI, AILEEN CHO, HEIDI LANDIS, GARY RAUCHER  
AND NADYA TRYTAN

- 6 An essence of the therapeutic process in an art therapy group for adults experiencing depression: therapy process mapping 102**

ANIA ZUBALA

- 7 Embodied treatment of depression: the development of a dance movement therapy model 120**

PÄIVI PYLVÄNÄINEN

- 8 Reversing a sub-cultural norm: art therapy in treating depression in prison inmates 136**

DAVID GUSSAK AND ASHLEY BECK

- 9 Music therapy clinical practice and research for people with depression: music, brain processing and music therapy 154**

HELEN ODELL-MILLER, JÖRG FACHNER AND JAAKKO ERKKILÄ

- 10 Phototherapy in the treatment of patients with depression in a clinical setting: development and evaluation through a randomised controlled trial 172**

KATHRIN SEIFERT

## **PART III**

### **Arts therapies with those experiencing depression in later life 189**

- 11 Art therapy with the older person: one life, many losses 191**

JANE BURNS

- 12 Dramatherapy in working with people with dementia: the need for playfulness in creative ageing as an antidote for depression and isolation 204**

SUE JENNINGS

<b>13 Dance movement therapy research and evidence-based practice for older people with depression</b>	<b>217</b>
IRIS BRÄUNINGER	
<b>14 Perspectives on research and clinical practice in music therapy for older people with depression</b>	<b>227</b>
JASMIN EICKHOLT, MONIKA GERETSEGGER AND CHRISTIAN GOLD	
<b>15 Assessment and therapeutic application of the expressive therapies continuum in music therapy: the case of Anna with cancer-related depression</b>	<b>241</b>
JANA DUHOVSKA, VIJA BERGS LUSEBRINK AND KRISTĪNE MĀRTINSONE	
<i>Index</i>	<b>255</b>

---

# Contributors

---

**Badr Alrazain**, PhD, is originally from the Kingdom of Saudi Arabia. He graduated from King Saud University in Art Education in 1999. He later worked as an art education teacher in a secondary school in Riyadh and then as a lecturer at Qassim University. He obtained his Masters from King Saud University, focusing his work on learning difficulties. He completed his doctoral studies at the QMU, Edinburgh, in the area of arts therapies for children affected by ADHD. Badr currently works as an assistant professor at Qassim University and leads art therapy at the Mohammed bin Nayef Center in Riyadh.

**Ashley Beck**, MS, is a recent graduate from the Florida State University Master's of Art Therapy program. Ms. Beck graduated with a BA in pre-professional art therapy, where she developed an interest for marginalized forensic populations. She has had clinical experience in both male and female institutions and forensic psychiatric units. Her current research interests include promoting the field of art therapy in prison settings as well as art therapy and sustainability within an international context.

**Iris Bräuninger**, PhD, is a professor and researcher at the University of Applied Sciences of Special Needs Education Zurich. She also teaches at the DMT Program at Autonomous University Barcelona and works as a DMT supervisor and practitioner. Previously, she worked as deputy head of the DMT, Physio, Music Therapy Department, a researcher at the University Hospital of Psychiatry Zurich and post-doctoral researcher at the University of Deusto Bilbao. Iris teaches internationally in DMT, research and KMP. She is a registered Supervisor of the German (BTD) and Spanish (ADMTE) Association and holds the European Certificate of Psychotherapy (ECP).

**Jane Burns**, PhD, is a qualified art psychotherapist currently working at Queen Margaret University as a lecturer on the MSc art psychotherapy programme. Her research has been in the arts therapies with the older person, and her PhD research mapped how arts therapists work in practice with the person who has dementia. Jane is also interested in how the arts can support a

person's wellbeing during periods of life transition such as retirement; she has completed an RBS funded project with colleagues looking at this topic. Jane has presented at conferences and has been a consultant on a variety of projects.

**Aileen B. Cho**, MA, RDT, LMFT, earned her MA in Counseling Psychology & Drama Therapy from the California Institute of Integral Studies (CIIS) Graduate School of Professional Psychology in San Francisco, CA. She currently has a private practice in San Francisco and is the program director and drama therapist at a residential treatment program for children, adolescents and teens ages 10–19 with eating disorders in Menlo Park, CA. Aileen is also a bilingual clinician and practitioner of Developmental Transformations (DvT) who provides psychotherapy and couples/family therapy in both Korean and English in her private practice and directs self-revelatory performances and social justice theater.

**Jana Duhovska**, MSc, MA, is a doctoral student at Rīga Stradiņš University in the “Medicine” study programme, assistant in the Department of Health Psychology and Pedagogy at the Faculty of Public Health and Social Welfare, and Head of Rīga Stradiņš University master's study programme “Arts therapies”. She is a practicing music therapist; her field of scientific interest is assessment in music therapy and application of Expressive Therapies Continuum and awareness-informed music therapy to address the social and emotional functioning of cancer patients and survivors.

**Jasmin Eickholt**, music therapist and social worker, completed her music therapy training specializing in geropsychiatry at the University of Applied Sciences Würzburg-Schweinfurt (Germany). She works as music therapist in a geropsychiatric hospital, in a nursing home and with private clients. Furthermore, she works as a lecturer in music therapy and behavioral therapy at the University of Applied Sciences Würzburg-Schweinfurt and at the University of Augsburg. Her previous research addressed depressive symptoms of elderly nursing home residents. In further research, her aim is to examine specialized music therapy interventions for elderly nursing home residents with dementia and depression.

**Jaakko Erkkilä**, PhD, is Professor of Music Therapy at the University of Jyväskylä, Finland. For over 20 years, he worked with children and adults with psychiatric developmental and neurological disorders. He has initiated and collaborated with research networks including the Academy of Finland, the EU and the Finnish Centre of Excellence in Interdisciplinary Music Research. He serves on international editorial boards of music therapy-related journals, and he has published leading books, chapters and journal articles on music therapy. His particular recent interest is the theory, practice and research of improvisational music therapy, for which he has gained new funding.

**Jörg Fachner**, PhD, is Professor of Music, Health and the Brain at Anglia Ruskin University. He specialises in interdisciplinary research topics within the medical field, humanities and music sciences. Originating in Germany, he has worked worldwide, contributing to music therapy and brain research, including for NESTA, the EU and The Finnish Academy of Music. His research into music therapy process, treatment of depression, stroke, addiction, consciousness states and time perception, led to publications in high-ranking journals and books across the disciplines. His scientific output comprises over one hundred publications. Recent projects and collaborations focus on biomarkers and timing of the MT process.

**Monika Geretsegger**, PhD, is a music therapist and clinical and health psychologist based in Vienna, Austria, and senior researcher at GAMUT, Uni Research Health, Bergen, Norway. She received her PhD from Aalborg University, Denmark, where she explored music therapy for children on the autism spectrum. As a music therapy clinician, she specialises in adults with psychiatric conditions, including affective disorders and dementia, and in children and adolescents with autism. Her current research activities focus on effectiveness and applicability of music therapy in the fields of developmental disorders and mental health.

**Christian Gold**, PhD, is Principal Researcher at GAMUT, Uni Research Health, Bergen, Norway. He is also Adjunct Professor at the University of Bergen and at Aalborg University, Denmark. He serves as the Editor of the *Nordic Journal of Music Therapy* and as Associate Editor of the Cochrane Developmental, Psychosocial and Learning Problems Group. He received his music therapy degree at Vienna University of Music and Performing Arts and his PhD from Aalborg University. His research includes randomised trials and systematic reviews of music therapy in mental health, as well as process–outcome research and reviews of research methodology.

**David E. Gussak**, PhD, ATR-BC, is Professor of Art Therapy and Chairperson of the Department of Art Education at Florida State University. He is the author of *Art on Trial: Art Therapy in Capital Murder Cases*, and is co-editor and contributing author of *The Wiley Handbook of Art Therapy*, *Drawing Time: Art Therapy in Prisons and Other Correctional Settings* and *Art Education for Social Justice*. Dr Gussak is also the author of the *Psychology Today* blog, “Art on Trial: Confessions of a Serial Art Therapist”, and he has published numerous articles and chapters and lectured widely both nationally and internationally.

**Sue Jennings**, PhD, is a specialist in Neuro-Dramatic-Play, creator of the EPR developmental model of Dramatherapy and the Creative Care model. She is a performer, storyteller, author, dramatherapist and play therapist. She is Honorary Professor in Expressive Therapies at the University of Derby and Honorary Fellow at the University of Roehampton. She is founder of the British Association of Dramatherapists and has developed play, drama and

theatre therapy training in other countries, including Malaysia, Romania and Czech Republic. She has written over 40 books and has held academic appointments at UK Universities including Coleraine, Leeds Beckett and Exeter.

**David Read Johnson**, PhD, is Co-Director of the Post Traumatic Stress Center in New Haven Connecticut and Associate Clinical Professor in the Department of Psychiatry at Yale University School of Medicine, US. A leader in the creative arts therapies and drama therapy, he has written extensively about schizophrenia, dementia and trauma, and he conducted numerous quantitative and qualitative studies of the contribution of drama therapy and the creative arts therapies to the treatment of these conditions.

**Vicky Karkou**, PhD, is a professor at Edge Hill University leading the research theme of arts and wellbeing. An educator, researcher and dance movement psychotherapist, she has lengthy experience working with diverse clinical populations in different settings. She is widely published in peer-reviewed journals and books, and acts as the co-editor of the international journal *Body, Movement and Dance in Psychotherapy* published by Taylor and Francis. She travels extensively around the world for research and teaching purposes.

**Heidi Landis**, RDT-BCT, LCAT, TEP, CGP is in private practice in New York City where she sees clients and facilitates trainings. She has expertise with several populations including refugee children and adults, adults and youth on the autistic spectrum and youth in residential settings and therapeutic schools. In addition, Heidi is an adjunct professor at Lesley University, The College of New Rochelle and Concordia University. Her work has been published in *Trauma-Informed Drama Therapy* and the *Handbook of Child and Adolescent Group Therapy*. She is the past Associate Executive Director of the clinical and training program at Creative Alternatives of New York (CANY).

**Vija Bergs Lusebrink**, PhD, ATR, Professor Emerita, was born in Latvia. She has been an art therapist since 1969 and was a faculty member of the Expressive Therapies graduate programme at the University of Louisville, Kentucky, from 1974 to 1995 (as director from 1985 to 1995). She is an honorary life member of the American Art Therapy Association and has served on the Editorial Boards of art therapy journals. She is the author of *Imagery and Visual Expression in Therapy* (1990), as well as many book chapters and articles on art therapy, imagery and sandtray therapy.

**Kristīne Mārtinsone**, PhD, is a professor at Rīga Stradiņš University, Latvia, Head of the Department of Health Psychology and Pedagogy at the Faculty of Public Health and Social Welfare and an expert in psychology in the Latvian Science Council. She has authored/co-authored more than 200 scientific publications, including her work as a compiler and scientific editor of collective monographs, collections of articles and textbooks. Dr Martinsone

is the key contributor for the establishment and development of arts therapies education and professions in Latvia.

**Elizabeth McAdam**, MA, RDT, is Associate Director of the ALIVE Program at the Post Traumatic Stress Center in New Haven, Connecticut, providing trauma-centered drama therapy services in both clinical and public school settings. She is also an adjunct faculty member at New York University. As a former educator-turned-drama therapist, she is interested in examining systems of power, privilege and oppression within educational settings and working with students to connect their lived experience to their learning process.

**Helen Odell-Miller**, PhD, OBE, is Professor of Music Therapy, and Director of the Cambridge Institute for Music Therapy Research at Anglia Ruskin University. As a therapist, and manager of the arts therapies services in mental health, she contributed to the development of music therapy in the UK and internationally. She has published and lectured widely and is a founder of the European Music Therapy Council. She is a Board Member for The Music Therapy Charity, and The International Consortium for Research in the Arts Therapies (ICRA). She is a pianist and violinist, and she primarily sings with Cambridge Voices, in the UK.

**Amelia Oldfield**, PhD, has worked as a music therapist with children and families in the UK for over 34 years. She currently practices as a clinician in Child and Family Psychiatry in Cambridge and is a professor and lectures at Anglia Ruskin University, where she co-initiated the MA Music Therapy Training in 1994. She has completed four music therapy research investigations and published six books and many articles in refereed journals. She has presented papers and run workshops at conferences and universities all over the world.

**Unnur Ottarsdottir**, PhD, has practiced art therapy in private practice and in a variety of organizations, including schools in Iceland, since 1990. She completed a PhD in art therapy at the University of Hertfordshire, in England, in 2006. Unnur conducts research on art therapy at the Reykjavik Academy, and she has written articles and book chapters about art therapy and the methodology of Grounded Theory. Unnur has taught art therapy at the Icelandic Academy of the Arts, University of Akureyri, University of Iceland (continuing education programme), the Art Therapy Association of Romania and the University of Hertfordshire in England.

**Päivi Pylvänäinen** is a clinical psychologist and a dance movement therapist. She completed DMT training in the US at the MCP Hahnemann University (Drexel University). She has done clinical work in occupational rehabilitation and psychiatric outpatient service, working with individuals and groups. She also contributes to the DMT training in Finland. Currently she

is completing her doctoral dissertation at the University of Jyväskylä (Finland), which brings together her research and international publications on body image, body memory, DMT and depression. She is the president of the Finnish Dance Therapy Association.

**Gary Raucher**, MA, LMFT, RDT-BCT is a professor in the Drama Therapy Program at the California Institute of Integral Studies (CIIS) in San Francisco. He is in private practice with broad clinical experience in community agencies, clinics and hospitals. His interest in psychology, spirituality, somatics and holistic health has led to certifications in several spiritual and healing disciplines. His community work has included introducing drama therapy as a modality for HIV support-groups in the 1990s and behavioral research aimed at reducing transmission of HIV-AIDS. He is a past Vice-President of the North American Drama Therapy Association (NADTA) and received its 2015 Annual Service Award.

**Nisha Sajnani**, PhD, RDT-BCT, is Director of the Drama Therapy Program and on faculty in the Rehabilitation Sciences PhD and Educational Theatre EdD/PhD Program at New York University. She is the editor of *Drama Therapy Review* and Past-President of the North American Drama Therapy Association. Dr Sajnani is a recipient of the Corann Okorodudu Global Women's Health Award from the American Psychological Association and the Research and Raymond Jacobs Memorial Diversity awards from the North American Drama Therapy Association. She is a visiting professor with the Harvard Program in Refugee Trauma.

**Kathrin Seifert**, PhD, is an art therapist working in the Department of Psychiatry and Psychotherapy at the University of Bonn, Germany, since 1996. Her doctoral thesis was on a photo-therapeutic model of treatment for inpatients with unipolar depression supervised by Professor Wichelhaus (University of Cologne) and Professor Maier (University Hospital of Bonn). Her main research focusses on art therapy in patients with severe mental illness. She organised exhibitions – paintings made by migrants, by depressive patients and by caregivers – at different hospitals and universities of art and applied sciences. She teaches and lectures at different universities. She exhibits her own creations.

**Nadya Trytan**, MA, RDT-BCT, is a drama therapist in private practice in Minneapolis, MN, where she provides services to mental health clients and drama therapy training to professionals. She is also on staff with the United Hospital Mental Health Department where she specializes in geriatric mental health, in addition to working with adolescent and adult inpatient and outpatient clients. She is Chair-Elect of the National Coalition of Creative Arts Therapies and Past-President of the North American Drama Therapy Association.

**Ania Zubala**, PhD, is a research fellow in health psychology at the University of the Highland and Islands, Scotland, where she develops research in arts therapies and arts in health, with particular focus on digital health and the wellbeing of remote communities and ageing populations. Ania's doctoral work enhanced understanding of arts therapies' role in treatment and prevention of depression. She is a peer-reviewer for a number of academic journals in the area of arts therapies, psychology and health and a collaborator and consultant on arts therapies research projects in the UK and beyond.

---

# Introduction

## Arts therapies' response to the global crisis of depression: current research and future developments

*Ania Zubala and Vicky Karkou*

---

We have known for a long time now that health is not simply a “lack of illness” but rather a constantly evolving condition of general wellbeing (WHO, 2017), enhanced by opportunities to be creative and form meaningful relationships. Holistic approaches to health and the need for humanising care are widely postulated (Todres, 2007), while pressures currently experienced in health and social care worldwide demand innovative solutions.

A recent major report demonstrated that arts can be enablers of connectedness and enhanced wellbeing on individual and community levels (All-Party Parliamentary Group on Arts, Health and Wellbeing, 2017). It is not surprising perhaps that researchers are increasingly more interested in exploring the nature of the long-established relationship between arts and health (Davies et al., 2014; Stuckey & Nobel, 2010) and, most importantly, the potential applications and relevance of this relationship in the modern context of fast-changing and ageing societies.

We know that arts may have powerful impacts on mood, actions and relationships and make important contributions to improved health, traversing treatment, recovery and maintenance (Karkou et al., 2017; MacDonald et al., 2012). We know this, as practitioners, from our daily experience. As researchers, we gather glimpses of the evidence, slowly painting a routinely patchy but evolving picture of the role of the arts therapies in enhancing global wellbeing. Developing excellent practice and research becomes, perhaps, an important support to our belief that arts therapies have the potential to improve health and wellbeing outcomes, can lead to reduced costs of healthcare, and contribute to more resilient and engaged communities.

Depression is the most common of the mental health problems one may face, exacerbated at times of crisis and global unrest. The socio-economic and political changes that are currently affecting us, as they have done throughout human history, create fear and pose a threat to what is known and familiar. In the face of a perceived inability to control the situation, anger, fear, and insecurity can be internalised, turning against oneself, resulting in helplessness and hopelessness (Seligman, 1974). Depression is one of the most likely, though destructive, responses to both global and individual challenges of the fast-changing and unpredictable modern world.

It is, thus, described as a “global burden” or a “global crisis” (WFMH, 2012; Cagney, 2015). To reflect its complex presentation, treatment of depression requires an appropriately holistic and individual approach, often combining pharmacological and psychosocial interventions. By responding to the universal human need for self-expression, not necessarily on a verbal level, arts therapies could potentially address the common withdrawal within depression and encourage sharing. For a more widespread access to arts therapies, we need to understand how arts therapies contribute to the treatment of the condition or to enhancing the lives of those who live with it.

In scoping literature reviews (Mala et al., 2012; Zubala, 2013), we found that, although numerous case studies have confirmed that arts therapies are used extensively to address depression, the effectiveness, and to some extent the nature of these interventions, remained unclear. There seemed to be a lack of robust research to support the wealth of anecdotal evidence or to explain what the active ingredients of therapy were. While health providers and policy makers seemed to need convincing scientific evidence to continue, or indeed, introduce arts therapies as part of health provision, we were aware that it was becoming increasingly difficult to provide this much-needed proof.

In general, quantitative research on primary depression is sparse, but there are significant studies that consider depression-related outcomes in people suffering from other conditions, like cancer, dementia, or substance misuse (Geue et al., 2010; Guetin et al., 2011). Two Cochrane reviews (Meekums et al., 2015, Maratos et al., 2008) confirmed methodological inadequacy of the majority of the research studies evaluating the effectiveness of dance movement therapy and music therapy for depression. However, both indicated potential benefits of arts therapies and highlighted urgent need for more high-quality research. The most recent Cochrane review (Aalbers et al., 2017) indicates that music therapy provides at least short-term benefits for people with depression but stresses the need of further research investigating mechanisms of this therapy for depression specifically. Another meta-analysis confirms the potential of music therapy interventions for not only successfully addressing the symptoms of this condition but also for improving the quality of life across many age groups for those who live with depression (Laubner & Hinterberger, 2017).

While evidence synthesis is crucial for the disciplines, we need to also remember that the sole focus on effectiveness does not always paint a full picture of the needs and complexities of modern practice and health culture where “does it work?” is perhaps not the most appropriate and certainly not the only question we should be asking. Arts therapies provision demands answers to more complex questions: for whom interventions work, in what contexts, and, as noted previously, what their active ingredients are, which are all questions already posed in psychotherapy by researchers such as Roth & Fonagy as early as 1996. It is argued that wider psychotherapy research on active ingredients of therapy (Yalom & Leszcz, 2005; Laurenceau et al., 2007), while being important and often providing a methodological base, does not focus on unique arts therapies

ingredients (Sporild & Bonsaksen, 2014). A few attempts have been made on this front so far across arts therapies that need further attention and research support. For example, although Karkou and Sanderson (2006) (see also Karkou, 2012, 2017) in the survey of UK practitioners have identified shared therapeutic trends (namely humanistic, psychoanalytic/psychodynamic, developmental, active/directive, and artistic/creative and eclectic/integrative), the key features of arts therapies they describe emerge from a review of the literature. They name, for example, participatory definitions of the arts, creativity and playfulness, imagery, symbolism and metaphors, non-verbal communication, and the triangular therapeutic relationship between the client, the therapist, and the arts work; all are still to be tested through empirical data. Similarly, Koch (2017) attempts to articulate active factors across the different arts therapies, whilst there is a growing number of publications that refer to therapeutic factors specific to their discipline (Czamanski-Cohen & Weihs, 2016; Robb, 2016; Gabel & Robb, 2017). In many cases the evidence base of these factors demands further investigation. Thanks to the researchers from Sweden in particular, we have very recently learned more about the therapeutic factors in art therapy to address depression (Blomdahl et al., 2013). Nevertheless, to our best knowledge, no similar reviews are available in other arts therapies, and despite the above advances in recent years, the gap in knowledge remains.

While we are observing a slowly but steadily growing body of research, the still fragmented evidence does not (yet) paint a consistent picture of arts therapies' role in tackling depression. More in-depth insights into the mechanisms of practice are needed to initiate the process of evaluation, which could potentially place arts therapies among other well-recognised treatment options.

Inspired by the above questions and challenges, a few years ago we set out to find out how arts therapists work with depression in the UK context, with which we were most familiar. Our initial research involved a nationwide survey completed by nearly 400 practitioners of all arts therapies disciplines (Zubala et al., 2013, 2014a; a follow up survey from Karkou, 1998). We learnt from them that over 91% therapists worked with depression in their daily practice and for 17% depression was the main focus of their work. Those therapists who specialised in depression tended to work with adults and older adults rather than children, which is not surprising given the growing reluctance to diagnose childhood depression. Our findings also seem to indicate that working with depression requires experience from the therapists, suggesting the level of challenge such work poses. Arts therapists who worked primarily with depression worked with groups significantly more often and agreed more strongly with psychoanalytic/psychodynamic principles than arts therapists who did not encounter depression among their clients. The respondents' practice was influenced primarily by attachment theory and group analysis, but it was often an eclectic/integrative approach responsive to the needs of individual clients or settings and reflecting the underlying problems, comorbidity, and the complex

nature of depression. Main themes in this work included: a) motivation (mainly, how to attract clients to therapy, while they are likely to continue once they have started attending); b) reconnecting (in response to withdrawal, disconnection, and isolation); c) depression as “desired state” (consequence of therapy, indicating change, typically a “depression spike” (Hayes et al., 2007), following reconnection with self and/or emotions); and d) re-parenting (re-building trust and relationships) (Zubala et al., 2014b).

Following the survey, we designed a pilot clinical study (Zubala, 2013; Zubala et al., 2016), in which an art therapy group for adults suffering from depression was facilitated. Within the general quasi-experimental design, we attempted to include multiple methods in order to demonstrate how quantitative, qualitative, and arts-based methods could be creatively combined to offer multidimensional findings meaningful to a range of audiences and potentially achieving wider impact. We were able to observe not only positive changes in depression levels and self-reported wellbeing but also understand participant experience and identify benefits of therapy as described directly by the participants. We were also able to examine the therapeutic process taking place and draw more in-depth meaning of the journey through the therapy by using elements of artistic inquiry. Synthesising all findings led to a conclusion that the tension between the desire to withdraw and desire to connect prevailed in the group and created a place from where the therapeutic process could develop. Through therapy, this “creative tension” eventually enabled self-expression and connection in the group – and these had therapeutic effects in lowering anxiety levels and building stronger relationships (for details see Zubala, 2013).

While working on these projects, we were becoming increasingly aware of the developments in the area from research teams in other parts of the world. We wanted to capture this often fragmented but certainly growing evidence to support arts therapies’ unique role in addressing the global burden of depression. We hoped for this research to be more visible, accessible, and inspirational for arts therapists, trainees, other health practitioners, researchers, and those shaping health provision.

And so, we were thrilled to be offered the opportunity to compile this work in a book as part of the International Research in the Arts Therapies series. We invited contributions from around the world including evidence of best research and accounts of diverse evidence-based practice, as well as discussion and critique of both existing practice and research methodologies. We were delighted and privileged to work with 26 authors, practitioners, and researchers, who contributed chapters diverse methodologically, often highly personal, and showcasing work from all arts therapies disciplines and with all age groups. In this volume, arts therapists from the UK, Finland, Norway, Iceland, Germany, Austria, and Latvia talk about their work next to arts therapists from the US, Canada, and Saudi Arabia, while examples of practice in Singapore and Malaysia are also included. Collaborations across countries are apparent, highlighting shared needs for collaborative and interdisciplinary research.

We are now presenting you with what we believe is a comprehensive (though by no means complete) compilation of expert knowledge on arts therapies' potential in addressing depression. The three sections correspond to particular life stages (children, adults, older people) and individual chapters within them represent the main four arts therapies disciplines (music therapy, art therapy, dance movement therapy, and dramatherapy) and less-known arts-based therapies, e.g. phototherapy.

Chapters 1 to 4 are dedicated to research and practice of arts therapies with children and young people. In the very first chapter in this volume, Amelia Oldfield introduces us to a music therapy assessment tool, discusses its use within the family psychiatric unit in the UK, and offers case vignettes, illustrating the mechanisms and benefits of music therapy for children with symptoms of depression. In Chapter 2, Unnur Ottarsdottir explains how art therapy was integrated within an educational setting in Iceland to address trauma-related depressive symptoms experienced by a particular young client, whom we meet again 17 years after his therapy. Chapter 3 again refers to trauma: using examples from two case studies from their practice in the US, Elizabeth McAdam and David Read Johnson propose how trauma-centred drama therapy could be used to reduce depression in adolescents. Final in this section is the chapter by Badr Alrazain and the editors of this volume, who describe the development and first application of a culturally sensitive movement-based arts therapy programme in primary schools in the Kingdom of Saudi Arabia.

Chapters 5 to 10 discuss ways of application and benefits of arts therapies for depression in adult population. In Chapter 5, Nisha Sajnani and co-authors from the US use the method of a collaborative discourse analysis to discuss the nature of their drama therapy work with adults experiencing depression and the therapeutic mechanisms that underpin their practice. In Chapter 6, Ania Zubala introduces her UK-based research on art therapy, highlighting the new method of visualising the moments of change, and guides us through the therapeutic process in an art therapy group for adults experiencing depression. Päivi Pylvänäinen from Finland in her Chapter 7 proposes a dance movement therapy model, which explains how DMT alleviates depression by promoting more flexible ways of relating with the environment and the self. In Chapter 8, David Gussak and Ashley Beck from the US discuss the nature of depression in a prison environment and demonstrate how art therapy assists inmates who suffer from depression in regaining purpose and identity. A collaborative and international Chapter 9, by Helen Odell-Miller (UK), Jörg Fachner (Germany), and Jaakko Erkkilä (Finland), explains the potential of music therapy to address depression from neurological, musical and psychological standpoints. Finally, in Chapter 10, Kathrin Seifert from Germany introduces us to phototherapy and the role it could play in alleviating the symptoms of depression.

Chapters 11–15 complete the life cycle mirrored within this volume and enhance our understanding of the role of arts therapies in addressing depression in later life. Initially, in Chapter 11, Jane Burns from the UK explores the

potential of art therapy to support an older person to express and process loss, often underpinning depression in older age. In Chapter 12, Sue Jennings from the UK describes her work with people affected by dementia, including examples from Singapore and Malaysia, and highlights how dramatherapy responds to their need for playfulness and creativity – an antidote for depression. Chapter 13 invites us into the care home and the ballroom, and Iris Bräuninger, a German dance therapist based in Switzerland, discusses the emotional, psychosocial, and recreational roles that dance movement therapy plays in addressing depression in older adults. In Chapter 14 an international team, Jasmin Eickholt (Germany), Monika Geretsegger (Austria), and Christian Gold (Norway), introduce an evidence-based working model of music therapy for depression associated with later life and discuss its role in reducing isolation, improving mood, and increasing self-esteem. In the final chapter in this volume, Jana Duhovska, Vija Bergs Lusebrink, and Kristīne Mārtinsone from Latvia and the US present application of the Expressive Therapies Continuum in music therapy for cancer-related depression in older age.

As indicated above, particular contexts are explored in this book as uniquely influencing the type of arts therapies delivered. Chapters of work in schools or in prisons for example, remind us of the impact the setting has on how symptoms of depression are expressed and how the work is modified to address these needs. Working with staff in care homes is mentioned a few times as active support in caring for older people. Many authors talk about working with clients who do not have a formal diagnosis but do have symptoms of depression next to other conditions, such as ADHD, autism, trauma, eating disorders, and dementia. Diverse settings and client groups in this volume correspond to real life practice. Such complexity perhaps highlights potential methodological difficulties with designing robust and clinically-meaningful research in the area.

Since we believe that arts therapies research should reflect the essentially creative and non-linear character of the interventions (Gilroy, 2006), the book has become a compilation of examples of similarly diverse research designs and methods. Methodologies included range from case studies to randomised controlled trials, from experience-focused, arts-based research to neuroscience. Both process and outcome are equally important. Theoretical explanations of why certain practices may work add to the discussion around therapeutic factors and active ingredients responsible for therapeutic change. Models of practice enable us to identify and theoretically explain particular arts therapies perspectives that have been developed specifically for the treatment of depression. Focus on therapists' and clients' perspectives completes the picture of current practice and is an essential step towards further process and outcomes research.

We trust that arts therapies research needs to be courageous, bold, and innovative – and essentially responsive to the needs of highly individual communities and ways of providing services in different contexts. It needs both learning from the current models of health and developing new, more appropriate approaches. It should reflect the creative nature of the disciplines and

focus equally on the outcomes and the process (Meldrum, 1999; Gilroy, 2006; McNiff, 2007). Creativity here is essential, while long-established research designs such as clinical trials may need to be adapted to remain relevant to the changing needs of societies. Nevertheless, responsiveness and flexibility does not have to compromise systematism and robustness – combining these qualities will ensure the success of arts therapies research and practice. Perhaps the future might see us undertaking more longitudinal studies, participatory research and developing arts-based methods appropriate for the field (Ledger & Edwards, 2011). We also believe that the future of research in arts therapies lies in interdisciplinary collaboration and openness towards novel ideas. Our field of practice and research naturally reaches across and beyond disciplines. Learning from, but extending beyond, the medical model is essential and could eventually bridge the current gaps between arts, science, and health.

As we were approaching the completion of this book, even more questions started to arise. Among them, how else can we, as researchers and practitioners, enrich study designs with methods more suited to our area of work, reflecting real life practice, and the needs of real clients we work with? Each research project and new method developed is a contribution to the emerging knowledge on arts therapies' current and future response to depression. It is absolutely crucial that we continue this work.

We hope that identifying the best possible ways of addressing depression, sharing experience of tools and approaches that work, and discussing particularly relevant methods of evaluation will inevitably lead to a conscious and confident evidence-based practice. We also hope that understanding the nature of depression itself and its response to arts therapies interventions will ensure that future practice is enriching and satisfying for the practitioners – empowered not only to work successfully with depression but also to share current research evidence with other professionals from health, education, and arts sectors.

We would like to welcome you on the journey towards uncovering some of the many faces of depression that our authors encountered in their practice and research. Ultimately, we hope that the journey will lead you to truly evidence-based, as opposed to purely intuitive, recognition of arts therapies' potential to address depression, reveal creativity, and promote empowering self-expression. In the end, arts therapies can simply help us all see beyond depression and into health and wellbeing for ourselves, our loved ones, and the communities we live in.

## References

- Aalbers, S., Fusar-Poli, L., Freeman, R. E., Spreen, M., Ket, J. C. F., Vink, A. C., Maratos, A., Crawford, M., Chen, X. J., & Gold, C. (2017). Music therapy for depression. *Cochrane Database of Systematic Reviews*, 2017(11). Art. No.: CD004517. Doi: 10.1002/14651858.CD004517.pub3.
- All-Party Parliamentary Group on Arts, Health and Wellbeing (2017). Creative health: The arts for health and wellbeing. Retrieved from [www.artshealthandwellbeing.org.uk/appg-inquiry/](http://www.artshealthandwellbeing.org.uk/appg-inquiry/)

- Blomdahl, C., Gunnarsson, A. B., Guregård, S., & Björklund, A. (2013). A realist review of art therapy for clients with depression. *Arts in Psychotherapy*, 40(3), 322–330. Doi: 10.1016/j.aip.2013.05.009.
- Cagney, H. (2015). Depression: An economic and moral case to tackle the crisis. *The Lancet Psychiatry*, 2(1), 20.
- Czamanski-Cohen, J., & Weihs, K. L. (2016). The bodymind model: A platform for studying the mechanisms of change induced by art therapy. *The Arts in Psychotherapy*, 51, 63–73. Doi: 10.1016/j.aip.2016.08.006.
- Davies, C. R., Knuiman, M., Wright, P., & Rosenberg, M. (2014). The art of being healthy: A qualitative study to develop a thematic framework for understanding the relationship between health and the arts. *British Medical Journal Open*, 4, e004790. Doi: 10.1136/bmjopen-2014-004790.
- Gabel, A., & Robb, M. (2017). (Re)considering psychological constructs: A thematic synthesis defining five therapeutic factors in group art therapy. *The Arts in Psychotherapy*, 55, 126–135. Doi: 10.1016/j.aip.2017.05.005.
- 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(3–4), 160–170.
- Gilroy, A. (2006). *Art therapy, research and evidence-based practice*. London: Sage Publications.
- Guetin, S., Florence, P., Gabelle, A., Touchon, J., & Bonté, F. (2011). Effects of music therapy on anxiety and depression in patients with Alzheimer's disease: A randomized controlled trial. *Alzheimer's & Dementia*, 7(4, Supplement), e49. Doi: 10.1016/j.jalz.2011.09.204.
- Hayes, A. M., Laurenceau, J.-P., Feldman, G., Strauss, J. L., & Cardaciotto, L. (2007). Change is not always linear: The study of nonlinear and discontinuous patterns of change in psychotherapy. *Clinical Psychology Review*, 27, 715–723. Doi: 10.1016/j.cpr.2007.01.008.
- Karkou, V. (1998). A descriptive evaluation of the practice of arts therapists in the UK (Doctoral thesis). University of Manchester.
- Karkou, V. (2012). Aspects of theory and practice in dance movement psychotherapy in the UK: Similarities and differences from Music Therapy. In R. A. R. MacDonald, G. Kreutz, & L. A. Mitchell (Eds.), *Music, health and wellbeing* (pp. 213–229). Oxford: Oxford University Press.
- Karkou, V. (2017). Explainer: What is dance movement psychotherapy? *The Conversation*. Retrieved December 06, 2017 from <https://theconversation.com/explainer-what-is-dance-movement-psychotherapy-79860>.
- Karkou, V., Oliver, S., & Lycouris, S. (2017). *The Oxford handbook of dance and wellbeing*. New York: Oxford University Press.
- Karkou, V., & Sanderson, P. (2006). *Arts therapies: A research-based map of the field*. Edinburgh: Elsevier.
- Koch, S. (2017). Arts and health: Active factors and a theory framework of embodied aesthetics. *The Arts in Psychotherapy*, 54, 85–91. Doi: 10.1016/j.aip.2017.02.002.
- Laubner, D., & Hinterberger, T. (2017). Reviewing the effectiveness of music interventions in treating depression. *Frontiers in Psychology*. Doi: 10.3389/fpsyg.2017.01109.
- Laurenceau, J.-P., Hayes, A. M., & Feldman, G. C. (2007). Some methodological and statistical issues in the study of change processes in psychotherapy. *Clinical Psychology Review*, 27, 682–695, Doi: 10.1016/j.cpr.2007.01.007.
- Ledger, A., & Edwards, J. (2011). Arts-based research practices in music therapy research: Existing and potential developments. *The Arts in Psychotherapy*, 38(5), 312–317. Doi: 10.1016/j.aip.2011.09.001.

- MacDonald, R. A. R., Kreutz, G., & Mitchell, L. A. (2012). What is music health and wellbeing and why is it important. In R. A. R. MacDonald, G. Kreutz, & L. A. Mitchell (Eds.), *Music, health and wellbeing* (pp. 3–12). Oxford: Oxford University Press.
- Mala, A., Karkou, V., & Meekums, B. V. F. (2012). Dance/Movement Therapy (D/MT) for depression: A scoping review. *Arts in Psychotherapy*, 39 (4), 287–295. Doi: 10.1016/j.aip.2012.04.002.
- Maratos, A., Gold, C., Wang, X., & Crawford, M. (2008). Music therapy for depression. *Cochrane Database Systematic Review*, 1. Doi: 10.1002/14651858.CD004517.pub2.
- McNiff, S. (2007). Art-based research. In J. G. Knowles & A. L. Cole (Eds.), *Handbook of the arts in qualitative research: perspectives, methodologies, examples, and issues*. London: Sage Publications.
- Meekums, B., Karkou, V., & Nelson, E. A. (2015). Dance movement therapy for depression. *Cochrane Database of Systematic Reviews*, 2015(2), CD009895. Doi: 10.1002/14651858.CD009895.pub2.
- Meldrum, B. (1999). Research in the arts therapies. In A. Cattanch (Ed.), *Process in the arts therapies*. London: Jessica Kingsley.
- Robb, M. A. (2016). Overview of historical and contemporary perspectives on art therapy research. In D. Gussak, & M. Rosal (Eds.), *The Wiley handbook of art therapy*. Chichester, UK: Wiley and Sons, Ltd.
- Roth, A., & Fonagy, P. (1996). *What works for whom?: A critical review of psychotherapy research*. New York: Guilford Press.
- Seligman, M. E. (1974). Depression and learned helplessness. In R. J. Friedman & M. M. Katz (Eds.), *The psychology of depression: Contemporary theory and research*. Oxford, England: John Wiley.
- Sporild, I. A., & Bonsaksen, T. (2014). Therapeutic factors in expressive art therapy for persons with eating disorders. *Groupwork*, 24(3), 46–60. Doi: 10.1921/10201240104.
- Stuckey, H. L., & Nobel, J. (2010). The connection between art, healing, and public health: A review of current literature. *American Journal of Public Health*, 100(2), 254–263.
- Todres, L., Galvin, K., & Dahlberg, K. (2007). Lifeworld-led Healthcare: Revisiting a humanising philosophy that integrates emerging trends. *Medicine, Health Care and Philosophy*, 10, 53–63. Doi: 10.1007/s11019-006-9012-8.
- World Federation for Mental Health (2012). Depression: A global crisis. Presentation for World Mental Health Day, 12th October 2012. Retrieved from [http://wfmh.com/wpcontent/uploads/2013/11/2012\\_wmhday\\_english.pdf](http://wfmh.com/wpcontent/uploads/2013/11/2012_wmhday_english.pdf).
- Yalom, I., & Leszcz, M. (2005). *Theory and practice of group psychotherapy* (5th ed.). New York, NY: Basic Books.
- Zubala, A. (2013). Description and evaluation of arts therapies practice with depression in the UK (Doctoral thesis). Queen Margaret University. Retrieved from <http://etheses.qmu.ac.uk/1775/>
- Zubala, A., MacIntyre, D. J., Gleeson, N., & Karkou, V. (2013). Description of arts therapies practice with adults suffering from depression in the UK: Quantitative results from the nationwide survey. *The Arts in Psychotherapy*, 40(5), 458–464. Doi: 10.1016/j.aip.2013.09.003.
- Zubala, A., MacIntyre, D. J., Gleeson, N., & Karkou, V. (2014a). Description of arts therapies practice with adults suffering from depression in the UK: Qualitative findings from the nationwide survey. *The Arts in Psychotherapy*, 41(5), 535–544. Doi: 10.1016/j.aip.2014.10.005.

- Zubala, A., MacIntyre, D.J., & Karkou, V. (2014b). Art psychotherapy practice with adults suffering from depression in the UK: Qualitative findings from depression-specific questionnaire. *The Arts in Psychotherapy*, 41(5), 563–569. Doi: 10.1016/j.aip.2014.10.007.
- Zubala, A., MacIntyre, D.J., & Karkou, V. (2016). Evaluation of a brief art psychotherapy group for adults suffering from mild to moderate depression: Pilot pre, post and follow-up study. *International Journal of Art Therapy*, 22(3), 106–117. Doi: 10.1080/17454832.2016.1250797.

# Arts therapies with children and adolescents experiencing depression

---