An Exploration of an Insecure Attachment Pattern and Identification Processes in Art Therapy: A Case Study of an Eight Year Old Girl

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Abstract

An Exploration of an Insecure Attachment Pattern and Identification Processes in Art Therapy: A Case Study Illustration of an Eight Year Old Girl

Tara Narbonne

An insecure attachment can have a significant effect on a child’s sense of security and development throughout his or her lifetime. This narrative case study explores and discusses how facets of an insecure attachment pattern and the issue of identity are revealed in art therapy. The artwork and symbolic play from sessions are analyzed under the scope of Object Relations and Attachment theories. Symbolic play was incorporated within the art therapy sessions with this child as further means to help identify underlying thoughts and emotions relating to insecure attachment and issues pertaining to identity. The literature review investigates various Attachment theories and how attachment relates to creativity, as well as Identity formation processes, threats to identity and responses to those threats. The results of this case study signify therapeutic growth, and the paper illustrates numerous ways in which issues of insecure attachment and identity can be explored via the therapeutic alliance, artwork, and symbolic play.
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Introduction

The rationale for this paper is to explore attachment theory and its relationship to art therapy. During my research, a number of questions have been raised, such as how the facets of an insecure attachment are expressed and revealed within art therapy? What role does the therapeutic relationship play in the therapeutic process? How does a child’s identification with a parent relate to attachment? Finally, what are some of the common links between attachment and creativity?

In this paper, I postulate that art therapy provides a valuable resource for children to work through issues of insecure attachment. In addition, children bring into therapy relevant experiences that they can express and creatively work through.

This research paper focuses on the art therapeutic process of an eight-year old girl who has been diagnosed with Oppositional Deviance Disorder (ODD). Coming from divorced parents, she appears to have manifested elements of an insecure attachment. Although she does have a diagnosis of ODD, the focus of this paper will be on how her behaviors relate to attachment, as well as how her level of security transferred to the therapeutic relationship as well as within the artwork in therapy.

Included will be a case study and a session-by-session description that focuses on aspects pertaining to attachment and identity. The clinical content within each session will be analyzed under the attachment theory perspective, as well as using object relations to further explore the artwork produced within therapy.

This research paper consists of three chapters. The first section of chapter one will present an overview of the development of object relations theory, as well as an introduction to John Bowlby (1940) and the beginnings of attachment theory. Relevant
theorists will be presented such as Mary Ainsworth (1974) and what she describes as the Strange Situation, as well as various styles of attachment she has identified. The work of Margaret Mahler (1979) will also be discussed, highlighting the process of early mother-infant attachment in a process called Symbiosis. The second section provides information on Internal Working Models, and the effect that attachment styles have on future relationships. The Secure Base and its significance within attachment theory will also be introduced.

The second chapter will look at the use of a secure base within therapy, as well as its significance in the restructuring of maladaptive internal working models. Theorists will be presented including: Freud (1927), Erikson (1968), Lynn (1969), and Breakwell (1983) who have looked at processes of identity formation through parental identification. Also addressed will be further reasons for identifying with others, as well as potential threats to identity and responses to those threats. Although the threats and responses discussed may seem more applicable to adults, they can be adapted to children and have been included due to their relevance towards the particular individual this paper is based on. To end the first section of this chapter, the potential threat of divorce to a child’s identity will be discussed.

The next section of this chapter will provide links between the beginnings of attachment and creativity. Stern (1985) discusses early mother and infant interactions, and Winnicott’s (1965) “good enough” mother helps to link the mother’s attunement toward her infant and creativity. Moreover, object relations theory will be addressed as a method to further explore and analyze artwork, followed by the significance of using art therapy with children dealing with issues relating to attachment.
During the second half of therapy, play became the main focus, and therefore the final section of this chapter will concentrate on exploring play therapy as a way to work through issues of attachment and identity. The important function of repetition within play will also be highlighted, as well as the use of the “Two Houses” approach that was first termed by Erikson (1937), when working with children dealing with divorce. As this paper is primarily about art therapy, the theorists I have chosen to include are not necessarily of the first in developing play therapy. However, their writings spoke to me and have merit in this particular case presentation.

The third and final chapter presents the case study beginning with the methodology. The first half of art therapy is then described session by session followed by the second half of therapy which is focused primarily on symbolic play. The themes from the last half of therapy are described in groups due to the repetition of themes within the play, and in order to be more cohesive. The description of therapy will be followed by the theory application, and end with the discussion.
Chapter I: Object Relations and Attachment Theories: An Overview

Object Relations Theory

In the early 1940s, the British Psychoanalytic society was split into three viewpoints. The first group consisted of those who supported Melanie Klein’s modern theory and techniques. The second group were those who remained dedicated to more traditional Freudian concepts, lead by Anna Freud. Finally, the third group, or the “middle group”, was known as Object Relations theories. Key members of this group included W.R.D. Fairbairn, D. W. Winnicott, Michael Balint, John Bowlby, and Harry Guntrip, all of whom added to Klein’s theory of an infant’s inherent wiring for relationships (Mitchell and Black, 1995). The idea that infants possessed inborn aggression due to the death instinct was a Klenian view that was discarded by object relations theorists, as they believed infants innately desired harmonious, non-traumatic relationships and interactions that could be disturbed by less than adequate parenting. As a result, less emphasis was placed on aggression and sexuality and more on human interactions as an infant’s motivational force.

Object relations theory emphasized the significance of early human interactions and proposed that individuals exist within the context of interpersonal relationships, both consciously and unconsciously. It is within this environmental context of human relationships where an individual’s biological and psychological development occurs (Klein 1990). Therefore, the “primary, innate purpose of man is to seek, in desire and need, sustaining relationships with other persons who will provide support, gratification, and affirmation” (Klein, 1990, p. 31).
Bowlby and Attachment Theory

John Bowlby, a British psychoanalyst, is considered to be one of the most influential figures in the field of psychoanalysis and attachment theory. As well as being an integral part in the development of post-Kleinian object relations theories, he also used his knowledge of early relationships towards the development of attachment theory, introducing the significance of the bond between an infant and the primary caregiver, as well as its effect in the subsequent development of that child (Bowlby, 1940; 1958). Bowlby also attempted to explain the causes of an infant's distress during separation from the primary caregiver, proposing that an infant's behavior at the time of separation was composed of wired cognitions and emotions based on previous experiences with their caregiver. Attachment theory was created by combining psychoanalysis, ethology, cognitive information theory and developmental psychology, and is based on the premise that infants need a responsive caregiver that will provide and satisfy the infant's basic human needs (Holmes, 2001).

Bowlby was critical of the views expressed by Klein and Freud, feeling they did not properly account for the significance of a child's own experiences and environment in the further development of that child. His ideas were controversial at the time; however with growing theoretical knowledge and observations of parent and child separations, he established a sound scientific foundation on which to base his theory. His observations would eventually be used to help verify the role of the environment in a child's potential development of neurosis and problematic attachment patterns (Holmes 2001).

According to Bowlby (1940), the relationships built in the early stages of childhood are significant in determining the security level of attachment. The bond or
connectedness between mother and child is to be a warm, safe, and continuous relationship, with the quality of the infant's attachment depending on the quality of care provided by the primary caregiver. If the child expected sensitive and reliable care, she would then likely develop a secure attachment. On the other hand, if the care received by the child was lacking or inconsistent, she would most likely develop an anxious or insecure style of attachment. In essence, the quality of the bond between mother and child would inevitably contribute to the child's emotional and psychological development (Bowlby, 1940; 1958; 1988).

The distinguishing element between a healthy and non-healthy individual is ultimately the capacity to regulate and control conflicting feelings of love and hate, typically toward the same person, and the ability to resolve these feelings. Bowlby (1979) postulated that this ability will develop when a child is met with parents who approach outbursts by demonstrating a lack of fear towards the child's hostility, as well as a belief that the child is indeed capable of self-control.

**Ainsworth's Strange Situation and Attachment Styles**

In the 1970's, Mary Ainsworth conducted research based on Bowlby's attachment theory, devising a procedure called the *Strange Situation* in order to observe mother-infant interactions at times of separation and reunion. Researchers devised six specific maternal characteristics in order to observe the dyads (Ainsworth, Bell, & Stayton, 1974). *Sensitivity-insensitivity* looked at the degree to which a mother was tuned in to her infants' signals, establishing a direct correlation between the accuracy of a mother's perceptions and the alleviation of an infant's distress. The second scale was *acceptance-rejection*, which focused on the amount of positive and negative feelings a mother had
towards her baby. These feelings were measured by the frequency of her positively exhibiting that she accepted her role as a mother, as well as her child. The co-operation-interference scale measured the level of control that a mother exuded onto her infant’s behaviour and exploration. An exceedingly interfering mother would exhibit control over many of the infants’ actions, whereas a very co-operative mother would interfere only when necessary. Accessibility-ignoring assessed the degree to which a mother was psychologically available to her infant. An ignoring mother would exhibit thoughts or actions of preoccupation while the highly accessible mother would exhibit availability to her infant’s needs. Emotional expression measured the extent to which a mother was able to freely express emotions to her infant through verbal and non-verbal means. Finally, rigidity rated how much flexibility existed within the mother-infant interactions.

Through these observations, Ainsworth postulated three types of infant attachments; secure, insecure-avoidant and insecure-ambivalent. These categories were comprised based on certain characteristics felt and displayed by the infant due to the different levels of attachment security, and continue to be used today in order to assess children’s attachment styles.

Infants with a secure attachment experienced distress during separation, with the distress dissipating upon being reunited with their mother. The children also displayed a strong desire in maintaining a physical closeness with their mother, showing a great deal of resistance when their mothers attempted to put them to bed or simply create physical separation.

Infants classified as insecure-avoidant did not appear overly distressed at times of separation, and did not make any great attempts in achieving proximity or interactions
with the mother upon her return. The infants did not cling to their mothers when held or appear distressed when separated, instead displaying more neutral reactions. Typical responses included turning away, avoiding eye contact, or a preoccupation with other stimuli such as toys.

Some infants displayed proximity seeking behaviors, expressing distress when separated from their caregiver, yet also displayed resistance to the same caregiver upon being reunited. These infants fell into the insecure-ambivalent category, and had a tendency to refuse soothing behaviors which in turn had a negative impact on their levels of exploration. In general, these infants seemed to display maladaptive behavior which in turn impeded them from being soothed and settled (Ainsworth, 1978).

**Mahler and the Early Phases of Attachment**

Margaret Mahler (1979) was a member of object relations alongside Bowlby, and like Ainsworth, she was interested in the specific behaviors of a mother and infant in the early phases of attachment and described the phases of separation and individuation between mother and infant, referring to the process as symbiosis. Symbiosis is comprised of four phases; differentiation and body image, practicing period, rapprochement and object constancy.

The process of separation and individuation begins with differentiation and body image, a stage at which the infant starts to pull away from the mother. At around seven to eight months, the infant begins looking away from the mother, yet still feels the need to periodically check in with her. The mother must be careful not to rely on the infant’s mirroring of her as opposed to her own mirroring of the infant, or the normal development of the child may be disrupted.
During the *practicing period*, the infant begins to crawl, stand and eventually walk. The infant will continue straying at a close distance from the mother, frequently looking back to “check in”. Over-protectiveness within this phase could impede normal development, as the infant may develop an apprehension toward exploration.

Around one and a half years, the child seeks to share experiences with the mother in hopes of displaying a sense of accomplishment, and this *rapprochement* period is essential in the development of autonomy. The “terrible twos” can be a difficult time for parents if they view it as a power struggle, however in actuality it is the time for a child to develop self-reliance and the ability to say “no”.

The final phase of separation from the mother occurs at three years and older, where the internalization of the mother takes place. The actual presence of the mother is no longer as necessary, with the child now possessing an internal representation of a secure base. The child begins to cognitively assemble the external and internal mother, knowing that the mother will always return. The breakdown of the individuation process occurs if the child is incapable of establishing an internal representation of the mother or object, therefore unable to achieve object constancy (Mahler, Pine and Bergman, 1975).

Van Ijzendoorn and Sagi, as cited in Holmes (2001), summarized four main hypotheses fundamental to attachment theory. The *universality hypothesis* states that across cultures, infants innately become attached to one or more primary caregivers. The *normativity hypothesis* proposes that approximately seventy percent of infants become securely attached to caregivers, with the remaining developing a more insecure attachment. As well, securely attached infants have an easier time settling when under duress, and are therefore more prevalent and physiologically “normal”. The third
hypothesis is the sensitivity hypothesis, which states that secure attachment depends on sensitive and responsive care-giving. Lastly, the competence hypothesis, which values the effects of attachment security on social competence, and states that more securely attached children have a greater success rate in positive relations with others (p. 6).

**Internal Working Models**

Bowlby (1979) proposed that early caregiver relationships are transferred to an individual’s internal world. Taking the term from cognitive psychology, Bowlby (1969, 1973) used the term “internal working model” to refer to the process of a child internalizing these external relationships. Internal working models, or IWM’s, represent expectations of the self, the other, as well as the relationship between the two, and are central aspects of attachment theory due to their pervasiveness throughout an individual’s mental and emotional development. Griffith (2004) describes these models as “unique, individualized conceptualizations of self that are embedded in and influenced by the surrounding sociocultural environment” and are “…composed of beliefs, goals, and strategies that provide a framework that defines identity” (p. 163).

IWM’s act as guides to help individuals perceive themselves as well as perceive others, and shape the way that one interprets or behaves with others. In turn, one’s perceptions can have an impact on how others treat them, thus potentially reaffirming their beliefs of adequate or inadequate care. West and Sheldon-Keller (1994) describe this process as being “cyclical and mutually reinforcing” (p. 66), suggesting that pertinent events and relationships eventually unite to create an attachment pattern.

Attachment theory strongly supports that attachment styles acquired by infants will most likely continue to influence future relationships (Ainsworth, 1985; Bartholomew,
A child that has experienced responsive, reliable care and developed a more secure attachment will most likely possess a strong sense of worth. This will help the child expect the same consistent responsiveness from others. Conversely, a child that has not received stable responses from the caregiver and developed a more insecure attachment style may grow to expect inconsistent care, or unresponsiveness from others, and therefore reaffirm the child's view as unworthy and unacceptable (Cassidy, 2000).

**A Secure Base**

The term *secure base* is widely used within attachment theory writings (Ainsworth 1973; Ainsworth, Blehar, Waters, & Wall, 1978; Bowlby, 1988). Originally referring to an attachment figure that provides a safe place for a child in distress, the secure base allows a child to explore with the knowledge that returning to the base is an option should a threat present itself. When the danger has disappeared, exploration can continue, provided the secure base continues being present. Both secure and insecure attachments can occur with the secure base due to shifting situations, however without some form of a security, survival is near to impossible (Holmes, 2001).

Early attachment contributors thought of the secure base solely in behavioral terms, primarily the physical form of an infant in times of stress. However, in order to apply the term across the lifespan and include adults, the secure base became referred to as the actual physical presence, or an internal representation of the attachment figure (Ainsworth, 1982).

Holmes (2001) describes the early child-caregiver secure base experience as (1) a set of behaviors activated by threat; (2) a response to those behaviors by the care-giver; and
(3) a psychophysiological state that is the end result of those behaviors (p. 9). Responses from the caregiver to provide a child with a secure base may include characteristics such as "responsiveness, sensitivity, consistency, reliability, attunement, the capacity to absorb protest and 'mind-mindedness', and the ability to see the distressed child as an autonomous and sentient being with feelings and projects of his or her own" (p.9).

This chapter has presented a brief overview of object relations theory, as well as Bowlby and his development of attachment theory. In addition, the works of Ainsworth and Mahler were discussed in order to better understand the various styles of attachment, and characteristics of the early phases of mother-infant interactions. Furthermore, the functions of internal working models were addressed as well as how an infant’s attachment style can go on to influence future relationships. Lastly, the secure base was presented and its importance in the development of a secure attachment style.
Chapter II: Attachment and Parental Identification in Art Therapy and Play Therapy

A Secure Base in Therapy

From the attachment perspective, the importance of the therapeutic alliance is emphasized in order to create a secure base in the relationship between the therapist and client, as well as the client’s internal representation of that relationship (Bowlby, 1988; Holmes, 2001).

Bowlby (1988) suggested that a secure base in therapy allows the client to feel secure in order to explore thoughts and feelings that may have been previously too threatening to explore in earlier relationships. The client’s behavior in therapy, including expression of internal working models and defenses stemming from insecure attachments, originate from early attachment experiences. Through the process of therapy, these internal working models can be brought to consciousness and hopefully altered in to more positive ways of relating and responding to the therapist. The recognition and adjustment of these maladaptive patterns of relating may in turn aid the client when it comes to forming and maintaining more positive and secure relationships outside of therapy (Griffith, 2004; Holmes, 2001).

Responsiveness and attunement are vital on behalf of the therapist in establishing a secure base, as well as the therapist’s ability to accept and contain the client’s anger. The therapist’s responsiveness and attunement towards the client helps to foster intimacy, while the client’s expression of anger towards the therapist allows for the establishment of autonomy (Holmes, 2001).

Holmes (2001) also discusses the importance of matching the therapists’ style and therapeutic framework to the attachment style of the client. For instance, in the case of a
client that is avoidant, the therapist might be more non-intrusive in the level of responsiveness, in order for the client to discover and acknowledge the therapist as “another self”. In the case of a client with a more ambivalent style, the therapist may require a more rigid and consistent frame to make the client feel safer in expressing anger, and therefore become more autonomous. Holmes suggests that autonomy is made possible through a secure base, and when the security is there, one can “go out on a limb, stand our ground, make our own choices and tolerate separation if we can be sure that intimacy is available when needed” (p. 139). The client may become close to the therapist upon feeling a sense of security and autonomy, without any fear of being overwhelmed or attacked in any way.

**Freud, Erikson, Lynn, Breakwell, and Identity Formation**

Many theories exist about identity and its formation (Freud, 1927; Breakwell, 1983; Erikson, 1968; Lynn, 1969). It is through the shaping of attachments that a child’s identity is developed and established, as children often try to identify with a parent, especially of the same gender.

Freud (1927) described the motivations behind this process for boys as the fear of the father’s aggression, and for girls as the fear of losing the mother’s love. As the case study presented here is that of a young girl, the focus will be on Freud’s view regarding identification among girls. Freud went on to explain that young girls have an infantile fixation on the mother, but feel cheated upon noticing her lack of a penis, and thus turn to the father. When this impossibility is recognized, the girl gives up. Lacking the motivating force of the fear of castration, the impossibility of the situation is recognized and the girl is propelled to identify with her mother, believed by Freud to be a product of
the girl’s fear her mother would not return her love. To some, Freud’s theory may be
considered outdated or sexist, and more recent theorists have used Freud’s process of
becoming identified as a departure for further work in the field of identity formation.

Erik Erikson (1963) followed Freud’s work in the study of identity, describing seven
psychosocial stages in the social and emotional development of an individual. He looked
at a child’s identity development in the context of internal workings as well as social
surroundings, emphasizing the contribution of social relationships, especially early,
significant relationships with parental figures (1968; 1981).

Lynn (1969) describes identification, or the process of identifying with someone, as
referring to a person’s similarity to: (1) another individual, (2) individuals belonging to
some body of people, or (3) individuals within a single category, a similarity often
described as a sort of emotional bond. Secord and Backman (1964), as cited in Lynn,
modified the following seven principles to aid the explanation of the identification
process. Some of these principles, or reasons for identifying with a particular model,
may overlap in reality, and the first two have obvious roots in Freudian theory.

The first principle is fear of punishment, when a model is identified with due to a
fear of being punished by that individual. The second principle is fear of withheld love,
which occurs when an individual is chosen due to a fear of losing that person’s love.
Reinforcement is the third principle, when an individual imitates a model or engages in
sex-typical behavior, in hopes of rewards when she does so and to avoid being punished
when she does not. Vicarious reinforcement occurs when someone is imitated for the
vicarious experience of receiving rewards. The fifth principle is status envy, when an
individual is chosen due to envy of being the recipient of rewards from others. Power
envy occurs when a model is chosen because the power possessed by him or her is sought by the individual. Finally, similarity happens when a person is chosen due to the individual’s perception of their similar characteristics.

Sears et al., as cited in Lynn (1969), furthered Freud’s concepts in a learning theory framework, including withholding love as part of bringing about identification. They state that “if the mother is always present and nurturant, the child will have little occasion to copy her action in order to obtain self-reinforcement” (p. 8). However, if the mother is not always present or is disapproving, the child will not be motivated to imitate her actions. A child’s motive to identify with a parent is most likely to happen when affection and nurturance are provided but periodically withdrawn, ensuring that the child will be rewarded when reproducing the parent’s behavior.

Breakwell (1983) discusses the nature of threats to identity and states that multiple experiences could potentially be threats, including “any thought, feeling, action or experience which challenges the individual’s personal or social identity...” (p. 13). An individual may experience threats to her identity and have self-descriptions challenged if change takes place and old labels are no longer applicable to that individual, or because society has changed the meaning of a label. Humans also tend to place great importance on remaining consistent in order to maintain self-esteem, and anything that prevents this consistency over time may pose a threat to identity. Breakwell continues to explain that threats to self-esteem and consistency exist on three different levels. The first is attacking the individual, which insists that the individual is not what she thinks she is, and challenges whether or not the person in question has the desired personal characteristics. The second level is attacking the individual’s group memberships, which
occurs when an individual is told that she should not be part of a particular group that she values. Finally, the third level of threat is *attacking the individual’s group*, and involves degrading the group to which the individual belongs. This is a threat to identity in that the individual’s identity derives from the group, and an attack on the group in turn would mean an attack to the person’s self-esteem.

When there are threats to identity, there are responses to those threats. Breakwell (1983) goes on to explain that there are three main categories of responses to threats of identity: *a) Reconstrual, b) Mobility or change, and c) Inertia*. The ways in which these responses are elicited depend on the type and severity of threat, and though these responses may seem more applicable to adults, they still have merit when adapted to children.

*Reconstrual* is a purely cognitive process that undervalues a threat, or reinterprets the threat in order to dismiss or lessen it. An individual may also respond to threat by reconstructing her identity. The threat in this case may be too difficult to ignore or integrate into one’s self perception, so the individual in turn changes her idea of her identity. This can be a turbulent response due to the fact that consistency is regarded as invaluable.

*Mobility or change* is grouped together because both require action from the threatened individual. With *mobility*, the person may physically remove herself from the threat, accomplished by changing one’s address, or changing a social position or job. Instead of moving oneself from the threat, *change* involves “moving” other people. Therefore instead of moving away from a troubling neighbor, the individual would perhaps teach the neighbor ways to live more harmoniously. The change response would
entail the strengthening of one’s membership to a group, or the group itself, in order to minimize the power of the threat. The focus of this response is ultimately to wipe out the source of the threat.

*Inertia* is essentially an anti-response, where the individual with the threatened identity neither reconstructs themselves nor takes action. People can carry out this non-response for a significant amount of time, and the strength of the consistency of identity ensures that no psychological threat occurs in change. This person is often caught suspended between the threats, inactive, and therefore creating no change. The author states that individuals dealing with threats in this manner tend to compartmentalize their experiences in order to lessen the negative experience of threats, which tends to be a maladaptive response in that no action is taken to alter the situation.

Divorce can be another significant threat to a child’s identity and can cause a child to deal with a shaken world when security with an intact family had been taken for granted (Hetherington, Bridges, and Insabella, 1998; Klein, 1990). Divorce can result in abrupt changes to the environment and the loss of a personal relationship with a parent. For many children, feelings of rage, sadness, self-blame, fears of abandonment and rejection, as well as an altered sense of identity play a role in their subsequent development (Klein, 1990). Klein also stated that identification with a parent in early childhood aids in the development of a child’s sense of self, and it is through identification that the child is able to maintain normal separations from the parent. When a parent has left the home, is preoccupied or emotionally unavailable, the child may attempt to over-identify with that parent in order to keep them present. Many also believe that age is a factor, with younger children experiencing more difficulty in divorce, particularly due to an older child’s
ability to understand conflict between adults and therefore be less likely to blame themselves (Parke and Buriel, 1998).

**Attachment, Creativity and Art Therapy**

Stern (1985) describes the beginning phase of attachment between mother and child as being significant to the development of artistic activity. From the time an infant is brought into the world, the mother begins to interact with the child on several levels. A mother’s attunement to her child may be displayed by the mimicking of the infant’s repetitive vocalizations or the creation of rhythmic patterns by patting the child on the back. Whatever the method towards attunement, it marks the onset of the child’s developing sense of self and separateness from the mother, and therefore “form, activity, reflection, and re-internalization of the reflection are all derived from the mother and infant’s interactions, and are fundamental aspects to creativity” (p. 111). Siegel (1999) also describes early mother-infant interactions as being mediated by the right side of the brain, as the right cortex develops at a faster rate than the left during infancy. The right side of the brain accounts for non-verbal processes such as drawing, supporting that art therapy provides a good foundation in working with issues of attachment.

Donald Winnicott was one of the first psychoanalysts to really value a human’s need for creativity, stemming from the earliest infant manifestations (Deri, 1978). Winnicott (1965) described the “good enough” mother as being a mother who allows for the infant’s omnipotence and strives to meet its’ needs, and then “A True Self begins to have life, through the strength given to the infant’s weak ego by the mother’s implementation of the infant’s omnipotent expressions” (p.145). To an infant, he or she is the creator of everything that is found beginning from the first feeding, as the infant
believes that the breast appears due to the infant’s needs. What is created by the infant is greatly based on what is provided by the mother, and the extent of her adaptation to the infant’s needs. Therefore if she is a “good enough” mother, the infant will successfully create his or her own world, alternatively, if a mother is not “good enough” and is not able to realize the infant’s omnipotence, difficulties may develop including what Winnicott describes as a *false self*. A *false self* conforms to external rules by wearing a mask to emulate a persona they expect will please others, and in turn that will sustain relationships. This persona can seem very real, and a child may grow up to be just like someone else who is prominent within the child’s life, for example a parent. Winnicott’s concepts of a *false self* and the infant’s individuation process will be further discussed in the following chapter.

Children face a multitude of psychological, environmental and physical stressors during development, and it is imperative they be able to communicate in a safe, comfortable, and natural way. Children differ from adults in that they are in between the developmental stages of prelogical and logical thought (Piaget, 1958). As logical comprehension is not yet established, pre-verbal methods of communication are significant to children, therefore art has the potential of acting as their universal language (Malchiodi, 2005). Children naturally draw what they know or have experienced, making art a non-threatening method of deriving both conscious and unconscious feelings from a child (Ball, 1998; Cormier, 1999; Huot, 2002; Rubin, 2001).

The creation of art in therapy aids in the discovery and strengthening of an individual through an external medium, and in the origins of art therapy requires the presence of another (Holmes, 2001). Relationships can then develop between the client
and art therapist, as well as amid the client and artwork. The art can then be further explored under the client’s control, in terms of its creation, manipulation, and destruction (Rubin, 2001). Artwork may also act as a protective container for the expression of the child, something that may not have been provided during childhood, allowing for the parent-child relationship to be explored and conflicts worked through in the creative process. Symbolic representations of attachments allow the child to detach from, and identify the art as being separate, and processes of attaching and detaching are the fundamental aspects of attachment (Nathans and Fleming, 1981).

With a focus on early interactions, and developmental progressions and regressions, the interpersonal framework of object relations theory provides an appropriate means to explore efforts towards a stronger sense of self, as well as relationships with others (Nathans and Fleming, 1981). In the context of object relations theory, art acts as a container for the client’s expression, and has the ability to mirror internal workings of an individual as well as the many emotions tied to interpersonal relationships. Art also has the distinctiveness of rendering conscious and unconscious symbols, or artistic representations, dating back to infantile experiences of attachment that may have created problems in early object-relations (Nathans and Fleming, 1981).

Rubin (2001) states that art therapy offers the client a psychological space, developed through the establishment of the therapeutic alliance, and this space can be restructured or reorganized in order to benefit the client’s adaptive patterning. Rubin also states that the “expressed art form will exhibit the various levels of definition the relationship creates” (p. 59). Therefore the client’s experience of relationships can be explored within the art making process, as well as within the therapeutic relationship.
Art therapy is found to be an appropriate therapeutic modality to have a positive influence on insecure attachments (Ball, 1998; Cormier, 1999; Henley, 2005; Jones, 2004; Robb, 2002; Shore, 2000), as well as being a useful tool in order to provide insight into a child’s internal level of attachment (Kaiser, 1996; Sheller, 2007). Art therapy coincides well with attachment theory due to pre-verbal constructs that are fundamental to the theory such as mental representations, or internal working models, therefore placing more focus on the non-verbal aspects such as art (Stern, 1985; Siegel, 1999).

Art therapy promotes creative thought as well as encouraging communication, whether verbal or non-verbal, and art plays an essential role in maintaining the needs of a child to relate to others as well as an opportunity to be solitary (Ball, 1998). Art therapy is provided for children with emotional, developmental and behavior problems, and positive change and expression can occur through interactions with the art materials, projection of emotion onto the artwork, as well as through communication with an art therapist directly, or via the art object (Waller, 2006). In a study of a severely neglected boy in art therapy, Irwin (2006) describes the boy’s difficulty with trust, and his response to safe and non-verbal modes of communication through the use of art. In an environment of acceptance and understanding, he was able to give a voice to his conflicting feelings surrounding attachment, developing the capacity to express himself symbolically, and integrate various aspects of himself into a more cohesive self. Riley (2001) also explains how art is used with young children who are struggling with attachments, in order to work through problems of relating as well as strengthening the parent-child bond.
The forming of a therapeutic environment can help individuals reclaim collective power, to create a more desirable world, and bring people together to reconnect (Henley, 2005; Timm-Bottos, 2006). As well, providing a safe and creative atmosphere where internal working models may be adjusted and restructured in order to gain more positive ways of relating, and hopefully restoring the individual’s ability to trust (Cunningham and Page, 2001; Henley, 2005).

**Attachment and Identity in Play Therapy**

Children who are hurting often act out or withdraw, and it is important that they are able to communicate in any form possible to a reliable and caring individual. As well, children who have difficulty with verbal expression sometimes have trouble and frustration within relationships (West, 1992).

A child brings relevant and significant experiences into therapy, with the focus on the here and now that is ultimately shaped by past experience. The child is able to project fantasies onto various roles, such as the roles of parents, themselves or siblings, expressing needs or urges and acting out daily conflicts (West, 1992).

Many therapists and clinicians agree that play, as well as art, is a natural and comfortable way for children to express themselves, and art therapists often use play within art therapy sessions with children (Jennings 1999; Landreth 1991; Malchiodi, 1998; McMahon & Schaefer 1976). Play is a dynamic and natural self-healing process that provides children with a method to explore thoughts, feelings and fears they may be experiencing in their lives. Play provides children with a place where they can organize their worlds, gain a new found sense of control, and hopefully increase their felt security. This form of expression helps children give a voice to their experiences and inner worlds,
and offers an accessible method as does art to express thoughts and concerns about themselves and significant others.

Landreth (1991) states that a significant function of play is the possibility of altering what may be unmanageable in reality to more manageable through symbolic representations. This self-directed play would provide children with opportunities to learn how to cope with difficult situations. The child is able to take difficult experiences, reorganize them, and replay them in a way that can be better understood and processed.

Influenced by Freud’s repetition compulsion (1920), Levy (1938) devised a technique called “release therapy” to aid a child who had experienced a traumatic event. The child is provided with a few specific toys thought to help facilitate the expression of the traumatic event, with the main premise being that with a supportive therapist, safe environment, and particular toys, a child will be able to recreate the trauma in order to absorb and attempt to deal with the negative experience. Walder (1976) states that when a child continuously recreates a situation over and over again, she is seeking to obtain a form of gratification that she is not receiving. There is a consistent determination towards a specific goal, as well as frustration within each effort to obtain that goal. If a child has been through a specific experience that was too difficult to comprehend, then “this unabsorbed or incompletely absorbed experience weighs heavily upon his psychic organization and calls for a new effort at handling and for a re-experience” (p. 84).

According to Walder (1976), the process of re-experiencing an event consists of two parts. The first aspect is affiliated with the Id, where the individual is seen a passive
entity, and it is the driving forces within the individual, or the Id, that propels her toward the re-experience.

The second aspect is the more active side involving the Ego. It is the Ego’s process of assimilating the experience by gaining mastery over it. The author uses the analogy of eating in order to further explain this process, in that if a piece of food is too large to digest at once, it must be chewed again in smaller pieces in order to be digested. If an experience is too large for a child to incorporate within their psyche, it will then need to be altered, in order to be “digested”. Therefore, the undigested meal is the passive component of the Id, and the active chewing aspect would be the work of the Ego. This is how Walder (1976) further describes the process:

In the play of children we seem to arrive at the conclusion that the child repeats even the unpleasant experiences because through his own activity he gains a far more thorough mastery of the strong impression than was possible by mere passive experience. Every fresh repetition seems to strengthen this mastery for which the child strives (p. 85).

Consequently during play, the child is able to transform from a passive being into an active being, and with this newfound control, become the master of his or her own creations.

During play therapy a child may use a number of toys to enable self-expression. Introduced by Erikson (1937), the “Two House” approach consists of using two houses in play therapy in order to further explore conflicts such as the splitting of nuclear families and displacement of children, or a parental figure, or any other form of traumatic separation (Schaefer and Cangelosi, 2002). The application of two houses in therapy can
be a useful tool in aiding a child struggling with issues pertaining to self-esteem, object relations, as well as identification within the family. It provides a platform for children to work through feelings towards parent, difficult home situations, separation trauma, and playing toward a solution of being in between two homes (Erikson, 1937; Kaduson and Schaefer, 2000; Klein, 1961; Moustakas, 1953; Schaefer and Cangelosi, 2002).

This chapter has presented a secure base in therapy from the attachment perspective, and the focus is on the therapeutic relationship to provide a secure base to rework and restructure modes of maladaptive interacting, such as old and outdated internal working models. As well as matching the therapeutic style to the attachment needs of the client. Theorists including: Freud, Erikson, Lynn, and Breakwell have been discussed regarding identity formation processes, parental identification, and threats to identity as well as responses to those threats.

The beginning phases of attachment and its relationship to creativity have also been presented, as well as using Object Relations theory to further explore the artwork in therapy. Relevant examples of art therapy have been included in order to provide a foundation to working through issues pertaining to children dealing with insecure attachment patterns.

Finally, this chapter has briefly highlighted fundamental aspects of play therapy such as the use of repetition within play, and techniques involving particular toys in order to work through issues of attachment among young children.
Chapter III: Case Presentation

Introduction

My subject of interest is attachment and its relationship to art therapy with children. I am interested in exploring the basis of attachment, and how it relates to the fundamental aspects within art therapy. Through a case study I will be looking at how these issues can be presented, explored, and ultimately revealed in non-directed art therapy, including the various ways in which attachment can be expressed within the artwork as well as in the therapeutic relationship.

Research Question

While working at my Practicum site with children presenting behavioral and social difficulties, it became apparent that issues of attachment were a common thread among the majority.

Due to the potential commonalities between an attachment figure and therapist, as well as the relationship between the child and art as the ‘other’, I became very interested in how the creative process and therapeutic relationship could act as tools to facilitate the growth of the child, and to ultimately help foster a more positive quality of attachment for the child. Working solely with the child and not with the parent-child dyad, I was more focused on the child’s experience through a positive and consistent relationship with myself, the therapist, and helping the child gain strength and confidence to work on making the current situation better. I evaluated how a child gains self-awareness and security through creative expression and the development of a “secure base” in the therapeutic relationship. I felt there needed to be further exploration of non-directed art
therapy with children, leaving me to pose the following question: *how are difficulties in attachment and identity revealed and explored in art therapy?*

**Hypotheses**

I propose that art therapy will have a positive effect on a child’s increased self-esteem and development of a stronger sense of identity, therefore resulting in a more secure attachment between the mother and child. I feel that through the creative process, a child can overcome familial insecurities felt by some children and express conscious and unconscious thoughts and feelings about his or her experiences and relationships with family members.

**Method**

Yin (1994) describes the case study as a way of contributing to knowledge about “individual, organizational, social and political phenomena” (p.2), as well as a manner of investigating real-life events such as life cycles and processes of change in a holistic and meaningful manner. A case study allows me to concentrate on a particular individual, and or phenomenon, in order to uncover meanings or significant aspects of that specific case. My case research is exploratory in nature and intended to look at the ways in which my participant revealed and explored her feelings and experiences related to attachment, within the unfolding of the art therapy process. Finally, an undirected approach in therapy is used, where the client ultimately decided the direction in which she needed to go based on her own needs, including choosing particular art forms, as well as the necessary media that would allow for self-expression.
Participants

In qualitative studies, the participant is viewed as the expert and the focus is on the unique experience of that individual. The participant included in my research is an eight-year old girl named Sara, an outpatient in the Child Psychiatry unit at the hospital serving as the site for my practicum. Although most of the children were diagnosed with various behavioral disorders, my focus will be specifically on issues pertaining to attachment and not solely her diagnosis. I will include behaviors deriving from sessions that are particularly relevant to attachment, her affect, as well as her relationship with me, her art therapist.

I chose this particular child in light of my interest pertaining to issues of insecure attachment, as well as her use of multimedia in order to explore feelings of attachment. There seemed to be a progression within her creative expression, as well as her verbal expression and felt security, and I was intrigued by how she utilized therapy in order to facilitate her needs. I also chose this particular case as a result of our positive therapeutic relationship, as well as my own growth as a therapist while working with her.

Data and Data Analysis

The data collected consists of my own process notes derived from art therapy sessions, various administrative documents such as reports from professionals, schools, and the family, as well as information provided by other members of the hospital staff working with the family. This data was collected and analyzed concurrently throughout the art therapy sessions. Open-ended interviewing was also included in the data, incorporating the participant’s verbalizations of particular opinions, feelings, and
perspectives on various subjects. Photographs of the client's artwork have also been included as a significant part of the data.

Artwork was analyzed from an object relations approach, in terms of how it represents significant objects, individuals, relationships and feelings towards the previously mentioned, and how the creations may in general mirror the client's internal experiences.

Marshall & Rossman (2006) suggest that qualitative studies do not claim to be replicable, however they do discuss the importance of addressing this concern of replication by keeping thorough notes, and stating the rationale behind each move in order for others to "inspect their procedures, protocols, and decisions" (p.204). They state that keeping all notes in an organized and retrievable form allows for the readers and or researcher to go back at any point and reanalyze the data if the study is challenged in any way. The intent of this study was to follow this suggestion.

Overview of Institution

The program in the Child Psychiatry unit within a large, urban hospital consisted of twelve children, the majority of which were referred to the program with some type of behavioral problem, including diagnoses of a learning disability, conduct disorder, oppositional defiant disorders (ODD), attention deficit hyperactive disorder (ADHD), and in some cases several of these diagnoses. Although I worked with all the children in groups at different times during the year, I saw only Sara in individual art therapy.

The program offers various forms of therapy for children ranging from ages six to eight, taking place two afternoons a week, as well as family therapy once every two weeks. Members of the team included psychiatrists, psychologists, occupational
therapists, social workers, nurses, family therapists and child-psychiatric workers, as well as an art therapy intern, which was myself. The primary motivation for the program is to aid children in gaining awareness and control over their behavior, increase self-esteem and confidence, in addition to enhancing social interactions and inter-family relationships.

**Referral Source and Recruitment**

Each child is referred to the Hospital program through concerned educators within the school system, or medical professionals having observed some form of behavioral or social difficulty from the child.

Sara was one of the twelve children from the program, and she received individual art therapy. Sara was originally referred to the Child Psychiatry program two years ago. She spent her first year full-time in the psychiatry program at a school affiliated with the hospital, while maintaining the after-school program two days a week at the hospital the following year. Sara was referred to art therapy by her primary worker at the hospital.

**Case Study**

**Personal & Demographic Description**

Sara is a pretty eight-year old Caucasian girl with long brown hair. Her parents were born in Canada, as were her two older brothers, aged ten and twelve. Sara’s mother and father were divorced when she was three, and though Sara stated she was not sad about the separation, it is evident that she had difficulty in dealing with their divorce and held a great deal of anger and resentment.

During my last semester of internship, I had the opportunity to meet with both parents at a team evaluation meeting to discuss Sara’s progress. Sara’s father was in his
early forties working as a financial investor, and seemed to be a pleasant man with a good sense of humor. It was apparent that he was concerned about Sara and her lack of expressing herself, mentioning that she used to be able to discuss her feelings. The two seemed to have a close relationship, sharing many laughs out in the hallway before the meeting began. No past history was provided on the paternal side.

Sara’s mother, Diane (pseudonym), was in her early forties working as a personal trainer and massage therapist. Diane came across as a friendly and relatively outgoing woman. Her past history included issues with bulimia nervosa, as well as what appears to be perhaps an unstable childhood, growing up in a divorced home. Her report states she had many “uncles” coming around, though their relationship to her mother was unclear. Sara’s primary workers reported to me about an incident previously this year where Sara was brought to the hospital dressed in a long, transparent skirt belonging to Diane, attire inappropriate for the session, let alone an eight-year old girl. This issue was addressed during family therapy with mother and daughter.

I had let Sara know prior to the meeting that I would be attending, but would not reveal any of her confidences, in order for her to feel more comfortable, as well as to ensure confidentiality. The meeting consisted of Sara, her parents, three hospital workers and me. Sara’s mother attended the meeting wearing a sporty black tracksuit, informing us that she would be seeing a client afterwards. Diane expressed to the workers numerous times of her concern that Sara’s behavior was abnormal, but they reassured her that the particular behaviors were actually quite normal for a girl Sara’s age. Diane appeared to be frustrated with Sara’s behavior, and perhaps did not feel entirely competent or comfortable being the mother of a young girl.
It is important to note that both parents were in significant relationships with new partners. Sara’s primary worker informed me that both the parent’s partners were very worried and supportive where Sara was concerned, and also made a note of the different approaches taken by each parent to integrate their respective new partners into Sara’s life. The mother seemed to take an immediate approach, introducing her partner into the environment and allowing Sara to witness their strong affection. The father took a more gradual approach to integrating his partner into Sara’s life, thus providing Sara with more time to become accustomed to the changes.

Prior Therapy

Sara first entered therapy at the age of three, and attended a play therapy group in kindergarten due to difficulties she experienced expressing herself in non-aggressive ways. She had also been in art therapy years before, but the exact time and lengths of the therapies were not provided.

Diagnosis

Sara was diagnosed as having oppositional defiant disorder, also known as ODD. The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR) (2000) defines it as “A pattern of negativistic, hostile, and defiant behavior lasting at least 6 months” (p.70). The behaviors include a child’s loss of temper, arguing with adults and defying rules or requests, being easily annoyed by others, or being angry, resentful and vindictive. Four or more of the previously mentioned characteristics must be present in order to receive a diagnosis of ODD.

Oppositional defiant disorder was manifested in Sara’s behavior in various ways. She often had difficulties in expressing herself, and tended to get frustrated or have her
feelings hurt easily. She had problems at school with aggressiveness and incidents of kissing and inappropriate touching with boys. Sara looked older and tended to act accordingly, often talking about having a boyfriend.

Goals and Initial Treatment Plan

The goals of the Child Psychiatry team members were to provide Sara with an environment where she could freely and comfortably express herself. Sara was seen as an enigma by her workers, tending to back away from group discussions with the other children. As a result, the goal for the team was to gain a better understanding of her thoughts and feelings in order to enhance benefits of the program for her.

By using the information provided, three primary goals were derived:

1. To freely express herself in a creative manner;
2. To explore her feelings of attachment through the use of art media, as well as the therapeutic alliance;
3. To explore the various aspects of her identity, and hopefully better integrate these aspects and become more comfortable with herself.

The following section will provide a description of each of the first eight sessions in art therapy with Sara. Some information was omitted in certain cases in order to focus on happenings that had more relevance to my research question. Due to a shift in therapeutic techniques and repetitiveness within the sessions, sessions nine to twenty-one will be explored in a different and more concise manner.

Session # 1

Sara appeared to be a very pretty, confident and relatively outgoing girl, yet slightly apprehensive. Her initial apprehension was understandable as she was now interacting
with a therapist who was virtually a stranger, and no other children in her group were participating in art therapy with me at that time.

During the first session I suggested that Sara create a folder in which to keep all of her artwork, as seen in figure 1*. She expressed a desire to draw herself, and began drawing right away. She drew herself with a large, square head and hair covering up one of her eyes, in what was quite a stylish portrait. It was interesting to observe that the drawing reflected reality, as her hair was actually covering one of her eyes while she drew. Sara spent time choosing the colour for her skin in the portrait, pointing out that her skin was a little darker than white, and eventually selecting a colour that was slightly darker than her actual skin tone. The figure was cut off from the waist down, and she drew herself wearing a little crop top.

Sara decided to draw a fairy on the other side of the folder, a figure she would use to represent me, seen here in figure 2*. The fairy also had a large head, but with two eyes and a complete body. She paid attention to detail by including my nose piercing, and asked what my favorite colour was so that she could put streaks in my hair. She wanted to give me pigtails, asking prior to make sure that was fine. She drew and erased the fairy’s body, or “my” body, numerous times and seemed frustrated that it was not exactly how she wanted it. I thought that perhaps she did not want to disappoint me, or disappoint herself with her own drawing imperfections. Sara said that it was a water fairy, and when asked what was special or

* Figure 1 “Folder-Drawing of Sara”
* Figure 2 “Folder-Drawing of the Therapist”
different about a water fairy, she simply replied that it can fly over water.

It was interesting to note the differences between her drawings of the two of us. In her self portrait, she illustrated herself appearing much older, wearing little clothing, with hair covering up one of her eyes. In contrast, she depicted me looking much younger with pigtails, wearing a longer dress that covered my entire body and both of my eyes visible. Sara's self portrait appeared to be cool and stylish, with her omission of certain aspects giving the impression that she was unsure of who she was, and was perhaps taking on the identity of someone older. The shielding of one eye was almost suspicious, as though she was hesitant or not yet willing to "show all of herself" at this point in therapy. The two sides of the folder were also interesting because they could be representative of many didactic relationships, such as the potential relationship between the two of us, the relationship between her and her mother, as well the different sides of herself.

During this initial session, Sara asked numerous questions about confidentiality, and who I was going to tell about her "stuff". She was adamant that I not tell a specific worker about her "guy friend", and made sure to let me know that they had broken up because he was making fun of somebody at school, and were now just friends. I assumed that she was hesitant in discussing boys due to her previous inappropriate behavior with them, and had been steered away from boys by her parents and workers. Sara went on to discuss matters such as her parent's divorce, saying that everyone thought she was still sad about her parents, even though she was not. As well, she stated that she "hated" her brothers and wished that she could have a sister because "girls are nicer", feelings which did not seem out of the ordinary for a girl her age. Near the end of the session she said
that her brothers should be in a school like this one, because “they’re bad too”, a comment which allowed me to realize that she felt that she was attending the program as punishment for being “bad”.

Themes derived from the session were her desire to be more “normal” or better understood, as well as her exploration of the various aspects of herself such as how she should appear and behave, as well as perhaps comparing herself to me, the therapist. My goal at this point was to provide Sara with an environment where she could feel comfortable to express herself and explore these different issues without fear of being criticized. It was evident that trust would be an important issue for her.

**Session #2**

Sara seemed to be in a good mood when she came into the session. She asked many personal questions about my artistic background, if I had other kids like her, and why she was selected for art therapy. She also asked how much I knew about her. I was quite honest with her and explained that many children participated in art therapy, with each child being different, and assured her that the children were not in art therapy because they were “bad”.

This was a non-directed session, and she chose from various materials to make a cup and saucer out of clay as seen in figure 3. She said that she wanted to give it to her mom to drink from, and appeared upset when informed that neither would be functional unless fired in a kiln. After receiving an explanation of what this meant, Sara said that she wanted to give her mom something that she would appreciate and be able to

* Figure 3 “Objects in Clay”
use, and did not like the idea of giving her a “fake” cup. We discussed what it meant for her to give her mom gifts, with Sara stating that she liked giving her mom presents because it made her mother happy. She then decided to make a crystal ball, and when asked what she would like to see in the crystal ball, she wanted to see what her parents were doing. Sara came across as a typical eight year old girl who wanted her parents to be proud of her.

While creating the art, Sara appeared preoccupied with perfection. For example, she would continuously smooth out cracks in the clay, while also teaching me how to do so using water. Nearing the end of the session, she decided to draw a portrait, shown here in figure 4. She was quite hard on herself, frequently erasing parts that did not please her and immediately attempting to redraw them. When asked who the portrait depicted, she responded “nobody”, almost as though an identity could not be given to the portrait until it was perfect.

I thought her need to make functional things related to her need to feel competent and more adult like, as a girl her age might desire. Or just to feel appreciated by her mother for giving something that was useful. Later on in the session she stated that she always needed to compete with her brothers when giving gifts to their mother. It seemed to be some sort of competition for their mother’s love. The significance of her relationship to her mother was apparent at this point, as well as Sara’s desire to please her.

Themes from this session were her curiosity about me as the therapist, her normalcy,
an apparent preoccupation with perfection, and a desire to please her mother.

Session #3

During this session Sara decided to paint the clay objects she had made the previous week. She seemed to really enjoy mixing the paint, and when asked if she had ever finger painted before, her eyes lit up and she asked if she could paint the clay with her fingers. When told that she could, she was excited and began to dip her fingers into the paint.

I introduced finger painting because it is a medium that allows one to regress, and I wanted her to feel free to be like a young girl with me, and not feel the need to put on a performance. Interestingly enough at this point she began telling me about her camp. She told me that initiation for the senior boys was to walk around in their underwear, and when she became a senior girl she would have to do the same. Sara also talked about going to dances where they would be “drinking”, and when she noticed my look of surprise, she explained that it was just pop. She also mentioned that the “kids” had to leave early from the dance, and that she never had a problem finding a boy to go with. Sara was telling me these stories as if she was much older, especially regarding the drinking, and I felt as though she was trying to be cool and perhaps impress me. Once again it seemed like she was trying on a different identity, someone much older than an eight-year old. It is important to mention here that her primary workers and I were unsure of what and how much sexualized behavior she had witnessed, although it was known that she had witnessed the strong sexual chemistry between her mother and her mother’s partner.
Soon after the camp conversation, she seemed to turn back into an eight-year old girl, messy with paint all over her hands. She made hand prints on a piece of paper, and then proceeded to pour some paint on a different piece of paper, both artworks are seen here in figure 5*. She asked me what I thought she was making, and when I said I wasn't sure, she said that it was a butterfly. She appeared very comfortable working with the medium, and the motion of her hands in the paint reminded me of giving a massage. My thoughts immediately shifted to her mother, and the likelihood she was mimicking her mother's profession as a masseuse. When I mentioned to her the similarity of her motion to a massage, she shrugged it off.

As Sara was enjoying creating various paintings with her hands, she was asked if she would like to work on a larger piece of brown paper laid out on the floor. She said yes and continued to paint with her hands, seen here in figure 6*, and her arms were soon covered in purple paint. She took a look at herself in the mirror and was quite impressed and humored by her appearance. She applied paint to her face and attempted to leave the room in order to show off to one of the workers. After telling her she could not leave the room all purple, I questioned her as to why she wanted to show herself off, to which she responded she desired the worker to see how crazy she looked.

* Figure 5 “Purple Hands and Butterfly”
* Figure 6 “Purple Painting”
As the session was winding down and we were washing up, Sara questioned if she should paint again. She appeared to be slightly overwhelmed that things had gotten a little out of control. I was pleased that she was able to express her discomfort, and I realized that more structure would be required for future sessions in order to facilitate her creative expressions, and to help her feel more secure. This was also the first time that I saw her vulnerability.

Themes that were of particular interest in this session were the contrasts between being a child and an adult, as well as between having control and a lack of control. It seemed that Sara desired to be older but was not necessarily ready for it, which was reflected in her wanting to be in control of the painting and then feeling overwhelmed. The theme of her mother seemingly reappeared, though Sara denied that she was in fact mimicking her mother giving a massage.

Session #4

At the beginning of this session I laid out various materials, and suggested the theme be about Sara. She did not appear to like this idea, preferring instead to make something for her mom’s birthday. I found it interesting that she immediately turned the attention from herself to her mother and suggested leaving some time at the end to make her mother’s gift. Looking back, Sara’s need to make something for her mother was in fact related directly to herself.

Sara agreed to leave some time at the end to make her mother’s gift, and decided to make a giant “Chinese fan”, as she called it.
She took a large piece of previously cut, white mural paper and folded it into a fan, shown here in figure 7'. She quickly began colouring in the fan, asking what colour the devil was. When I suggested the possibility of the devil being red, she started telling me a story about the devil and his wife, and that the wife was in heaven because she was good while the devil was in hell because he was bad. The subject of the devil may have come up since Halloween was upon us, but it also seemed to relate to Sara’s internal concepts of being both good and bad, and the confusion or uneasiness this seemed to create within her.

It was apparent that Sara was trying to finish the fan quickly to move onto her ultimate task, which was making a present for her mom. She decided to make a pillow and was very creative in finding materials. Unable to find typical pillow making materials, Sara stapled paper together and stuffed it with tissues from the tissue box sitting on one of the tables. She laid her head down on the pillow, but felt it was not soft enough and covered it in soft fabric that was eventually discovered in the room. Sara stated the importance of giving her mom something really nice that the “boys” wouldn’t get her, and went right into telling me that one of her brothers was so lucky because his birthday was in the same month as their mother. She seemed to feel a great deal of competition against her brothers in obtaining her mother’s love, approval, or simply a special closeness to her. Sara appeared quite anxious to finish the pillow in time, and continued laying her head on it to make sure it was as comfortable as possible so that her

* Figure 7 “Chinese Fan”
mother could use it. She was able to finish it in time, however chose to leave the pillow in the room.

Repeating themes from this session were Sara’s focus on her mother’s attention, as well as the dichotomy of good and bad. It was interesting that Sara created a pillow for her mother, as the pillow could represent a symbol of comfort and nurturance, something that would typically be provided for the child by the mother and not vice versa. I couldn’t help but think of role reversals between a parent and child, when the child feels a responsibility to take care of the parent. I also thought about Sara’s desire to make her mother happy and feel loved by her, as well as her wanting to be a normal and good girl, and how much pressure that must be for an eight-year old girl.

While discussing my client in supervision, I was concerned that Sara would use her time in therapy making ‘pretty things’ for others instead of focusing on her. With the help of my supervisor, I realized that creating gifts for her mother was what needed to be brought to therapy. Sara needed to direct her own course, and let everything unfold naturally.
Session #5

Sara had expressed the desire to sew this week, so I brought in various colours of felt and a sewing kit. Also present was a stenciling kit she had previously expressed interest in, where she could choose and assemble various fashions on plastic plates and create a woman, making a stencil by drawing over the plates on paper, seen here in figure 8*. This was something very familiar to me as I was quite fond of it as a little girl. Sara was very happy when she saw the materials and said that she liked coming to art therapy with a big smile on her face. I couldn’t help but think that she was happy and surprised to see that I had remembered to bring in the sewing kit that she had wanted.

Sara initially focused on the stenciling kit and began to look at the many clothing options. She first picked out a short skirt, and looked directly at me for my reaction. When she saw that I had little reaction in my face, she slowly put down the skirt and decided to dress the woman in some old fashion clothes instead. When I told her that she could dress the woman any way she desired, she said that it was okay and wanted to put her in the more traditional clothes. After she made the first stencil, she expressed that she would have much preferred the skirt and wanted to make another stencil. I recalled the incident and more so the fuss it created, when Sara wore the transparent skirt belonging to her mother, and thus was not surprised that the issue of appropriate and non-appropriate fashion came up. I felt it was important at this point to convey to Sara that she could express herself freely, without my reactions influencing her.

* Figure 8 “Fashion Stencils”
After Sara was finished making the stencils, she wanted to make another pillow for her mother, shown here in figure 9*. Sara felt the last pillow was not soft enough, and wanted to make one that her mother would use for certain. She chose two pieces of baby blue felt, Sara’s favorite colour, and began to sew the pillow with my assistance. When asked who had taught her how to sew, she said that she had watched many people do it, but it was me who had taught her. She appeared sad when telling me this and I felt she may have been disappointed because it was not her mother that had taught her. When I addressed her sadness, she just shrugged it off as was her tendency when asked about things to do with sadness or anger. Sara continued to sew very well, appearing quite content and proud when I complimented her accomplishment. The smallest compliment or recognition of her achievements seemed to be very much needed. It was apparent to me that Sara was not as comfortable expressing herself verbally as she was creatively, and I did not want to push her before we had established a strong therapeutic alliance.

The theme of fashion came up for the first time in a session, and the persistent dichotomy of good and bad played a role in clothing that was both appropriate and inappropriate. The theme of her mother continued within this session, as well as Sara’s aim for perfection in creating the perfect pillow. It seemed as though she felt that if she created perfect things, it would make up for the fact that she felt she wasn’t perfect enough to please her mother. I felt a little sad for her that she felt the need to create something so perfect for her mother, and the amount of pressure she seemed to put on herself to do so. The most significant thing derived from this session however, was Sara

* Figure 9 “Pillow for Sara’s Mom”
developing a sense of competency due to succeeding at a new task.

Session #6

This session occurred on a special day as there was no program initially scheduled, however Sara’s father was able to bring her in especially for our session. Instead of meeting in the therapy room, I picked her up from downstairs, at which point she asked if we could take the elevator up. She was excited at the prospect of doing so, and that we had the floor mainly to ourselves.

As soon as we entered the room, Sara stated that she did not want to finish the pillow, and instead wanted to make a skirt, seen here in figure 10*. I was surprised at her decision because she was so focused on perfecting the pillow the previous week, but I went along and suggested that we go to the bigger art supply cupboard down the hall so that she could pick out some material.

She chose a large piece of blue, transparent material with some sparkles on it, and it once again reminded me of her mother’s skirt she had worn the year before. She began wrapping herself in the fabric, looking at it and saying that she would have to do something to make it less transparent. I told her that she had chosen some beautiful fabric and her idea to make the fabric less transparent was a good one. I was very aware of my reactions and made sure to remain neutral, yet practical. I wanted her to be able to express and project whatever it was that she was potentially thinking or feeling about the skirt incident, not wanting to bring it up so soon in therapy as I felt that she may be suspicious as to how much information the other workers and I had exchanged. I was

* Figure 10 “Transparent Skirt”
focused on building a strong therapeutic alliance at her own pace, and was solely relying on what she was bringing into therapy.

We brought the material back to the room and she asked me to help her lay it out and hold it while she cut it. She proceeded to prance around the room in an elegant manner with the fabric wrapped around her, making sure that she was still able to jump in it. She seemed to have fun playing dress up and it was nice to see her enjoying being a young girl. It was interesting to note once again her transition from a young lady wrapped in beautiful fabric to a little girl jumping around in dress up clothes. There was not much of a response from Sara when I reflected this back to her. We spent some time putting the skirt together, and she sewed a button on it with my assistance. She was delighted with the skirt, and wanted to wear it out in public. When asked if she thought it would be okay for her to wear it in public, she said yes, once the skirt was made to be less transparent.

As I walked with Sara to meet her father, she said that she liked my skirt which was long and black, mentioning that she had a similar one. Sara also made numerous comments about liking my jewelry and other pieces of clothing during previous sessions, and she seemed to be very interested in my appearance in addition to her own. Perhaps she was trying to show me that we were similar, or at the very least better relate to me, and it seemed to me that a positive identification process was occurring. I recalled what it was like to look up to older girls when I was her age. When we approached the elevator, Sara pressed the button with her foot, which is worth noting because I had seen her mother doing the exact same thing the previous week. This was just one more situation that showed how much Sara desired to be like her mother.
The main themes brought forth in the session were the previous incident with her mom's skirt, childhood versus adulthood, the theme of appearance, as well as the beginning of her identifying with me.

**Session #7**

Sara looked around the room and was happy to see the skirt, also noticing the camera I had brought in to tape the session for my supervisor, which she later helped me set up. I had spoken with Sara the previous week about the video and asked for her and her parent's permission, and assured her that only my supervisor and myself would be watching it.

Sara no longer wanted to work on the skirt, and instead wanted to make a mask, seen on the right in figure 11*. Sara's desire to make a mask was perhaps a way to hide herself, knowing that someone "powerful", my supervisor, would be watching her.

Sara picked out a white, plastic mask and began to slowly paint on it. She seemed quite frustrated and at times almost angry during the session, and when asked how she felt about having the camera there, she said that it was "cool". Her response however did not mirror the way she seemed to be feeling, and I could tell that it was the video making her uncomfortable as she continuously looked at it. She explained to me that she was painting an "Egyptian" lady, and did so quietly though her frustration continued to show. She soon asked who would be watching the videotape, and I explained to her again that it would only be shown to my supervisor at school. She asked what her name was, and said that she thought her name was "pretty cool". It seemed that Sara was nervous she would

* Figure 11 "Masks"
get into some kind of trouble by my supervisor, or anxious that she wouldn't be able to produce something good enough, and I reassured her that the video was more about me than about her, and she seemed more comfortable with that. We also decided that it would be fun to make silly faces at the camera, something that my supervisor later appreciated.

Sara eventually asked why I simply sat there and watched her draw. I smiled and asked her what she would like me to do, and she told me I should draw too. In order for Sara to direct the course of her own therapy, I did as she asked, and I drew with her. Her focus turned to what I was doing and she asked me what I was drawing. I chose to draw a large, pink jellybean, which seemed to frustrate her because I was not drawing anything spectacular! However, the fact that we were drawing together seemed to put her at ease, and please her. She then placed another mask in front of me and told me that she was going to teach me how to paint it. At this point she began teaching me and playing up to the camera, with a new sort of confidence. Her teaching provided her with a sense of empowerment by putting herself in a position where she was good at something and able to teach someone else.

It was difficult to ignore the heavy symbolism of the mask, and how it relates to one's identity, or Winnicott's (1965) concept of the false self. Not only does the mask allow an individual to hide from others, but it is also a representation of who you want others to think you are, or how you want others to think you feel.
After we finished the masks, Sara asked me if I wanted to help her make a town, and I agreed. She was going to draw city hall, and told me to draw an old fashioned lady, seen here in figure 12*.

She seemed pleased that I was working with her. Sara then showed me what she and her friend had done at school, and took a gem off her shirt to put it on her nose like a nose piercing. We had a laugh together at this, and she went to look at herself in the mirror and said that she looked stupid. When I questioned her about why she looked stupid, she said because kids don’t have pierced noses. I agreed that it was probably something that people do when they’re a bit older.

I felt as though the therapeutic relationship grew stronger during this session. She was able to express her dislike, or discomfort with me “just sitting there”, and told me that she wanted me to paint and draw with her. She seemed excited to be working on projects together, and it was an enjoyable experience for me as well.

The theme of identity was visited with the masks as well as giving herself the identity of a teacher. The theme of fashion reappeared in this session, with the lady wearing old fashioned clothes, as well Sara trying on a nose stud. The nose piercing perhaps acted as a medium to reflect or mirror me as an adult or accepting figure that she was beginning to look up to. A comment made by Sara about looking stupid with a nose piercing because kids her age did not usually do so once again reflected the struggle between being a child and an adult. She often seemed confused as to what was “normal” or questioned what was appropriate for someone her age, as well as someone older, and seemed to be testing it out with me. This may have been as a result of having older

* Figure 12 “City Hall and Old Fashioned Lady”
brothers, or possibly attempting to identify with her mother in ways she was too young to comprehend.

Sara’s desire for perfection was evident during this session. She appeared to be uncomfortable in creating something good to be seen by my supervisor, as well, she once again switched projects at the beginning of the session, and perhaps this was because she felt her last project wasn’t good enough and therefore she should just start something new, almost as if what was the point if it was less than perfect.

**Session #8**

We continued to create the town together during this session, shown in figure 13. She initially wanted me to draw on the bristol board, however I suggested that she draw it first to give me an idea of how she wanted it, and then I re-draw it. We compromised and Sara drew the road while I drew City Hall. When asked if she had been to City Hall, she began telling me about how her friend’s parents were going through a bad divorce. I made a comment that it must be hard for her, and Sara emphasized that she was talking about her friend and not herself, even though I was talking about her friend. Sara’s defensiveness or tendency to withdraw from questions was something that I was well aware of, and I continued to struggle slightly as to how I should communicate my thoughts or feelings to her without her retreating or feeling as if it were coming across as an attack. I was realizing at this point how my counter transference was making it difficult for me to address certain things with her. Due to my own open and close relationship with my mother, I really felt the need to be accepting and open with her to soothe her concerns.

*Figure 13 “City Hall on Bristol Board”*
and fears, and I wanted her to feel completely comfortable and I didn’t want her to feel threatened and pull away. Many times during therapy I felt that she was just a regular little girl with questions and concerns that needed to be addressed and normalized in order to alleviate her evident fears and insecurities.

Together we drew two houses where our two “fairies” would live. During this process of creating the town, we took turns switching seats so that we could each be closer to the part we were working on. In her fairies’ closet she drew various dresses that were very sexy, and said she really liked the way they looked. When asked what she liked about fairies, Sara said that they were sweet, though it seemed odd to me that a sweet fairy would wear such sexy dresses. I told her that I liked fairies as well because they could assume various characteristics, such as being cute, elegant or mischievous. I thought that fairies worked as an interesting metaphor for the various parts of Sara, allowing her to see that possessing different parts of oneself was okay. At that point she requested a bathroom break, which was the first time during any of our sessions that she left the room, and I suspect this was due to my comments. My disclosures may have caused her to feel uncomfortable, and she may have thought I was indirectly referring to her. Although upon her return from the bathroom, Sara brought out two Barbie dolls, Miss Flower and Miss Anna, to represent the two of us. This may have been an attempt to push the therapy into a different direction. She made up a game that resembled Clue, where we were the detectives and had to find out who killed the famous bride. She seemed to really enjoy playing, as did I, and it strengthened our bond during this session. I felt as though Sara was putting me in the role of the older sister, or an ally that she had always wished for and just wanted to create art and play together.
The themes of divorce and brides were brought up by Sara for the first time in therapy, which may have been as a result of her increased comfort level with me. It was interesting that the game was for us to be detectives and find out who killed the bride, and I thought once again of her own mother and the potential of her getting re-married. The theme of fashion was revisited once again with the fairies “sexy” clothing.

Sessions 9 through 21

At this time there was a shift in therapy, and play now would be the focus for Sara’s expressions. An interesting change was seen when we began to play with the dolls, as if Sara had found a medium to work with that would allow her to be a little girl again. The hands-on approach may have provided a more realistic way for her to create various scenarios in which she could use to work through difficult conflicts and find resolutions. The following section will cover the choosing of the dolls and setting up of the dollhouses.

Choosing the dolls

We continued to use the same Barbie dolls from the previous session. They were chosen from a variety of dolls in the therapy room, including dolls that were small and plastic, large and stuffed, or of different ethnic backgrounds. Sara chose two female Barbie dolls, both white, with long blond hair, shown here in figure 14.

From the very beginning, the two dolls Anna and Flower were to be sisters, although they would eventually refer to each other as just “sister”. It was not too surprising for a girl her age to play with the Barbie dolls, as their hour glass figures and long, golden

* Figure 14 “Barbie Sisters”
hair are esthetically pleasing and somewhat more realistic than the other dolls.

**Setting up the dollhouse**

There were three different houses to choose from, with two of the three always used at a time, seen in figures 15* and 16*.

I found the use of two houses to be quite significant due to the fact that her parents were divorced and she moved between two houses every week. Sara spent the beginning of the sessions putting a great deal of effort into setting up the houses, carefully placing each piece of furniture in a desired place, and moving it around if she was not pleased with its location. This appeared to give her a sense of control of her surroundings, something that she may not have felt with two older brothers and the continuous back and forth between the houses of her mother and father.

The rest of therapy will be described in a different format. Due to the repetitive nature of various themes and scenarios played out within therapy, themes derived from the play will be grouped as opposed to a session by session description. The first prevalent theme within Sara’s play, and one that continued from previous sessions was the issue of attachment.

* Figure 15 “Houses”
* Figure 16 “Castle”
Attachment Scenarios Repeated in Play

From the very initial stages of play, the issue of attachment persisted. Sara would often mention her desire to have a sister and someone to play with, often sounding like she wanted to have someone on “her side” that she could relate to. Sara decided during the board game that our dolls would be sisters, however at some points her doll would turn into an “evil” mother, which will be further discussed later.

There were a few scenarios repeated in therapy. The first and most prevalent situation occurred when Sara asked me which country I would like to visit most. Upon hearing my answer, she told my doll to go take a nap, at which point her doll prepared to get on a plane and fly to this particular country. Just before the plane was about to take off however, she woke up my doll up to inform her of her departure. It was never enough warning, so my doll would always miss the flight. This was a scenario we played over and over again, and she appeared to really enjoy leaving me behind! It seemed that she wanted me to experience how it felt being abandoned, possibly to relate to her own feelings or fears of abandonment.

There were certain instances when she would be in a different country enjoying ice cream and saying “my sister would have loved this, ah well too bad”, and then bring my doll back presents from her trips such as food or nice clothing. Perhaps she wanted to make my doll jealous, but then felt uncomfortable that she was being mean, so she would bring back presents. Sara seemed to be expressing ambivalent feelings of love and hate, and appeared to be practicing expressing her anger toward someone that she loves and is dependent on. In addition, when she brought my character back gifts, it reminded me of a parent “buying” their child’s love. Her desire to repair the damage through buying my
doll things made me feel like my character was being provided with material objects instead of her, and this may have been a product of her parental environment.

Another situation often repeated was her doll and doll’s boyfriend flying off to another country to get married. Sara would line up about ten different characters, then return to pick one up at a time in her plane, shown here in figure 17. She would continuously set me up for disappointment by saying that she was going to pick up the person closest to her to walk her down the aisle, then take her best friend, and so on, yet always selecting another doll instead of mine. In our play, I would express my frustration and disappointment that my “sister” was not choosing me, but she chose not to respond. Sara’s choice to leave me out of her special occasion provided her with empowerment, in that she was able to create a situation where she was in control verses being helpless. The size of Sara’s doll in relation to the other characters also may have helped her feel more powerful. Sara could also test me and my reactions to see that I was surviving her rejections, and that I still remained. This seemed to relate directly to her mother’s relationship becoming more serious and possibly leading to marriage, with Sara concerned that she would be left out of the ceremony or marriage, fearful of losing her mother, and feeling anxious about the unknown. Sara could not deal with the situation verbally, responding to questions such as “I wonder if you’ve ever felt this way?” in a defensive manner and choosing to ignore my question. It was evident early in therapy that she needed to work at her own pace and feel comfortable expressing herself. Therefore instead of relating things back to her, I

* Figure 17 “Marriage”
felt that it was more important for her to be able to comfortably and openly explore her fears in a meaningful manner.

There was a strong feeling of abandonment in these particular situations. Sara needed to be in the position of leaving my character behind in order to work through her anxieties and fears about being abandoned. She put me in her role so that I could feel the sense of abandonment as she has felt. She was able to constantly attach to her “sister” as well as detach and separate from her, working through the natural happenings of attachment. However, these separations were a little more traumatic and more unexpected than everyday separations. Sara was able to experience what it was like to persevere through conflict and work toward a resolution that made both of us happy. She was also forced to come up with different ways to handle situations, and to better express verbally what she needed from my character and I through the use of play. With a little time, she became the master of her own play and was able to direct me in what to say and what to do, so that it was most beneficial to her.

In these previously described scenarios, there were times that Sara would express a lot of anger. For example, when her doll would fly back home after being in a different country, she would run over my doll with the airplane and say “oh I’m so sorry” in a sarcastic manner. At times she would also hit my Barbie with her Barbie, sometimes to a point where I would have to remind her to be careful not to hit too hard. It seemed that the only times Sara was able to express anger was in these scenarios, and it generally was expressed in a physically aggressive way as oppose to verbally. In time her aggressiveness lessened and she was able to respond to my doll’s questions about her anger, to the extent that she was able to explain exactly what my doll was doing to make
her mad and what she could do to make it better. This seemed to be a significant step for Sara.

After repeatedly playing out these situations, Sara’s doll eventually allowed me to go to her wedding. As well, she placed me in the position of leaving in the plane while she took a nap, and her doll was then able to catch up with the plane for us to go on a trip together. It seemed that Sara needed to relive and re-experience feelings of abandonment to help her make sense of them, to lessen her fears, or to see how I would react. The repetition within the scenarios seemed to help lessen her anxiety and I believe that it took a lot of trust and courage for Sara to be in the position of the one left behind, and switched our roles when she felt ready so that she wouldn’t allow herself to be left behind.

Change of Homes and Roles in Play Scenarios

Sara often displayed a great deal of change in the way she played, causing me some occasional confusion. We were always moving from one house to the other, and she would either stack two houses on top of one another, or set them side by side, with the pairs of houses frequently changing from session to session. At times I would have to verify which house it was that I was living in because sometimes we would live together, other times in separate houses, and she would at times spontaneously change where I lived. Sara and I were able to talk about what it was like for her to go back and forth from her mom’s house to her dad’s on a weekly basis, and although she said that it was not a big deal, her play seemed to say otherwise.

Sara put a great amount of care into setting up furniture in the houses, sometimes taking as long as fifteen minutes to set up the rooms at the beginning of the session. We
spoke about things such as the lack of control over her surroundings, and the fact that privacy was always something she seemed to need within the play. Sara would let me know when I could come into rooms and where I should be at certain times in the house. As a little girl with two older brothers, she seemed to desire more control over her privacy when at home, and perhaps more control of her life in general.

Another situation often repeated was the transformation of Sara’s doll from the role of my sister to my mother. She would instruct me to go take a nap, at which point she would turn into a quite scary and mean person with the laugh of a witch. She would then transform back into my sister and would act confused as to what happened, explaining to me that an evil power would sometimes come over her doll and apologizing for being mean to my Barbie. This resembled a representation of feelings of anger, guilt and the discomfort of being dependant on the “other”, which is often a source of pain when there’s a fear of abandonment, and the guilt relating to her desire to destroy the loved object.

It seemed apparent that Sara felt confusion between feeling angry and not wanting to express it, and the uncertainty between wanting to punish me yet feeling scared that if she did, she would be abandoned. This could help to explain why Sara had difficulty expressing anger towards her parents for fear that they would leave her, as she already felt that she was sent off to the program for being “bad”, and may still blame herself for her parent’s divorce. Her discomfort with verbal expression, anger, fear, and frustration were being conveyed through her actions.

Sara would often ask questions about all aspects of relationships, and through her symbolic play, seemed to have a great deal of curiosity and concern about her mother’s
relationship with her partner. Her concerns seemed rather appropriate, and she played out issues such as sexuality and marriage, seemingly unable to alleviate her insecurities through communication with her mother.

The Last Session

Sara was quiet and looked sad at the beginning of our last session together, something she was not alone in feeling, and we were able to talk about what it felt like for her to be finishing therapy. Sara decided to put the dolls away and instead brought out the white, cotton fabric she had used in a previous session to make a wedding dress. She asked me to help pin it on her, and proceeded to prance around the room and tell me that her mom was going to get married soon, which was the first time that she spoke about it. She said that she would be in the wedding party and had gone shopping with her mom to buy a new dress. I asked her at this point if she had mixed feelings about the marriage, to which she responded she was happy. It was evident that she felt the need to verbalize this to me on our last day. At the end of the session, she took off the wedding dress, folded it up and gave it to me, and said that she wanted me to have it so that I would remember her. I thanked her and explained I would not need a dress to remember her by, and told her what a special young girl she was and that I really enjoyed getting to know her.
Theory Application

Issues of Attachment

As mentioned by Bowlby (1979) in the first chapter, a healthy individual is able to regulate and manage conflicting feelings of love and hate towards the same person. He suggested that this ability to resolve these conflicting feelings develops when parents react to a child’s outbursts with a lack of fear, as well as helping to instill in the child a sense of empowerment that they can exert self-control. Sara had trouble expressing her anger and sadness, towards her parents, not wanting to be a “problem” due to her fear of abandonment. Therefore she seemed to repress these more difficult feelings and would become quiet or in some cases as with school mates, she would act aggressively. If Sara’s outbursts were met with discomfort or insecurity about parenting on the part of her parent, then perhaps Sara wasn’t able to regulate these conflicting feelings.

Sara appeared to display an insecure attachment towards her mother. According with Ainsworth’s (1978) findings, written about in the first chapter, she displayed aspects of the insecure-ambivalent pattern of attachment. Typical behaviors of this attachment style include distress when an infant was separated from their caregiver, yet resistance toward the caregiver when reunited, as well as a tendency to refuse soothing. Generally speaking, these infants displayed maladaptive behaviors that hindered them from being soothed, and they seemed to apply to Sara. During the meeting with Sara and her parents, I noticed that Sara would engage in a “push and pull” with her mother. Sara would be playing with her mother’s hand or pull her in closer, and when she attained her mother’s attention, Sara would become quiet, sit back, and fold her arms as if she didn’t want others focusing on her. Sara’s maladaptive behaviors that impeded her from being comforted included
telling others that she was fine when she was not, as well as situations like the one
described in the seventh session where she was uncomfortable with the video, but she did
not say anything, and acted rather angry. Therefore her maladaptive behaviors impeded
her from getting help and potentially feeling better.

Although it was apparent that Sara’s mother loved Sara and was concerned about
her, however if her mother felt insecure about mothering due to perhaps her own
upbringing, a secure base would be difficult to develop. Therefore Sara’s internal
working models of being difficult to love, or “bad”, would be applied when attempting to
create secure attachments with others, and this would create possible feelings of isolation,
anger, and sadness.

Sara’s fear of abandonment seemed to relate to her parent’s divorce and their
moving on with new partners. In addition to these reasons, Sara felt like she was sent off
to the program at the hospital because she was “bad” and this furthered her fear of being
abandoned, and most likely strengthened her feelings of blaming herself for her parent’s
divorce as many children do. Methods of coping with this fear of abandonment will be
further discussed in the section about identification.

Mahler described the infant’s final phase of separation from the mother as occurring
at three years or older (Mahler, Pine and Bergman, 1975). At this point the child begins
to cognitively assemble the external and internal mother, knowing that she will always
return. Mahler goes on to state that a failure in the individuation process happens if the
child is unable to develop an internal representation of the mother, or object. Sara was
three years old when her parents divorced, and it is possible that this caused disruptions
in the formation of the internalization of her mother, therefore hindering her ability to
achieve object constancy. If the individuation process had not fully occurred with Sara, it’s possible that Sara wasn’t able to form this internal representation of her mother, therefore not able to acquire a secure base, and a method of maintaining closeness would be to over-identify with her mother in order to keep her close.

A Secure Base in Therapy

As the secure base is a fundamental aspect of therapy and within attachment theory, our therapeutic alliance was a significant part of the process.

Bowlby (1988) suggested that a secure base in therapy provides the client with security in order to explore thoughts and feelings that have not been able to be explored within past relationships. Bowlby also discussed how experiences with early attachment figures are brought into therapy, and how they can be looked at in terms of the effect they have in the present. Therefore the client’s old internal working models will naturally come into play within the new therapeutic relationship, and can be addressed and restructured in order to become updated and useful for more positive and effective interactions with others. This was the case with Sara.

At times within our interactions, Sara would be confusing or misleading in her expressions, making me unsure of what she was feeling or what she wanted or needed. This confusion may have caused some misunderstandings or frustrations in the past, and maybe led to misrepresentations of what she really needed from significant others, including her mother. She could have also been reproducing a family pattern, in that she was behaving as others have behaved with her. These misrepresentations included expressing that she was fine when she was not and refusing help when she needed it, as seen in the school setting.
Although it took a while for us to establish a trusting and comfortable relationship, Sara was able to eventually let me into her world and allow me to understand her fears and defenses that perhaps stemmed from previous insecurities in relationships, including the relationship with her mother, and her own insecurities within herself. Sara was able to work through issues of attachment through projection and the experience of building trust with a caring, reliable and consistent figure toward creating a positive relationship.

Holmes (2001) stated that responsiveness and attunement toward the client are vital in the forming of a secure base, as well as the therapist's ability to understand and hold the client's anger, and this has surely helped Sara to more comfortably express her anger and sadness. Over the course of therapy she seemed to realize that when done appropriately, it was alright to express anger and that it was normal to feel the way that she did about things such as her parents' divorce, her parents moving on with new partners, and her fear of abandonment. It was evident that she wanted to be seen as a good and normal girl, and part of the problem lay in the fact that she wanted to keep her fear and anger to herself to not make more of a "fuss" out of her fear of abandonment. When she pushed down these feelings, they would manifest in different ways such as her aggressive behavior at school and over-identifying with her mother to a point where it was inappropriate, such as her premature sexuality with boys. She did not seem to feel able to express her fears to significant others in her life, but her fears were able to come out in therapy.

Issues of Identity

Over the course of art therapy, Sara's identity seemed to often come into question. Through the artwork and verbal dialogue, many dichotomies were present including good
verses bad, and childhood verses adulthood. From the beginning of therapy it seemed apparent that Sara wanted to be “good” and “normal”. She thought that she was in the program because she was bad and perhaps felt that her family was split apart due to her “badness”. Sara’s need for perfection was also evident in her attempt to be good. She tried to smooth out the cracks in the clay, she erased constantly while drawing a portrait trying to make it perfect, and finally she tested out the pillow that she made to ensure that it was good enough as a gift for her mother. This dichotomy of good verses bad was also present while she was talking about the devil and his wife, as well as during our play when she switched between being angry and abandoning my character and then trying to make it up to my Barbie by buying her things.

There were also several instances when Sara would go back and forth from being an eight year old to coming across as someone much older, such as the session when she was finger painting and then began to talk about “drinking” at camp. When she did this switch it would at times make me feel a little uncomfortable as it seemed so put on.

Sara seemed to over-identify with her mother, and some of the personality traits that Sara was emulating were perhaps not the most positive and adaptive, from pressing the elevator button with her foot, to behaving in an over-sexualized manner with boys. Although there is a “normal” and healthy process for children to identify with their parents that has positive benefits, my focus was on Sara’s tendency to over-identify with her mother to a point where it seemed maladaptive or inappropriate, as well as look at the threats that she may have felt to her identity that would lead her to some of these behaviors.

Lynn’s (1969) identification theory presented various principles or reasons for
identifying with someone, perhaps due to feelings of insecurity, some of which applied to Sara’s situation. One of the principles is fear of withheld love, similar to Freud’s (1927) reason for a young girl to identify with her mother, and this applied to Sara as a reason for identifying as she longed for her mother’s love, and had a strong fear of abandonment. She may have wanted to identify with her mother in order to receive the same attention her mother was getting from her new partner, described in vicarious reinforcement, or she may have thought that the more similar she was to her mother, the more accepted she would be by her, and the more her mother’s anxiety or insecurity towards parenthood would be alleviated. Perhaps Sara wanted to feel appreciated and know that her mother was proud of her, therefore trying to be like her mother in order to better understand her and strengthen their bond. Finally, as Sara and her brothers seemed to compete for attention from their mother maybe Sara thought that if she was similar to her mother she would be more significant within the family and others would love her more, and this principle is described by Lynn as status envy.

Change can be a significant threat to identity according to Breakwell’s theory (1983). There was a lot of change for Sara with her parent’s divorce, their new partners, and going back and forth between their two houses. All three levels of threats could have been experienced at this time, including; attacking the individual, attacking the individual’s group memberships, and attacking the individual’s group. Sara may have felt that her membership or position in the family, or “group”, was in question, and as the family unit was being attacked, her sense of identity naturally deriving from the family was therefore compromised.

Sara’s response to threats to her identity seemed to relate most to Breakwell’s
description of reconstrual, which is a cognitive response that allows the individual to reinterpret a threat in order to lessen it. If the threat is too difficult to ignore or assemble into one's existing identity, a change in the idea of one's identity may take place, although this response can be quite traumatic as consistency is highly valued. It seemed as though Sara was trying to alter her identity in order to fit into the "mold" of what she believed others wanted her to be. One of the difficulties with this response was that she seemed to feel confused and pulled in different directions as to what she thought people wanted or expected from her. Therefore she tried to be a "good" girl thinking that meant she couldn't be angry or tell others that she was feeling sad or scared. Winnicott's (1965) concept of the false self also accurately applies to Sara's need to please others, and this will be discussed in the following section.

Klein (1990) states that in addition to anger, sadness, and self-blame, many children of divorced parents experience feelings of rejection, fears of abandonment, as well as an altered sense of identity. Klein also suggests that the process of identifying with a parent is essential in aiding the development of a child's sense of self, and through identification the child is able to sustain everyday separations. When a parent leaves the home as in the case of a divorce, a child may try to over-identify with that parent to keep them close, and if there was a change in the relationship between Sara and her mother, perhaps Sara felt an even greater sense of abandonment.

**Object Relations, Artwork, and Creativity**

Nathans and Fleming (1981) describe the use of the object relations approach in art therapy with individuals struggling toward establishing an identity, stating that the theory is beneficial due to the "...interpersonal framework emphasizing early developmental
progressions and regressions...” as well as offering a way to “…understand the artistic reflections of such a patient’s struggle with self-definition and relationships with others” (p. 25). Art therapy has the capacity to highlight important symbols relating to a child’s past experiences and desires, and works as a process to help repair early disruptions in object relations. During the art therapy process, Sara was able to work through some of her difficulties with self-definition, and relationships with family members and the fear of abandonment that went along with those interactions.

Artwork can help facilitate working through issues such as the parent-child relationship through a creative process. There were many symbolic artworks and repeated scenarios in play that brought to light Sara’s previous and present emotions and experiences, and these symbolic representations provided a foundation in which to address and further explore them. As mentioned in chapter two, art has the ability to mirror the unconscious and internal workings of an individual, as well as having symbolic representations of attachments appear within the artwork such as attaching and detaching from the artwork (Nathans and Fleming, 1981). In the first eight sessions, Sara created artworks that she wanted and needed to create. These pieces of art mainly consisted of gifts for her mother, as well as a skirt similar to the one belonging to her mother, and these creations provided Sara with a foundation from which we could explore why giving her mother gifts was significant for her. Sara would often start a project, and then detach from it, or “abandon” it in order to begin another. This was one more way of acting out the basic properties of attachment, as well as emphasizing her evident need for perfection.

It was apparent that she longed for attention from her mother, and expressed concern
having to compete with her brothers to obtain it. From the object relations perspective, the artwork that Sara created acted as a representation of her mother, “the object”. The pillow she made was symbolic of her apparent need to “comfort” or provide nurturance for her mother, or to satisfy Sara’s own need for nurturance or security. The skirt played many roles, as it allowed Sara to recreate what may have been an embarrassing or confusing experience, as well as being able to relive it. She was also able to see what my reaction would be and compare it to reactions from her mother and the rest of the staff. The fact that my reaction was neutral may have allowed for her to come to terms with her own feelings, or what she had learned from the experience. As she created her “art objects”, Sara was able to explore the “other” in relation to her own feelings of dependency verses independency, adequacy verses inadequacy, and competency verses incompetence.

Rubin (2001) states that “the art form offers an added means for working with internalized splits and polarities, and integrating them into new wholes. … The representations from our past are expressed through image and symbol, and expanded the boundaries of objective reality” (p.60). The artwork or “objects” that Sara created were in direct relation to her inner and outer worlds, and to her past experience. By working on these specific projects, Sara was able to bring into therapy significant relationships and experiences that required further attention and exploration. Her creations provided her with a container which could hold and help facilitate her expressions, as well as help her to look at previously mentioned issues with an objective and creative outlet, with the help of me, her therapist.

As described in chapter two, Winnicott’s (1965) concept of the “good enough”
mother is significant in the development of a child’s omnipotence and creativity. When a mother is “good enough”, her conscious and unconscious attunement toward her infant creates a surrounding where the development of a child’s sense of self and separateness from the mother can occur, in time leading to more established object relations. A “good enough” mother adjusts to the various stages of her child’s development, and meets the needs of her child in order to strengthen his or her sense of control. Winnicott describes this process as a child having a transitory illusion of omnipotence, followed by a realization that the omnipotence is merely a hallucination, resulting in the need of a mother’s protection from the anxiety associated from being completely dependent on her. As a child develops, the ego also develops and strengthens, and with this new awareness of having hallucinated omnipotence, the mother is seen as more of a separate being. This process allows for the creation of a healthy sense of independence, and failure at this stage could lead to the formation of a false self.

Sara appeared to have a great deal of anxiety associated with being dependent on her mother. Sara’s anxiety seemed to be associated with her fear of abandonment, as it would be very disconcerting and unsettling to be dependent on someone if there’s fear of being abandoned by that person. Perhaps during the previously discussed process, Sara’s mother was not able to protect Sara from the anxiety stemming from complete dependency on her mother, and from having a lack of control. According to Winnicott (1965) the development of a false self would then potentially ensue, and perhaps this is something that Sara has incorporated within her personality as a strategy of coping with her fear of abandonment.
The Element of Play

Similar to what Landreth (1991) stated, Sara was able to process difficult and potentially fearful situations in a less threatening and playful way, through symbolic representations. Through her self directed play, Sara was able to practice different coping strategies in various situations, as well as dealing with my character’s reactions to her character’s emotions. In the repeated scenario of her Barbie leaving my character behind, Sara was able to project her fears of abandonment onto my character, and re-enact these particular fearful situations in order to reorganize them, better understand them, and process them.

Repetition was used frequently within Sara’s play, and has been described as an important aspect of art and play therapy that can aid a child’s growth, by using repetition to work through difficult situations with a desired goal (Levy, 1938; Walder, 1976). Sara repeated various themes and circumstances, such as being abandoned by a significant other, being left out of a special event such as a wedding, and experiencing the transformations of character roles in order to make sense of her feelings. Sara was able to take control and be more active during play as opposed to being the passive recipient of circumstances within her everyday life, ultimately setting the scene and how it would play out. Although it may have been unpleasant and scary to repeat these particular situations, it is through the process of repetition that Sara was able to realize her fears, perhaps lessen her fear or pain, and to practice dealing with the problem. As stated by Walder (1976), “Every fresh repetition seems to strengthen this mastery for which the child strives” (p. 8). Repeating the situations gave her a sense of control, that she could set up the scenes, identify what her role would be, as well as mine, direct the play, and
practice different coping strategies. By practicing dealing with more difficult feelings during play, such as fear, sadness, and anger, Sara would then hopefully be able to express her newfound knowledge and experience with significant others, such as her fear of being abandoned by her mother.

Sara's use of the two houses reflected the writings of Erikson (1937) and Schaefer and Calgelosi (2002) as a way of working through issues pertaining to the splitting of the nuclear family, as well as the displacement of a child or parent in the home situation. The use of two houses provided a base for addressing early object relations, identification within the family, and separation trauma. Therefore she was able to recreate and re-explore early childhood experiences within the home pre and post divorce, replay interactions with particular family members, and even set up her "ideal" home where she was able to be in control of who was in the house, as well as how the furniture was set up.

Sara used the two houses as a setting where she could re-enact separations such as when one of us would move out and into the other house. She was also able to recreate her situation of having divorced parents and the continuous going back and forth weekly between their two homes, as well as re-experiencing the initial separation of her parents.

**Discussion**

Art therapy appeared to be an invaluable experience for Sara. Therapy seemed to begin at a time when she had a strong desire to have someone to talk to, create art and play with, as well as a place to be able to explore her various thoughts, feelings and fears. It seemed important that she feel comfortable enough so that she could be vulnerable, and therefore able to be more open and genuine with her own feelings.
She had expressed a disinterest to discuss things in front of the other kids in her group within the program, so it was necessary for her to have someone with whom she felt comfortable to open up to. Due to Sara’s increased comfort expressing herself non-verbally and creatively rather than verbally, she adapted very well to art therapy. She was able to use various media as well as play within art therapy in order to explore her world.

From the beginning of therapy, Sara created many artworks that were in relation to her mother. She created a cup and saucer, and a pillow as gifts for her mother, and even when Sara was not creating anything specifically for her mother, I could always feel her mother’s presence in the room. It was evident how much Sara loved her mother, and desired to please her and be close to her. Through the artwork, Sara was able to creatively express her feelings towards her family and her place within it.

Perhaps Sara thought of me as an “ideal” mother figure, as I was not an authority figure enforcing rules, but someone who wanted to understand what life was like for her in a very non-judgmental position. I may have also been viewed as a bridge between Sara and her mother, or a bridge between her two families, and hopefully she was able to transfer the comfort and security of our relationship to relationships with significant others in her life, in particular her mother who she obviously loved very much and wanted to please.

As therapy progressed, she moved into play using Barbie dolls and began to work through relevant issues in a more active way. She was able to create situations in the play, where she could act out and test multiple ways of dealing with difficult feelings by placing me in particular roles such as the role of the abandoned individual which was
essentially her own role. By repeating particular scenarios in therapy, Sara gave a voice to her fears, towards making sense of what she was feeling.

Sara’s self-worth and confidence seemed to be positively affected by being provided with a place for free expression. She was able to have a consistent time and place to explore whatever she was feeling, and this enabled her to tap into her creative side, and master new skills to help foster her creativity as well as enhance her self-esteem through creation. Sara seemed to really benefit from having someone to openly express herself to, and ask any questions without feeling scared to do so, as well as having an art therapist, myself, who accepted her for who she was.

The non-directive approach used within our therapy sessions appeared to work quite well in that Sara was very competent in directing her own artistry in accordance with her needs. By integrating art and play within therapy it allowed her with ample means to create “objects” as symbolic representations of her feelings about herself and her relationships with others, as well as act out scenarios, and assign roles that were significant for her. Therefore Sara’s feelings of insecure attachment and issues relating to identity were able to be revealed and worked through within the art therapy process.

As our therapy progressed, I was informed by Sara’s family therapist that Sara’s behavior and verbal expressions had improved with her family, with her mother in particular, and that she seemed to be less angry. After the conclusion of our therapy and the end of my placement at the hospital, I was updated by the same worker that the positive change had progressed in the relationship between Sara and her mother. Sara had begun to really listen to her mother and their relationship had greatly improved. When asked why there was such a change, Sara replied that she “just felt like it”.
Limitations of study

Limitations within my study included using a single case design, therefore findings cannot be generalized or statistically significant. However, these findings may be applicable and adaptable to other children of a similar age and diagnosis, within a similar setting. As the case study is exploratory in nature, my intent was not to provide causation or proof. A final limitation is that the art therapy took place with only the child, and progress may sometimes be more significant when working in attachment with the parent-child dyad, however, the family was seen in family therapy.


Aronson.


Consent Form

Art Therapy Student: Tara Narbonne
Concordia University

Background Information
Graduates students in Art therapy at Concordia University are required to write a research paper that includes case material and art work by clients they have worked with during their practicum. The purpose of doing this is to help them, as well as other students and art therapists who read the research paper, to increase their knowledge and skills.

Permission
As a Master’s student in The Department of Creative Arts Therapies, I am asking you for permission to use selected photographs of the art work in the research paper, as well consult your child’s case file until I have completed my research paper. A copy of the research paper will be bound and kept in the Concordia University Library, and another in the Department’s Resource Room. This paper may also be presented in educational settings or published for educational purposes in the future.

Confidentiality
Due to the personal nature of this information, it is understood that your confidentiality will be respected in every way possible. Neither your name, the name of the setting where the art therapy took place, nor any other identifying information will appear in the research paper or in the art work.

Advantages and Disadvantages to Your Consent
This permission will not cause inconvenience or give your child preferential treatment. You may withdraw your consent at any time before the research paper is completed with no consequences, and without giving any explanation. To do this, or if you have any questions about this research paper, you may contact my supervisor, Irene Gericke at 555-1234.

Consent
I, the parent of __________________________, give permission for Tara Narbonne, Art Therapy student, to use selected photographs and certain case material to be included in my research paper. I understand that all information will be kept entirely confidential. I also understand that my consent can be withdrawn at any time before completion of the paper.

Date: __________________________

Parental Signature: __________________________