Increasing Self-esteem through Art Therapy

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A Research Paper

in

The Department

of

Creative Arts Therapies

Presented in Partial Fulfillment of the Requirements for the Degree of Master of Arts Concordia University Montréal, Québec, Canada

September 2008

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ABSTRACT

Increasing Self-esteem through Art Therapy

Georgia Dow

This paper will investigate what the literature suggests are manners in which selfesteem can be increased using art therapy techniques. Individuals who lack secure selfesteem often deal with a lot of physical, mental and emotional issues. Using a historicaldocumentary methodology this paper is a literary review of Art Therapy and its effectiveness and efficacy in increasing an individual's self-esteem. This review of the literature in self-esteem and art therapy has shown that there are many different treatment methods that can be used to enhance self-esteem in various populations and special cases. The objective of this paper is to provide a relevant synopsis to art therapists of the variety of the art therapy techniques that can increase their client's self-esteem.

ACKNOWLEDGEMENTS

The completion of this paper and my studies would not have been possible without the care and support of many people.

To my caring and loving husband who spent long hours in the night to look over the family while I worked and then read over my papers. Though he knew we would have to make great sacrifices in order for me to receive my degree he fully encouraged me in my pursuits. To have such a partner in life is wonderful.

To my parents who took the time to watch over my little boy while I was at school, just so that I may receive my master's degree. Their unconditional love and continuous support made this journey of mine possible. I have been blessed.

To my best friend Rene for reading and rereading my thesis and always being there for me if I needed someone to watch over my son. I am blessed to be surrounded by such wonderful friends.

To my friend and mentor Jeanette Ritchie, whom I have always looked up to and was the first person to encourage me towards being an art therapist. You are an inspiration to us all.

To the teachers and staff and my fellow students of the Creative Arts Therapies program. Thank for all the support and instruction, it has been a wonderful journey.

To Suzy Lister my thesis supervisor, for helping me through this process. Your smile and humor was so very appreciated in this process. Thank you.

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INCREASING SELF-ESTEEM THROUGH

ART THERAPY

Introduction

A lack of self-esteem has been shown to lead to a multitude of physical, mental and emotional problems (Kernis, 2005). In art therapy it is often a primary or secondary objective to increase and enhance a client's self-esteem (Arrington, 2007). In order to achieve this objective effectively a therapist must understand the etiology, process, and barriers to self-esteem development. It is also imperative that a therapist fully understands how to use art therapy techniques which can help a client enhance selfesteem.

This paper will investigate the manner in which self-esteem can be increased using art therapy. The areas of focus will be the definition of self-esteem, developments in the field of self-esteem research, effects of high and low self-esteem on an individual, art therapy techniques effective in developing self-esteem, and the therapist's role and specific populations. These themes will provide a strong foundation towards understanding variables in building an individual's self-esteem through the use of art therapy.

Research Rational

Though there is a lot of literature in art therapy which discusses the primary or secondary objective of raising a client's self-esteem (Ackerman, 1992; Arrington, 2007; Heenan, 2006; Karkou & Glasman, 2004; Reynods & Lim, 2007) there is very little which presents theories on the properties of self-esteem, the importance of raising it, the therapeutic techniques beneficial in raising it, or successful programs which have focused on raising it. Even the research literature which focused on self-esteem and art therapy, did not comprehensively present the self-esteem research in art therapy.

Therefore, the rational for this research paper is to give the reader a comprehensive literature review on self-esteem theory and the manner in which it can be applied to art therapy. It will also look at the various manners in which art therapy has been used to help various populations. It's hoped this review will help other art therapists find the research to support their objectives and to create new and creative ways to help their clients more effectively.

Research Questions

Primary Research Question

What does the literature suggest are ways that art therapy can enhance selfesteem?

Subsidiary Research Questions

- What techniques can art therapy use effectively in order to increase a person's self-esteem?
- 2) How can the differing techniques in art therapy be used to increase selfesteem in various populations?

Methodology

This paper will be based upon a historical-documentary methodology, deriving information from an amalgamation of sources, and analysis of current and past research and literature. This methodology is appropriate for reviewing the literature on art therapy and the benefits art therapy has towards the enhancement of self-esteem. This study will be founded in a comprehensive literary review dealing with art therapy (Research paper/project policies and procedures handbook: Creative arts therapies, 2007). The meaning, effects, and effective treatments in enhancing self-esteem will also be investigated. Self-esteem and art therapy theories and research will be reviewed and discussed. Information will be gathered from analysis and synthesis of information from published journals and books (Froese, Gantz & Henry, 1998).

Due to the similarity of definition and treatment in the data, the terms self-esteem and self-worth (Beauregard & Dunning, 2001; Chin et al. 1980; Greenberg, 1980; Heenan, 2006) will be used interchangeably throughout this research paper. Though self-esteem has been defined in these various ways, for the purpose of this study, self-esteem will be defined as a person's inner feeling of worth and competency (Coopersmith, 1982). *Data Collection*

Data will be collected from current and past literature in the form of books and scientific journals. The scientific journals were accessed using the electronic search engines, PsychINFO, PubMed, EBSCO, ERIC and Academic Search Premier. The main search words used for the data collection were: self-esteem, art therapy, art psychotherapy, art, self-worth and self-concept. Since a lot of important self-esteem research has been conducted in the past, the research was delimited to studies from the past 30 years with the exception of a single article from one of the founders of self-esteem research, Coppersmith, which is from 1959. For the books and articles on art therapy, I delimited the last 30 years.

Data Analysis

In this kind of research the theories and studies are the data (Junge & Lineshe, 1993). Analysis occurs through observing patterns and formulating theories based on what is significant and pertinent, the culmination being a comprehensive integration of information (Junge & Lineshe). Therefore, for this paper, research will be analyzed through careful evaluations of the information collected and more weight will be given to those theories which provide more supporting data. There are some issues in the research literature such as the fact that most of the research in the area of self-esteem is quantitative in nature and most of the research for art therapy is qualitative.

Operational Definitions:

- Self-esteem: A person's inner feeling of worth and competency (Coopersmith 1981).
- Self-concept: A person's perception of himself/herself (Chiu, 1988).
- Self-worth: the manner in which a person feels about himself/herself (Crocker, Sommers & Luhtanen, 2002).
- Implicit self-esteem: Unconscious feelings of self-acceptance and worth (Kernis, 2003).
- Explicit self-esteem: Conscious feelings of self-acceptance and worth (Kernis, 2003).
- Global self-esteem: A person's baseline or overall sense of self-worth (Guindon, 2002),
- Situational self-esteem: A feeling keyed to specific events or circumstances (Guindon, 2002),

Self-esteem Literature

Self-esteem is a term which has been used in a wide variety of contexts. As mentioned previously, the literature also uses two other terms, self-esteem and self-worth

almost interchangeably (Kernis, 2005). Self-concept differs in that its definition is more the manner in which a person looks at him/herself whereas self-esteem is the positive or negative emotions linked to that concept. Guindon (2002) found that self-esteem articles from the ERIC search engine produced over 4,900 journal submissions from 1982 to 2000. The PsycINFO search engine found over 7,500 journal submissions from 1984 to 2000. Kernis mentions that self-esteem is used in the DSM-IV-TR for 24 different diagnostic criteria for various disorders. There are also 50 terms in the DSM-IV-TR which refer to self-esteem in a general sense, such as: increased sense of self, low selfworth and self-assurance. Self-esteem has also been linked to a variety of other phenomenon such as depression, aggression and suicidal ideation. Though self-esteem is widely used by the scientific population the actual scientific findings as to its role and effect on the individual has been wrought with ambiguity (Kernis). This ambiguity is found all through self-esteem research and can be seen in everything from the various aspects of human behavior which are affected by self-esteem to the very definition of what self-esteem encompasses. Though articles which focus on self-esteem are prolific, few of these articles clearly define it or study its definition. This is probably due to the fact that self-esteem's definition is often assumed to be implicitly understood. This review will try to clear up any inconsistencies in the literature and come to a larger understanding of what self-esteem encompasses and with what types of behaviors it correlates.

Defining Self-esteem

Coopersmith (1959) is often considered to be one of the founding fathers of selfesteem research. Coopersmith proposed that self-esteem should be defined through two

different perspectives: from the perspective of the subject and from the perspective of the observer. Coopersmith (1981) later defined self-esteem as a linear construct which could be viewed as a summary evaluation of our experiences. This summary is made up of a person's self-estimations of successes and failures. Each of these is weighted and valued depending on how important they are to the individual. The total of these measures then indicate the individual's feeling of worth. Coopersmith (1981) also stated that self-esteem is defined as a result of the opinions of others, with more weight given to those individuals who are highly regarded by the individual.

Subsequent studies in self-esteem research have also distinguished its components in various ways. Self-esteem can be assessed as having two components, one of which is global and the other of which is situationally specific. Guindon (2002) explained the differences between these two types as follows: Global self-esteem is a person's baseline or overall sense of self worth, and situational self-esteem is dependent upon the feeling keyed to specific events or circumstances. Gecas (1982) theorized that self-esteem is based on two different facets: competency and worth. The competency aspect refers to the amount a person perceives they are able to accomplish. The worth aspect refers to the amount of their internal values and character.

Cast and Burke (2002) furthered Gecas' concept by proposing that the self is composed of various identities which mirror different social situations, and that a person's identity is dependent upon which situation they are in at any given moment. The determinant of what is considered successful is an internal measure, weighted and analyzed by the individual in question. Cast and Burke also suggest that self-esteem can work as a buffer. When a person has had many successful efforts that verify their

internal identities, a reserve is built up which may protect them from a certain amount of negative experiences. When the reserve is depleted, the individual's self-esteem may again decline.

Coppersmith (1981) states that self-esteem could be viewed as a summary evaluation of our experiences each weighted by its importance to the individual. Global self-esteem is a person's baseline feeling of self-worth and different situations may alter these feelings depending on the person's estimation of competency in each situation (Gecas, 1982).

Though self-esteem has been defined in these various ways, for the purpose of this study, self-esteem will be defined as a person's inner feeling of worth and competency (Coopersmith, 1982). There remain, however, different types of self-esteem.

Types of Self-esteem

Low self-esteem can be defined as someone who does not feel that they have much value or worth. Adults who rate high on self-esteem scales can be defined as feeling very worthy and competent about themselves (Zeigler-Hill, 2006). On face value this seems to state that high self-esteem is positive and low self-esteem is negative. However, there may be more to these two types of self-esteem than first realized. Zeigler-Hill discusses in his article that there are two types of high self-esteem. These two types of high selfesteem are: secure high self-esteem and fragile high self-esteem. Secure high self-esteem is characterized by high explicit feelings of self-esteem and high implicit self-esteem. Zeigler-Hill goes on to mention that explicit self-esteem can be defined as conscious feelings of worth and acceptance, while implicit self-esteem can be defined as unconscious feelings of worth and self-reflection. Zeigler-Hill states that people with secure high self-esteem are well grounded and their self-esteem is more tolerant of negative events. Fragile high self-esteem, however, is defined by high explicit feelings of self-esteem and low implicit self-esteem. Fragile high self-esteem is in constant need for approval, is susceptible to challenges, and may encompass self-deception. Zeigler-Hill has established a link which shows that individuals who tested the highest on fragile selfesteem also had the highest levels of narcissism.

Kernis (2003) furthered the same theory but used different terms. Zeigler-Hills' (2006) term secure self-esteem is called optimal self-esteem by Kernis. Its meaning includes stable and implicit feeling of self-worth. The term fragile self-esteem used by Zeigler-Hill is called high self-esteem by Kernis. High (fragile) self-esteem describes someone whose self-esteem is only explicitly high but implicitly low. Kernis believes high self-esteem can be used as a defensive measurement and is fragile, while optimal (secure) self-esteem is related to awareness and being at peace with one's true nature. Kernis states that many individuals who exhibit high self-esteem can be found to be aggressive, self-enhancing, and prone to narcissism. Optimal (secure) self-esteem is anchored closer to reality, with individuals who accept themselves, imperfections and all. These individuals with optimal (secure) self-esteem do not see the need to be superior to others and do not gauge their worth through the actions of other people. Instead, while they react to failure and accomplishments in a similar manner, it does not alter their feelings of overall self-esteem (Kernis).

High self-esteem can be further broken down into two different types: fragile (high) self-esteem and secure (optimal) self-esteem (Zeigler-Hill, 2006). Zeigler-Hill defines secure self-esteem by high explicit feelings of self-esteem and high implicit self-esteem

(where explicit means conscious and implicit is unconscious). Fragile (high) self-esteem occurs when the individual has high explicit feelings of self-esteem and low implicit selfesteem. People with secure self-esteem are more able to deal with negative interactions (Zeigler-Hill), see closer to their true selves and do not feel the need to rate themselves in relation to others (Kernis, 2003). Whereas, people with fragile (high) self-esteem are in constant need of approval (Zeigler-Hill), and can be found to be aggressive, selfenhancing, and prone to narcissism.

Distinguishing types of Self-esteem

Kernis (2005) hypothesized four different manners of distinguishing secure/optimal self-esteem from fragile/high self-esteem. 1) *Defensive self-esteem*: individuals who are afraid to display negative self-feelings and so portray high self-esteem in a defensive manner and do not take any responsibility for their failures. 2) *Discrepant implicit/explicit self-esteem*: people who have fragile self-esteem may present affirmative feelings of worth but unconsciously sense they are not worthy. The manner used to determine implicit negative self-esteem was to have people respond to evaluations quickly or when they were too busy to think about the responses. 3) *Contingent self-esteem*: individuals whose self-esteem is dependent on the manner in which they score in relation to other people and are also very invested in their own achievements. 4) *Unstable self-esteem*: self-esteem where feelings fluctuate greatly over time. Though short-term fluctuations are dependent upon circumstances these fluctuations do not vary much from the mean (Kernis).

Effects of Self-esteem

Baumeister, Cambell, Krueger and Vohs (2003) completed a comprehensive literary review focusing on the consequences of self-esteem. In their review, journal articles were obtained from the Psych INFO database and yielded over 15,000 publications, these publications covered studies involving, children, adolescents and adults. The number was narrowed greatly by only including original objective studies whose outcomes were of broad societal relevance. The studies determined that higher selfesteem does not lead to better grades or prevent adolescents from doing drugs or smoking. However, high secure self-esteem did seem to have a link to overall happiness and was shown to reduce the occurrence of eating disorders in females. It also made individuals more willing take up opposing views in group settings. Cast and Burke (2002) discuss that self-esteem can also work as a buffer against negative life events. They state that when an individual has had a lot of positive life experiences, their selfesteem reserve is built up and this allows for the individual to be able to 'afford' to experience negative life events without losing their feelings of global self-esteem. Cast and Burke state that it is when this reserve is depleted then the individual's global selfesteem goes down and they are at risk for developing negative feelings of self-worth (Cast & Burke).

Elmer (2001) suggested that people with low self-esteem may treat themselves badly and may allow others to treat them badly. He also found that they may also have difficulty forming relationships. While research has not conclusively shown that low selfesteem is linked to crime, drugs, child abuse, or low grades (Butler & Gasson, 2005), high self-esteem (fragile) has been linked to narcissism, boasting, fabrication,

aggression, bullying, depression and lack of initiative (Baumeister et al., 2003). Scheff & Fearon (2004) propose that high (fragile) self-esteem may be linked to aggression because the tests often lump fragile high self-esteem and secure self-esteem into one score. Adding to the issue, Kernis (2005) found that people with unstable self-esteem are more prone to misinterpret daily events as indicators of their self-worth. These individuals are so sensitive that they will even interpret innocuous events as relevant to their self-esteem (Kernis). This link between narcissism and aggression can be seen more clearly from the study by Papps and O'Carroll (1998). They investigated the manner in which adults with high levels of narcissistic self-esteem expressed anger versus those who had high self-esteem but low ratings for narcissism. The participants for the study were 338 university students, (137 men and 201 women). The age range of the participants was 17 to 34 years old with a mean age of 20.9 years. Each subject finished four self-reports in random order. The self reports were: The Culture Safe Self-esteem Inventory (Battle, 1981), The Narcissistic Personality Inventory (Raskin & Hall, 1979), The Novaco Provocation Inventory (Novaco, 1975) and The State Trait Anger Expression Inventory (Spielberger et al., 1985). A between-subject design was carried out to compare the results on anger scales of participants who had high scores on the selfesteem and narcissism scales. Papps and O'Carroll found that high narcissistic selfesteem adults had a greater propensity towards anger, even when not provoked, than those participants who had high self-esteem and low narcissism. They also found that those with high levels of narcissism and high self-esteem also reacted more irrationally to threats to their egos than those with high self-esteem and low narcissism.

Tice and Baumeister (1990) examined self-preservation and the amount of time spent

studying between adults with low and high self-esteem. The participants in the study were 40 university students (23 men and 17 women). In order to measure the participant's self-esteem the researchers used Silverman's (1964) version of the Janis and Field (1959) scale. The participants were then told they would be tested on an intelligence test. Tice and Baumeister found that university students who scored high on the self-esteem scale studied less when the study time before a test was publicly known. This study assumed that participants utilized a protection of self-presentation through the appearance of success. That is, an individual who receives a bad mark may blame it on the lack of preparation instead of lack of intellect.

Baumeister et al., (2003) found that taken together, the research on the effects of selfesteem shows that self-esteem does not lead to better grades or prevent children from doing drugs or smoking. Individuals with secure high self-esteem have been found to be happier and more open minded, whereas individuals with low self-esteem are prone to depression (Baumeister et al.) and have difficulty forming relationships (Elmer, 2001). Whereas individuals with high fragile self-esteem have been linked to narcissism, aggression, and lying (Baumeister et al.).

Facilitating Optimal Self-esteem

With the aforementioned negative effects of low self-esteem, increasing self-esteem can be seen as a positive goal. Cousins (1998) suggests that this can be accomplished by focusing on skill-building activities. Cousins mentions studies which showed that by developing social skills, problem solving abilities and coping skills, students increased their abilities to cope with school activities. Cousins theorized that children who have mastered the developmental requirements for their age level would have average to high levels of self-esteem.

Scott, Murray, & Mertens (1996) discuss how modeling self-esteem is an important way that teachers and mentors can help a child develop an understanding of secure selfesteem. This is because the manner in which an influential authority figure acts has been found to have a much greater impact on a child's actions when compared to an authority figure who simply tells a child how to act (Scott et al.). What's more, teaching a child actual life skills and personal control over his/her environment allows the child to feel empowered, a key element in the development of self-esteem (Walsh, 1990). In addition, Branden (1991) states that there are a few values which are important for the process of internalizing self-esteem, including self-respect and self-acceptance. It was also found that creative expression was important to building an individual's self-esteem (Scott; Walsh).

From this, it can be seen that building an individual's social skills, problem solving abilities and coping methods will help that individual better interact with his environment and enhance their sense of worth (Cousins, 1998). Having role-models who also have high secure self-esteem is beneficial in building self-esteem, as is learning to express oneself in creative ways (Scott et al., 1996).

Self-esteem and the Importance of Self-expression

Self-expression has been shown to have a positive correlation to an individual's selfesteem (Hermann & Betz, 2006; Sharpe, Heppner & Dixon, 1995; Woodhill & Samuels, 2003). Self-expression is the manner in which we deal with our emotions and feelings. We may choose to express feelings verbally through language, or we may deal with them

through movement, artistic creation, or writing among many other creative options. Greenberg (2008) explains that primary emotions, the ones we first feel in response to a situation are strong. Secondary emotions are often defense mechanisms to the primary emotions. An example of this may be feeling shame for being happy that someone did not get a job. Through an exploration of current literature Greenberg found that when people learned to express themselves effectively (being able to make a point without causing unnecessary emotional pain to others or oneself), they felt better about themselves and experienced increases in their self-esteem (Greenberg). Watson, Gordon, Stermac, Kalogerakos, & Steckley, (2003) similarly found that clients who were encouraged to express their feelings creatively also experienced increases in their feelings of self-worth.

Our self-expression, more specifically our inter-personal skills, can also affect our feelings of self-worth and the manner in which we view ourselves as the following study will demonstrate. Chin et al., (1980) described that many students with poor social skills became frustrated when they tried to communicate their thoughts and wishes in the classroom, which caused much distress to the students and negative feelings of self-worth. They mention that this can cause a disharmony between the teacher and student which only worsens when the student arrives at more challenging activities. This disharmony negatively affects the student's feelings of competency and self-esteem. Chin et al. researched a program which incorporated art therapy, social skills training, and video work to help students with learning and social difficulties. Four boys and three girls, aged 17 to 19, participated in the program. The groups lasted for eight weeks with five three-hour sessions occurring each week. The students who participated in the

program had little self-confidence, low self-esteem, poor social skills and were not functioning well academically. This research data was obtained from personal daily checklist and staff observations. By the end of the program the data showed that the students had significant improvement in their self-esteem daily checklist and social skills and the results from staff observations corroborated these results.

Thus self-expression and learning to competently express our feelings to others is important to our emotional wellbeing and feelings of self-esteem (Chin et al., 1980). As discussed further on in the research paper, art therapy can effectively help a client learn how to express themselves in various creative manners and help their self-esteem (Case & Dalley, 2006).

Self-esteem in School Children

In the school environment, increased self-esteem can be seen as a buffer against negative experiences (King, Vidourek, Davis & McClellan, 2002). Shaffer (1994) argues that as children enter the school system they usually begin with a self-concept which is already well formed. He mentions that this is due to a mixture of nature and nurture. Shaffer states that, at a young age, children begin to develop a sense of their internal attributes, values, beliefs, and ideology. By elementary school they are not only asking themselves who they are but what their role in society is. He goes on to state that the most important self-concepts to a child seem to be linked to those activities in which they are the most involved. For school-aged children this is family, academic achievements, and social competency (Shaffer).

Scott et al. (1996) researched the significance of student self-esteem and the school system. Through a gathering of 2,799 randomly assigned personnel from kindergarten to

grade 12, Scott et al. found that, while family is the most significant factor in the development of a child's self-concept, school follows a close second. As children get older their feelings of self-worth diminish. Eighty-nine percent of children in preschool reported high self-esteem compared to only twenty percent of students in grade five. This may be due in part to the growing understanding that their performance will be evaluated and on the external emphasis placed upon achievement. Children are constantly required to perform in a variety of tasks and roles and are then evaluated on how well they accomplish them.

Along with the age of the student, the school environment also plays a role in selfesteem. Scott (1999) found that school environments are usually placed somewhere between two continuums: a school which is custodial or a school which is humanistic. A school which is more custodial will place emphasis upon sanctions, order, and autocratic procedures. A school which places more emphasis upon a humanistic climate will be characterized by democratic procedures, personal flexibility, and student participation. Students who attend schools where they are encouraged to make choices and show creative expression have displayed higher self-csteem (Scott).

This is why the school environment is very important to the development of a child's feelings of self-worth and competency (\Shaffer, 1994). Shaffer found that a school-aged child's self-esteem can be positively correlated to their feelings of family, academic achievements, and social competency. As the children go up in grades they usually see a drop in their self-esteem (Scott, 1999). This was related to the child realizing their own academic and social performances and emphasis being placed upon achievement (Scott). Scott also found that the school approach molds the manner the children view

themselves, with schools which are more humanistic and democratic having children who feel greater self-worth than those who attend schools which are more custodial.

Conclusion of Self-esteem

Researchers show that self-esteem's definition has been subject to different and evolving interpretations. The most succinct definition is an individual's feeling of worth and competency (Coppersmith, 1981). Studies show that self-esteem is influenced by a variety of factors, which include the people, environment and activities with which an individual is involved. A person's self-esteem is both dependent on the situation at hand and the person's global sense of self-worth. An individual assesses all of his/her successes and failures to give them an overall sense of self-esteem.

Zeigler-Hill (2006) state that low self-esteem can be defined as someone who does not feel that they have much value or worth. People who rate high on self-esteem scales can be defined as feeling very worthy and competent about themselves (Zeigler-Hill, 2006). These two types of high self-esteem are: secure high self-esteem and fragile high selfesteem. Secure high self-esteem is characterized by high explicit (conscious) feelings of self-esteem and high implicit (unconscious) self-esteem. Fragile high self-esteem can be defined as a person who has high explicit (conscious) self-esteem but low implicit (unconscious) self-esteem.

People with secure self-esteem are more able to deal with negative interactions (Zeigler-Hill, 2006) and see themselves closer to their true selves and do not feel the need to rate themselves in relation to others (Kernis, 2005). Whereas people with fragile (high) self-esteem are in constant need for approval (Zeigler-Hill) can be found to be aggressive, self-enhancing, and prone to narcissism (Kernis).

There are many other effects of self-esteem. Baumeister et al. (2003) looked at the effects, causes, and treatments for increasing self-esteem. They found that high secure self-esteem did have a link to overall happiness and was shown to reduce the occurrence of eating disorders in females; it also made individuals more open minded to new viewpoints. By contrast, low self-esteem was also linked to depression and lack of initiative (Baumeister et al.). Elmer (2001) found that people with low self-esteem may treat themselves poorly, are more willing to allow others to treat them poorly, and had more difficulty forming relationships than people with high self-esteem.

Cousins (1989) studied manners in which you can increase an individuals' selfesteem. He found that building an individual's social skills, problem solving abilities and coping methods will help that individual better interact with his/her environment and enhance his/her sense of worth. Greenberg (2008) found that self-expression was helpful in learning how to cope with issues more proficiently whilst interacting with the outside world. They both found that those who were more competent in self-expression had healthier and higher levels of self-esteem.

As the children go up in grades they usually see a drop in their self-esteem (Scott, 1999). This was related to the child realizing their own academic and social performances and emphasis being placed upon achievement (Scott).

Self-esteem is an important factor in the development of a healthy happy individual who is able to capably interact with the outside world. There are a variety of techniques which can be used to help build an individual's self-esteem. How this can be applied to various populations using art therapy techniques in order to build a client's feeling of self-esteem and competency will be discussed further in the paper.

Art Therapy

The association des art-therapeutes du Quebec (AATQ) (2005) defines art therapy as a psychotherapeutic process which utilizes clients' visual and spoken expressions and reflections. Art therapy has been used as a tool with a wide variety of different populations and environments (Di Maria, 1982). The AATQ states that art therapy can be used to support people of any age and background and with diverse emotional, physical, and intellectual issues and can be seen in health services, corporate, educational and community settings. During an art therapy session, a therapist and a client work together, collaboratively, in order to facilitate the client in self-expression. One of the benefits of art therapy is that it allows thoughts and feelings to be articulated in images as well as words, but while art making is central to the therapy, clients do not need to have any specialized training or abilities in order to utilize and benefit from it (www.aatq.org). Malchiodi (2000) explains art therapy as being divided into two different categories. The first category is founded upon the belief that the very process of creating art is therapeutic, called *art as therapy*. The other class of art therapy uses the art as a means of symbolic language between the client and therapist (AATQ). Rhyne (1984) takes this further, holding that art is not a passive process but is always engaging the artist and viewer in an internal dialogue, with both actively transmitting and receiving information. One's choices in media, observations, or omissions are all indications of one's own personality and preferences.

Art therapy as a field recognizes that the creative process can be used as a manner of dealing with emotional issues and encouraging self-esteem and growth (Rhyne, 1984). Case and Dalley (2006) explain that art therapy is a therapeutic relationship in which the art therapist and participant are both involved in interpreting the meaning of the artwork produced. Chin et al. (1980) mention that art therapy is a non-threatening manner in which clients can feel free to express their issues. This is because, for many clients, the use of art instead of verbal language represents an easier way to communicate with a therapist as the art object provides a focal point for deliberation and reflection. Also, since the artwork is usually a tangible object there are traces of the process the client went through while creating the art object and the interactions that took place between the participant and therapist (Case & Dalley). Therefore, the art therapy space provides hands-on, imaginative, and non-judgemental environment where people feel less threatened about interaction and self-expression.

As Rubin (1984) describes, in art therapy the therapist takes on three roles: educator, teacher, and clinician. Though therapist is our main role, we are also in the role of guide and helper in the client's journey of the self. Rubin talks about how many clients come to therapy because they are having difficulty dealing with the world. The art therapist is there to make present and gradually accept all of the shunned aspects of the self. She mentions how the distorted world of the client is gradually molded into a form which is closer to reality. When clients are better able to view their world and interact with it effectively, feelings of worth and self-esteem increase (Rubin).

Havsteen-Franklin (2007) describes art psychotherapy as an intertwining of the imaginal and the image-making process, linked similarly as the ego and the self. Images formed by the client create the spaces between which fantasy, reality and illusion collide and debate a manner of being together. The image becomes a map of the client's internal space and so whatever meaning is lost in the verbal can be held in this creative frame.

The image acts as a mirror obscura giving form to the inner darkness. The image can give way to various associations that may not survive ego distortions or attacks. This manner of dealing with issues allows the client to keep his/her self-esteem more intact and allows the client to choose the pace of dealing with issues (Havsteen-Franklin).

Therefore, Case and Dalley (2006) state that in art therapy the art therapist and client work together to find the meaning in the artwork. This statement is supported by Rubin (1984) who describes that art therapy can help clients interact more effectively with the world and increase self-esteem. Additionally, Havsteen-Franklin (2007) suggest the image created in art therapy becomes an external map to the client's internal world, allowing the client to form various associations which may not survive ego attacks. This allows the client to deal with issues at their own pace and keep their feeling of self-worth intact (Havsteen-Franklin).

Art Therapy and Self-esteem

Art therapy helps clients initiate an activity which allows them to freely express their conscious and unconscious needs through the medium of art and verbal language. Art therapy is an effective means of helping an individual express emotions, fears and dreams with the therapist in a non-threatening way. Art is also a valuable medium for children who may not have the skills to verbally discuss complex issues and fears (Karkou & Glasman, 2004). As mentioned previously, for shy individuals this allows the focus of the therapeutic setting to be placed upon the art instead of on them so the artwork acts as a container for emotions too frightening to discuss verbally. This allows a child to distance themselves from their situations (Waller, 2006).

Heenan (2006) conducted a study which looked at the effectiveness of using art therapy as a method for increasing self-esteem. The study was conducted at an assistance recovery center which offered their participants five different programs. One of the programs was art as therapy. The program ran for 10 hours a week for 10 weeks. The participants of the program were between the ages of 18 to 55 and were all referred to the program by a doctor or psychiatrist. The art as therapy sessions were conducted by an art teacher with the primary objective being the therapeutic value of creation rather than the aesthetic qualities of the artwork produced. The study demonstrated increases in selfesteem, self-confidence and empowerment for the participants as measured by thematic analysis of transcribed interviews. These participants described that they felt low about themselves and were not able to communicate their feelings effectively. The clients mentioned that art gave them the medium through which to express themselves without words and allowed them to discuss their feelings with the others in the group. The participants also expressed that they experienced a reduction in stress and anxiety when they were working on their artwork. The distancing that occurs through art therapy often allows a client to see aspects of the art that they were not aware of beforehand. This distancing has been shown by Greenberg (2008) to be helpful in helping clients deal with issues that may be disrupting their self-esteem. The separation permits the client to look at their work from a third-person perspective, helping them to be more objective about their concerns, and more able to alter their behavior which may have been causing their feelings of self-worth to diminish (Heenan).

Case and Dalley (2006) describe the case of a young boy who came into a therapy session eager to check on the clay bowl he'd created in an earlier art therapy session.

Upon looking at his creation he cried out in despair. He stated to the therapist that his beloved bowl was broken. When the therapist looked at the bowl she could see a small, barely discernible hole. The therapist reflected to the child on his feelings and about how difficult it is to see something you care about damaged. The therapist also reflected to herself that the boy's reaction mirrored his feelings of being neglected and not being able to count on the people around him for protection. Then the boy came up with an idea on how to repair the bowl. He would paint the bowl with a thick paint which would cover up the hole. Upon fixing his bowl, the boy looked proud. Case and Dalley state that, through figuring out a solution to his problem by himself, he felt more self-worth.

As Cousins (1989) mentioned earlier, learning to problem solve is one manner to increase a student's self-esteem. The therapist only needed to validate the boy's feelings of frustration and this validation allowed him the space to create his own solutions (Case and Dalley, 2006). Some may rush to find a solution to the problem and fix it themselves or not even allow the child the space to be angry. This would rob the child of the validation of their feelings and also of learning that they have the power to solve problems themselves. Finding a solution for the child would have been counterproductive to the child's self-esteem as it would have taken away an opportunity for the child to learn how to solve his own problems. This ability to problem solve (Cousins, 1989), and the feelings of competency (Coppersmith, 1981; Zeigler-Hill, 2006), which accompany it are strongly linked to an individual's feelings of self-esteem.

Therefore, art therapy allows a client to express both unconscious and conscious issues via a safe container that may be too difficult to deal with directly (Waller, 2006). Therefore, difficult issues can be more easily dealt with using art therapeutic techniques

as described by Heenan (2006) which showed a causal reduction in stress and anxiety and increases in self-esteem, feelings of empowerment and self-confidence.

Art Therapy and Self-expression

Self-expression is often linked to self-esteem (Hermann & Betz, 2006; Sharpe et al., 1995; Woodhill & Samuels, 2003). Scott (1999) states that self-expression is a very important aspect of self-esteem and that being given space for creative expression is shown to help increase an individual's self-esteem. Rubin (1984) found that art therapy is an effective method to help children and adults learn to creatively express themselves.

As referenced earlier, Zeigler-Hill (2006) mentions that self-esteem encompasses both the unconscious and conscious, with implicit self-esteem being unconscious and explicit self-esteem being conscious. If someone has fragile self-esteem they may express positive self-esteem but may unconsciously feel that they are not worthy or accepted. This can be seen through the manner in which they deal with conflicts, such as the exhibition of defensiveness (Kernis, 2005). Since their true feelings of self are largely unconscious it makes it more difficult to bring these feelings to the surface and deal with them. Case and Dalley (2006) describe how art is often used to as a method of forming a link from the conscious to the unconscious. Case and Dalley describe art in therapy can help with the release of unconscious feelings of low self-worth by coaxing this pain to consciousness and allowing it to be expressed. In order for an art therapist to help a client increase both kinds of self-esteem they need to find ways in which they can reach the client on conscious and unconscious levels. Case and Dalley found that a therapist can help a client bring unconscious material to consciousness, is through the interpretation of their artwork. They mention that the therapist must be careful to make sure that the client is ready for these interpretations and be as much a part of the process as possible. If an interpretation is done prematurely the client's self-esteem may decline instead of increase, since, for example, people with unstable self-esteem are more prone to misinterpret daily events as indicators of their self-worth Kernis. Taken together, this shows how encouraging and enabling creative self-expression through art therapy can be to help a client increase self-esteem. Allowing the client to come to his/her own interpretations also gives the client the added benefit of feeling competent which has already been shown to be an effective method of self-esteem enhancement (Gecas, 1982).

Therefore, since self-esteem is both conscious and unconscious, allowing a client to express themselves creatively will help the client in dealing with unconscious self-esteem issues. One method explained by Case and Dalley (2006) was through the interpretation of a client's artwork.

Art Therapy and Competency

As mentioned by Gecas (1982), Kernis (2005), Schaffer (1994), and Zeigler-Hill (2006) feeling competent at something is strongly linked to a person's self-esteem. Art therapy can help build up an individual's competency in various manners. Walsh (1990) found creative therapies were an effective method to reduce stress and help the participants be less self-conscious. They go on to say that this allowed the adolescents to feel more competent and feel increases in their self-worth (Walsh).

Reynolds and Lim (2007) found that doing art therapy was also very effective in helping women who had serious medical conditions feel competent. They noted that the women felt more competent since the art allowed them to feel challenged, focus on something other than their illness, and feel a sense of achievement. This study is

described in the chapter called special populations.

Rubin (1984) mentions that, as the client learns how to use various techniques and media in art therapy, they will begin to experience competency and as they continue to work on projects their proficiency will amplify. If the art therapist keeps the client's artwork they will also be able to give concrete evidence to the client of their increasing ability. Arrington (2007) suggests that the therapist could also put the artwork on display. Though there is also a risk that the client's artwork may not be received in the manner they wished, Arrington discusses how the client would feel proud and competent as an artist. There is also the issue of displaying to the public private images that deal with unresolved issues for the client. The therapist should always weigh the risks and benefits before making such a decision. If the client does not like the reaction their artwork receives from others the client may see their feelings of self-worth decline instead of increase.

Using Art Therapy Techniques to Facilitate Optimal Self-esteem

Case and Dalley (2006) mention that art in therapy can help with the release of unconscious feelings of low self-worth by coaxing this pain to consciousness and allowing it to be expressed. Schaverien (1999) discusses how these unconscious feelings may be brought to the surface in more detail. She states that art can graphically represent impulses and create an objective representation of these inclinations. These negative feelings of self-esteem can then be more easily dealt with through the artistic embodiment. This embodiment of the negative impulses can then be destroyed or kept until the affect can be later incorporated within the individual. In this manner the art can be an object of transference. According to Schaverien, transference can be an unconscious attribution that brings past emotions to the surface, so they no longer affect the individual's feelings of self-worth and competency. In this manner the artwork can temporarily be encountered as the transferred thought or archetype.

Another format that Shaverian (1999) mentions that artwork can help deal with issues which may be hindering an individual's self-esteem is through the use of an embodied image. Shaverien discusses that there are times where art can represent a feeling or pain when no other word can be substituted, this is called an embodied image. This image differs from a symbol as the whole image takes on a complete entity. Through exploration this image may begin its own journey, taking on a new meaning than was originally intended. This objectified manifestation functions as a container for emotions and imagery too powerful to manage inside the client (Schaverien). This way the client will be able to look at his/her issues from a distance which helps the client deal with the issues objectively. These are criteria that Greenberg (2008) states are important in helping a client deal with unresolved issues which can lower their sense of worth.

As was described earlier, creative self-expression is important in facilitating selfesteem. This means self-expression itself becomes another effective technique for the art therapist (Scott, 1999). Rubin (1984) explains that evoking expression means inviting the client to create. Rubin has found that many art therapists stall on the question of what type of activity is best suited for this purpose. Her suggestion is to tailor the art therapy activity to the time and space of the session. Allowing the client to be part of the decision making can increase feelings of competency which is, as previously explored, strongly linked to self-esteem (Gecas, 1982). Rubin also mentions that the therapist should try to ensure that there is a strong likelihood the client will encompass and

complete the set goal successfully. This being said, a person's ability to set and meet goals can be linked to increasing their feelings of self-worth (Reynolds and Lim, 2007). *Guided Imagery*

Guided imagery is another technique which has shown success in enhancing selfesteem in children. Utay and Miller (2006) describe guided imagery as a manner to externalize clients' inner imagery. It can be used in order to rehearse new skills, modify behaviors, deal with unconscious needs and visualize outcomes. It has been found effective in reducing pain, increasing motivations and even altering maladaptive behaviors, all facets which may be hindering a individual's feelings of self worth (Utay & Miller). The guided imagery process usually begins with having the participants enter a calm state. More specifically, Pearson (2003) mentions that guided imagery usually begins with some relaxation techniques such as breathing exercises and/or some muscle relaxation. Greenberg (2008) noted the importance of helping the client enter a calm state so they will be able to more easily deal with negative conscious/unconscious emotions, which may be hindering their self-esteem. Pearson states that the facilitator will ask the participants to place themselves in a setting while paying attention to the sights, sounds, and smells of the area. This will allow the clients to separate themselves from the issues they are dealing with and look at their issues more critically, also helpful in allowing a individual to confront and alter issues which may be causing an individual distress (Greenberg) and lowering their sense of self-worth. The session ends when the therapist gives the participants some directions and then asks them to open their eyes and bring their attention back to the present (Pearson).

Omizo, Omizo and Kitaoka (1998), by way of example, successfully used guided imagery techniques in order to help enhance the self-esteem of Hawaiian school children who were suffering from low self-esteem and poor academic achievement. The study had 60 children, whose ages ranged from eight to twelve. There were a total of 26 boys and 34 girls in the study. The children were randomly selected and assigned to the experimental and control groups. The experimental set had 16 girls and 14 boys. The children were given the Culture Free Self-esteem Inventory (Battle, 1981) a week before sessions began and one week after the last session. During each session the children were given imagery that would help reinforce awareness about themselves and others. In the first session, the children were asked to write down their names, and then, around their names, to write down their positive traits and things that they had accomplished or were proud of. After their sessions, the children were given art materials and clay to use as symbolic objects to explore aspects of their guided imagery experience. In other sessions the children were asked to think about negative traits they possessed and think about positive alternatives to those traits. After 10 sessions the children in the experimental group reported higher academic self-esteem and personal self-esteem scores. In the 2month follow-up, they found that the children in the experimental group continued to demonstrate positive behavior towards others and themselves (Omizo et al., 1998).

Therefore, there are various art therapy techniques which can be used to successfully develop a client's self-esteem. Schaverien (1999) discussed that the artwork may be used in order to embody the client's negative issues and allow them to distance themselves from their problems. These detrimental effects can then be more easily destroyed or integrated in the client (Schaverien). Guided imagery can be used to help clients reassess

their own preconceptions about themselves and those around them (Omizo et al., 1998) This allows the client another manner of looking at life events which may have been affecting their feelings of self-worth and competency. Utay and Miller (2006) also found that through guided imagery participants were able to practice a new skill, alter a person's behavior, deal with unconscious needs and visualize different outcomes. Visualizing these different outcomes, Utay and Miller state that guided imagery can be an effective way of changing maladaptive behaviors which may be hindering a person's selfesteem. Rubin (1984) explained that allowing the client to be part of the process in their own creative expression is effective in dealing with low self-esteem through giving the client choice over their activities and increasing their feelings of competency.

Therapist's Role

According to Rubin (1984) there are various techniques that can be used to increase a client's self-esteem with art therapy. Choosing non-fail activities is always a benefit but this does not mean that the therapist should go the simple route and choose something very basic such as coloring or ready-made projects. Rubin notes that such projects, though fun, do not offer clients a strong sense of accomplishment and can constrain the client's feeling of achievement and potential to learn more about themselves. Rubin suggests that the therapist choose art media which is intrinsically pleasing to use and view. An activity that does not require a great deal of effort in order to create a successful outcome should be used. Rubin suggests using a variety of colors such as colored cellophane or tissue paper which can easily create something that the client will feel proud of. Rubin goes on to mention that the art therapist should ensure that the activity does not take a lot of technical skill or the client could feel discouraged, which

would then negatively affect their self-esteem. Rubin encourages that the therapist should try to ensure the session is geared towards the level of the client. Finally, Rubin suggests that the client works on something that has a final product. She mentions that art sessions which provide some sort of utility are also very useful to help a client feel a sense of esteem and accomplishment.

Techniques for Dealing with Unconscious

Greenberg (2008) defines the steps a therapist should take in order to help their clients deal with unconscious emotional issues which may be negatively affecting their selfesteem. The therapist should ensure that they are in a soothing and validating space so that the client is more able to express their emotions. Greenberg states that empathy is important in order for the client to learn to self-sooth and help them fortify their selfworth. After this has been established, the first goal in a therapeutic setting should be helping the client become aware of their primary emotions. This may mean that the client will have to be helped to move past the defensive secondary emotions. Greenberg goes on to mention that this does not mean that the client should only be able to name the emotion but to feel the emotion and be aware of its existence and tolerate it. He asserts that under-regulated emotions are helped by validation, while dealing with overly active secondary emotions and feelings that are maladaptive should be regulated. Regulation of maladaptive emotions can take the form of naming the emotions, working at a distance from the emotion, increasing the feeling of positive emotions, learning tolerance, increasing positive emotions, breathing techniques, and distraction. All of these techniques are already found in art therapy or could be integrated seamlessly into the treatment methods. Greenberg states that understanding the reasons why one person gets

upset at something is of great benefit but alone it is often not enough to change behavior. More implicit alterations in narrative are very beneficial. He goes on to mention that being able to symbolize those emotions help in assimilating them into one's own narrative. Greenberg suggests using writing as the medium but this could easily be adapted to drawing, sculpture, or film. For an example of how this can be used in art therapy, Utay and Miller, (2006) as described earlier, used guided imagery in order to help clients deal with unconscious needs and bring to the conscious. While a client is in a relaxed state they will be more willing to move past secondary defensive emotions to deal with unconscious issues. Guided imagery also allows for all of the techniques which Greenberg states are helpful for bringing unconscious material to the surface. It allows the client to be relaxed, learn breathing techniques and helps the client distance themselves from their issues. Rubin (1984) also mentions that activities which the client is able to do quickly without much deliberation is a manner to bring to the surface unconscious material. Rubin also mentions that the art object also allows the client to distance themselves from their issues, which Greenberg states is one manner to help a client deal with unconscious material which may be lowering their self-esteem. Allowing the client to free associate is another method that Rubin states is beneficial to surface unconscious problems. Each of these techniques meets the criteria which Greenberg (2008) states are necessary for dealing with unresolved issues which may be blocking clients from feeling better about themselves.

Techniques for Self-expression

As discussed earlier self-expression is an important aspect of a person's self-esteem. The ability to express oneself to others and oneself is strongly linked to an individual's feeling of self-worth (Razzino, 2004). Additionally, being able to express oneself in a creative manner has also been shown to be a way to increase your self-esteem (Scott, 1999; Walsh, 1990). There are a number of ways that an art therapist can help clients express themselves. Rubin (1984) mentions that it is not necessary that an art activity be destructive in order to be cathartic or expressive. The therapist may choose to use strong coloring materials, such as thick pastels or markers which will hold up under a lot of pressure. The therapist may also choose an activity which uses up a lot of aggressive force such as working with wood or working with large pieces of clay. The therapist may also suggest to the client that they create an image about anger or frustration. This will allow the client an appropriate outlet for their repressed feelings as well as helping the client learn different ways to express themselves, which is important towards building a higher level of self-worth (Scott, 1999; Walsh, 1990). Rubin mentions that in order to uncover repressed emotions, projects that require less time and deliberation would be ideal. Choosing activities which incorporate free associations with little need for deliberation help the client let go of their inhibitions (Rubin). The client then is free to deal with any deeper issues which may be affecting their feelings of self-worth.

Though expressing one's feelings creatively have been found beneficial for the client to build secure self-esteem (Watson et al., 2003) sometimes it is difficult for a client to express these negative emotions. Rubin (1994) discusses ways in which a therapist can facilitate their client's expression. If the client has difficulty expressing anger or being free and playful and if the therapist is unsure of what the client needs are at the moment, Rubin (1984) states a more open activity would be recommended. She mentions that though an art therapy technique could be beneficial, she worries that when the therapist controls much of the session it stifles the client's creative expression. Especially since creative expression and feeling competent are so important for self-esteem growth (Gecas, 1982). Most often Rubin allows the client to choose his/her own media and approach, and only if the client seems stuck does she give suggestions. She suggests that the art therapist could suggest a theme or topic but then allow the client to choose between the type of media and manner in which the theme is portrayed. Rubin states that the challenge for the therapist is to guide the client in small steps towards the desired goal. She describes a group of troubled youth she was working with who wanted to create a mural all together. Rubin realized that this situation was a breeding ground for tension and disagreement. She decided that each individual would build his/her own section of the mural and then place it one by one on the common backdrop. After the activity each individual was given time to express feelings about the activity. It took a good number of sessions before this group of troubled youngsters was able to work together but through little steps they became more aware of themselves and how to express themselves effectively with others (Rubin).

If clients have a strong need to express themselves, Rubin (1984) has different techniques which can help with this process. She states that it is not necessary for the process to be aggressive or destructive, but the client can work with a strong material such as woodworking, large crayons or clay. Rubin states that, in order to uncover repressed feelings, projects which require less thought are preferred. Try to allow the client freedom to choose activities, suggestions are okay but it is important that the client be able to express him/herself in the manner s/he feels comfortable with (Rubin). These techniques will help clients develop their skills in self-expression, creativity and

competency, all which are important steps in developing secure self-esteem (Gecas, 1982).

Specific Populations

Children with ADHD

Attention Deficit Hyperactivity Disorder (ADHD) is one of the most common psychiatric disorders for children and many children suffering from ADHD also suffer from low self-esteem (Slomkowski, Klein & Mannuzza, 1995). Henley (1998) studied a multi-modal treatment for young children with ADHD which integrated art therapy with cognitive therapy and medicinal treatments. Henley found that art therapy can be one avenue which allows children to express themselves creatively in a safe atmosphere where their feelings are supported. Henley stated that with his group of children with ADHD, art making helped redirect destructive impulses through symbolizing conflicts rather than acting out behavior, which then made the children feel better about themselves. This method allows a child to look at behavior more objectively. Creative expression also promoted cognitive abilities through teaching a child how to problem solve (Henley) which Cousins (1989) mentioned earlier was one manner in order to increase a client's self-esteem.

Children with Cancer

Wallace (2007) describes how art therapy has been used successfully with children dealing with cancer. A special problem arises in that children with cancer typically have to undergo treatments which alter their appearance, something they are often overly conscious about. Wallace mentions that this leads to difficulties dealing with their body image and lowered self-esteem. In a medical setting art therapy offers children and young adults a means of control and self-expression, two facets which are important for a strong sense of self-worth. The art therapy room also provides a safe container in which children are able to release inner emotions and fears. Just allowing children to be successful in creating something helps them build self-confidence and promotes positive self-esteem (Wallace).

Adolescents at Risk

Chin et al. (1980) worked with a group of nine adolescents who had poor social skills, low self-esteem, and were doing poorly academically. They developed a program which incorporated three main criteria in order to help the adolescents become more content with themselves and their school life. Using three modalities, art therapy, video rehabilitation and lessons on social skills, the treatment plan was intended to give the adolescents the opportunity to discuss problems, enhance social skills and express their creativity. Art activities were presented to the adolescents in a non-threatening manner and the expression of personal feelings and ideas was encouraged. An environment of respect and understanding was promoted and the adolescents were made aware that there were no wrong answers. The sessions ran five days a week for three hours per session. The program ran for four weeks. The art therapy component was used in order to allow the adolescents to express their emotions verbally and through their artwork. It was also a means of allowing the adolescents to practice socializing with others in a non-threatening way. During the social skills component the adolescents were taught the appropriate way to behave in various social situations. A video component was used in order to have the children role-play and watch their own behavior. Good behaviors were replayed during the class while unsuitable behaviors were edited out of the videos. Out of the nine

adolescents, seven completed the program. Using triangulation, encompassing teachers, self-reporting, and a psychiatrist, a behavioral checklist was completed for each of the adolescents which dealt with their self-esteem and social efficacy. They found that the adolescents improved not only in their self-esteem but that their interpersonal skills also increased. Ultimately the adolescents were doing better in school and interacting with their peers more appropriately.

Women with Cancer

Reynolds and Lim (2007) looked into the relationship of 12 women who used art and were in treatment for cancer. They discovered that there were many different benefits these women experienced through working with art. Reynolds and Lim recognized that women who dealt with this kind of condition used art as a means of expressing themselves and constructively communicated their feelings of anxiety, sadness, and anger. Through group art therapy these women said they felt an increase in their selfesteem and became more confident in social relationships. They also enjoyed the fact that they could then use the artwork they had created as gifts for those who had cared for them. It was also a manner in which the participants could focus their attention on something other than their treatment and prognosis. Many of the women felt that their self-worth was deteriorating and so art therapy helped them to not solely define themselves as cancer patients. The artwork helped the participants reconnect with their inner selves and also allowed them to connect and discuss things such as their artwork instead of the usual treatment discourse. Feeling accomplishments in completing projects, overcoming challenges, and being given choice and control were all benefits which helped these women increase their self-esteem (Reynolds and Lim). Chin et al. (1980)

discussed the fact that in art therapy the activities can be tailored so that there is little risk of failure, and everyone's feelings about their work are valid. These circumstances provide the perfect environment for the building of an individual's self-esteem.

Incarcerated Pedophiles

Art therapy has been used with sex offenders as a means of helping them enhance their self-esteem and decrease anti-social behavior. The use of art therapy as an expressive tool was able to help sexual offender develop a sense of empathy towards their victims and increase their own feelings of self-worth (Ackerman, 1992). Ackerman used a single case study design in order to ascertain the effectiveness of using art therapy in order to increase the client's the self-esteem. The therapy consisted of 10 art therapy sessions, two times a week, lasting one hour each. The sessions included many human figure drawings (HFD) and archetypal symbols. These were used in order to help the client integrate his sense of self with his ideal self. During the final sessions human figure drawing and the Tennessee Self-Concept Scale (TSCS) were used to assess change. The results showed that figure drawings displayed more attention to detail and better figure integration, both of which have been shown to be linked to increases in selfesteem (Prypula, Phelps, Morrissey, & Davis,1978). Ackerman also notes that the TSCS showed increases in self-esteem and greater personality integration.

Assessment of Self-esteem and Art therapy

Imagery in art has long been used as measure of a person's self-concept and selfesteem. The House, Tree, Person (Buck, 1951) and the Draw a Person (Harris, 1963) tests have been thought of as projective device into a person's unconscious feelings and needs (Prypula et al., 1978). In these two projective tests, a larger figure is thought to

mean a person with greater feelings of self-worth in comparison to images with smaller figures. Prypula et al. conducted studies which looked at the correlation between figure size and self-esteem and self-concept as measured by the Children's Self-Concept Scale (Piers-Harris, 1969). One hundred and fifty female fifth and sixth grade students participated in the study. In order to ascertain which students had high, low, and moderate self-concept they used the Piers-Haris Self-Concept scale, then each student was placed in three different groups: low, high and moderate self-esteem accordingly. Each student was instructed to draw a man, woman and self. If there was a link between figure size and self-esteem then it would be expected that children who scored higher in self-esteem on the Piers-Harris Self-Concept scale would also draw larger figures. Other factors, 14 in all, were also correlated in this study such as omissions, erasures, details and shadows. The researchers did not give any specific reasoning for why they chose certain aspects to qualify. No correlations were found between the size of self images and students who had high or low self-concepts. Factors which did have significant results, however, for children with moderate or high self-concepts were: these students used erasures more in their images, their images had more details, they omitted fewer body parts, they had a more prevalent use of shading and they drew figures which were more concretely defined (Prypula, et al.). They proposed that the reason for this was that children with higher self-esteem cared more about the quality of their drawings. This study shows that certain characteristics in artwork in can be used as projective indicators of self-esteem (Prypula, et al.).

Conclusion

Individuals who suffer from a lack of secure self-esteem deal with a great number of

physical mental and emotional issues (Kernis, 2005). Some of these physical and emotional issues are depression, aggression, and suicidal ideation (Kernis). In art therapy it is often a primary or secondary objective to increase and enhance a client's self-esteem (Arrington, 2007). In order to more effectively increase a client's self-esteem an art therapist should have a strong understanding of the reasoning and research behind the development and treatment of self-esteem. This paper reviewed the literature on art therapy and self-esteem research, discussing the various treatment methods that can be used by art therapists in order to enhance his/her client's self-esteem.

Characteristics in which the literature has shown to positively increase an individual's self-esteem include skill building, problem solving, learning coping skills, (Cousins, 1998) as well as learning how to be in more control over their environment and learning life skills (Walsh, 1990). Branden states that learning self-acceptance is very important for a client to feel better self-esteem. Further, learning how to express oneself creatively (Scott, 1999;Walsh, 1990; Watson et al., 2003) has also been positively correlated to increases in self-esteem. Self-expression has been shown to have a positive correlation to an individual's self-esteem (Hermann & Betz, 2006; Sharpe et al., 1995; Woodhill & Samuels, 2003) as well as increasing a client's feelings of competency (Coppersmith, 1981; Zeigler-Hill, 2006) that in turn increases self-worth.

For the art therapist it is not only knowing techniques that will help a client increase self-esteem, it is also in the manner in which the therapist administers these techniques. Since self-esteem is also affected by the interaction and assessment the client feels s/he is getting from others, the client-therapist relationship is very important. As Coopersmith (1981) stated, self-esteem is defined as a result of the opinions of others (as well as self),

with more weight given to those individuals who are highly regarded by the client. A therapist could be one of those individuals who could be highly regarded and their opinion of the client and manner in which they react will have more of an effect on the client's self-esteem than many other people that the client would interact with. Greenberg (2008) continues with other things that should be in place in order for a client to be able to open up to their art therapist. The therapist should ensure that their clients feel they are in a soothing and validating space so that the client is more able to express emotions. Greenberg states that empathy is important in order for the client to learn to self-sooth and help them strengthen their self-worth.

Regarding the primary research question, there are various methods that the literature states will help increase the client's self-esteem using art therapy. Rubin (1984) states that choosing non-fail activities which have a final product can enhance the client's self-esteem. Through choosing a non-fail activity which will have a final product the therapist allows the client to feel accomplishment through completing the project and also competency by not failing at this activity, both of which are strongly linked to building self-esteem (Coppersmith, 1981; Zeigler-Hill, 2006). Rubin states that allowing the client to learn new media in art therapy, will allow the client to also develop feelings of competency via skill building. It is specifically this skill building that has been linked to increases in feelings of self-worth through feelings of competency (Cousins, 1998). If the art therapist keeps his or her client's artwork the therapist will also have concrete evidence of the client's accomplishment and skills (Rubin).

Guided imagery, as described by Utay and Miller (2006) has also been shown to be effective in increasing self-esteem via art therapy. They explain that guided imagery is a

way that a client is able to reach inner needs which may have been causing distress and hindering their self-esteem. There are many different ways that guided imagery can be used in order to build up an individual's self-esteem, including the development of new skills (Cousins, 1998), modify maladaptive behaviors (Chin et al., 1980) and deal with unconscious needs (Greenberg, 2008).

Sometimes a client may not know or fully understand why they feel such low selfesteem because it is unconscious. Schaverien (1999) provides some ways in which an art therapist can help bring these unconscious feelings to the conscious level. Schaverien states that art can sometimes represent unconscious feelings or events to which the client would not be able to deal with in their emotional form, thus lowering a client's selfesteem (Greenberg, 2008). The therapist may notice this occurring when an art object seems to have its own characteristics. For example, the therapist only needs to provide the client with the space to create an empathic environment and the embodiment will occur on its own. In this manner the artwork acts as a container, holding powerful issues for the client until the client is more able to deal with them (Schaverien). Finally dealing with these contained issues will facilitate the increase of the client's self-esteem (Greenberg).

If a client seems to have a lot of aggression, which may be hindering their self-esteem Rubin (1984) gives some tips that the art therapist can use. Rubin states that working with clay, wood, or other hardy materials can help express feelings of aggression via the medium. Self-expression is one manner of helping a client increase their feelings of selfworth (Hermann & Betz, 2006; Sharpe et al., 1995; Woodhill & Samuels, 2003). If the client is unable to express these feelings of anger or if the art therapist is unsure about

how to meet the client's needs, Rubin states that an open activity would be in order, one where the client has the freedom to decide upon the art media and utility. Opening up an activity will allow the client to creatively express himself/herself as he/she sees fit, an important aspect of one's self-esteem (Gecas, 1982). In this scenario the client assumes control over an activity.

Art therapy has also been used with a wide variety of populations in order to increase their self-esteem. Art therapy has been used with children dealing with ADHD and low self-esteem. Henley (1998) used art therapy as a method of redirecting destructive impulses and symbolizing conflicts instead of acting out and found that the children's self-worth increase because of their increased social skills. Wallace (2007) worked with children who had cancer and found that art allowed the children a safe container where the children were able to express their emotions and fears. This form of creative selfexpression was beneficial in helping the children with cancer deal with issues which were affecting their self-worth. Chin et al. (1980) worked with adolescents at risk, academically and socially. The art therapy component allowed the adolescents to express their emotions verbally and in a non-threatening manner through their artwork. It also allowed the adolescents to practice socializing with others in a non-threatening way in which they found that the adolescent's self-esteem improved as well as their interpersonal skills and academic performance (Chin et al). Reynolds and Lim (2007) used art therapy with women who were in treatment for cancer. The women in the group creating art, which resulted in final products that they then gave to the caretakers (Rubin, 1984), were able to feel challenged and focus on something other than their illness (Reynolds and Lim). Art therapy was also used with incarcerated pedophiles in order to help increase

their self-esteem and decrease their anti-social behavior (Ackerman, 1992). The sessions used many human figure drawings (HFD) and archetypal symbols. These were to help the client integrate his sense of self with his ideal self. Ackerman found increases in selfesteem and greater personality integration.

Limitations and Suggestions for Further Research

One of the limitations to this research is that most of the research on self-esteem is quantitative while the research on art therapy as a method for increasing self-esteem has been qualitative. The art therapy data has mostly been obtained through self-reports and case studies. It would be beneficial for the field of art therapy and self-esteem research that other art therapists publish more quantitative studies. This would bring more credibility to the field and help balance out the amount of quantitative and qualitative research in the art therapy field. Specifically, a study which would investigate the effectiveness of using various art therapy techniques with pre and post self-esteem scales would benefit the art therapy field immensely.

Closing Remarks

Self-esteem is an important aspect of our being. This review of the literature in selfesteem and art therapy has shown that there are many different treatment methods which can be used to enhance self-esteem in various populations and special cases. Art therapy is an effective manner for increasing self-esteem. The techniques discussed in this paper were designed to facilitate those therapists who are helping their clients develop their self-esteem.

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