

POSTPARTUM POSTTRAUMATIC GROWTH: AN ARTS-BASED HEURISTIC INQUIRY

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Abstract

A significant amount of people who give birth are affected by traumatic birth experiences (TBE), but research shows that there is potential for achieving posttraumatic growth (PTG) following such events. There is growing evidence of art therapy's efficacy within treatment for survivors of trauma, and promising research demonstrates the potential for art therapy interventions to facilitate and measure PTG. This arts-based heuristic inquiry explores what insights a student-researcher with lived TBE can gain about posttraumatic growth. The arts-based component of this project consists of five artworks and writings created through the Open Studio Process (OSP), and a painting made in the creative synthesis phase of the heuristic inquiry. The project uses Reflexive Thematic Analysis to analyze the data sets generated through the OSP. Key findings of this inquiry suggest that a) the OSP may facilitate and contain deliberate rumination about TBE, with potential to produce insight about PTG; and b) there was a struggle with notions of success and failure throughout all OSP rounds that were connected to deeply held core values and negative core beliefs. The results could inform possible future art therapy intervention research integrating the OSP, and possibly aspects of PTG, with exploration of TBE. The struggle with ideas of success and failure in childbirth carries significance for countertransference for art therapists with lived experience of TBE who work with clients who have given birth.

Acknowledgments

I would like to acknowledge my Bubbie and Zaidy, Morris and Paula Zaifman (may their memories be for a blessing), as shining examples of Posttraumatic Growth.

It is necessary to say that as I write this, on stolen Haudenosaunee land, while attending a university that invests in various companies which benefit the apartheid state of Israel, that state is committing an expanding genocide. I acknowledge that as I safely and comfortably study traumatic birth experiences, new, unimaginable and horrific forms of birth trauma are experienced by Palestinians giving birth in Gaza on a daily basis.

I would like to thank my daughter, Moirah, for teaching me hope and opening my eyes to the beauty of the world.

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Postpartum Posttraumatic Growth: An Arts-Based Heuristic Inquiry

Chapter 1: Introduction

This paper describes an arts-based heuristic inquiry on posttraumatic growth (PTG) undertaken by a student researcher who has had a traumatic birth experience (TBE). The purpose of this research is to explore the potential for incorporating a PTG lens to postpartum art therapy with clients who have experienced TBE. A qualitative and subjective methodological approach was chosen that integrates arts-based research with heuristic inquiry to allow the sole researcher-participant to creatively engage with a deeply personal topic. This is accomplished through multiple rounds of Pat Allen's Open Studio Process (OSP) (2022), and reflexive thematic analysis (Braun & Clarke, 2022). This research intends to expand the scholarship on PTG specifically with postpartum populations, through the eyes of a student researcher with lived experience of TBE. The findings include insight into the OSP's facilitation of deliberate rumination, and countertransference implications relating to how successful (or not) a parent judges their childbirth experience to have been.

The experience of traumatic events during childbirth has been reported to be as high as 33% (Creedy et al., 2000; Soet et al., 2003; Alcorn et al., 2010), which makes it very likely that many mental health trainees and professionals themselves have lived experience. For student therapists who have had traumatic birth experiences (TBE), can a heuristic arts-based inquiry provide insight into the essence of postpartum posttraumatic growth (PTG)? Having experienced traumatic events during the birth of my daughter, working with parents who have also gone through TBE seemed to be a natural choice. What I found through this process, however, is that part of my interest in this topic came from what Hill (2020) might describe as a self-motivated orientation: a desire to prevent others from experiencing something similar, or to "fix" it when they have. However noble the intention, an art therapist's role is not to fix or solve their client's problems for them, but to support clients in identifying, expressing and processing feelings, thoughts and experiences, as well as developing and reaching their own goals. This tension between aiming to be in service and unconsciously trying to save could denote countertransference that art therapists who have experienced TBE may feel in session with a client who has given birth.

There was another tension present throughout this research project: maintaining a posture of research and learning rather than self-therapy. There were moments when I did not know if I would accomplish it, and that struggle illuminated a deep wish to achieve PTG myself. There were also moments in which I felt that I have not grown in ways that I wish I had since having my daughter, and this triggered feelings of shame, inadequacy and failure. The processes described in this paper allowed me to identify the potential for countertransference relating to those feelings and their underlying core beliefs, and how that awareness can benefit future art therapists and their clients.

Key Terms and Definitions

Traumatic birth experience (TBE): Real or perceived physical, psychological and emotional harm during the course of giving birth (Beck, 2009).

Posttraumatic growth (PTG): The theory that traumatic events can sometimes lead to growth across five categories: personal strength, new possibilities, relating to others, appreciation for life, and spiritual growth (Tedeschi & Calhoun, 1996).

Postpartum PTG: Posttraumatic growth following traumatic birth experiences.

Heuristic inquiry: A subjective, qualitative research method involving fully immersing oneself in a topic of deep personal interest and remaining reflexive throughout the data collection, analysis and explication (Moustakas, 1990).

Open studio process (OSP): A process developed by Pat Allen (1995) in which participants set an intention, create art without constraints, and then engage in reflecting on and writing about the art based on specific reflection questions. In a group setting there is a strict no-comment rule to avoid fellow participants offering judgement of each other's processes.

Conclusion

In summary, this project explores a topic of deep personal significance to the researcher-participant- TBE- in order to gain insight on the potential relevance and benefits of considering PTG in art therapy for postpartum populations. The methodological stance of this arts-based heuristic inquiry is subjective and reflexive, and values personal experience's role in understanding the essence of an experience. The following chapter explores the relevance of this research topic through a review of pertinent literature.

Chapter 2: Literature Review

Introduction

This literature review provides background information and an overview of research into TBE and PTG and their relevance to art therapy, with the aim of highlighting the gap in research into art therapy for postpartum PTG. The first section details the prevalence and some common factors of TBE. This is followed by a summary of why art therapy is useful in trauma-informed interventions, and a brief section on the development of the PTG model. The postpartum period is then explored as an opportune life event for measuring PTG, due to the unfortunately high statistical likelihood of experiencing trauma while giving birth. The literature review concludes with some examples of art therapy's interactions with PTG, and a proposal that these successes indicate promising PTG exploration through art therapy for postpartum populations who have experienced TBE.

Traumatic Birth

Traumatic birth experiences (TBE), also known as traumatic childbirth or birth trauma, refers to real or perceived physical, psychological and emotional harm that can take place throughout the labour and delivery of a baby, according to prolific nursing and midwifery researcher Cheryl Tatano Beck (2009). This includes: medical/obstetric emergencies such as shoulder dystocia, use of forceps, or emergency c-section; real or perceived danger to the baby or person giving birth; breach of trust or violation of consent on the part of medical professionals or loved ones (Beck, 2016). Obstetric racism, including practitioner's reliance on gendered and racialized stereotypes, can also influence TBE (Dmowska et al., 2024). TBE can impact many aspects of parenthood, including breastfeeding and bonding with the child (Beck, 2009). This paper mostly uses non-gendered language in recognition that not all people who give birth are women, and that the exclusion of transgender and nonbinary parents from these conversations perpetuates harm and further exacerbates trauma (Parker et al., 2023).

British researcher Janet Menage (1993) was among the first to demonstrate psychological, rather than solely physical, trauma in a postpartum sample. The study was conducted through self report questionnaires sent out to 500 women who had given birth at least a month prior. One hundred (20%) of these women described "very distressing" to "terrifying" obstetric or gynecological events during childbirth, with 30 (6 % of sample, 30% of the most

highly distressed respondents) meeting the criteria for PTSD. The common factors for the women experiencing PTSD levels of trauma in childbirth were: 1) feelings of powerlessness, 2) lack of information, 3) experiencing physical pain, 4) “perceived unsympathetic attitude on the part of the examiner,” (p. 221), and 5) the patient’s lack of informed consent for procedures. Similar themes arise in other qualitative studies of traumatic birth experience. Fielding-Singh and Dmowska (2022) describe four key components of obstetric gaslighting distilled from interviews with mothers who had experienced traumatic birth: “Denials of 1) mothers’ humanity, 2) mothers’ knowledge as valid, 3) mothers’ judgements as rational and 4) mothers’ feelings as legitimate” (pp. 4-6). Beck (2006) identified five common attributes of traumatic birth through a meta-analysis of more than ten years of her own research. These are “Deprived of caring,” “Stripped of their dignity,” “Terrifying loss of control,” “Neglected communication” and “Buried and forgotten” (p.4).

In 1997, Canadian researcher J.L. Reynolds laid out four ways for healthcare workers to lessen the impact of traumatic birth: carefully taking a pregnant patient’s history for risk factors of traumatic birth experiences; excellent pain control; including an effort to understand a patient’s birth experience in postpartum care; and screening for postpartum depression (PPD) (Reynolds, 1997, p. 1). Two of his recommendations are of particular interest to art therapists: screening a client for past trauma and understanding a person’s birth experience. Since this pioneering paper, many researchers have taken the opportunity that pregnancy provides to carry out prospective research on traumatic birth experiences (Creedy et al., 2000; Alcorn et al., 2010; Verreault et al., 2012) and postpartum posttraumatic growth (PTG) (Sawyer et al., 2012). There remains opportunity to study the unique strengths art therapy could offer to the field of postpartum mental health care and the fostering of PTG.

The reality of traumatic birth has been studied worldwide in the decades since Menage’s pioneering study (Creedy, 2000; Verreault et al., 2012; Miao et al., 2024). However, the phenomenon of silence surrounding birth trauma remains an unfortunate reality. Butterworth et al.’s (2023) Interpretive Phenomenological Analysis (IPA) examined 4 heterosexual couples in England in which one parent had been referred by a healthcare professional for counselling. The results found that although both partners had perceived the birth as traumatic, they did not discuss it with one another, nor did they seek help until prompted. This is unfortunate, given the researchers stated that “[t]he couple relationship may be an important resource in mediating growth and adversity following birth trauma” (Butterworth et al., 2023, p. 2). Guilt, shame,

avoidance and dissociation —words often associated with sexual assault —characterized the couples’ memories of the birth, and often prevented them from processing it together. Menage (1993) also identified this association with sexual assault, with many illustrative examples: “I came away hurting and feeling violated”; “I felt assaulted and then abandoned”; “I felt abused” (1993, p. 226). There is an undeniable link between the feelings that both kinds of trauma can elicit, and, in fact, a history of sexual trauma increases the risk of developing PTSD following childbirth (Verreault, 2012).

The research described above demonstrates the need for trauma-informed interventions for people who have given birth, given the high likelihood of TBE combined with survivors’ difficulty identifying or speaking about their trauma (Menage, 1993; Butterworth et al., 2023). Trauma-informed art therapy provides one such avenue of intervention.

Art Therapy and Trauma

There is an expanding body of literature supporting trauma-informed approaches within art therapy, emphasizing the role of nonverbal, sensory, and embodied processes in working with traumatic experience (Malchiodi, 2020; Hass-Cohen, 2016; King et al., 2026). Traumatic memories are sensory and emotional experiences that can be difficult to access and recall with language alone (Malchiodi, 2020). Art therapy provides opportunities to engage these experiences through nonverbal and embodied processes, which can support integration and meaning-making. Some art therapists draw on frameworks such as Polyvagal Theory (Porges, 2022), as well as somatic and trauma-focused approaches (Levine, 1997; van der Kolk, 2014), to further understand how the body senses and responds to perceived threat. Within this broader perspective, trauma responses are understood as deeply physiological and not always accessible through cognitive processing alone (Malchiodi, 2020; Hass-Cohen, 2016; King et al., 2026).

Malchiodi’s (2020) discussion of trauma-informed approaches to art therapy includes three integral characteristics of session structure, drawing from van der Kolk’s (2014) work on traumatic stress and Levine’s (1997) Somatic Experiencing model: *titration*, *pendulation*, and *resourcing*. *Titration* means slowly introducing exploration of the distressing sensations related to a traumatic memory, little by little, using creative expression. *Pendulation* refers to alternating between approaching trauma related sensation and *resourcing*: “The body’s internal sense of self-efficacy, resilience and well-being,” (Malchiodi, 2020. P. 229). The current research project is informed by these tenets of trauma-informed art therapy, and is motivated by a belief that

experiencing trauma, including TBE, does not preclude someone from being able to continue growing and thriving.

Posttraumatic Growth

Traumatic experiences can have lasting negative impacts on the survivor's life, but Tedeschi and Calhoun (1996) found that some people have the potential to grow in positive ways from trauma. They call this post-traumatic growth (PTG), and it is divided into five areas: New Possibilities, Relating to Others, Personal Strength, Spiritual Change, and Appreciation of Life. These broad categories of potential growth are measured by the 21-item Posttraumatic Growth Index (PTGI). In testing the validity of the PTGI, Tedeschi and Calhoun (1996) found that there was a relationship between the severity of trauma experienced and the amount of perceived growth. This is a hopeful finding for survivors of extreme trauma.

There is a significant amount of interest in understanding how PTG is achieved, and whether all clients could potentially be successful at attaining growth or if it is limited in any way. Allen et al. (2022) found a correlation between deliberate event-related rumination following trauma and PTG. Deliberate rumination differs from intrusive rumination in that it necessitates intentionality (Allen et al., 2022). This process is reminiscent of Jung's work with active imagination and amplification, whereby a client is encouraged to follow a train of thought through the non-linear twists and turns of association until a breakthrough or understanding is reached (Schaverien, 2005). Deliberate rumination can also be compared to the Immersion phase of Moustakas' heuristic inquiry, during which a researcher "lives the question in waking, sleeping, and even dreaming" (Moustakas, 1990. P. 27). Considering the nature of automatic trauma responses in the body, deliberately ruminating on TBE carries risks of re-traumatizing a researcher. Therefore, it is necessary to include safety planning in any study design involving rumination-evoking processes.

Postpartum Posttraumatic Growth

In a proposal of conceptual questions and recommendations on the study of PTG from the perspective of personality trait change, Jayawickreme et al. (2021) contend that studying life events with potential for growth is difficult because a) "many life events (e.g., clinical traumas) are relatively rare" and b) "the timing of data collection is complicated by the fact that many life events are not predictable" (pg 148). Studying birth addresses this gap because, as discussed

above, the potential for TBE is significant among birthing populations. Unfortunately, there is little in the literature specifically on postpartum PTG, and even less with North American samples. Silva et al. (2024) conducted an online survey, advertised through social media sites, to study associations between PTG, perceived levels of stress and core beliefs after traumatic birth during the COVID-19 pandemic. They found that 42% of their participants experienced substantial growth following traumatic childbirth, and the disruption of participants' core beliefs was highly associated with growth (Silva et al., 2024).

Sawyer et al. (2012) recruited 125 pregnant women into a prospective study in South-East England. The participants filled out questionnaires in their third trimester, and again at 8 weeks postpartum. One drawback of this study is the missed opportunity for longer term follow ups with the participants to track the potential for growth over a longer postpartum period. The findings indicated growth across all measures of PTG, with the lowest in the domain of Spiritual Change. Analysis of delivery type saw cesarean section, both planned and emergency, producing more significant levels of growth postpartum. Actual support received was associated with higher levels of growth than perceived support available. They attribute this to the cognitive processes that occur when people speak with each other, and how that may be integral to a person being able to achieve growth. This is important, because we know from Butterworth et al.'s 2023 study that parents can have a hard time expressing that they have experienced traumatic birth, let alone seeking support for it. This indicates that postpartum care should include professionals naming that which is difficult for these parents to name.

As we can see from this section, there is compelling evidence that PTG is possible following TBE. It is integral to our field to explore how art therapy could fit into this equation, considering how common TBE is.

Art Therapy and Posttraumatic Growth

Several studies have attempted to demonstrate the efficacy of art therapy in promoting and measuring PTG (Mohr, 2014; Singer et al., 2013; Rowe et al., 2017), but studies specific to postpartum PTG in art therapy are difficult to find. Sezen and Ünsalver (2019) carried out a quantitative study of pregnant women with fear of childbirth attending group art therapy. Although this was not a study of PTG, one of the findings was that the women in the experimental group gained control over their fears. Those in the experimental group also had much lower incidence of obstetric intervention during childbirth, which warrants further study.

This research raises the question of whether prenatal art therapy interventions could have mitigating effects on the occurrence of traumatic birth experiences by empowering people pre-birth to feel in control.

Mohr (2014) studied the responses of youth survivors of an earthquake in Peru to an art therapy group. The art based research identified the following themes: “honoring and holding, relatedness to community, perspective and balance, and freedom to move forward” (p. 160). These themes may point to culturally specific measures of growth, begging the question of how PTG might manifest differently across cultures. In the discussion, the authors describe the honoring process as “considering the losses endured long enough to discern ways in which they can be transformed” (p. 160). This aligns with Allen et al.’s (2022) finding of deliberate event-related rumination leading to growth.

The studies described above provide clues as to how art therapy can be used to measure or foster PTG following traumatic birth. This is a research gap with obvious potential for further study.

Conclusion

A few key threads emerged across the reviewed literature: the high incidence of TBE, the importance of deliberate rumination, and the efficacy of art therapy in treatment of trauma. Childbirth, TBE and its lingering effects are a complex human experience, making it an appropriate topic to study through Heuristic inquiry, which includes methods resembling deliberate rumination- a key factor in growth (Allen et al., 2022). The researcher-participant has lived experience herself of TBE, and therefore the study design integrates arts-based processes to allow for access to tacit and bodily knowledge connected to trauma and recovery, opportunities for titration, pendulation and resourcing, and safety planning. The rest of this paper focuses on the methodology and findings of an arts-based heuristic inquiry designed as a response to the gap in research regarding postpartum PTG and art therapy.

Chapter 3: Methodology

Introduction

This heuristic arts-based inquiry is guided by the research question: *For student therapists who have had traumatic birth experiences (TBE), can a heuristic arts-based inquiry provide insight into the essence of postpartum posttraumatic growth (PTG)?* The following chapter describes the qualitative methodological approaches of arts-based research and heuristic inquiry, the data collection procedure of the OSP, and details the data analysis method of reflexive thematic analysis. This design was chosen because the various methods share unifying characteristics of valuing subjective and tacit knowledge, reflexivity, and transparency of the researcher's positionality. These characteristics also make the research design appropriate and realistic for a single researcher-participant.

Methodological Framework

This project contains two components with overlapping processes: heuristic inquiry, and arts-based research in the form of the OSP and final creative synthesis painting. This project envisions a melding of the arts-based, reflexive OSP and heuristic inquiry, because their steps and iterative processes are quite complementary.

Heuristic Inquiry

Heuristic inquiry is an immersive search for the meaning and essence of a human experience (Moustakas, 1990). It contains six steps: Initial Engagement, Immersion, Incubation, Illumination, Explication, and Creative Synthesis. The topic of study should be one that holds deep personal significance to the researcher, with the inquiry unfolding in a manner unrestricted by time (which is not realistic for this research), in cycles of engagement, rest, and return to the data.

Arts-Based Research

Arts-based research is the incorporation of art processes into research design across collection, analysis, and/or presentation of data (McNiff, 1998; Leavy, 2025). The purpose of this integration is to allow researchers to engage in creative ways with data creation, meaning-making and dissemination, to more fully capture the nature or essence of the experience studied (McNiff, 1998). Leavy (2025) distinguishes between various arts-based methods, and this

research project will incorporate visual art as well as narrative data collection processes in the form of the OSP art making and journalling, and the final creative synthesis painting. The OSP taps into what is important to the artist/participant in the moment of engagement, and proposes several steps to facilitate an exhaustive, immersive exploration of the intention through art making, witnessing, and journalling (Allen, 2022). Arts-based research employing the structure of the OSP is an appropriate method to answer the research question because of the potential to facilitate intentional rumination in a contained way. In fact, McNiff (1998), who authored the first book on arts-based research, cites Pat Allen's self-inquiry work as foundational. The complementary way the parallel processes of heuristic inquiry and the arts-based OSP unfold in this project are detailed below.

Researcher as Participant

Due to the methodology, I, the researcher, will be the sole participant of this arts-based heuristic inquiry. My relationship to the topic is deeply personal, as is recommended by Moustakas' heuristic inquiry methodology (Moustakas, 1990). I am a trainee in art therapy who has had traumatic birth experiences, including an adverse reaction to medication, an external version and emergency c-section. My positionality as an able-bodied, white, university-educated, upper-middle class settler of European background with Canadian citizenship by birth afforded me many privileges and supports during my pregnancy and the birth of my daughter. I had my c-section in a large, state-of-the-art prenatal hospital wing in a mid-sized city. Although I gave birth as a single mother, I had extremely supportive relatives to lean on during this experience and in the following months of recovery. I also had access to psychotherapy and art therapy to process my experiences and did not experience postpartum posttraumatic stress disorder or significant postpartum depression.

Data Generation Procedures

Initial Engagement

This first step of heuristic inquiry entails becoming interested in a research topic or question of personal importance, which Moustakas describes as identifying with the focus of inquiry (1990). For this project, it begins with the search for and formulation of the research question within the broad topic of childbirth.

Immersion

This stage involves fully immersing oneself in the topic. For this project, immersion begins with the literature review and will continue through data collection. Heuristic research collects qualitative data such as verbatim records and highly descriptive interpretations of information in order to capture the essence and true nature of an experience. Artwork and writings will be collected through the OSP (Allen, 2022).

Criteria for inclusion: all data which reflects the essence of the experience of exploring PTG as a student researcher who has had TBE. Data which does not authentically engage with or portray this experience would be excluded.

Open Studio Process

Step 1) Intention is set, structured according to three categories outlined by Pat Allen (2022):

1. **Inquiry:** “I receive information about...” “I explore possibilities about...”
2. **Engagement:** “I commit to learning...” “I am guided in my relationship to...” “I place myself in service to the Creative Source...”
3. **Celebration:** “I give thanks for...” “I remember...” “I honor...” “I mourn...”

Step 2) Intention is set aside, and art is made freely and continuously until a natural sense of completion arises.

Step 3) Witness the art through quiet observation.

Step 4) Write about the art with the following prompts (Allen, 2022):

1. Describe in writing what you see as fully as you can without coming to conclusions.
2. Write down any feelings or thoughts, including judgments that come up for you.
3. Dialogue with the image or a part of the image; write it down as it comes, including any seemingly extraneous thoughts or tangents.
4. Check in with your intention; ask your image what it has to do with your intention.

Incubation

A time to take a break from the research to let it percolate in the subconscious. In this phase of the research, time will be spent focusing on parenting, crafting, and spending time at the beach.

Illumination

Reflecting and allowing new insights to emerge. The data will be revisited, and analysis will unfold according to Braun and Clarke's (2022) reflexive thematic analysis method. This method was selected due to its consonance with the subjective, immersive and iterative philosophy of heuristic inquiry. Reflexive thematic analysis allows for a rigorous, systemic investigation of qualitative data, such as the written reflections of the OSP.

Explication

In this stage, the results and discussion will be written. In line with Braun and Clarke's (2022) method, illumination may continue to take place throughout the explication phase, as the data continues to be analysed and interpreted or re-interpreted while being prepared for dissemination.

Creative synthesis

A final summary artwork synthesizes the aforementioned steps, facilitating the embodied, sensual and visual processing and consolidation of ideas generated throughout the research process.

These processes do not necessarily unfold in a linear, chronological manner. It may bounce back and forth from immersion, incubation and illumination between each round of the Open Studio Process, and illumination could continue up until the completion of the creative synthesis painting.

Materials and Timeline

Between July 21st and August 22nd, 2025, I will spend a week at a time exploring each of the 5 areas of PTG through the OSP. Materials available for use are 22"x30" paper, acrylic paint, magazines, glue, and string. These materials were chosen because they offer a range of fluidity and structure to allow for engagement across the Expressive Therapies Continuum (Lusebrink & Hinz, 2016). This phase will be followed by a period of Incubation, with a week at a cottage with family and a return to routine of school in the fall. I will kick-start the Illumination phase through

a period of re-familiarization of the data and beginning of data analysis over the fall reading week, October 11th to 17th. Explication will begin, through writing-up findings and the discussion, at the start of December. The research will culminate with the Creative Synthesis painting in early January.

Although it is important to maintain structure and routine in the heuristic inquiry, there will be some flexibility of timing in order to allow for the titration, pendulation and resourcing necessary to allow for trauma-informed research (Malchiodi, 2020). In a general sense, those three processes can take place at any stage of the research; for example, if I find myself overwhelmed, I will pause the exploration and take time for self care. I will have biweekly therapy appointments and regular check-ins with friends and family members who are aware of the personal and potentially triggering nature of my research.

Data Sources

The data sources for this project will consist of the artwork produced during OSP, the written responses to the OSP reflective prompts, and process notes taken during the incubation and illumination periods.

Data Analysis

In a heuristic inquiry, data is analysed after the researcher has taken some time away from the research. Then, with fresh eyes, the researcher analyses the data for essential qualities and themes. The analysis proceeds in a cycle of analyze, step away, analyze, step away, and so forth, until the researcher has been able to fully capture the meaning or essence of the experience being studied. The aim of the data analysis is to construct a universal portrait of an experience from the multiple data sets acquired. As this research focuses on one participant, the multiple rounds of art making in the OSP will comprise the data sets from which a composite is created.

Reflexive Thematic Analysis

Braun & Clarke (2022) outline a six step process for reflexive thematic analysis (RTA)- a “values-based, situated practice” (p. 66), in which the researcher identifies and iteratively examines their subjective positions. This methodology is grounded in the belief that knowledge and meaning is generated by people based on their own subjective experiences. The phases are as follows:

- 1) Familiarisation with the data set through deep and thoughtful immersion.
- 2) Coding: “The *process* of exploring the diversity and patterning of meaning from the dataset, developing codes, and applying code labels to specific segments of each data item.” (p. 97)
- (3) Generating initial themes from the codes.
- 4) Developing and reviewing themes.
- 5) Refining, defining and naming themes.
- 6) Writing up.

In this research project, familiarisation will be *re*-familiarisation with the OSP written responses, the paintings that inspired them, and the intentions that guided each round of the process. Coding will take place over multiple rounds of reading through the responses until every important point is represented. Initial themes will be generated by identifying organizing qualities of the codes, and these will be compared against the researcher-participant’s felt sense while re-examining the paintings in order to ensure consonance. Over multiple days, the codes will be revisited, re-categorized if necessary, and compared against the emerging themes to capture a full picture of the data. Once this process is exhausted, the heuristic phase of explication can begin with the write-up. Explication and writing-up are both described as potentially sparking continued illumination, as the consolidation of the findings and translation onto paper facilitates new perspectives (Moustakas, 1990; Braun & Clarke, 2022).

Ethical Considerations

The main ethical consideration with this method is the safety of the student researcher. Even when a researcher has accessed therapy and other support for lived experience of trauma, there must still be consideration of how to make the research process trauma informed. Much of the literature on traumatic birth includes potentially triggering accounts of traumatic birth events, such as descriptions of treatment by medical staff and physical injury sustained during childbirth (Alcorn et al., 2010; Beck, 2009; Butterworth et al., 2023). This, along with the search for meaning from personal experience can be very productive and insightful but potentially activating as well. Structure, constraints in the art making, self-care and safety planning in case

of overwhelming feelings was necessary. Another consideration is for the student researcher's personal privacy. The heuristic process is meant to be deeply personal, and once the research is on the internet it can always be accessed by potential employers and clients. The student researcher needs to consider how the exposure of their personal experiences will impact them psychologically, sociologically, and potentially impact future employment or client relations.

Research, not Therapy

For a heuristic inquiry consisting of one researcher-participant, it can be difficult to maintain a boundary between research and self-therapy. This project aims to examine the theoretical concept of postpartum posttraumatic growth in the service of furthering the understanding of art therapy's potential to foster it. The researcher-participant will not be using this project to process a raw experience of TBE, as this could be re-traumatizing; she has already had opportunity to do so with professional help. This project instead allows for an open-ended exploration of the insights that a researcher with experience of TBE can generate about PTG through the OSP.

Conclusion

This chapter has described how the overlapping processes of heuristic inquiry, arts-based research and RTA create a harmonious study design to explore the complex topic of postpartum PTG research undertaken by a student-researcher with TBE. The next chapter will detail how this methodology unfolded, and describe and interpret the emergent themes.

Chapter 4: Findings

Introduction

This section details the data collection and analysis stages of this research project in order to answer the question: Can a heuristic arts-based inquiry provide insight into the essence of postpartum posttraumatic growth (PTG)? The OSP yielded five pieces of art and accompanying written reflections for reflexive thematic analysis. The paintings and writing were analyzed after a period of re-familiarization in order to generate codes and themes in two ways. First, every painting was analyzed separately to explore the essence of experience contained therein. This yielded some interesting but weak organizing characteristics, such as a subtle sense of moving from the deeply personal to the collective as the different areas of PTG were ruminated on. However, the themes that continued to emerge across multiple rounds of analysing the codes were simply the writing prompts of the OSP, and the meaning was more fully expressed in the integrated visual-textual data. This aligns with arts-based and heuristic inquiry principles of representing the full essence of a phenomenon. Therefore, another perspective was undertaken by way of analyzing the codes and themes when categorized by each OSP answer across all five rounds. With this pivot, the illumination stage of heuristic inquiry began, and a compelling arc of activation and closure in the creative and emotional process became apparent.

The Intentions and Resultant Paintings

“I Give Thanks for Personal Strength”

Figure 1



I Give Thanks for Personal Strength

Art Process and Imagery. This painting began with a quote from Pat Allen’s instructions, “Follow your sense of pleasure until you feel a sense of completion.” (Allen, 2022). The creation process had strong elements of sensory, kinesthetic and cognitive experiencing, which could indicate lack of engagement on the affective, perceptual and symbolic levels according to the ETC (Lusebrink and Hinz, 2016). This may point to avoidance of affective processing or meaning-making in an attempt to regulate or stay in a familiar mental space. Despite that avoidance, this process sparked self-doubt and negative perceptions in the written reflection, discussed in the codes and themes below.

Written Reflection. The idea of feeling a sense of completion seemed connected to intuition, and writing about the painting experience brought out memories and feelings of impaired intuition during labor, illustrated by the codes, “Not being able to tell when something is complete,” “Fear that my bodily knowledge, felt sense and intuition failed me during labor,” and “Following my sense of pain instead of sense of pleasure.” This perceived impairment was due to fear-related dissociation from sensation, and loss of trust in self and healthcare providers. Other pertinent codes generated from the written reflection included: “Success makes me think of failure,” and “Wanting to learn something from the experience.”

Contribution to Analytic Arc. The codes and themes from this piece largely reflect rumination centred on the self. Much of the writing skewed negative: negative emotions, self-judgements, and fear. There were a few sparks of goal identification as well, which may have set the stage for the increase in meaning-making seen in later paintings and reflections.

“I Receive Information About New Possibilities”

Figure 2

I Receive Information About New Possibilities



Figure 3

New Possibilities- Jester Detail



Figure 4

New Possibilities- Candle Detail



Art Process and Imagery.

This piece continued the exploration of my TBE through highly cognitive processes of collage, mostly with words, and fastening those words in a somewhat chronological order to the bottom of the paper with string. Cutting and tying was also a very kinesthetic activity, possibly providing a sense of regulation and grounding as I tried to remember what happened while I was in labour. Empty space and shadows were significant visual characteristics of this piece, symbolizing the memory and doubt of trying to construct a timeline.

I created this work in a cloud of seriousness, punctuated by absurd details such as the worn-down stone figure (figure 2) and the jester (figure 3). These moments of self-deprecating humour seem to be the most meaningful links to new possibilities, because they offer a reprieve from the self-centred seriousness and a chance to look at the situation from a new perspective. The jester represents feeling like a clown in front of family and strangers at the hospital, and suddenly it turns from a solitary to a collective experience.

Written Reflection. The overarching message in the written reflection about this painting is that one cannot force readiness to look for new possibilities. This is illustrated by the following codes: “I don’t know if it is time to process and find new perspective yet,” “I am fragile, delicate and afraid of falling apart,” and “I am not ready to sort things out yet.” Reaching this insight shed light on the larger issue of striving towards PTG; is it possible that there is a

time and place for growth, and therefore, that PTG can only be reached when a person is ready? If this is true, then supporting someone in fostering PTG should only be undertaken at an appropriate time, which begs the question: how would we know if someone is ready to work towards PTG?

The codes from this piece also begin to more significantly reference people other than the researcher-participant: “betrayed trust,” “I felt like she thought I was lying,” “I needed help to understand and explain what was happening (attunement?).” Codes such as, “Shadow or whisper of what was felt, thought, remembered and perceived,” “Lacking confidence in my own recollection,” “Lost ability to process events chronologically during TBE,” highlight a struggle with confusion and ambiguity which remained important aspects of the data as the analysis continued.

Contribution to Analytic Arc. The codes from this piece continue reflecting rumination centred on the self, with some reference to the individuals and systems the researcher-participant interfaced with while in labor- and these are mostly in a negative light.

“I Explore Possibilities About Improved Relationships”

Figure 5

I Receive Information About Relating to Others



Figure 6

Relating to Others- Corner Detail



Figure 7

Relating to Others- Tentacle Detail



Art Process and Imagery. This piece viscerally explores the notion of rupture and repair, as well as the nature of the grotesque. The message it offers is of the witnessing and acceptance of the gross, scary, painful, and even undesirable characteristics of ourselves and others in order to improve our relationships. The relationship to self post-traumatic-experience is explored in a way that sublimates the pain, shame and disgust of a healing c-section incision through sewing into tough, acrylic covered paper. The result is a “thing”, which could be bodily, that is both cute and grotesque and many things in between. A transformation also took place while working on this piece of coming to a greater appreciation for the hard work of the medical professionals attending my labor and c-section, likely triggered by the physical and psychological difficulty of persevering when the sewing was tricky. This movement from blame to gratitude was liberating.

Written Reflection. Dialoguing with this piece revealed thoughts similar to those I had as a new mother observing my newborn child. “What does this little thing need?” “Are you in pain?” “Held in place in a state of shock,” “You are being held onto.” It brought up the constant fear I felt in the first few weeks postpartum that something was wrong and that it was my fault. I also had to step into a new role that included navigating new situations that could trigger disgust, such as dealing with my baby’s bodily fluids and excrement. These seemed to bring on the most fear of doing it wrong or being judged. The dialogue also brought about a sense of absurdity or silliness, taking the edge off of the fear- “When something ugly is silly it is cute,” and “Like a baby octopus playing in the water.”

During this analysis process, it became apparent that a new type of language was appearing in the reflection for this piece: reflections on universal concepts. Codes such as “Pain is a fact of life,” and “Giving birth is a risky endeavour,” shows a shift from only considering the immediate and personal implications of my TBE to a more collective view. There is also language of accountability and self-responsibility: “Accepting undesirable aspects of myself could help me accept those parts in others;” “Being less judgemental could improve relationships.”

Contribution to Analytic Arc. This piece considered many of the same themes as previous ones, while also incorporating a more collectivist, universalist view. This seems to show a shift from purely ruminative writings to a search for meaning and solutions.

“I Explore Possibilities About Appreciation for Life”

Figure 8

I Explore Possibilities About Appreciation for Life



Figure 9

Appreciation for Life- Eyes Detail



Figure 10

Appreciation for Life- Line detail



Art Process and Imagery. This piece was the least cohesive visually, and the most difficult to interpret. While creating it, I had the feeling of just charging ahead despite not knowing where I was going. This resulted in a big struggle with ambiguity and uncertainty while writing the reflection. It took a strong effort to accept the weirdness of the ambiguous forms I felt called to create. This acceptance led to me meditating on the idea of acceptance of what is while drawing the lines, and I wondered if that was a stepping stone towards gratitude.

Written Reflection. “Life continues on whether you understand it or not.” On reflection, this came up a few times in writing regarding the struggle to take time to be thankful for the bigger picture when wrapped up in a busy life: “Gratitude and appreciation as a muscle you need to train,” “Distractions keep from seeing other parts or the whole.” Being appreciative for “life” remains a work in progress.

Contribution to Analytic Arc. There were a lot of similarities between the intentional rumination of this painting and the next one, who’s topic was spiritual growth. This indicates that the two are connected for me. The data at this point include a more balanced variety of codes about the self, others, and systems, which seems to demonstrate that through multiple rounds of the OSP, the view of my experiences expanded.

“I Commit to Learning About Postpartum Spiritual Growth”

Figure 11

I Commit to Learning About Postpartum Spiritual Growth



Figure 12

Postpartum Spiritual Growth-Candle Detail



Art Process and Imagery. This painting was difficult to work on without self judgement, because I knew from my research that the domain of spiritual growth tends to be the most elusive of the 5 measures of PTG. The piece is simple and cliché, with a candle acting as a

symbol of spirituality against a mysterious background. It was an attempt to grasp at the unknown, and to contain the ambiguous. The creative process was largely sensory and kinesthetic, which offered a sense of containment and closure to this part of the research journey. There was some activation on the perceptual level of functioning as well, as the candle form became apparent. The candle symbolized illumination, spirituality and search for meaning.

Written Reflection. Angst surfaced in my reflection; “Sometimes I want to know answers to things that do not affect my day to day,” “The way my daughter was born felt devoid of spiritual meaning.” I wallowed in that for a while. I came to a level of acceptance of the piece being hard to interpret, “Ambiguity can hold potential.” Then I realized that as I had been ruminating on all this, I was imagining myself standing at the beginning of the universe, and never throughout my reflection did I try to enter *into* it. Maybe because of fear. Now, when I look at this painting from far away, I see the candle as a person with their back to the viewer, gazing into a universe full of possibilities.

Contribution to Analytic Arc. The creation and exploration of this piece allowed for the greatest variety of perspectives to surface. It seems that with each OSP, some defensiveness which had kept ruminations centred on the self fell away. There also seems to be an evolution from a search for meaning towards meaning-making- the idea that we are responsible for creating meaning in our lives, rather than inherent meaning being a “thing” to go out and find.

Generating Codes and Themes Across the OSP

In total, 235 codes were generated, and distilled into 19 themes categorized by their location in the stages of the OSP. Each theme in Tables A.1-A.4 specifies their definition in the context of this research. Across the Open Studio Process, a trajectory emerged beginning with step 1 (Table A.1) acting as a warm-up, continuing with increasing activation through steps 2 (Table A.2) and 3 (Table A.3), and a consolidation and re-framing of experiences in step 4 (Table A.4) which facilitated regulation and generation of insights. This arc of activation demonstrates the containment offered through the OSP, which supports the notion that a heuristic inquiry using this arts-based process can potentially facilitate a student researcher’s insight into lived TBE. Less obvious is the OSP’s utility in reaching postpartum PTG; these findings seem to point towards readiness to seek growth as an unexpected integral factor.

Describe What you See

Four themes were generated from all the answers to the first writing prompt of the OSP, “Describe in writing what you see as fully as you can without coming to conclusions” (Allen, 2022). These themes indicate what is most visually obvious about the artworks, and they are: cognition/rationalizing; cut and sewn; sensation; symbols (Table A.1). The reflections of this step are very rational, matter of fact and even unemotional, as if it was a warm-up: “Filling in space,” “Empty space,” “Burning wax candle.”

Contribution to Analytic Arc. Warming up at the start of this process is reminiscent of the trauma-informed practice of titration: approaching potentially triggering material slowly and in small, manageable amounts (Van der Kolk, 2014). This is facilitated by the OSP’s structure which encourages participants to refrain from making judgements or drawing any conclusions at this stage (Allen, 2022).

Feelings, Thoughts, Judgements

The second prompt, “Write down any feelings or thoughts, including judgments that come up for you,” (Allen, 2022), inspired six themes that indicate a much deeper level of emotional processing at this stage. Furthermore, the codes and resultant themes skew negative, suggesting deep intentional rumination. These themes are: getting it wrong; confusion; feelings; negation; complexity; avoidance; action; disgust (Table A.2). While re-familiarizing myself with the data and beginning the analysis, the words affected me greatly and I felt disappointed in myself for my negativity: “Worry about doing the wrong thing,” “The result is uglier and messier than expectations,” “I feel like I’m making an impossible effort,” “Blood, excrement, organs, flesh, wounds, incision, throbbing.” There are, however, a few very powerful statements from this prompt that demonstrate a strength and growth-oriented view: “Choosing to look at something a different way,” “Recognizing the collective power in the operating room during my C-Section does seem extremely significant on reflection.” I suggest that these rays of hope are due to the intentions set at the start of each OSP, and that every now and then during the written reflection that intention would influence the thought processes.

Contribution to Analytic Arc. This stage saw a deeper rumination take place. This rumination was slightly uncontained and disorganized, similar to venting or releasing negative thoughts. It seems to represent the necessary time of sitting with your feelings and thoughts without an attempt to find resolution.

Dialogue with the Image

The third prompt was “Dialogue with the image or a part of the image; write it down as it comes, including any seemingly extraneous thoughts or tangents,” (Allen, 2022). The themes from this section show a dialectic of emotional responses and rigorous cognitive search for understanding: existential/philosophical thoughts; grappling with ambiguity; blame; success and failure; growth; not being ready; memory; comfort; acceptance (Table A.3). I attribute the power of this prompt to what Dorothy Davidson (1966) would have called active imagination- except that instead of a therapist taking on a client’s ego function, I role-played with myself and the artwork to achieve that state. This allowed me to talk myself through multiple perspectives of the same topic, for as long as I felt like writing about it.

Contribution to Analytic Arc.

This stage seemed to facilitate a more contained and constructive deliberate rumination, a process which Allen et al. (2022) identified as a common factor among study participants who had experienced growth.

Check in with Intention

The fourth and final prompt, “Check in with your intention; ask your image what it has to do with your intention,” yielded the fewest themes: seeing a bigger picture; re-interpretation; meaning-making (Table A.4). Under the theme seeing a bigger picture is the code “Not ready to reflect on new possibilities yet.” This point highlights that the pressure of looking for growth-related indications, such as recognizing new possibilities, can cause a shut-down and negative self judgments if undertaken prematurely.

The theme re-interpretation included the code, “Striving during labour is courageous.” This demonstrates a re-framing of many sentiments uncovered during the second and third written reflection steps, such as “I feel like I’m making an impossible effort,” “I should have known how to push,” “Difficulty submitting or succumbing to pain of contractions,” and “Giving birth is a high risk part of the lifecycle.” These examples were written from the standpoint of negative self judgements, and a feeling that I had failed to prepare enough for such an important life event. When these statements were eventually compared against the original intention, “Giving thanks for personal strength,” I felt a softening towards myself, and was able to identify

that there was bravery in facing a challenge that was frightening, painful, and that I did not feel prepared for. I did not know exactly what to do, but I did my best.

Contribution to Analytic Arc.

The overall essence of this last stage in the OSP is of closure. This shows the power of the intentions, written according to Allen's (2022) optimistic and action-oriented instructions, to gather up and re-frame the information generated in previous stages in order to see new perspectives, or come to acceptance of what was uncovered.

Validity, Reliability, and Limitations

Moustakas offers a measurement of validity which can only be determined by the researcher themselves: "Does the ultimate depiction of the experience derived from one's own rigorous, exhaustive self-searching and from the explications of others present comprehensively, vividly, and accurately the meanings and essences of the experience? (Moustakas, 1990, p. 32). This study shows strong validity in the rigor and genuine reflection of the researcher-participant's experience, demonstrated by the rich experiential insight generated through the OSP. The reliability of the research is obvious in the consistency of the methods and procedures followed across multiple rounds of the OSP, as well as the transparency of the process seen in the study design.

Arts-based heuristic inquiry does not bracket off the researcher's personal biases or frame of reference in an attempt to be objective, and therefore the findings must be represented as highly subjective to the experience studied. This limits conclusions of the research from being generalizable or capable of demonstrating causal relationships.

Conclusion

Across five Open Studio Processes and several rounds of reflexive thematic analysis, the researcher-participant found herself engaging in an arc of warm-up, activation/rumination, structured and deliberate rumination, meaning-making and closure. There was also a subtle progression, from the first OSP to the fifth, of zooming out from the self and taking a more relational and systemic view of experiences. Some compelling themes that emerged include: success and failure; and, meaning-making through deliberate rumination. These will be explored more deeply in the proceeding chapter.

Chapter 5: Discussion

Introduction

Can an arts-based heuristic inquiry provide insight into postpartum PTG? This inquiry demonstrates that the topic of PTG can be activating to a researcher with lived experience of TBE, but that with structure, constraints, and a robust support system, a deep exploration of such a personally significant topic can add valuable insight to the field. Engaging in several iterations of the OSP demonstrated a consistent arc of activation and consolidation facilitated by the process' reflective steps. The key findings of this inquiry were that a) the OSP can facilitate and contain deliberate rumination, with potential to produce insight; and, b) there was a struggle with notions of success and failure throughout all OSP rounds that carries significance for countertransference for art therapists with lived experience of TBE seeing clients who have given birth. This chapter provides a deeper look into these findings, connecting them to foundational texts and literature in order to demonstrate the relevance of this research within the art therapy field. I will also explain the potential benefits of this research project for other trainees and professionals with TBE, and identify potential areas for future research.

Deliberate Rumination

Deliberate, event-related rumination may be a key factor in growth (Allen et al., 2022). From this experience, it is evident that deliberate rumination can happen throughout the OSP, from the nonverbal processing that takes place while creating the artwork, to the stimulating written prompts.

As previously described, there seemed to be an arc of activation while responding to the written prompts. The first prompt allowed for a warming-up of the rumination muscles. The second prompt seemed to facilitate deep and genuine emotional responses, which sometimes evoke what cognitive therapy proponents might call negative core beliefs or self-defeating beliefs (Knapp & Beck, 2008; Burns, 1980). This can be seen in Table A.2, where under the themes "getting it wrong," and "thoughts and judgements," many codes include negative self-judgements, shame and ideas of failure. Because these thoughts and feelings are familiar to me in times of high stress, they could be connected to a core belief of unworthiness- an insight I was able to arrive at after rigorous engagement with my thoughts, feelings and judgements about my paintings. PTG is believed to come about through the challenging and re-shaping of core beliefs

during and after a traumatic event (Tedeschi & Calhoun, 1996). It seems possible, according to cognitive therapy principles, that the self-defeating or negative core beliefs identified through this deliberate rumination can now be challenged and re-shaped (Burns, 1980; Knapp & Beck, 2008).

Table A.3 contains themes and codes generated from a different, even more deliberate and focused kind of rumination. The themes vary between existential musings to blame to acceptance through a writing exercise that turned the research dynamic into a dyad of the researcher-participant and the artwork being dialogued with. This conversation felt more contained, and the rumination took on an argumentative quality with the researcher-participant eventually conceding to her own sense of self-responsibility. The theme of acceptance houses the simple and profound code, “We cannot avoid scary and painful things all the time” (Table A.3).

The final prompt facilitated a sense of closure in each round of the OSP, with a dialogue between all that had transpired and the original intention set at the beginning of the round. There was still opportunity to ruminate, but it seems that checking back in with any of the five measures of PTG (personal strength, openness to new possibilities, relating to others, appreciation for life, spiritual growth) sparked a more positive, self-compassionate response and attempts at meaning-making.

These findings offer promising examples of how deliberate rumination, a key factor in growth, can be facilitated and somewhat contained through the OSP in order to foster insight and meaning-making. This is significant for future art therapy interventions and research into PTG with postpartum populations.

Success and Failure

The exploration this inquiry facilitated of success and failure has been painful, rich with insight, and will remain ongoing. The codes implicate different kinds of success across various endeavours, but they all point to grappling with core beliefs. For example, “Conflating beauty with love and success,” was written while reflecting on the fear of looking silly and unattractive in front of medical professionals while experiencing contractions, and how that fear made it hard for me to focus on techniques to withstand that pain. This could be related to a core belief of feeling “unlovable” (Burns, 1980). That is significant for an aspiring art therapist to know about herself, because on examining that belief, I realize it would mean believing that people *are* or *are*

not lovable. What does unconsciously holding a belief like that mean when working with clients who hold the same? Does it unintentionally influence the therapist to assist a client in becoming “more lovable,” instead of helping them to see their authentic worth? Presumably, self awareness and paying attention to countertransference could mitigate that possibility (Cabaniss et al., 2011). Therefore it is essential for art therapists to be able to identify their core beliefs, and this research would suggest that an arts-based heuristic inquiry may be an effective way to do so.

There are many accounts in the literature of parents feeling a sense of success or failure depending on how closely birthing experience aligns with expectations or plans. (Beck, 2016; Butterworth et al., 2023; Silva, 2024). As much as I tried not to hold onto expectations while planning for a home birth, I have found on deeper reflection that I did feel a sense of failure for having had to transfer to the hospital, request pain medication, and eventually have an emergency c-section. This is reflected in the codes, “Fear that my bodily knowledge, felt sense and intuition failed me during labor,” and “Can you accidentally do the wrong thing while giving birth?” As mentioned previously, there was some repetition in the data regarding feeling rushed or not ready to move from rumination to exploring new possibilities. While collecting data I felt shame for being stuck on negative feelings such as failure, and searched for ways this research could help others to not ever feel the same way. That means that my personal feelings about failure were creating a savior mindset. But not only am I unable to prevent the obstetric emergencies or disrespectful communication that can lead to TBE, *it is ok to feel like you failed at something*. Even though I can say that it is ok to fail with my rational brain, I still have a somatic response to the idea of someone suffering because of their perceived failures. This fear of failure is another potential area to remain vigilant about in countertransference, and may be the most consequential finding of this research project.

There is another area in which I have had to examine my relationship with the idea of success and failure: success in terms of reaching posttraumatic growth following TBE. Throughout the course of this inquiry, I have gained an understanding that the road to PTG, if I am to arrive there, may be longer than two years (happy birthday, Moirah!). In the art therapy setting, it is important to set realistic goals. PTG could be looked at as a potential topic of psychoeducation, similar to attachment theory (Kobak et al., 2015). One does not endeavour to heal a disordered attachment over the course of short term art therapy, but one can make an effort to reach smaller goals that are building blocks towards secure attachment. PTG could inform interventions and objectives in a similar fashion.

Implications for Art Therapy Training/Practice

The OSP seems to have potential for working with some less acute trauma survivors, including TBE, because of the structure and containment of the intervention, including a warm-up and closure. Since the OSP was designed to be extremely open, care must be taken to ensure that timing and art materials offered also provide enough containment for each particular participant, in addition to safety planning.

Identification and re-evaluation of self judgements is reminiscent of cognitive-behavioral therapy (CBT), and as it turns out, there is a growing interest in the application of cognitive-behavioral art therapy (CBAT) with perinatal populations (Brown et al., 2023). Integrating the theory of PTG with CBAT could offer structure to goal-setting and objectives of interventions chosen for this population. Intentional rumination and discussion of growth-related goals would need to be balanced in intervention design, to be sensitive to clients' readiness to shift from one to the other without feeling premature pressure to find positivity or new perspectives on a traumatic experience.

Limitations

This study had one researcher-participant, and so the findings are highly anecdotal and not generalizable. There also appears to be an ethical question about the study of PTG and the pressure it may put on parents regarding success, but this is a question that merits further investigation.

Creative Synthesis

Figure 13

Creative Synthesis



Figure 14

Creative Synthesis- Detail 1



Figure 15

Creative Synthesis- Detail 2



This piece was created during the writing of the discussion section of this paper, to allow for periods of distance from the writing process to gain clarity and integration of ideas. It began purely abstract, with an attempt to weave themes from the analysis into the process. The strokes were very grounding. I focused on enjoying the sensation for a few sessions before considering the piece as a composition and deciding to cut into it. After organically pendulating between writing and painting/cutting/sewing for several days, I suddenly saw figures in the mire, and went with my first impulse to develop them into an image of a person cradling a baby. It seemed natural to base these figures on myself and my daughter, as I have plenty of reference photos. There was a difference in my mood and regulation between this round of art making and the open studio processes. I felt calmer, less burdened, more prone to taking a positive view, and overall experienced more positive affect. Upon reflection, it may have been interesting to engage in the same written reflection for this creative synthesis as I had for the OSP pieces, in order to more accurately evaluate if there had been a qualitative difference in attitude. Despite this shortfall I can subjectively report, as Moustakas (1990) would have predicted, that re-interpretation and gaining insight continued through the creative synthesis, and as I finalize writing.

Chapter 6: Conclusion

This paper explored what insights a student researcher with TBE could gain about PTG through an arts-based heuristic inquiry. The inquiry's initial engagement began with a search for a topic of great personal significance. The immersion phase began with a literature review, and continued with five rounds of the OSP. This was followed by incubation, time away from the research and with family and peers. The explication phase began with the rigorous reflexive thematic analysis, and continued through writing up the findings and discussion. Finally, a painting was created and reflected on to facilitate creative synthesis of the research project.

This project demonstrates that the OSP can effectively facilitate and contain deliberate rumination, with potential to produce insight into TBE and PTG. Another important insight is the significance of how core values, such as ideas of success and failure, may predispose art therapists with lived experience of TBE to countertransference related to birthing stories.

As a researcher, I approached this project with an implicit, selfish goal of measuring my own postpartum PTG, and learning how to help others do the same. In the process, I uncovered the judgements, unrealistic pressure and potentially harmful idea of success and failure inherent in that goal. Therefore, this researcher concludes that PTG could be a useful concept for art therapists to explore in setting goals and choosing interventions, but not necessarily an effective framework for clients who may feel pressure by prematurely exploring a growth mindset following a traumatic event. Another limitation is the small sample size (1) of this research.

A few compelling topics surfaced during this research that merit further study. The mechanisms of intentional rumination and its effects on trauma survivors could be explored in intervention research through use of the OSP. There is also a strong argument for integrating a PTG lens into CBAT interventions, considering the power of the PTG-themed intentions throughout the OSP. Lastly, questions remain about when incorporating PTG might be appropriate with postpartum populations. Longitudinal studies measuring PTG with clients who have experienced TBE could provide answers, if done in a sensitive, trauma-informed manner.

To conclude this exhausting and enlightening journey, I believe that self-study in the form of an arts-based heuristic inquiry brings richness and new perspectives into art therapy

research. The concept of posttraumatic growth creates hope for healing in a meaningful way, and people who endure birth trauma deserve our best efforts to preserve and share that hope.

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Appendix A

Tables of Codes and Themes Generated from Open Studio Processes

Table A.1

OSP Prompt 1: Describe What You See

Themes	Codes
Cognition/Rationalizing <i>Definition: composition strategies and items relating to the cognitive level of the ETC</i>	Words Outlining Cut outs Too complex to understand Variety of lines and strokes Contrast
Cut and Sewn <i>Definition: the physical qualities of cutting and sewing paper</i>	Cut outs Cut out and stitched back on Paper puckers from the tension
Sensation <i>Definition: sensual painting methods and/or their resultant tactile qualities</i>	Sense of touch Rounded and circular strokes Filling in space Embodied understanding Thickly painted Texture
Symbols <i>Definition: symbolic representations and interpretations</i>	Empty space Hanging on by a thread Worm like figure Three eyes spread out over the piece Beginning straight becoming wavy Burning wax candle

Table A.2

OSP Prompt 2: Feelings, Thoughts and Judgements

Themes	Codes
Getting it wrong <i>Definition: thoughts and behaviours that indicate negative self judgement</i>	Nagging Disappointment in self Guilt Worry about doing the wrong thing Focus on aesthetic rather than pleasure and completion The result is uglier and messier than expectations I wasn't able to pinpoint or explain how I felt accurately to midwife More clean and campy than I expected the stitches to look
Confusion <i>Definition: trouble understanding the events or meaning of an experience, sometimes leading to giving up trying to understand</i>	Getting stuck on words Is this growth, or coping and resilience? Lost ability to process events chronologically during TBE Trying to make sense of the timeline of labor I needed help to understand and explain what was happening (attunement?)

	<p>Hard to understand Challenging Distractions keep from seeing other parts or the whole</p>
<p>Feelings and judgements <i>Definition: emotions and impressions of events and myself, both previous (during TBE and postpartum) and present.</i></p>	<p>Embarrassment Fear of judgement Enjoyment of sensual painting experience Embarrassed about how I am perceived Being in touch with your body makes intuition clearer Perversely comforting to cut into paper forcefully So much shame and embarrassment connected to felt pain Feeling like a clown Lost trust in midwife Lost trust in myself I feel like I'm making an impossible effort Being held in place The word incision is activating Shame around fear that incision wasn't healing properly Shame that something was wrong and was my fault Secret desire to be told I was doing a good job Self judgement: I am too needy Not visually pleasing Unsatisfying, unresolved, unsettling Weird, made up shapes Something silly about it Everything happens for a reason Everything happens as it should If everything happens for a reason, does genocide have a reason? The way my daughter was born felt devoid of spiritual meaning</p>
<p>Negation <i>Definition: attempts to deny or downplay my subjective experience, mostly in order to feel more socially acceptable</i></p>	<p>Desire to wrap things up with a bow Shadow or whisper of what was felt, thought remembered and perceived Lacking confidence in my own recollection Maybe it wasn't a big deal I felt like she thought I was lying Fear of cliches Millions of people give birth every year It must not be special to give birth since so many people do it Others survive worse trauma Pretending everything is ok</p>
<p>Complexity <i>Definition: when a question or shift in perspective expands possibilities, sometimes beyond what is understood. Similar to confusion but less avoidant</i></p>	<p>Choosing to look at something a different way Significance of blank spots When something ugly is silly it is cute Enigmatic Hard to define or interpret Detailed and busy It could be a wish for illumination Thinking about spirituality brings me to think about the collective</p>
<p>Avoidance</p>	<p>Flight response in body</p>

<p><i>Definition: turning away from something out of fear</i></p>	<p>Block on positivity Lack of motivation to bathe Afraid to dive into what my painting represents</p>
<p>Action <i>Definition: Physical, emotional and psychological action relating to TBE memories, the art making and reflective writing</i></p>	<p>Effortful art making Perversely comforting to cut into paper forcefully Artwork as a roadmap I don't know if it is time to process and find new perspective yet Should I let it come up as it may Sewn in and being restrained Warm painting made colder by the stitching Eyes looking out from another dimension Recognizing the collective power in the operating room during my C-Section does seem extremely significant on reflection.</p>
<p>Disgust <i>Definition: an emotion triggered by memories and visual representations of things that make my skin crawl</i></p>	<p>A cute way to think about cutting through flesh like a C-Section Representing something bodily but ambiguous More clean and campy than I expected the stitches to look Intestine, worm, octopus It is ugly Like a baby octopus playing in the water Like a fetus in a dark womb Hard to look at Blood, excrement, organs, flesh, wounds, incision, throbbing</p>

Table A.3

OSP Prompt 3- Dialogue with the piece

Themes	Codes
<p>Existential/philosophical thoughts <i>Definition: Questions and musings related to existence and the nature of life</i></p>	<p>Wanting to learn about life Desire to get in touch with spiritual self Wanting to escape capitalism Life is sublime What used to be here? Do I have choice over my feelings and perceptions? Pain is a fact of life I want to know something about life Hard to understand what appreciation for life means Why be thankful for what just is? Is there a start and end to the universe? When do we enter the universe? Do we already exist in the universe in a different form when our first cells are gathered together in a fertilized egg? I guess I want to appreciate how amazing or special it is to have consciousness</p>

	Check in with Intention
<p>Grappling with ambiguity <i>Definition: Struggling to understand, or to be ok with not understanding, something that lacks clarity</i></p>	<p>Giving birth is a high risk part of the lifecycle Not being able to tell when something is complete. I can't be sure of the things I believe Crude and precarious, but endearing and earnest What is happening Do I need to understand what is happening? Hypervigilance One sees waves and chaos while another sees complexity and beauty Ambiguity can feel threatening Ambiguity can hold potential To try and change something from ambiguous to definable may mean a desire to own or control or mold it to your expectations</p>
<p>Blame <i>Definition: judging someone or something as responsible for things going wrong</i></p>	<p>Judgement of people's birthing experiences Censoring my own expression of thoughts around childbirth Blaming self for birth trauma Looking for places to put blame If I had done something different maybe I could have had a better experience Desperate to offload some guilt and shame I would feel stupid and ashamed if I was unprepared for something that I could have prevented I should have known how to push Maybe knowing how to push could have led to a vaginal birth</p>
<p>Success vs failure <i>Definition: meeting an expectation or not</i></p>	<p>Worried that love is tied to appearance and beauty Conflating beauty with love and success Success makes me think of failure Is there a spectrum between success and failure? Success and failure in childbirth as harsh perspective Extreme version of failure in childbirth is losing a baby Can you accidentally do the wrong thing while giving birth Fear that my bodily knowledge, felt sense and intuition failed me during labor Saying something catchy rather than true Piecing it together Too defined, boxed in I did not know how to push</p>
<p>Growth <i>Definition: developing new skills or adaptive perspectives</i></p>	<p>Should interrogate new core beliefs formed while and in aftermath of having a baby Wanting to learn from the experience Opportunity for components to re-arrange I want to remember every detail so I can learn something about life</p>
<p>Not being ready <i>Definition: attempting to do something before meeting required conditions</i></p>	<p>Maybe I'm trying to be too positively minded I am not ready to sort things out yet I felt unprepared I fear being unprepared for difficult situations in the future I can be more prepared for important events in the future</p>
<p>Memory <i>Definition: Thoughts related specifically to the events that took place during labor</i></p>	<p>Fear of asking certain questions Doubting my senses during labor Disconnected from body Difficulty submitting or succumbing to pain of contractions Inability to "let go"</p>

	<p>Following sense of pain instead of pleasure Fear of losing control Fear of dying Fear of looking stupid I can't shake the memories Held in place in a state of shock</p>
<p>Comfort <i>Definition: Questions seeking and statements providing soothing from negative beliefs and fears</i></p>	<p>You are being held onto Will it ever feel different Am I doing ok? Am I still useful? The world continues on while you rest When it seems hard to see the positive you could try to remember the things you love and are grateful for You could try to observe how it feels to consciously appreciate life Gratitude and appreciation as a muscle you need to train Sometimes I want to know answers to things that do not affect my day to day It might give me some sense of relief or safety to understand the boundaries of existence It might give me solace to know that death is not the end, that the universe is not the end of existence Make peace with the periphery by minding your own business</p>
<p>Acceptance <i>Definition: Accepting the reality of an event or of my subjective experience of life</i></p>	<p>We cannot avoid scary and painful things all the time Pain is a fact of life Giving birth is a risky endeavour It's best not to take things too seriously Life continues on whether you understand it or not The world does not depend on you, and it would be a huge responsibility if it did You don't have to be thankful or appreciative Preoccupation with death can be distracting from living in the moment</p>

Table A.4

OSP Step 4- Check-in With Intention

Themes	Codes
<p>Seeing a bigger picture <i>Definition: finding a larger context to explain a thought, behavior, or experience</i></p>	<p>Not ready to reflect on new possibilities yet Is there a lesson to be learned about accepting ugliness Pain management was harder at the hospital I was self-conscious about moving through pain in front of professionals Discomfort and fear made pain harder to manage I couldn't yell and let go during contractions I judged myself for not being able to let go I felt like I was in trouble for not being able to let go Focus helped with pain, like catching a wave while surfing Getting through the pain was gratifying It feels hard and bad to be ugly in front of others</p>

	<p>I hold myself and others to unrealistic expectations</p> <p>I should not put others on a pedestal</p> <p>I need to stop looking to blame others for my feelings</p> <p>Motherhood began with sense of duty and responsibility</p> <p>I felt like a caregiver before I felt like I was becoming a mother</p> <p>I was scared foggy and panicking, making becoming a mother confusing</p> <p>Acknowledging difficult jobs and hard work of others makes me appreciative</p>
<p>Re-interpretation</p> <p><i>Definition: intentionally looking at something from a new perspective to better understand or see the positive</i></p>	<p>Striving during labor is courageous</p> <p>Positive self talk</p> <p>Defenses are down</p> <p>Some playfulness in reflection</p> <p>Collaging provides opportunity to re-interpret, re-arrange</p> <p>Acknowledging others' work takes me from entitlement to gratitude</p>
<p>Meaning making</p> <p><i>Definition: looking for and/or creating meaning retroactively</i></p>	<p>Rupture and repair</p> <p>Accepting undesirable aspects of myself could help me accept those parts in others</p> <p>Being less judgemental could improve relationships</p> <p>Labor and birth are unique and risky life events</p> <p>I guess there's the idea of having something larger than ourselves to look to for... comfort, or coping</p>