

Culinary Postcards: An Arts-Based Heuristic Inquiry on
the Therapeutic Experience of Cooking

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Abstract

Using an arts-based heuristic approach, this research examines the therapeutic experience of cooking. A review of literature highlights the sensory and creative qualities inherent in food, comparing these qualities with the methods, materials and psychodynamic theories inherent in the art therapy process. The researcher's own reflective process is described, modeling how cooking and art making is a self-affirming and regulatory process which could be used by art therapists as a personal reflection process, to increase self-awareness and wellbeing. Derived from this heuristic investigation, themes related to the therapy process emerged that are then woven into personal experience and relevant literature to ultimately suggest how a community kitchen setting could function as a safe and inclusive place, where participants could experience cooking and art making within a creative arts therapies framework. Finally, it is suggested that these public homeplaces already being adapted for therapeutic benefit within community settings are also natural sites for an expansion of art therapy methods for, what the author calls, "cooking therapy groups."

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I would like to thank my family for the recipes we have lived together and for their endless support in my endeavours. They have taught me to respect and appreciate the beautiful moments that surround sharing food.

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Introduction

Throughout various life experiences, I've been connecting to people and places through food. I have used food as a way to understand novel experiences and places, to inform my developing sense of self, to define a sense of independence, to celebrate a sense of curiosity, and to incorporate values I've gleaned from cultural experiences.

Food has been a way to connect with my family and to relate back to my childhood experiences. Since moving away from home, my phone conversations with my dad have often consisted of sharing thoughts on food: new recipes, alterations to old recipes, advice and techniques, health and nutritional information, and cravings. Often when I am preparing to host a meal, I will first confirm cooking instructions with either my mom or dad. While my dad has taught me a lot of my food knowledge, it has also been a skill that we teach each other. For example, since my visit to Spain years ago, my dad and I continue to discuss variations and improvements on how to make, *gazpacho*, a cold soup we both enjoy. Gazpacho directs us to our shared appreciation of both its' cultural context and our experiences of traveling to which it references. It is in this way that we can both respect each other by sharing skills, knowledge, and experience. Food has become a beautiful way for us to continue relating to each other; even though we have few opportunities to actually share a meal together, we can bond over imagining potential meals.

My mom recently gave me a compilation of her favorite recipes hand written and catalogued. With recipes vastly available online, cookbooks have become a more nostalgic sentiment. My mom's collection of recipes points to a lineage of meals that I grew up with, many of which she grew up with her mother making as well. These recipes

reference family stories, values, and a sense of heritage. These were the meals that we shared at our kitchen table throughout my childhood. This heirloom cookbook is like a family photo album.

Food has been an integral part of my experience of traveling. For example, when I was an exchange student in Sweden, kitchens were an invaluable setting. People were eager to spend time with me in their kitchen whether hosting me for a “typical” meal, or wanting to show me how to make something from scratch. For example, I was taught how to make homemade mulled wine from potatoes and yeast, tending to the batch over the course of weeks. I was also taught how to make cheese, where to pick seasonal mushrooms, and how to bake *saffron bullar*, the most common treat that is served with coffee. It was important to my hosts, as well as to myself, to understand culinary moments that are essential to our respective daily lives. This was a way for us to relate, to share, and to connect.

One of the most pivotal culinary experiences I’ve had that piqued my interest in the therapeutic potential of food, was when I was traveling in Portugal. A hospitable stranger took my friend and I to a local *taska*, a small private restaurant that is run out of someone’s home, operated by a 92 year-old woman. Throughout times of economic difficulties, this woman had served the community affordable meals from a few tables she set up in her home. She used whatever ingredients were most accessible, including those from her own garden, to create a particular dish that she would offer her customers that day. I was told that this social enterprise was her sole modest income, while affordably feeding many in the community who wouldn’t otherwise have access to such low cost meals. As I sat and enjoyed the dish that was on the menu for that day, fried

chorizo and potatoes with a glass of her home-made green wine, *vino verde*, it was explained to me that taskas were like a second home for those who ate there. It was not just a cheap meal, but also a place to feel safe, nurtured, and in good company. At the time, the government was in a process of shutting down taskas as they did not have a registered food license. However, this woman who had been in business for over 70 years, fought and succeeded to stay open, petitioning to the government with the cultural importance and invaluable heritage of her taska.

This experience taught me the cultural importance of sharing food. I have since become interested in collecting other moments that contribute to my understanding of the therapeutic qualities of cooking, eating, and sharing food. Upon entering the Masters of Creative Art Therapies program, I intended to connect my interest in the culinary process with my clinical psychodynamic training in art therapy. During my practicum at a women's shelter, I developed and facilitated an ongoing *cooking therapy group* for the residents in transition.

These experiences with cooking, and many more, have served as *culinary postcards*, linking me to memories of people, places, and community values that continue to influence my sense of identity as well as my intention to become an art therapist. These recipes are mapped throughout my memories and continue developing as works in progress. I seek out these meals, especially when I feel the need to reconnect to those memories, places, and people who have informed me of who I am.

Through geographic, linguistic, culinary, and other dislocations, her works articulate how cultural “leftovers” may, like the leftovers in her own and her

mother's kitchens, infinitely be combined and recombined, creating dishes and identities that are never identically constructed or fixed. (Gooze, 1999, p. 101)

The following research includes a review of existing literature on the topic, my creative process of elucidating further meaning of the phenomenon, and a synthesis suggesting how cooking could be understood within a therapeutic context.

Research Questions

My primary research question is: What is the therapeutic experience of cooking?

My subsidiary research question is: How can cooking potentially function as a therapeutic modality, thereby expanding the current methodology of art therapy? I will investigate these questions using an arts-based heuristic inquiry of my experience as a facilitator of cooking therapy groups, and reflection of my own personal experience of cooking. The research process is explained in greater detail within the methodologies section.

Operational Definitions

Art therapy. "Art therapy often is defined functionally as a set of interpersonal and art-based skills used to help people come to terms with psychological, developmental, social, and behavioral stressors that impede their health and wellbeing" (Kapitan, 2010, p. 30).

Cooking therapy group. An art therapy group that I designed and facilitated for residents in a women's shelter. Participants were invited to prepare a meal, cook, and share the food within a therapeutic framework.

Incorporation. An oral mode of primary self-formation whereby the self takes in and is filled with the primary object, mother-breast-milk (Falk, 1994). The parallel visual

mode of this psychodynamic concept is imitation, whereby the self imitates what is visually perceived.

Intention. Pat Allen (2001) describes an approach of beginning a creative process by breathing, meditating, or practicing quiet, in order to clear a space within oneself to make room for our imagination to speak; “The spark is our intention, ignited by the attention we give it through making art” (p. 13).

Meal. Socially structured dining occasion that includes a dish of combined ingredients or a sequence of dishes (Wood, 1995).

Psychologies of liberation. A collection of participatory approaches to foster the inclusion and leadership of individuals and their communities; especially empowering individuals who have experienced oppression and marginalization in order to support re-authoring their experience, and voicing needs, struggles, and visions (Watkins & Shulman, 2008).

Public homeplace. A safe and accessible community space, especially for marginalized and vulnerable individuals to gather, share, dialogue, connect, and witness each other (Belenky, Bond, & Weinstock, 1997; Watkins & Shulman, 2008).

Response art. A creative expressive method of tending to one’s intuitive way of knowing in order to gain a deeper understanding of a phenomenon or experience.

Witness. A therapeutic intention of attending, attuning, and being present and alongside a client, image, or oneself (Allen, 2005; 2007).

Literature Review

Introduction

Cooking can be a therapeutic expression that is comparative to the process of art making within a therapeutic context. With a growing popularity in the field of culinary arts, there is an increased awareness around the profound social benefits of community cooking projects. As food is known to promote a sense of closeness, belonging, and stability, cooking has a rich therapeutic potential (Bar-On, 2006). The process of cooking can be shown to overlap with the psychodynamic practices of art therapy. The following literature review will illuminate the therapeutic features of food practices as exemplified in the fields of art therapy, psychology, cultural psychology, philosophy, folklore, anthropology, sociology, and oral history. The following text will highlight how cooking can function as an artistic process that elicits potential psychotherapeutic benefits.

Food as Art: Material, Form, and Process

Food is art. It is a creative art material that is accessible to us in our everyday lives. The rich sensuous nature of food includes a palette of colour, texture, smell, flavour, taste, and imagery. Food is transformative, whether through a natural process of digestion or of aging and decomposing, or through an intentional alchemical procedure of cooking or mixing. Food is not only loaded with sensorial possibilities, but also rich with expressive meanings. Rozin (2007) suggests:

In addition to expanded roles for food as art form, moral, and social vehicle, the vocabulary associated with food is co-opted as a means of describing things that have nothing to do with food; that is, food has a metaphoric function. (p. 397)

In other words, food is seen as an art material complete with sensorial, metaphorical, symbolic, and expressive qualities (Marte, 2008; Quinet, 1981; Rozin, 2007; Sutton, 2001).

The philosophical research of Quinet (1981) and Marte (2008) regards food as an art material as it is an aesthetic object. Like composing a painting, food can be constructed by combining parts into a greater whole. Quinet questions food's artistic nature being overlooked and is instead seen merely as a functional object because it involves bodily gratification. However, while research acknowledges food's biological function, it also highlights the creative potential that invites a sense of originality, expression, and an artisanal skill of knowing the properties and limitations of this aesthetic medium (Quinet, 1981; Sutton, 2001). The artistry of cooking requires a sense of material understanding but also a sense of imagination, creativity, and foresight.

As in art making, food is prepared not only for its final product, but also the process can be meaningful. For example, the process of chopping vegetables, selecting flavor combinations, and standing over a stove to cook a pot of soup on a cold day can be as reparative as eating the bowl of soup afterwards. Quinet (1981) notes that "What is crucial is not that the finished product provides information about the author of the work, but simply that the author has 'expressed himself' in the work" (p. 212). Quinet values the act of self-expression and the emotions elicited, even though the art form may not be a literal reproduction of the emotions themselves. After all, Quinet explains, the emotional quality in the work might depend on how it was made. In other words, the creative process itself is also a rich source of meaning. The act of preparing food can be as personally engaging as consuming the eventual meal.

As art is a visual language, food is also considered to be an expressive form with symbolic and metaphorical signifiers (Marte, 2008; Quinet, 1981; Rozin, 2007; Sutton, 2001). Research acknowledges the cultural importance of the structural semiotics of food; meals are constructed with a complex syntax and a culturally relevant grammar (Fischler, 1988; Marte, 2008; Rozin, 2007; Sutton, 2001). Antal (2011) suggests cultural food habits become so systemic that they can function like a language. For example, in some cultures a traditional meal consists of a particular order of service: first an appetizer, followed by a soup, a salad, then a more filling main dish, and punctuated with a dessert. However, an abbreviated meal structure for a lunch course might only consist of a soup and sandwich. There is also the blasphemous and misplaced midnight snack, a profanity that might even be enjoyed away from the dinner table, spilling crumbs onto the bed or sofa! This likening of food to language is to say that the currency of meaning has a structure that lies on a continuum of parts, forming a whole; a structure that has different variations, combinations, and sequences all which gather together to give meaning, which is personally or culturally informed.

Food and Affect

Food making is an expressive art form, loaded with cultural and emotional meaning. Marte (2008) likens the process of cooking to that of art making, as both can be a creative and commemorative act of giving form to a feeling or memory. Psychologist Orit Bar-On (2006) elucidates that throughout our life span we use food to communicate affect and facilitate relationships. Bar-On states, “The associations that have the most profound psychological effects are those in which food awakens complex memories and

activates a set of thoughts and feelings” (p. 23). Marte describes food as “emotionally charged artifacts that have the potential to generate poetics” (p. 396).

Why is food regarded as such an emotionally charged artifact? Firstly, research studies have investigated the biological extent to which emotional content can be elicited by food (Bar-On, 2006; Croy, Olgun, & Joraschky, 2011; Fischler, 1988; Herz, 2004; Marte, 2008; Rozin, 2007; Warren, 2009; Willander & Larsson, 2007). More specifically, the olfactory system has been determined as the most influential sensory system to trigger emotionally loaded memories (Croy et al., 2011; Herz, 2004; Willander & Larsson, 2007). Research implies that the olfactory system especially elicits the emotions of happiness, disgust, and anxiety, thereby emphasizing its’ evolutionary value in assuring our health and survival (Croy et al., 2011). In other words, these three emotions aid in directing our life affirming abilities to discern between acceptable and unacceptable foods to eat, to avoid consuming hazardous materials, and to maintain an interest in ingestion (Croy et al., 2011).

Food is also said to contribute to our ability to emotionally regulate (Bar-On, 2006). For example, we might turn to starchy carbohydrates when in need of a calming effect as these foods metabolize slowly, or we might turn to sweets when seeking quick energy and an elevated emotional state (Bar-On, 2006). Even Freud suggested the affect-regulation involved in a cooking process as described in his recipe for “Wish-fulfillment Icing” to “...stir until both icing and you feel smooth” (Hillman & Boer, 1987, p. 71). However, we each have our own individual food lexicon that references different emotional states based on our personal past experiences.

Moreover, Warren (2009) notes that food's relationship to affect is also due to the rewards system that is triggered in the pleasure centre of the brain. Food is biologically linked to mood because of its interaction with serotonin, dopamine, and pleasure (Warren, 2009). This biological factor contributes to our ability to use food as an emotional regulator, eliminating undesirable emotions and prolonging pleasant emotions as needed (Bar-On, 2006).

While the olfactory system, notably engaged in the process of eating, is found to be life affirming, it is also understood to be psychologically influential. For example, research reveals that memories recalled by odors tend to be more emotionally evocative than those elicited by visual or auditory cues (Herz, 2004). Herz (2004) suggests that in some cases odor can even be the only sensory cue to access particular memories.

Food and Memory: A Narrative Tool

The traditions of food carry forward cultural, familial, and even a personal heritage of particular places. Food can be a vehicle for connecting to past traditions, past meals, past experiences, and past places. As a narrative tool, food can therefore serve to map one's experience (Marte, 2008; Sutton, 2001). Marte (2008) eloquently notes:

It can be inferred from the food-narratives that what gets re-imagined through active interpretation of cultural-memory is not necessarily an abstract national community belonging or performance of ethnic identity, but experiential socio-cultural relations to former local places, people, and landscapes. (p. 399)

It is in this sense that food can tell a story by creating a map that integrates the past and the present (Marte, 2008). This sense of place can be creatively imagined and influential to one's cooking process. In essence, food can be considered as a souvenir, a culinary

postcard, if you will, used to narrate a personal vignette that fits into a larger cultural story (Marte, 2008). This narrative continuum of ‘food-place-memory’ can provide an empowering experience for especially dis-located individuals who are seeking to reconnect to their sense of ‘home’ (Marte, 2008).

In reviewing the psychological implications of food, the most common subject in literature seems to be focused on the relationship food has on the autobiographical memory (Antal, 2011; Croy et al., 2011; Herz, 2004; Marte, 2008; Sutton, 2001; Sutton & Hernandez, 2007; Warren, 2009; Willander & Larsson, 2007). Marte (2008) succinctly explains, “...cooking practices are inseparable from the narrative memories that give them meaning, constituting complex memory-work strategies, communicative and expressive means...” (p. x). Food memories are also suggested to function as a transitional tool that can create a sense of continuity across time and place (Antal, 2011; Marte, 2008; Sutton, 2001). For example, the folkloric study of Antal (2011) suggests that food, as a tool to stimulate memory, helps an individual to appreciate and integrate the past into the present by taking fragmented memories and reconstructing a sense of wholeness. Freud even described the psychotherapeutic function of the most invaluable kitchen tool, a ‘memory screen’ (Hillman & Boer, 1987):

We often forget what ingredients, derived from the day’s residues or leftovers, have gone into a soup, especially if the concoction has first been processed in a blender. One needs to sift or screen out unwanted remnants that may remind one of meals past. Hence every kitchen should have this invaluable piece of equipment. It is also good for purees, where one needs a Memory Screen to catch the bitter lemon seeds, the parsley stalks, and the peppercorns. (p. 64)

Furthermore, literature elaborates on the sense of personal and collective memory involved when participating with food traditions (Antal, 2011; Marte, 2008; Rozin, 2007; Sutton, 2001; Sutton & Hernandez, 2007). According to anthropologist David E. Sutton (2001) the interrelationship between food and memory is a fairly unexplored topic in anthropology. Sutton describes food as a quotidian and ritualistic part of culture that serves to build social memory. He also explains food practices as a non-verbal and felt experience (Sutton, 2001). Learning food traditions is an embodied apprenticeship and a performative history that involves a repetition of recipes, methods, and meals (Sutton, 2001). Food offers individuals a way of continuing to participate with a greater context of social history.

Food, Self, and Identity

Another common theme is food's relationship with one's sense of identity (Antal, 2011; Fischler, 1988; Marte, 2008; Rozin, 2007; Sutton, 2001; Sutton & Hernandez, 2007; Warren, 2009). "Food indicates who we are, where we came from, and what we want to be" (Antal, 2011, p. 1). Antal (2011) illuminates the way in which we can use food to perform a desired sense of self. For example, cooking can be an artistic performance that expresses one's identity including features such as gender, class, ethnicity, personal history, and a sense of belonging to a collective culture. Furthermore, it seems that cooking can engage the ambiguity between past and present experiences, allowing an individual to integrate parts of their identity into a greater whole. Antal goes on to express that ethnic food can be prepared not only to individuate or differentiate oneself within a culture, but also to combine shared cultural meanings, helping to make sense of one's own fragmented cultural identity. Interestingly, Antal addresses the

possibility of how food can contribute to a sense of multiplicity within one's identity. In other words, there is room to use food as a tool to play with the expectations, constructions, nostalgic yearnings, and even curiosities one might have around a personal sense of identity. Antal reminds us that ethnicity and identity are not so much a list of characteristics as they are an ongoing process of negotiation and performance.

In addition, Fischler (1988) discusses how food fits into the concept of *incorporation* as a key factor in identity formation literally taking in food across the frontier of the outside to the inside. Through incorporation, we internalize our external environment and experience (Fischler, 1988). As the saying goes, 'we are what we eat'. Incorporation is a literal and biological action as much as it is a process of taking in values that we would like to identify with (Fischler, 1988). In other words, food selection contributes greatly to our sense of self (Fischler, 1988; Rozin, 2007). Consequently, Fischler suggests the potentially malleable process of re-considering and re-imagining one's identity when working with food, especially when one's identity has been ruptured, disturbed, or questioned. Similarly, Sutton (2001) explains how food can be a valuable narrative tool to negotiate identity as a process of remembering and forgetting, and integrating and discarding.

Finally, another factor that contributes to forming an identity is a sense of belonging. This can be derived from a sense of community, familial cohesion, or feeling a part of a lineage. Whether in a family setting or a community environment, intergenerational learning also informs our identity as we share values along with new recipes or cooking skills (Antal, 2011). Afterall, food can serve to connect us even across vast differences as we share in our need for, and appreciation of, food.

Food and Attachment Theory

The psychodynamic theorists that especially contributed to a relational understanding of our first feeding experiences include John Bowlby (1988) and Melanie Klein (1952). Klein suggests that the gratification involved in feeding is as much about the good, patient, and available mother-object who offers the food, than it is about the food itself (as cited in Bar-On, 2006). Klein finds that this positive experience of satisfying a drive helps the infant to create an internalized sense of security and safety (Bar-On, 2006). The caregiver's sense of nurturing while feeding their infant includes an attuned gaze that suggests that the infant is seen, has its needs acknowledged, and is cared for (Bar-On, 2006; D'Elia, 2001). If this experience is positive it translates to the infant's understanding that the world is a safe place.

In addition, while food can promote feelings of safety and security, it can also stimulate feelings of insecurity and anxiety. Bar-On's (2006) qualitative study investigated the relationship between people's experience of food and their early-childhood attachment styles. He examined how our first experiences of food, most often breast-milk, coincides with our first experiences of bonding with our primary caregiver. Attachment theorist, John Bowlby (1988) illuminates that this feeding experience is not just nutritional, but is especially a communicative, relational and bonding experience between infant and caregiver (Bar-On, 2006; D'Elia, 2001). This relationship between food, affect regulation, and relational connection continues on throughout our adult lives (Bar-On, 2006; Bowlby, 1988; D'Elia, 2001).

Bowlby (1988) further suggests that it is the nature of the feeding experience itself that impacts the infant. Is the overall experience nurturing and secure, or is it frantic

and stressful? (as cited in Bar-On, 2006). Bar-On (2006) explains that this notion of our early-childhood attachment style therefore has an effect on how we go on to utilize food in our adult life to emotionally regulate, and to communicate and relate to others.

Psychologies of Liberation

Therapists are branching out and utilizing new methods to access the subjective experience of their clients. For example, narrative therapy is a post-structural approach that was initially coined by Michael White and David Epston in 1989 (as cited in Duvall & Beres, 2011; Madigan, 2011). Narrative therapy values a relational, contextual, and anti-individualist therapeutic view of people and their relationships (Duvall, & Beres, 2011; Madigan, 2011). Duvall & Beres (2011) illuminate the therapeutic potential in story telling as the following, “The mapping of storylines makes it possible to free identities from problem-saturated stories and journey toward preferred, transformative stories” (p. 32). Narrative therapy intends to elucidate our complex sense of multiplicity and demystify the so-called problem by encouraging a contextual understanding of the surrounding experience of an individual (Madigan, 2011). This includes a process of empowering the individual with a sense of agency to re-author their lives, instead of the relying on the sole authoritative voice of mental health professionals in defining the so-called problem (Madigan, 2011). Madigan (2011) discusses how we have a multi-sited sense of self and a social landscape that informs how we understand our experience. Using creative methods to tell one’s story can help to heal, connect, and empower the greater community.

Moreover, this narrative approach to healing individuals and communities mirrors the participatory and dialogical sense of communication that is valued in psychologies of

liberation professed by psychologists, Mary Watkins and Helene Shulman (2008).

Valuing and sharing subjective experience is a vital ingredient to healthy communities. It is especially important to create safe spaces to safely explore previously untold stories.

Watkins & Shulman further elucidate:

When the past is frozen in silences that divide individuals and communities, it can become extremely difficult for people to interpret, represent, and express the effects of historical events on their own lives. Experience' is partly the result of symbolic and interpretive work done by individuals and communities through the mediation of language, organized within a shared cultural interpretive framework. Subjectivity and memory are structured through language as a social and symbolic vehicle. Memory is therefore partly a social process. (p. 94)

Watkins & Shulman suggest the importance of informal learning environments for community members of all backgrounds to exchange their knowledge, experience, and in essence, their stories. These informal community spaces are called *public homeplaces*, coined by Mary Belenky et al. (1997). A public homeplace is a transitional space that bridges between private and public, and offers a sense of safety, belonging, dignity, responsibility, and dialogue (Watkins & Shulman, 2008). Community kitchens can function in this way, providing individuals with an accessible venue to socialize, dialogue, and participate with other members of the community (Engler-Stringer, 2006).

Emerging Projects

As illustrated in this literature review, food is an art material with potent psychological meaning. While there is limited literature of the application of food in a

psychodynamic context, there are emerging examples whereby food is being intentionally used as a creative method to empower and heal communities.

One example, *MABELLEarts*, is an urban renewal program located in a high density immigrant housing project in Toronto. This collaborative project includes a *Ladies Cooking Circle* whereby “a group of women come together to share recipes and traditions while feeding the neighbourhood” (“The Mabelle Ladies Cooking Circle”, para 4). Creative cooking projects such as this one offers residents a sense of responsibility, belonging, and pride in their culture and their new neighbourhood.

Another example is the *Miriam Home Supper Club* in Montreal, a community dining collective for adults with various disabilities. The members of this supper club offer responsibility over tasks including menu planning, music selection, table setting, meal preparation, and cleaning. This ongoing event promotes a sense of empowerment, autonomy, and belonging.

Furthermore, food is used in community art therapy spaces as an element to offer a sense of unity, comfort, and safety. *La Ruche d’Art* (Timm-Bottos, 2012) and *Le Milieu* are two Montreal community art studios that offer food to their participants as they make art during open-studio, workshops, group therapy, and during art openings. This inclusion of food and gardening contributes to a sense of hospitality, welcoming the community into creative sites that serve as public homeplaces.

While it is popular in the field of anthropology to discuss the impact of food on a sense of identity and cultural belonging, it is not yet a topic commonly discussed in psychology (Warren, 2009). However, food has a powerful effect on relationships, establishing and re-creating bonds, and on developing a therapeutic alliance. Food can be

ameliorative, negotiate boundaries, create intimacy, stimulate reminiscence, trigger affect, and even offer a sense of security (Warren, 2009). Considering psychology involves negotiating relationships, mood, affect, and subjective experience, it is appropriate to integrate food into a therapeutic context (Warren, 2009).

As art is a potent medium in the modality of art therapy, I believe food can also be used as a therapeutic medium. In fact, I will proceed in the following section to place culinary therapy within the context of creative expressive therapy. My research will substantiate through qualitative methods how food enhances the practice of art therapy.

Methodology

Roots of my Research: Cooking Therapy Groups

During my master's degree in art therapy, I completed a year long practicum at a women's shelter for women and children survivors of domestic violence. I was intrigued to learn that residents were not permitted to use the shelter's kitchen without supervision for reasons of liability. This struck me as a great opportunity to extend a therapeutic practice into the kitchen and encourage residents to cook during their transitional stay at the shelter. Considering residents were recently displaced from their homes and were often experiencing the effects of trauma, it seemed that cooking could potentially be an accessible, familiar, grounding, therapeutic, and creative activity for the families to engage in. I initiated and facilitated a cooking therapy group every other week for several months; open to any resident interested in participating.

I held planning sessions at the kitchen table a few days before the cooking sessions. During these meetings interested residents would gather to share their thoughts, feelings, experiences, ideas, and recipes. In some cases, it was the first time that some

residents were introduced to each other. The kitchen table became a warm, communal, and safe meeting place. First, the framework of the cooking therapy group was introduced, including the guidelines of maintaining it as a safe and non-judgmental space. Since it was important to me that the residents were given as much decision and agency in this process as possible, I facilitated a discussion in order for a direction of the group to be established. Each group varied, sometimes with participants deciding to work collectively on one particular dish together, or an individual participant wanting to cook and host a meal for the entire group, or women wanting to teach each other their recipes and each woman contributing a different dish to add to the collective meal. Another mother and her child cooked together as a dyad. As each meal was being planned, participants shared their methods, their recipes, and their memories around certain dishes; sometimes the participants did not share the same language and therefore communicated through gesture and by drawing the ingredients. My contribution to the planning discussions was to ensure the group remained safe and inclusive. This facilitation included containing the emotional content that was triggered as food and cooking often reminded residents of experiences of 'home', offering them the space to share those feelings, but also bringing the group back on topic. For example, some women would share life experiences that seemed unrelated to the rest of the group members and I felt it was important to return to the topic at hand to maintain a sense of group cohesion. At the end of these planning sessions the participants made lists of ingredients to collect for the following cooking therapy group and they collectively agreed upon a time that we would meet together to cook.

At the time of the cooking therapy group I would set out the requested groceries on the kitchen counter and the participants were first invited to sit at the kitchen table to review the menu and the non-judgmental setting of the therapeutic space. I would also ask participants to frame their upcoming cooking experience with an *intention* (Allen, 2001) and often led by example. We took turns sharing our intentions and then the group began cooking.

As I wanted to empower the participants with as much agency as possible, I did not participate in cooking. Rather, I facilitated a sense of safety and *witness* (Allen, 2005, 2007) of the women's experience. I reflected what the participants were doing, encouraged further discussion around topics that were surfacing, and tried to connect threads between any themes that were happening amongst participants. Occasionally, I took on a light task such as washing vegetables or helping to find tools in the kitchen, as it was an unfamiliar space to most participants. While the meal was being prepared, there was often someone setting the table and informing the rest of the household, staff and residents, approximately when the meal would be ready.

Once the meal was ready to eat, we would sit together at the kitchen table. I would thank the cooks for the meal they had prepared and ask them to introduce their dish to everyone at the table. This was a moment for the cooks to take on the role as host and to share an explanation of their dish, the method of preparation, and any personal or cultural meanings. This often encouraged a sense of pride in the cooks as the table showed great appreciation and interest in their creation. Each participant was then invited one at a time to speak before we began eating. This was often an emotionally loaded

moment as participants shared how they felt about the opportunity to share a meal together and others shared a prayer or a blessing.

After the meal was finished, participants continued to take on roles of generosity and responsibility as they collectively cleaned up. The cleaning seemed to be as important to the complete process as the cooking. The participants were then invited back to the kitchen table to make art or a writing reflection in order to process anything that came up during the group. I often initiated the creative response activity with a theme, such as home, community, or health that seemed pertinent during their process or related to a particular time of year or holiday. The group was offered relatively controlled and rigid materials such as markers, oil pastels, and pencil crayons. I did not offer fluid or less controlled materials such as watercolours because I wanted to maintain a safe and contained therapeutic space (Hinz, 2009; Kagin & Lusebrink, 1978); at this point in the session, the participants had already expressed themselves in a long process of cooking, cleaning, and dialogue. The participants were then invited to share anything about their experience of cooking, sharing food, artwork, or writing. I facilitated these discussions by witnessing what was expressed and by connecting the themes that were brought up by participants.

The end of each cooking therapy group often left a shared sense of warmth, community, and belonging in the shelter.

I will further reflect in the following sections about my subjective experience of facilitating these groups and how the experience contributed to my expanded understanding of using cooking as an art therapy methodology.

A Heuristic Inquiry

Considering I have had an ongoing interest in the socio-cultural importance of cooking, this research became an opportunity to glean further meaning around the topic by engaging in a heuristic process of dedicated absorption, self-dialogue, and personal reflection (Moustakas, 1990). Kapitan (2010) explains that art therapy research involves a practice of learning how to look and to reflect upon what it is that you see. The qualitative approach of a heuristic inquiry utilizes carefully collected subjective observation. In other words, the individual experience is a valuable contribution towards the creation of knowledge and the multiplicity of truth. In this research process it has been my intention to have a greater understanding of my own invested interest, as well as to make a contribution towards the field of creative arts therapies.

The Heuristic Research Method

Clark Moustakas wrote the primary texts on conducting a heuristic inquiry (Kapitan, 2010). Moustakas (1990) defines the following six phases of a heuristic approach that also reflects a creative process involving oneself as an ‘internal frame of reference’ (p. 25). The initial engagement is the phase of the researchers’ percolating personal interest with the phenomenon that shapes and defines the research question. During the next phase of involvement with the subject matter, immersion, the researcher spends time in introspection with one’s own experience and relationship with the phenomenon. Moustakas explains that in this ‘indwelling’ the researcher lives with the question, both awake and in dream (p. 24). This spontaneous and repeated self-dialogue includes a “unity of one’s intellect, emotion, and spirit” (Moustakas, 1990, p. 16). Following an intense absorption with the phenomenon, the researcher naturally retreats

into a phase of incubation, allowing the material to digest. The illumination period of discovery ensues after rest from the material, creating clearer pathways for the researcher. This allows the researcher to reach an explication phase of examining what has consciously surfaced and organize the themes and findings into a meaningful context. It is then time for the researcher to externalize their understanding of the data (Moustakas, 1990). The researcher collects the parts and creatively assembles them to express a meaningful whole in the final phase of creative synthesis.

Moustakas (1990) suggests that this six-phase process of inquiry can be cyclical and that it can repeat itself as the researcher continues to engage with their topic. Through this process of immersing oneself in relation to the phenomenon in order to explicate meaning, the researchers' sense of self-awareness is developed as they listen to their intuitive and tacit ways of knowing (Kapitan, 2010; Moustakas, 1990). It was in this way that I navigated through my own research process that I will describe in greater detail below.

Data Collection

This research focused on my own relationship to cooking, informed by the cooking therapy experience. In my process of collecting data, I cooked meals for myself at home. I replicated dishes that I had learnt from the participants in the cooking therapy groups and other times made dishes reminiscent of personal life experiences, places, or people that are important to my sense of self. In any case, I cooked based on an intuitive interest, need, or craving.

After I enjoyed each meal, I made art in response to the cooking experience. I chose to do my response art using oil pastels initially in a sketchbook as it was an

accessible art making process to do spontaneously after a meal and reflected the types of art materials the women were offered. Moreover, oil pastels felt like an appropriate medium as I was interested in gestural mark making and in having a large variety of bright and saturated colours to choose from. This led to a process of continuity, where I moved to using a large roll of paper instead of individual sheets. The images were separate from each other, but were done on the same continuous roll of paper.

After each art response, I then spent time with my image through witness reflection writing. In this writing process, inspired by Pat Allen's (2005) witness writing process, I described what I saw in the image, how it made me feel, dialogued with the image when called for, and any other part of the cooking, eating, or art making experience that came up for me.

Furthermore, another aspect that emerged through this stage of indwelling with the phenomenon was through my dream state. Consequently, whenever I dreamt about the cooking therapy groups or experiences related to cooking, I also did witness reflection writing upon waking.

The immersion phases I experienced in my research process alternated between actively saturating myself with the phenomenon and otherwise retreating into incubation, allowing the material to marinate, so to speak. My creative responses contributed to further understanding of the themes regarding my essential research question. It also helped to deepen the subject and allowed me to come to terms with ideas that had been beyond the surface. The personal process of dialoguing with the phenomenon was thorough and ongoing, lasting twelve weeks. It felt like I was carrying the subject with me at all times and considering it during my waking and dreaming life. Creating response

art and reflection writing was a formal method to express and extricate my immersive dialogue with the phenomenon. In total I compiled seven response art images and ten entries of witness reflection writing.

After a period of incubation where I took time and space away from my phenomenon, I then approached my data with a fresh perspective for an explication phase of deriving themes and illuminating findings into a meaningful context.

Limitations

This study was intended as a preliminary exploration of my own reactions to the therapeutic possibilities in the experience of cooking. This was an accessible approach to the topic, but also important in understanding the roots of my interest before investigating how the phenomenon may function in a community setting in future research. As it is my own subjective understanding of the phenomenon, this research is not necessarily transferable to others, but it is a contribution towards a greater understanding of the multiplicity of human experience. As I continue to find this topic rich with potential areas of further investigation, I will include recommendations for future research in the conclusion of this paper.

Findings

Introduction

My creative process furthered a tacit and intuitive understanding of the phenomenon of cooking therapy which I will identify through the meals I made, descriptions of my response art, as well as excerpts from my witness writing which will be discerned in italics. The following themes emerged as essential ingredients of my

experience in relation to food, both personally and as a facilitator for the cooking therapy groups: places, vessels, the gaze of an eye, and left-overs.

Places

The first theme that emerged in my response art was an abundant use of landscapes. Most of the landscapes have a peaceful tone with features such as clear blue skies, warmth, and green foliage. There are peripheral green areas of significance throughout my images. I understand these places to be for rest, like a green space within a city that functions as a relaxing refuge (see Figure 1, 2, 5, & 7). This theme of a safe place was verified through a dream about the nature of facilitating a therapeutic space. *It is not my kitchen. I wasn't a cook, rather a pillar in the kitchen, an architectural support that holds up the space, making it safe for them to do their work.* These nature-scapes in the art images also connected to my love of using of fresh ingredients in my cooking and a feeling of health while making the dishes (see Figure 3), such as when I cooked fresh spinach pasta with tomatoes. While cooking, I often felt I was rejuvenated through a connection to a healthy and safe space of respite.

This sense of place in my meals, my response art, and reflection writing involve various locations that have been stitched together to collectively inform my identity. The landscapes in my images are often contained within round mandala shapes, containing the inner fragmented parts that are divided into patches, layers, or peels. Together these parts form to make a whole. I have noted in my writing that the meals I have chosen to reflect upon often signify a memory of where I've been and an ongoing process of who I've become. *Like an author or an alchemist that tailors a scenario that entails both a*

present sensory experience as well as a historical component –a reference to past moments and other places.

In another example of how food has referenced place, I made the dish *Turkish lentil soup*, a soup I often ate when I lived in Turkey. My art following the meal reflected the sense of domestic tablecloth patterns and floral print wallpaper that were often present in the soup shops in Turkey (see Figure 1). The writing conveyed that it is not only a memorable dish, but also reminiscent of a feeling of community and hospitality. From my writing: *Lentil soup in Turkey, found in back alley restaurants and late night eateries. A meal to warm and protect the everyman's belly. Served with as much bread as you can eat and affordable for all. I think of the farmers I met who ate raw onion with every bite of soup. I think of the domestic shops they were served in. People's food.*

I recalled enjoying this soup at a time in my life when I was in an unhealthy situation, feeling lost, and in the process of discovering my sense of self worth. These soup shops were a comfort to me to join others in a feeling of belonging and in eating a healthy and affordable meal. In my experience, lentil soup references my own participation in taking comfort in public homeplaces.

Vessels

The second theme that arose from my response art was a sense of vessels: pod-like containers, pools, bellies, mouths, circles, bowls, and canoes. This reflects a notion of feeding, filling, holding, and containing. For example, the image of a pool in Figure 6 offers a cool and refreshing space inside, with warmth emanating on the outside. There is an entrance into the pool, making the comforting space seem accessible. The pool appears to be a regenerative and gentle space to bathe in respite. In the witness writing

the pool also references bodily vessels that hold, carry, or contain, such as a belly or womb: *Bellies...mine is round and whole too. Cool refreshment. Swimming pool full. Taken care of today.*

Another aspect of the vessels in the images is that while some of them are holding others are spilling or overflowing such as in Figure 1 and 2. While these vessels give a sense of abundance they also convey clutter, fragmentation, and overwhelming excess.

Meanwhile, other vessels are like safe nests or wombs, offering a holistic sense of containment (see Figure 4, 6, & 7). Two beans, peas, or figures share the nest-like space in the image of Figure 7. They are close, secure, and sheltered by a roof or cap overhead. This image was in response to making *spinach lentil dahl* and sharing it with a significant person in my life. The image invokes the sense of safety, health, and intimacy that was experienced in sharing this meal.

The Gaze of an Eye

The third theme that I uncovered in my images is the gaze of an eye. Upon reflection, I noticed the eye has a varying aperture in each drawing including wide-eyed, shut eyes, the protective shade of an eye-lid, and even dilated pupils. In some images there is a repetitive blinking motion, a glimpse, or a glance (see Figure 1 & 2), perhaps conveying a sense of pattern, or a hint of a new beginning. These eyes suggest various degrees of seeing, witnessing, and self-awareness.

In addition, I noticed exposed and dilated pupils in the response art images Figures 4 and 6. The meals that inspired these images were made during moments of self-care when I felt open, energetic, and healthy. In contrast, the image in Figure 1 appears to have a closed eyelid. As I discussed earlier, the dish Turkish lentil soup recalls a time

when I did not have a healthy sense of self-awareness and when I had my eyes closed to situations and relationships. In this image the closed eyelid reflects the domestic and familiar dining space of the soup shops, and meanwhile instead of looking around, I am looking inward (see Figure 1).

This notion of the eye seems to reflect a sense of seeing others, including the participants in my cooking therapy groups, with an attuned gaze. It also seems to reflect a sense of my own degree of self-awareness, and inward looking “I”.

Leftovers

The fourth reoccurring theme that I found in my data was the value of preservation I embedded in my use of food materials. Four of the meals were made from ingredients or previous meals I already had in my house, such as the meals that inspired the response are images in Figure 1, 3, 4, and 7. For example, the image in Figure 4, began with a circular outline and was filled in using a spontaneous selection of different colours. This art making process reflects the inventive cooking process used to make the meal *arugula salad with salmon, feta, and dill from garden*. Furthermore, all response art images were made using the same set of oil pastels. The leftover art materials were used to make each next image, mirroring the cooking process that frequently incorporated previous meals and ingredients into the next.

I appreciate the resourceful quality of using found materials. This includes remixing leftovers, things found in the freezer, and ingredients that already exist in the fridge, instead of fetching new ingredients in order to accommodate a recipe. This way of cooking and art making art feels spontaneous, creative, and humble. My witness writing also reflects these values that are inherent in my family’s relationship to food: *Finish*

your plate. Waste not, want not. Leftovers. Surely this came from my mom. Her freezer has portions of leftovers on lay away for another day. Never taking her groceries for granted. A farm life she grew up on, with values she took with her that have now been engrained in me.

Not only my use of food materials, but also my use of art materials reflected this notion of continuity between past and present. Initially, I created my response art to cooking and eating meals in a sketchbook. However, part way through my research process I began creating response art on a long roll of paper. I appreciated the feeling of connectedness between all of the images on the roll of paper. While each image remained separate from each other they also began to form a relationship to each other as a lineage on the continuous space of paper. This series of meal response images were visually stitched together like a panoramic stretch of different experiences across time.

Altogether, the common themes that I derived from my response art focus into a repetitive use of places, vessels, eyes, and leftovers. I will further expand on these themes in my discussion as they draw on therapeutic concepts of safety, containment, witnessing, and creative process.

Discussion

In the following discussion I will review how my heuristic investigation has informed my research question: What is the therapeutic experience of cooking? I will also address my subsidiary interest which is: How can cooking potentially function as a therapeutic modality, thereby expanding the current methodology of art therapy?

Reinforced by a heuristic phenomenological research process is the basic notion that food making is art making. Both involve creative processes utilizing sensory rich

materials that are combined and made special resulting in culinary narratives in which we express ourselves, tell our stories, and share our personal experiences. For example, cooking and then savouring Turkish lentil soup brought me back to another time, place, and part of myself that was relevant for me to examine in relationship to the work I am currently developing with the women in the cooking therapy sessions. Confirmed through my experience was that cooking can elicit the reexamination of historical life events. In the image (see Figure 1), I expressed a feeling of vulnerability, a scarce sense of self, and a need for personal reflection while living through a difficult experience. The remembering that cooking offers can be a valuable experience to have in a supportive and therapeutic context. Having the opportunity to express and share emotionally painful parts of oneself in the safe context of a cooking therapy group could be a rich, reparative, and empowering experience. In my experience of making response art and witness writing after cooking, I discovered that together these narrative tools have the power to elicit unsuspecting paradoxical parts of myself. Recalling these chapters from one's life from a safe distance, with reparative ingredients can foster a constructive and illuminating experience.

Leftover meals or ingredients from one's past experiences can be combined with one's current sense of self to continuously create a renewed sense of self and identity (Gooze, 1999). Like art, the creative process of cooking invites us to sift through our experiences, re-author new stories, and recall parts of our identity that are tacitly inherent in the recipes we each have catalogued in our selves. We can intentionally call forward past meals or ingredients, while other times we follow a winding and instinctive

connection by the evocative material properties or historical roots drawn from past recipes.

The image in Figure 4 evokes a process of sculpting parts into the new creation of a greater whole, in the same manner that one's identity is constructed from a collaboration of parts into a cohesive sense of self. This image was made in response to a meal made with ingredients found in my fridge. Combining leftovers can be a metaphoric process of bringing forward past meals, moments, and parts of one's self. As reflected in my intuitive selection to sequence my response art images on a continued roll of paper, this can facilitate a therapeutic process of preserving identity across time and experiencing a sense of continuity especially for individuals who have experienced personal or geographical displacement (Marte, 2008). I believe that this sense of place can offer a sense of familiarity, safety, and belonging.

A therapeutic cooking practice could encourage a critical examination of being a step away from old recipes, in order to challenge unhealthy patterns of behaviour. In a therapeutic cooking space, individuals could also be encouraged to experiment with new dishes, techniques, or flavours, incorporating new coping skills and methods of healthy living into one's repertoire. For example, I made several new adaptations to my recipe for Turkish lentil soup by changing spices or adding new flavour combinations to reflect aspects from my current sense of self. By including aspects from my present life, I begin to re-author a challenging chapter from my life. This further illuminates the potential for repair work that can be done when emerging the art of cooking into a therapeutic arts practice.

From this research process I began to understand more deeply the therapeutic process and realized that informative cognitive content also surfaces while cooking, enjoying a meal, and taking time to make response art and reflecting afterwards. For example, I had spontaneously glued a found image onto the cover of my response art sketchbook of a mother bird feeding her baby bird (see figure 8). I was initially instinctively drawn to the sense of guidance and attunement in this mother/child image, thinking this image reflected my role as therapist feeding my clients. As the facilitator and witness in the cooking therapy groups, I was there to contain the group's experience, process, intention, and the content that surfaced; I was to take in and digest the meal I was offered, along with all of its' embedded narrative and emotional content. It is common for an art therapist to support the process of digesting emotional content that is brought up by the client. This role of assisting in witnessing and metabolizing a client's experience is inherent in developing a therapeutic relationship. The therapist takes it in, digests it, and offers it back to the client in a more tolerable form. As with early childhood attachment experiences with a primary caregiver, the therapeutic alliance is an internalized relationship that offers the client a feeling of being heard, understood, emotionally contained, and a feeling that the world is a safe place (Bar-On, 2006). Our attachment needs continue on throughout our adult lives and are often fulfilled through socially meaningful exchanges around food. It is this experience that can be replicated in the presence of a trustworthy and secure therapeutic alliance within a safe space (Bar-On, 2006; Bowlby, 1988; D'Elia, 2001). Towards the end of my research process, however, in a moment of reflection, I realized I was also the baby bird being fed in mid-flight (See Figure 8).

The creative process of working with food materials can reflect and express one's emotional state, as well as contain and regulate one's emotions. For example, round shapes were repeated through my response artwork (see Figure 4 & 6) and helped me to illuminate this phenomenon. Although the creative process of cooking can be very messy, fragmented and compartmentalized, improvisational, and experimental, these images reflect a sense of containment and wholeness. Once the meal is ready, it is often presented in round dishware, such as a bowl or plate that renders the meal manageable and contained. In art therapy, the art materials can be used to offer a sense of boundary, framework, and structure. Likewise in therapeutic cooking, the food materials and dishes themselves can serve to metaphorically and physically hold the expressed content (Sutton, 2001).

This was again reflected and complicated in another response piece of a swimming pool, referencing both a feeling of holding and of being held (see Figure 6), while not being completely contained. I reflected in my witness writing that like the filled swimming pool, my belly was also full, and I felt content and satisfied. To fill and nourish oneself, not only with the material sustenance of food but also by engaging in a creative process, is a self-affirming and self-regulatory therapeutic experience (Warren, 2009). To participate in this process as witnessed by others could have been the missing step my own process needed for completion; to further contain and empower.

The process of cooking is participatory, engaging, active, expressive, and productive. When applied to a collaborative group setting, this creative process resembles the approaches suggested with psychologies of liberation whereby active participation in a social dialogue values subjective experience and expression (Watkins & Shulman,

2008). Participating in a creative group process of sustaining oneself could be an empowering part of a cooking therapy group, especially for individuals who are developing skills of self-care and relational affect-regulation.

In art therapy, the therapist and the art materials are offered in support of a client's emotional creative process, rendering the process tolerable, manageable, safe, and contained. Similarly, the therapeutic act of preparing food includes the methods in which kitchen tools and food materials are offered by a trained creative arts therapist in order to trust a process which is dependent on material properties, as well as the framework of the kitchen as a therapeutic space, to support a healing process.

Like “two peas in a pod”, my response art image in Figure 7 elicits a sense of didactic intimacy within a safe space. The two figures in the image comfortably share a nest-like space. This relationship is reflected in the etymology of the word ‘companion’: to eat bread together, with ‘com’ as together, and ‘panis’ as bread (Hillman & Boer, 1987, p. 175). In other words, there is social value in preparing a meal and sharing it, encouraging a relationship you have with yourself and with others. The therapeutic alliance is also an imperative to art therapy as the therapist serves as a nurturing, warm, and protective guide to travel with on a contained journey of self-inquiry, expression, and discovery.

This therapeutic alliance does not necessarily require an intimate setting, but can also be developed in community based settings. For example, the community kitchen serves as a public homeplace (Belenky et al., 1997) and can provide a “safe pod” to house the therapeutic group alliance, which within this setting bears witness to each other's experiences around shared meal preparation and dining. This environment can create a

safe sense of connection and well-being, while the cooking can foster sharing personal histories in a shared collective present moment. Engler-Stringler (2006) illuminates that cooking with others in a community space increases a feeling of social inclusion, belonging, competence, and empowerment. Likewise, when using food as the art material, the kitchen translates to an individual's felt-sense of refuge and deep nurturing. As illuminated in my reflection writing, the art therapist serves as a "pillar" in the space, an architectural support beam that holds the safe in order for the work to be done. The therapist in the community space acts to hold up the intention for the safe dialogue and sharing of stories.

Pat Allen (1995) illustrates how we tend to repeatedly live out our particular myths and stories. She suggests that by having the space to express and share these stories we might have the opportunity to acknowledge our life patterns and consider new transformative arrangements. Similarly, I believe that our own repeated recipes come from our internal catalogue of life experiences. Calling forth our recipes into a therapeutic context of a public homeplace or community kitchen invites an intimate opportunity to reflect, learn more about ourselves and each other, express and regulate our emotions, and share in a potent aspect of daily life.

These culinary moments can also be experienced as pleasurable, relaxing, and even meditative. Many response art images from my research process included peripheral patches of green spaces (see Figure 1, 2, 5, & 7). These green areas elicit a sense of park-like spaces or fresh and natural landscapes that, like cooking in the refuge of a kitchen can offer rest from the daily grind. I felt my research cooking experiences were privileged moments to have with myself. During this time I took time to reflect on my

sense of self, dreams, memories, physical and emotional needs. These moments to cook and reflect were like the peripheral green spaces in my images, places to rest, contemplate, and enjoy. My cooking and reflecting process supported a felt-sense of respite that could be applied to a therapeutic cooking practice.

My artwork also recalled introspective moments that I could have only experienced in a safe place. For example, my response artwork in Figure 1 reveals a domestic Turkish soup shop mirrored on a closed eyelid. This image illuminates how I experienced soup shops in Turkey as accessible and comfortable public homeplaces. These soup shops felt warm and protective, allowing me to feel safe enough and even ‘close my eyes’ to look inside myself while in the safe company of others. These public homeplaces were especially important to me as it was during a time when I otherwise lacked a safe domestic refuge (see Figure 1). These comforting spaces in the community are especially invaluable to individuals whose voices have been oppressed and are seeking a venue for safety, expression, belonging, or a personal journey of insight (Watkins & Shulman, 2008).

Based on my own felt-sense of safety in the therapeutic space of a kitchen, I believe a community kitchen setting would be an appropriate public homeplace to host cooking therapy groups. A community kitchen setting is an accessible and transitional space between private and public that offers a feeling of inclusion and comfort (Engler-Stringer, 2006). To have the social experience of enjoying food with others in a safe space could be especially beneficial for individuals in the community who do not otherwise have access to this experience.

To experience being witnessed in this cooking process of expression and celebration can be valuable. For example, many of my response art images contain the gaze of an eye (see Figure 1, 2, 5, 7). These images elicit a sense of looking and of being seen. The attuned gaze is known to have therapeutic benefits of assuring a sense of safety and security and also functions accordingly in attachment theory (Bar-On, 2006 & D'Elia, 2001). Bowlby (1988) suggests that our attachment needs continue on throughout our life, and especially during our times of increased need for comfort and security (D'Elia, 2001). Therefore, it makes sense that within a therapeutic experience there is a witness who offers a warm and attuned gaze, in replication of those early formative moments of security. This sense of being witnessed can be facilitated in a cooking therapy group as the therapist sees and reflects the client's creative process, acknowledges her narratives, and is present with the her sense of self that surfaces in the session.

Replicating meals at home that had been previously shared in the cooking therapy group was an illuminating method which supported a process to take in further and deepen into the content that had surfaced. For example, the response art I made after making one of these dishes at home reflects a sense of rupture and spilling (see Figure 2). This image references the challenge I had in witnessing and containing the overwhelming sense of emotional spilling that I had experienced in the group. The process of repeating the meal on my own after a session, followed by making response art and witness writing was helpful in understanding counter-transference issues that arose during the session. Again, the complimentary creative methods of cooking, art making, and witness writing can increase self-awareness as part of a revealing therapeutic process.

Using this creative sequence to focus my lens as a therapist will nurture and sustain my practice. As an art therapist it is important to have the experience of knowing and seeing oneself, if intending to be the witness for others (Allen, 2007). Pat Allen (2007) eloquently explains:

The first step is for the art therapist to listen to herself to notice what calls for her witness. Where should she pitch her tent, her mishkan, the portable sanctuary she creates whenever she holds the space for images to arrive? (p. 74)

Allen (2007) continues to explain that an art therapist is a witness who does not come to change things, but rather to be present with the client, to mirror, and get to know them. Similarly in cooking therapy, it is important to have a facilitator to offer an attuned gaze, hear the stories, and reflect back their creative process. However, therapeutic cooking can also be a creative art practice that fosters an attuned inner gaze to foster an increasing a sense of self awareness.

When I began facilitating the cooking therapy groups I had imagined that the stories would be held nicely in each pot, pan, bowl, or belly. What I discovered is that the therapeutic experience of cooking is rich with emotion, memories, and self-discoveries, requiring a larger therapeutic framework to hold it.

This arts-based heuristic inquiry allowed me to feel the experience of cooking, reflect on the experience, and imagine how it could potentially function as a therapeutic modality. As shown in my data, I found cooking to be a creative practice that develops and nurtures my sense of self. It reminded me of who I am, recalling formative narratives of places and people, and encouraged a healthy practice of taking care of myself. In literature, one of the most commonly noted psychological implications of food making as

a creative process is that it elicits our own autobiographical map of our self (Antal, 2011; Croy et al., 2011; Herz, 2004; Marte, 2008; Sutton, 2001; Sutton & Hernandez, 2007; Warren, 2009; Willander & Larsson, 2007). This experience of engaging with our own lexicon of life experience recalled through the emotional felt-sense of the food materials and the narratives they elicit is rich groundwork for a therapeutic journey. While this research process was a self-inquiry using my own reflective process as a witness to my own expressions, it also suggested to me the importance of having a safe therapeutic space and a warm and trustworthy therapeutic alliance in order to further support what is unearthed in the process of cooking and art making.

As Pat Allen (1995) coined “*Art is a way of knowing*”, and I too have discovered in my research, “cooking is a way of knowing”. I believe that paired together, cooking and art making are complimentary therapeutic processes that can give form and expression to my diverse sense of self, and can support my self and others to feel emotionally stable, whole, and balanced.

Conclusion

My research journey has elucidated that cooking is a therapeutic experience that can serve to transport, hold, remember, soothe, repair, stimulate, express, and nurture oneself. Like art materials, food materials can be similarly used as a therapeutic vessel to journey through a supportive psychodynamic process. Furthermore, I found that the two creative processes of art making and food making are complimentary therapeutic methods when practiced in tandem. My research suggests it could be valuable to expand art therapy methodologies by including the art process of making food.

Art therapy practice uses a range of materials based on what is appropriate to the therapeutic context and to the needs of the clients (Wadeson, 2010). As the profession experiences ongoing development, practitioners are incorporating new methods and technologies such as touch screen computers or gardening, in order to make creative mediums more accessible to a range of populations. Moreover, the clinical space is transferable to community settings and public spaces, making art therapy practices adaptable to the needs and resources of the individual (Wadeson, 2010). Psychologies of liberation encourage this multi-faceted approach to community reparation, health, and vitality (Watkins & Shulman, 2008). I believe it would be beneficial to include cooking as an accessible art practice in community settings using a therapeutic framework.

Food is a cultural postcard, directing us to personal and collective histories. It connects us to our lineage of cultural traditions, rituals, and momentous occasions we have experienced throughout our lives. Food is a rich artistic medium that can be served up to expand the art therapy methodologies.

Recommendations for Future Research

It has been personally rewarding to engage in a heuristic research process and to investigate my subjective therapeutic experience of cooking. While my deepened understanding of the phenomenon is valuable subjective knowledge, it would be beneficial for further research to explore other individual's experience of intentional cooking as well. In particular, it would be valuable to research the experience of participants in cooking therapy groups in order to better understand how to tailor the therapeutic framework within a kitchen setting, and to identify the limitations, as well as the benefits of this creative therapeutic process. Further research could be done to

elucidate the group experience of cooking within a therapeutic framework. It would be beneficial to the expanding field of art therapy to develop a greater understanding of the potential of using cooking as a creative arts therapy.

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Figures



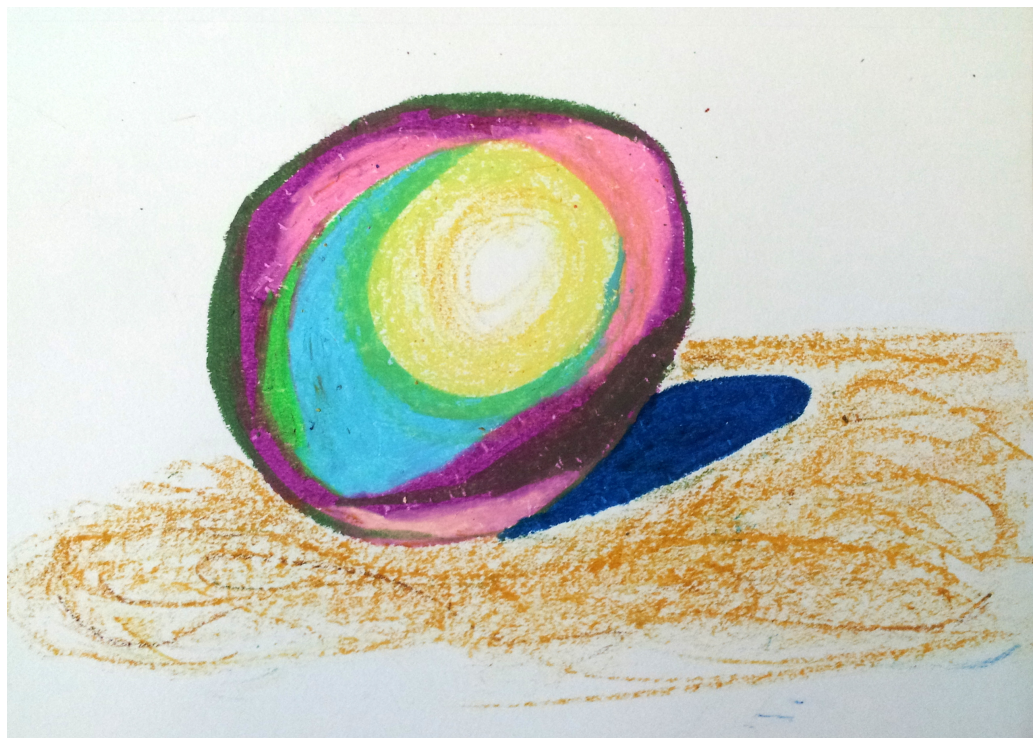
(Figure 1)



(Figure 2)



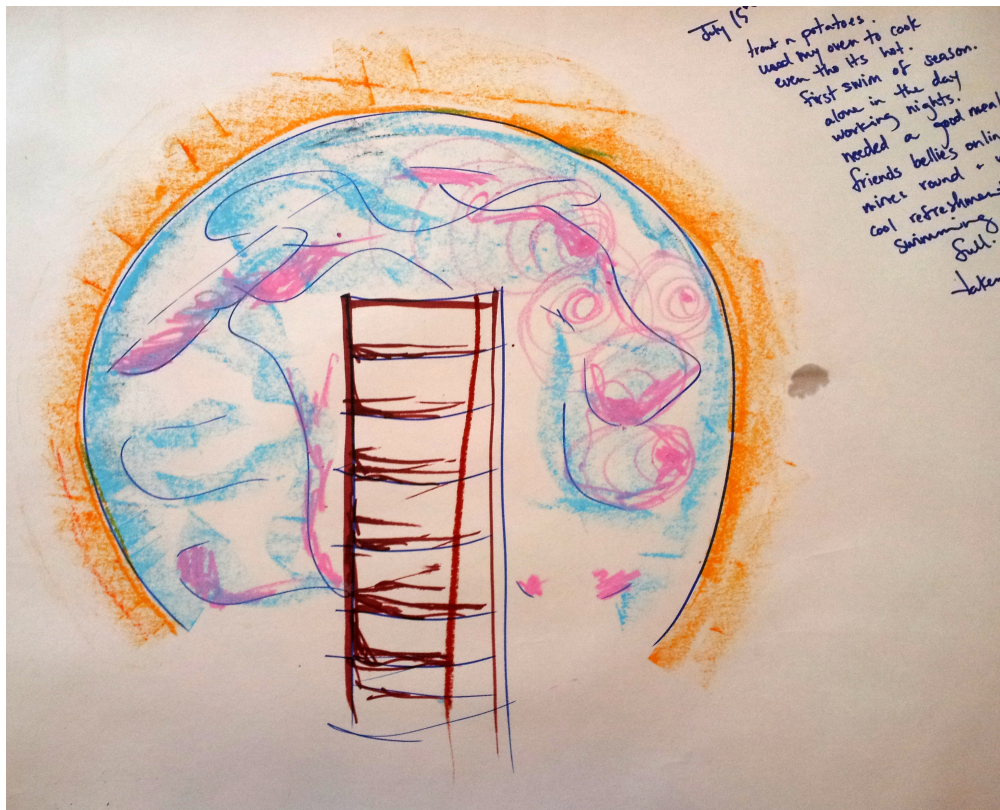
(Figure 3)



(Figure 4)



(Figure 5)



(Figure 6)



(Figure 7)



(Figure 8)