

Summary of Creative Forces Art Therapy Research Findings

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Preliminary evidence of art therapy's effectiveness with military service members and veterans in addressing traumatic brain injury, post-traumatic stress, and other underlying psychological conditions attributable to the work of Creative Forces art therapists and cross-disciplinary colleagues.

As part of Creative Forces®: NEA Military Healing Arts Network¹, eight research papers have been published to date, which include small case series or analyses of secondary data (clinical documentation and program evaluation). The findings from these studies provide a solid base to inform more in-depth, research pursuits. The Creative Forces strategic framework and five-year agenda for clinical research calls for multisite investigations in collaboration with other health and rehabilitation disciplines.² This will enable evaluation of the clinical effectiveness of creative arts therapies pertaining to health outcomes and quality of life of military personnel.

Creative Forces clinical research focuses on how creative arts therapies interventions **promote rehabilitation and recovery** across multiple domains, including, but not limited to: neurological, physiological, physical, functional, cognitive, social/relational, occupational, and psychological/behavioral difficulties.

Promising results related to several of these domains from the eight published art therapy studies are summarized below. The research is also beginning to address the utility of creative arts therapies in improving some of the **quality of life outcomes** of service members (e.g., readiness for duty, ability to work, live independently, complete educational programs), as well as their benefit for outcomes such as reduction in use of health services and costs, sustainability of therapeutic benefits through continued use of creative arts therapies, etc.

- 1) Art therapy helps to foster improvement in **psychological/behavioral** functioning:
 - Art therapy helps to identify patterns of resilience and indicators of psychological risk embedded in artwork and provides valuable clinical information (Kaimal, Walker, Herres, French, & DeGraba, 2018).
 - Art therapy helps in recovering from traumatic experiences, reducing flashbacks and nightmares (Jones, Walker, Masino Drass, & Kaimal, 2018).

¹ Creative Forces®: NEA Military Healing Arts Network is an initiative of the National Endowment for the Arts (NEA) in partnership with the U.S. Departments of Defense and Veterans Affairs and the state and local arts agencies. This initiative serves the special needs of military patients and veterans with traumatic brain injury and psychological health conditions, as well as their families and caregivers. Administrative support for the initiative is provided by Americans for the Arts.

² National Endowment for the Arts. (2018, June). Creative Forces clinical research: A strategic framework and five-year agenda (2018 – 2022). Retrieved from: https://www.arts.gov/sites/default/files/CF-Clinical-Research-Framework-and-Agenda-10.23.18.pdf

- Art therapy improves insight and tolerance of PTSD symptoms (e.g., hypervigilance)
 (Walker, Kaimal, Myers-Coffman, Gonzaga, & DeGraba, 2017).
- Art therapy encourages expression and management of recurring images and traumatic memories by re-enactment of memories using art materials to promote insights and alleviate intrusive thoughts (Walker, Kaimal, Koffman, & DeGraba, 2016).
- The recollection of a traumatic memory in art therapy leads to construction of an alternative narrative for trauma processing and recovery (Berberian, Walker, & Kaimal, 2018).
- Art therapy helps service members to open up, express, and confront aspects of their struggles that cannot be expressed through words (Kaimal, Walker, Herres, French, & DeGraba, 2018).
- Art therapy provides patients with the opportunity to freely express trauma symptoms and engages the patient in the treatment process (Walker, Stamper, Nathan, & Riedy, 2018).
- Art therapy provides a means to channel aggressive behaviors and address emotions like anger and anxiety (Jones, Gonzaga, Landless, & Kaimal, 2015).
- Artworks created in art therapy can act as agents for change to improve frustration tolerance and stabilize emotions (Walker, Kaimal, Koffman, & DeGraba, 2016).
- Art therapy helps in coping with difficult experiences and feelings such as grief, loss, avoidance, survivor's guilt, and shame related to wartime actions (Jones, Gonzaga, Landless, & Kaimal, 2015; Kaimal, Jones, Dieterich-Hartwell, Acharya, & Wang, in press; Walker, Kaimal, Myers-Coffman, Gonzaga, & DeGraba, 2017).
- Art therapy fosters the ability to experience positive feelings like hopefulness and gratification (Berberian, Walker, & Kaimal, 2018) and enhance verbal processing through artmaking (Kaimal, Jones, Dieterich-Hartwell, Acharya, & Wang, in press).

2) Art therapy can promote **neurological** and **cognitive** functioning:

- Art therapy improves concentration and memory (Kaimal, Walker, Herres, French, & DeGraba, 2018; Walker, Kaimal, Myers-Coffman, Gonzaga, & DeGraba, 2017).
- Art therapy may foster connectivity in the brain to help support healthier brain function (Walker, Stamper, Nathan, & Riedy, 2018).
- Art therapy can enhance enjoyment and promote relaxation (Kaimal, Walker, Herres, French, & DeGraba, 2018).

3) Art therapy has been shown to alleviate **social/relational** difficulties:

- Art therapy enhances learning about the self, promotes identity integration and improved self-concept (Jones, Gonzaga, Landless, & Kaimal, 2015; Jones, Walker, Masino Drass, & Kaimal, 2018; Kaimal, Jones, Dieterich-Hartwell, Acharya, & Wang, in press).
- Art therapy addresses a divided sense of self by promoting development of a coherent self through mask-making (Walker, Kaimal, Myers-Coffman, Gonzaga, & DeGraba, 2017).

- Art therapy fosters the ability to relate to others (Berberian, Walker, & Kaimal, 2018).
- Art therapy helps in overcoming resistance to treatment due to societal stigma of pursuing treatment for PTSD (Walker, Kaimal, Koffman, & DeGraba, 2016).
- Art therapy is helpful in reducing isolation and connecting with others who experience similar challenges (Jones, Gonzaga, Landless, & Kaimal, 2015).
- Mask-making in art therapy supports expression of internal struggles that offers an alternative mode of communication with caregivers, family, and fellow service members (Walker, Kaimal, Myers-Coffman, Gonzaga, & DeGraba, 2017).
- Mask-making in art therapy promotes expressions of patriotism and belongingness to address feelings of disconnect with society and the country after returning home from deployment (Walker, Kaimal, Myers-Coffman, Gonzaga, & DeGraba, 2017).
- 4) Art therapy can yield improvement in the domains of **physiological**, **physical**, **functional**, and **occupational** abilities:
 - Art therapy can increase the ability to cope with pain and stress. It may help service
 members who are experiencing physical or psychological injury and/or struggling
 with rumination and stress to shift from the survival brain, which is focused on selfpreservation, to the learning brain, which is relaxed and receptive to new
 information (Walker, Stamper, Nathan, & Riedy, 2018).

The evidence to date **supports the need for experienced and highly competent art therapists** and clinicians coordinating assessment and treatment planning while providing clinical services.³ Trauma processing through artmaking can involve visceral and intense experiences for patients, such as heightened flashbacks, underscoring the need for the services of proficient art therapists.

³ Walker, M., Kaimal, G. Koffman, R., & DeGraba, T. J. (2016). Art therapy for PTSD and TBI: A senior active duty military service member's therapeutic journey. *The Arts in Psychotherapy 49*(2), 10-16. doi: 10.1016/j.aip.2016.05.015

References

- Berberian, M., Walker, M. S., & Kaimal, G. (2018). "Master My Demons:" Art therapy montage painting by active-duty military service members with traumatic brain injury and post-traumatic stress. *Medical Humanities*. Advance online publication. doi:10.1136/medhum-2018-011493
- Jones, J. P., Gonzaga, A., Landless, B. M. & Kaimal, G. (2015). *Evaluation of the art therapy Program at Fort Belvoir Intrepid Spirit One*. Report prepared for the Fort Belvoir Community Hospital and the National Endowment for the Arts. Philadelphia, PA: Drexel University.
- Jones, J. P., Walker, M. S., Masino Drass, J. & Kaimal, G. (2018). Art therapy interventions for active duty service members with post-traumatic stress disorder and traumatic brain injury. *International Journal of Art Therapy*. doi: 10.1080/17454832.2017.1388263
- Kaimal, G., Jones, J. P., Dieterich-Hartwell, R., Acharya, B., Wang, Xi. (in press). Evaluation of art therapy programs for Active Duty Military service with TBI and post-traumatic stress. *The Arts in Psychotherapy*.
- Kaimal G., Walker, M. S., Herres J., French, L. M., & DeGraba, T. J. (2018). Observational study of associations between visual imagery and measures of depression, anxiety and post-traumatic stress among active-duty military service members with traumatic brain injury at the Walter Reed National Military Medical Center. *BMJ Open, 8,* e021448. doi:10.1136/bmjopen-2017-021448
- Walker, M., Kaimal, G. Myers-Coffman, K., Gonzaga, A. M. L., & DeGraba, T. J. (2017). Active duty military service members' visual representations of PTSD and TBI in masks. *International Journal of Qualitative Studies on Health and Well-being,* 12(1), 1267317. doi: 10.1080/17482631.2016.1267317
- Walker, M., Kaimal, G. Koffman, R., & DeGraba, T. J. (2016). Art therapy for PTSD and TBI: A senior active duty military service member's therapeutic journey. *The Arts in Psychotherapy 49*(2), 10-16. doi: 10.1016/j.aip.2016.05.015
- Walker, M. S., Stamper, A. M., Nathan, D. E., & Riedy, G. (2018). Art therapy and underlying fMRI brain patterns in military TBI: A case series. *International Journal of Art Therapy*. doi: 10.1080/17454832.2018.1473453