

Visual Journaling: An Empowering Process to Support Emotional Regulation
and Symptom Reduction in Trauma Survivors

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Abstract

The prevalence of trauma in society requires mental health practitioners to remain educated and aware of both evidence-based and alternative treatment options. Adaptive responses to trauma produce a wide range of symptoms from mood disorders to life-threatening medical conditions. While medical models have the propensity to diagnose, categorise, and treat individuals presenting with trauma-related symptoms, they also have the capacity to dehumanise individuals seeking support. There is a wealth of data acknowledging the benefits of creative interventions in trauma treatment and recovery. Moreover, research on the use of visual journaling explores the benefits it can have for self-reflection, anxiety reduction, and affect regulation. This study aims to show how visual journaling can offer an alternative model of support to traumatised individuals, help them to process traumatic memories, reduce symptoms, regulate emotions, and increase autonomy and self-efficacy. The literature explores the neurobiological processes behind trauma and creativity and supports the use of visual journaling in processing nonverbal trauma, regulating emotions, and symptom reduction in trauma survivors. Further research is required to quantify the effect of visual journaling on emotional regulation and symptom reduction in trauma recovery. The provision of professional development courses for psychotherapists may help to increase awareness of the positive neurobiological implications of visual journaling as a creative intervention.

“Trauma is a fact of life. It does not, however, have to be a life sentence” (Levine, 1997, p. 2). Psychotherapists are regularly faced with the pervasive effects of trauma and the dilemma of how to treat traumatised individuals. Psychological trauma can be a result of a specific traumatic incident, however, symptoms can also present as a consequence of developmental trauma or even witnessing a traumatic incident (Schnyder & Cloitre, 2015; van der Kolk, 2014). The range of possibilities can make trauma difficult to treat and dissociative responses can add to this challenge (Johnson, 1987). Due to the prevalence of trauma in society (Schnyder & Cloitre, 2015) and the range of effects it has on mental and physical well-being (Johnson, 1987; van der Kolk, 2014), it is imperative that counsellors and psychotherapists are aware of the implications for therapeutic practice. The Irish Association for Counselling and Psychotherapy (IACP) Code of Ethics requires therapists to keep skills and knowledge up to date in order to provide services in line with best practice (Irish Association for Counselling and Psychotherapy, 2018). Awareness of evidence-based treatments is essential. Furthermore, it is necessary for practitioners to advocate for research and testing of new and alternative therapies (Schnyder & Cloitre, 2015).

While a significant amount of research has been completed in the field of art therapy regarding its usefulness in treating trauma, there is a paucity of research on treatment using particular interventions such as creative or visual journaling. The available research on visual journaling ranges from its use by counselling and art therapy interns (Deaver & McAuliffe, 2009), in individual counselling (Sackett & McKeeman, 2017), as a path to self-discovery (Lokna, 2021), with recovering military veterans (Mims, 2014), and in combatting vicarious trauma in art therapy (Gibson, 2018). The variety of areas subjected to research show an upward trend of interest in the creative journaling process as a therapeutic tool, notwithstanding, minimal research has been carried out directly with trauma survivors. Creative interventions have long been shown to be effective in accessing unconscious

processes (Neumann, 2013) and the unconscious undoubtedly plays an important role in psychotherapeutic treatment (Freud, 1922). The nonverbal and unconscious processes involved in trauma recovery can be challenging to access using words alone (Schoore, 2019).

This study aims to explore the use of visual journaling in trauma treatment and assess its efficacy in symptom reduction and emotional regulation. Chapter one will define trauma and discuss its impact on health and mental wellbeing, the benefits of trauma-informed care, and the use of evidence-based treatments. Challenges presented in the treatment such as the nonverbal nature of trauma and dissociative responses are introduced, and the role of emotional regulation is noted. Chapter two will review the literature on the use of creative interventions with traumatised individuals and the challenges faced in talk therapy. It will explore the needs of the trauma survivor and how expressive interventions can support those needs using mindful, somatic self-exploration. Chapter three will further discuss the neurological processes behind the elements of visual journaling and how creative expression may help to bypass the challenges faced in talk therapy. Moreover, chapter three will review the effect of emotional regulation and dysregulation on the brain and how the loss of sense of self may be recovered in the creative process of visual journaling. Finally, it explores the efficacy of visual journaling and what is required to support its use in counselling and psychotherapy. To conclude, I will provide an overview of the results of the literature review, discuss any limitations that may present in practice, and suggest how further research might support the implementation of visual journaling as a therapeutic aid. The review aims to answer the question; Can visual journaling support emotional regulation and symptom reduction in trauma survivors?

Chapter One

Trauma

Trauma is a widely used term referring to the protracted effects of a perceived or actual threat on a person's well-being. While traumatic experiences can initially be met with resilience, these adaptive responses can subsequently produce trauma-related symptoms. Repercussions can range from anxiety and mood disorders to somatically expressed symptoms such as an increased risk of conditions including, but not limited to, cardiovascular disease, lung disease, gastrointestinal illnesses, stroke, diabetes, and autoimmunity issues. (Center for Substance Abuse Treatment, 2014; Felitti et al., 1998; Schnyder & Cloitre, 2015; van der Kolk, 2005). In 1998, Felitti et al. completed a study that found a strong link between adverse childhood experiences and several of the most common causes of adult mortality.

There is an abundance of evidence to support the idea that traumatic experiences in childhood are linked to increased risk of depression, anxiety, and impaired self-regulation in adults (Dunn et al., 2017; Felitti et al., 1998; van der Kolk, 2005; Schnyder & Cloitre, 2015; Spinazzola et al., 2005). Nonetheless, psychological trauma can occur at any stage of life and its effects are pervasive regardless of age (Johnson, 1987; van der Kolk, 2014). Johnson (1987) noted the difficulties in diagnosis due to denial and dissociation when the traumatic incident occurred. Dissociation or splitting-off of parts of the self are common responses to psychological trauma. Repressed traumatic memories cause both psychological and physical distress, expressing themselves through unconscious processes such as dreams, flashbacks, or re-enactments. Splitting-off of traumatic memories further reduces the individual's capacity to verbalise their experience. Moreover, this denial can lead to a loss of identity or a distorted sense of self. (Johnson, 1987; van der Kolk, 2014; Schore, 2019). An appreciable amount of trauma research has been directed at children. "To "process" their traumatic experiences,

these children first need to develop a safe space where they can “look at” their traumas without repeating them and making them real once again.” (van der Kolk, 2005, p. 7).

Trauma-informed Care

Trauma-informed care promotes awareness of the prevalence of trauma in mental health services and adopts a non-pathological approach to recovery. Emotional dysregulation is one of the many symptoms of trauma and as a result, traumatised individuals can turn to substances or other destructive behaviours to cope. Conversely, some channel this energy into more positive pursuits such as health promoting behaviours and supporting other survivors (Center for Substance Abuse Treatment, 2014).

Trauma and Emotional Regulation

Emotional regulation is defined as a complex set of skills used to facilitate a flexible approach to “processing, accepting, and responding to a range of emotions” (Berzenski, 2019, p. 2). If adequate emotional support is not received in childhood, emotional brain development can be compromised and cause deficits in emotional regulation abilities. Underdeveloped emotional responses can lead to a need to dissociate through substance use or other self-harming activities. The aim of therapeutic interventions is to increase the window of tolerance, increase awareness of internal and external frames of reference, and integrate different emotions (Schore, 2019).

Evidence-based Trauma Treatment

Evidence-based treatments include cognitive, exposure, and narrative therapies, eye movement desensitization and reprocessing (EMDR), and pharmacological supports. The research available on these therapies is generally based on early intervention strategies which means they are not always suitable for the more protracted effects of trauma. A more individualised conceptualisation is required for these cases. Cognitive approaches may be

more suitable for presentations of trauma-related chronic pain which is common in traumatised individuals (Schnyder & Cloitre, 2015).

Schore (2019) argues that a restructuring of the unconscious is necessary in recovery from early relational trauma and that the most effective way to achieve this is through an empathically attuned therapeutic relationship. He also asserts that creativity is essential for emotional wellbeing and notes that “Reik suggested that creativity specifically activates unconscious primary process mentation, which involves “sounds, fleeting images, organic sensations, and emotional currents” (Schore, 2019, p. 172). The right hemisphere of the brain embodies our early relational experiences. It plays a vital role in creative processes, relational bonding, affect regulation, and processing novel experiences (Schore, 2019).

Visual Journaling

“The diary taught me that it is in the moments of emotional crisis that human beings reveal themselves most accurately. I learned to choose the heightened moments because they are the moments of revelation.” (Anais Nin, as cited in Capacchione, 2015, p. 9). Visual or creative journaling is a process which allows the expression of emotions and unconscious processes through the creation of visual images. This can be done through media such as drawing, painting, collage, or using a multimedia approach. At its most basic level, the visual journaling process begins with introspection and interoception. It can be accompanied by breathwork or meditative practices. Feelings, emotions, and bodily sensations are expressed through visual imagery. Once the process is complete, a written or verbal exploration of the created image can take place (Capacchione, 2015).

Creative journals have been used as a metacognitive tool by some of the greatest minds; Leonardo da Vinci, Charles Darwin, Thomas Edison, and as previously mentioned, Carl Jung (Stone, 1998; Jung, 2019). Capacchione (2015) names Carl Jung as one of the inspirations for her creative journaling journey. She reports that many journal users begin

their practice in times of crisis or transition. People are driven to “do some serious soul-searching” (Capacchione, 2015, p. 9) when they are faced with feelings of “pain, loss, grieving, confusion, anger, fear, and/or insecurity” (Capacchione, 2015, p. 9). Creative journaling can be useful in helping individuals to process these overwhelming feelings. Exercises include various expressive forms, such as drawing, writing prose, poetry, letters or dialogues, creating graphs or charts, and the use of colour, image symbols, and abstract designs. Creative talent or training is not a prerequisite as the aim of these exercises is self-exploration (Capacchione, 2015).

Chapter Two

The Nonverbal Nature of Trauma

Psychological trauma can result in reduced verbal expression. Artistic expression can be used to access the non-verbal, somatically stored traumatic experiences (King, 2022). Peter Levine (1997) asserts that the development of our felt sense increases sensual and embodied experiences. It increases creativity and improves access to intuitive feelings that aid the trauma healing process. Creativity appears to be a common thread between healing somatic expressions, emotional dysregulation, and accessing the unconscious or nonverbal traumatic memories. Malchiodi (2005) asserted that expressive styles can vary from person to person and that expressive therapies can facilitate accelerated communication of the client’s issues. Creative means have been used to access the unconscious in psychotherapy since the earliest inceptions of talk therapy. Creativity and dreaming have been linked to creative problem solving and additionally mimicking the process of free association (DeAngelis, 2003). Jung believed dreams aided the restoration and maintenance of mental health (Weitz, 1976) and that the subjective unconscious experiences that are expressed through dreams should be interpreted without the use of preconceived ideas (Jung, 2012). This supports the

idea that interpretations of art in therapy should be client-led as it is a reflection of the client's unconscious experience (Moon, 2012).

Expressive Interventions in Therapy

Expressive therapies are considered to be mind-body interventions as they combine psychotherapeutic and sensory features. Neuroscientific and neurodevelopmental research supports the use of art and writing therapies in ameliorating post-traumatic symptoms and expressing traumatic memories. Writing has also been shown to reduce symptoms of chronic illness. Additionally, attachment research supports the use of expressive therapies in establishing healthier attachment patterns (Malchiodi, 2005). According to van der Kolk (Johnson, 1987), verbal therapy can present several challenges for traumatised individuals. Premature disclosure, intimacy, and presenting clients with feelings they cannot yet verbalise, can contribute to overwhelm and further avoidance. He also notes that in early treatment, patients are regularly unable to conceptualise their experience symbolically. Expressive arts counselling interventions have been shown to be useful in working with unconscious material and for assisting clients who cannot verbalise their experience. Visual journaling allows greater flexibility for expression and can be tailored to the client's individual requirements (Sackett & McKeeman, 2017).

Psychological defence mechanisms and neurological processing of traumatic events can result in access to memories being inhibited and present a challenge in trauma resolution. The unconscious representations and manifestations are better accessed using psychoanalytic techniques such as dreamwork and free association than they are through verbal expression (Johnson, 1987). "The symbolic and metaphorical content of the image is not found; it is revealed through the interactive process between client, therapist, and image." (Chapman, 2014, p. 114). Art therapy has been shown to be effective for the treatment of the adverse effects of psychological trauma. Gantt and Tinnin (2008) presented research findings that

support neurobiologically informed art therapy approaches as successful nonverbal treatments.

Traumatized individuals can experience a reduced capacity for self-expression through language (King, 2022). While written journaling has proven to be useful for stress reduction, it has also been shown to increase negative affect when used alone (Mercer et al., 2010). The visual journaling process provides a blend of visually creative and written expressions. This combination has proved to be particularly effective in emotional processing. (Deaver & McAuliffe, 2009; Mercer et al., 2010; Ganim & Fox, 1999).

Mindfulness and Somatic Exploration

The process of visual journaling integrates mindfulness and body awareness (Ganim & Fox, 1999). Mindfulness and body awareness promote connection to the unbearable physical sensations experienced by traumatized individuals. Avoidance of these sensations increases the risk of fight or flight systems becoming activated. Mindfulness calms the sympathetic nervous system and promotes interoception which is essential to trauma recovery (van der Kolk, 2014). The externalisation of traumatic images provides a safe distance between them and the client preventing overwhelm (Johnson, 1987). Mindfulness has also been shown to reduce post-traumatic symptoms in multiple studies (Vujanovic et al., 2013).

Self-exploration

Capacchione (2015) claims that the benefits of creative journaling include the expression of thoughts and feelings, a deeper sense of meaning, and richer relationships with others. She also maintains that the process can deepen one's relationship with the self. Loss of identity or sense of self is commonly reported by trauma survivors (Horowitz, 2015; Le, 2017; Pearlman, 1997). In her book, *The Creative Journal: The Art of Finding Yourself*, Capacchione (2015) explores self-identity using multiple journal prompts. Readers are

invited to create self-portraits, explore beliefs, and connect with value systems. Following on from this, she facilitates further exploration of the self in relation to others and deeper unconscious processes by delving into the intuitive insights of the “higher self” (Capacchione, 2015, p. 107).

As the literature suggests, the components of visual journaling can support various elements of trauma recovery. The individual elements of drawing, painting, collage and the use of multiple types of media leaves room for self-expression. Art therapy assists in processing traumatic experiences by collating the details of the event and expressing them in a way that creates a relationship between the verbal and non-verbal mind (Gantt & Tinnin, 2009). Due to the image-based nature of traumatic memories, art therapy can be powerfully cathartic and generally requires training in order to provide it (Appleton, 2001). While art therapy is traditionally facilitated by a certified art therapy practitioner (Regev & Cohen-Yatziv, 2018), creative interventions have been used in psychotherapeutic settings with positive outcomes for decades (Bieber & Herkimer, 1948).

King succinctly describes the impact of creative expression by stating “art is, in fact, all over the brain” (King, 2022, p. 4). What she is describing here is the involvement of multiple areas of the brain in artmaking and creativity. Creative expression uses sensory-motor features to access nonverbal traumatic images and emotions. It can also facilitate the integration of traumatic experiences by restructuring cognitive narratives. The overall aim of these interventions is to integrate the right and left hemispheric processes. This enables the expression of nonverbal right-hemispheric traumatic memories through left-hemispheric verbal functions. Consequently, the implicit is made explicit (King, 2022). Gibson (2018) discussed the role that art therapy plays in building autonomy in traumatised children and helped them to view traumatic events from a more powerful position. She analysed her responses to working with traumatised individuals to explore the effect visual journaling had

on vicarious trauma. She found that visual journaling enabled her to detect recurring themes in her process and that the written responses to these served to build resilience and reduce vicarious trauma symptoms.

Chapter Three

The Neurological Processes Behind Trauma and Creativity

Verbal Inhibition

Tripp (King, 2022) affirms that verbal expression alone is not sufficient in processing trauma. Recent treatment protocols may provide a more thorough resolution of traumatic memories by utilising sensorimotor protocols, somatically informed practices, and bilateral stimulation. Drawing and writing “require the synchronisation of cognition, language, and perceptual-motor skills.” (Harrington, 2007, p. 450). A research experiment completed using functional magnetic resonance imaging (fMRI) revealed bilateral activation in multiple areas of the brain. Moreover, the study demonstrated that “writing may actually inhibit some right hemisphere cortices related to language, while drawing does not.” (Harrington, 2007, p. 457).

Emotional Regulation

Early childhood trauma disrupts the development of the brain’s right hemisphere, reduces the volume of the hippocampus and corpus callosum, which in turn causes deficits in language processing and emotional regulation (King, 2022; Schore 2019). Chapman (2014) described the results of a study on the use of art therapy as a brief intervention with traumatised children in a hospital setting and noted that the intervention initially reduced avoidance symptoms but did not affect overall symptom reduction. This suggests that the interventions can be successful and highlights the requirement to implement long-term interventions in trauma recovery.

Recovering a Lost Sense of Self

Carl Jung, one of the earliest proponents of visual journaling in the field of mental health, stated that “There is no linear evolution; there is only a circumambulation of the self.” (Jung, 2019, p. 233). This suggests that the self is at the centre of our lived experience and in any process of growth, change, or recovery, we are simply moving closer to or further away from the self. Masterson (as cited in Schore, 2019, p. 155) believed that “the real self” expressed through creativity is used “to change old familiar patterns into new, unique, and different patterns”. Schore also notes the centrality of creativity in “self-actualisation and self-expression of one’s inner being” (Schore, 2019, p. 155). One of the many results of traumatisation is a loss of sense of self. This can present as low self-esteem or avoidance of contact with others. Horowitz (2015) posits that these disturbances can intensify other trauma symptoms, nonetheless, creating new narratives about the self can ameliorate symptoms and move the client towards post-traumatic growth. Creative journaling techniques such as those suggested by Capacchione (2015) may support clients in reducing identification with their trauma and discovering who they are through self-exploration. The book is ordered so that readers first explore who they are terms of their past and present using timelines, life maps, questioning their likes and dislikes, examining beliefs, creating self-portraits and mandalas. This is followed by an invitation to explore the inner critic and inner child, the shadow self, and somatic exploration. The final chapters look at how the reader relates to other people and objects. A deeper exploration of unconscious processes is manifested through dreamwork. The book concludes from a place of hope, encouraging the reader to consider their aspirations for the future. Schnyder & Cloitre (2015) express the relevance of client empowerment in all evidence-based trauma treatments. Giving clients a variety of treatment options allows them to choose what is best for them as individuals. Creative journaling can provide the flexibility required to tailor the client’s self-exploration and serve as an empowering tool long after therapy has ended.

The Efficacy of Visual Journaling

Since the original release of Capacchione's book in 1979, the creative journaling process has been used successfully in schools, medical settings, prisons, and with war veterans. Capacchione created a training program along with her colleague Dr. Marsha Nelson called the Creative Journal Expressive Arts Certification Training for professionals (CJEA). They co-authored a book specifically for cancer survivors having witnessed the positive outcomes in dealing with the trauma of cancer diagnosis.

In one study comparing the efficacy of art and writing as therapeutic interventions, the results suggested that art alone may not provide the same health benefits as writing. Cognitive organisation was present in the writing group but absent from the art group. However, the positive feedback from the art group suggested that there could be a higher continuation rate due to the enjoyment of art therapy techniques. The study concluded that a combined art and writing therapy approach may be more enjoyable to participants and therefore promote the continuation of therapy (Pizzaro, 2004).

Military veterans have long been the subject of post-traumatic stress research (van der Kolk, 2014). Mims (2014) completed a study in which military veterans were invited to participate in a visual journaling art therapy group with a view to reducing symptoms of "stress, anxiety, depression, and trauma." (p. 99). The research was completed using techniques introduced by Capacchione and resulted in the participants gaining greater self-understanding, acceptance, and confidence. Drawing elicited feelings of calm and participants stated that the process helped them to communicate their true selves. The provision of hope detailed in the results of this study points in the direction of post-traumatic growth being supported by the process. The use of visual art interventions in counselling has been linked to cathartic emotion release and the development of the client's ability to self-soothe (Whisenhunt & Kress, 2013).

Limitations, Barriers, and Solutions

In one visual journaling study, it was noted that in the initial stages the participants found it difficult to access visual thinking. This may prove as a deterrent in practice, however, the participants later confirmed that they found visual journaling to be valuable and the combination of writing and drawing to be particularly effective (Deaver & McAuliffe, 2009). Another study indicated that the benefits of visual journaling were not sustainable in lowering stress and affect levels when the participants were left to journal alone (Mercer et al., 2010). This suggests that the relational aspect of group or guided journaling might be more beneficial. This is worth considering in the context of the therapeutic relationship. Furthermore, therapist inexperience with materials may produce undesirable reactions from clients as different artistic mediums can increase negative affect in traumatised individuals (Chapman, 2014).

Supporting the Use of Visual Journaling in Psychotherapy

Biases against creativity and novelty are inherent in many educational institutions and organisations (Mueller et. al, 2012). Facilitating the use of visual journaling as a creative intervention requires examination of therapists' attitudes towards creativity. Training in the form of Continuing Professional Development (CPD) courses and further reading should be encouraged. As the evidence presented suggests, creative interventions can be useful tools in supporting trauma recovery. As Mueller et. al (2012) noted, implicit negative attitudes towards creativity are driven by the fear of uncertainty. There is safety in practicality. Creative thinking on the part of the therapist is essential to maintaining originality and adapting the learned modalities to present-day interventions (Lett, 1987). Kottler (2022) extols the virtues of creativity in therapy while noting that frequent resistance that arises. The uncertainty mentioned by Mueller (2012) is exacerbated by the requirement for pushing past boundaries and sometimes "breaking existing rules" (Kottler, 2012, p. 278). Schnyder &

Cloitre (2015) assert the importance of evidence-based practice, however, they subsequently note that “there ought to be scope for new, creative approaches, for which scientific evidence is not yet available.” (Schnyder & Cloitre, 2015, p. 4.).

Conclusion

This study aimed to investigate if visual journaling could support emotional regulation and symptom reduction in trauma survivors. The dearth of research using visual journaling as a therapeutic aid in trauma recovery was apparent in reviewing the literature. However, the available literature substantiates the theory that creative interventions support the accessing and processing of nonverbal traumatic memories. Positive emotional experiences produced by image-making can reverse negative emotions associated with trauma and improve emotional regulation. The combined drawing/writing process can produce bilateral activation which has proved to be advantageous in trauma recovery (King, 2022). Right brain creative processes combined with the relational right brain processes activated in therapy may result in safe exploration and resolution of traumatic memories. Consequently, the relationship between client and therapist can be strengthened by this exploration. The externalisation of images provides a safe distance for the client to view the issue and the supportive role of the therapist provides relational safety. Chapter one presented the evidence supporting the link between childhood trauma and an array of adult illnesses. This shows the importance of processing traumatic memories and regulating emotions. Visual journaling was presented as a method to support symptom reduction and emotional regulation. Chapter two analysed the value of this method in bypassing the nonverbal elements of traumatic memories and the benefits of mindful and somatic exploration. Chapter three presented the neurological processes behind trauma and creativity and, finally, reviewed the efficacy of creative journaling as a supportive therapeutic aid.

Visual journaling can be tailored to the individual and can provide a space for expression between therapy sessions (Stone, 1998). It may be used outside of the therapeutic space to provide the client with an unaided method for self-exploration and self-regulation. This can in turn empower the client, support their autonomy, and increase overall self-

confidence. Furthermore, it can help traumatised clients reconnect with the self and find meaning in their lives. While noting the importance of client empowerment and autonomy, it must be stated that the research suggests that group work may be more beneficial, particularly in the early days of practice, because of the benefits produced by sharing and connecting. The emotional and frequently overwhelming nature of trauma can pose challenges for clients who choose to begin their visual journaling journey alone. Ganim & Fox (1999) impressed the importance of seeking professional support from counsellors or psychotherapists to assist in processing these emotions. It stands to reason then that beginning the process in a supportive environment would increase the client's ability to explore emotions alone outside of sessions and even after the therapeutic relationship has ended. From an attachment perspective, the client-therapist relationship in its ideal form facilitates growth by mirroring a secure attachment space where the client can feel free to explore and come back to security. Eventually, developing enough independence and self-sufficiency to explore alone; to individuate (Jung, 2014), self-actualise (Rogers, 1995), and become secure (Bowlby, 2005).

Counselling and psychotherapy training courses vary in their educational approaches. Some favour experiential models and others rely on a more structured academic approach. While there are benefits and disadvantages to both, experiential training appears to acknowledge the importance of creativity over the practical science-based approach favoured by academia. Counsellors and psychotherapists risk developing vicarious trauma as a result of being exposed to trauma through their clients. Visual journaling is evidently a useful medium for processing vicarious trauma in helping professionals (Gibson, 2018). The author suggests that therapists wishing to implement the use of visual journaling in their practice may benefit from experiential learning by exploring the process as part of their self-care process. As creativity can help the traumatised individual become unstuck, it is similarly

necessary to embrace creativity on a larger scale to avoid stagnation in the field of counselling and psychotherapy.

While previous research has concentrated on the use of expressive interventions in trauma recovery, this review has focused on the process of visual journaling as a supportive aid. It has considered the nuanced neurobiological processes behind trauma and creativity, explored the practical implications in respect of symptom reduction, and the significance of right-brain relational processes. The study was limited by the secondary nature of the research and the paucity of direct analysis of visual journaling and trauma recovery. Conversely, it was bolstered by the wealth of knowledge on the benefits of neurobiologically informed art therapy. Although the literature review suggests that visual journaling may support emotional regulation and overall symptom reduction in trauma recovery, more current and extensive research is required and should be explored in the context of the therapeutic relationship. Comparisons between the group, individual, and therapist-supported visual journaling could provide a clearer view of its efficacy in varying situations. Qualitative studies exploring the attitudes of counsellors and psychotherapists towards the use of creative interventions may support awareness of biases inherent in education and practice. Increased recognition of scientific studies supporting neurobiologically informed art therapy and further education on the benefits of visual journaling may be advantageous in supporting trauma survivors through their recovery.

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