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Encountering Grief: Exploring the Value of Art Therapy for Bereaved Adults

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ENCOUNTERING GRIEF

Exploring the value of art therapy for bereaved adults

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This dissertation has been submitted in partial fulfilment towards the MA in Art Therapy at Cork Institute of Technology / Crawford College of Art and Design and is deposited in the Departmental library to be made available as a reference under rules of the library.

ABSTRACT

This extended literature review explores the value of art therapy interventions for bereaved adults, with a particular emphasis on its application for individuals with histories of insecure attachment. A review of literature in the areas of bereavement and attachment considers how attachment insecurities present as a risk factor for complications in the grieving process with a subsequent focus on the implications for therapeutic intervention. A review of literature in art therapy, related areas of psychoanalysis and creativity aims to highlight the distinct value that art therapy could offer this particular subgroup of bereaved adults in adapting to grief. An incorporation of models of bereavement such as the Dual Process Model (Stroebe et al., 1999) into the practice of art therapy can enrich perception of the processes of grief, potentially impact a bereaved individual's therapeutic engagement and influence the progression of adaptation. The triangular relationship in art therapy incorporating artist, art therapist, and art object, offers a dynamic platform for the inimitable support and containment of a bereaved individual. Art therapy can facilitate processes central to adapting to complicated forms of grief including the development of core emotional regulatory capacities and the faculty to symbolise.

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INTRODUCTION

The following dissertation takes the form of an extended literature review with the aim of exploring the value of art therapy interventions for bereaved adults. In reviewing current theories of grief, the predominant models of bereavement, complicated grief and research on insecure attachment, I explore the elements of therapeutic intervention that are essential in supporting bereaved adults. In subsequently reviewing literature in psychoanalysis, creativity and art therapy I seek to gain insight into the distinct benefits that art therapy can additionally generate that could potentially impact treatment and subsequent adaptation for the bereaved.

RESEARCH QUESTION

The aim of this literature review is to explore the distinct value art therapy can offer as a therapeutic intervention for bereaved adults. The primary question I am presenting and seeking to address in this dissertation is; 'How can art therapy potentially assist bereaved adults adapt to their grief?' I chose to conduct this research in the format of an extended literature review as this enabled developing a perspective from a wider context incorporating different disciplines and research areas such as bereavement theory, complicated grief and attachment insecurities in addition to a review of literature relating to art therapy. In the course of seeking to explore this research question a number of additional questions arose such as - 'Who acquires therapeutic assistance for their grief and why?' 'Why do bereaved people respond so differently to the death of significant others in their lives?' 'What makes grief therapy effective?' These questions directed me to consider another question – 'Does current bereavement research suggest anything is lacking in the practice of grief therapy?'

Investigation into these specific questions informed my continuing review of the literature, leading me to explore theoretical perspectives on grief and subsequently persuaded me to embrace an attachment perspective in more thoroughly exploring the benefits of utilising art therapy for bereaved adults.

RATIONALE

Grief, understood in human terms has existed as long as humanity itself and stands at the intersection of attachment and separation, love and loss. Evidence suggests that individuals and communities have used the arts in expressing loss ever since the Paleolithic era (Thompson & Neimeyer, 2014). Despite this reality, there are very few empirical studies conducted in the field of expressive arts therapies with bereaved clients with no studies focusing solely on the effectiveness of art therapy in promoting bereavement adaptation (Bat Or & Garti, 2019). Personally I believe an 'intersection' of grief and art therapy is of real importance, worthy of serious consideration, bringing value to the intimate relationship between past, present and future, other and self, vulnerability and agency.

STRUCTURE OF THESIS

The thesis is presented in five chapters and is structured in this way to differentiate themes from one another. The first chapter presents a theoretical background to be eavement theory in addition to briefly reviewing relevant psychoanalytic contributions and attachment theories. The second chapter reviews literature on complications in grief and the relationship between attachment insecurity and complicated grief. The third chapter focuses on reviewing literature with an emphasis on utilising the distinct features of art therapy in

terms of providing the essential foundations of a therapeutic intervention for bereaved clients. The fourth chapter reviews literature that emphasises concepts relevant to exploration through language, artwork, and imagination in the service of meaning formation and adaptation to change. The final chapter concludes the thesis in drawing the findings together and seeking to answer the primary question posed in the thesis by outlining a number of implications for professional art therapists.

METHODOLOGY

This thesis is an exploration of the potential benefits of art therapy in assisting bereaved adults adapt to the loss of a significant other. The chosen methodology for this thesis is an extended literature review with a hermeneutic approach. The interpretative hermeneutic approach is based on the assumption that meanings implicit in texts can be made explicit through interpretation and that this is a constructive process between the investigator's study and the text being studied.

HERMENEUTIC PROCESS

Seeing a literature review as a hermeneutic process makes it evident that there is no final understanding of the relevant literature, but a constant re-interpretation leading to a wider and clearer insight of relevant publications (Boell, 2010). As a hermeneutic process, Boell (2014) highlights how the literature review has a dual purpose; 'to establish, synthesise and critically assess a body of literature, while also creating a new understanding that serves to extend the scope of existing knowledge'. (2014: 268)

Hermeneutics is concerned with the iterative process of interpretative understanding. The understanding of any individual paper is not isolated but interpreted in the context of other papers from the wider literature. This interpretative movement back and forth between the parts and the whole in the process of understanding was described as the 'hermeneutic circle', and was first proposed by the German theologian Friedrich Schleiermacher (1768 – 1834). The hermeneutic circle emphasises understanding of both the text (part) and the context (whole) in continual revision and mutual co-production together. In addition, when a text is approached the interpreter's own experiential life inevitably arises through expectations, beliefs, values and concepts, resulting in what Gadamer (1979) termed a 'fusion of horizons'.

THEORETICAL ASSUMPTIONS

Crotty (1998) suggested that one aspect of the hermeneutic circle is the awareness that 'in order to understand something, one needs to begin with ideas, and to use terms, that presuppose a rudimentary understanding of what one is trying to understand'. As the researcher brings an initial understanding to the issue being examined, such 'understanding turns out to be a development of what is already understood, with the more developed understanding returning to illuminate and enlarge one's starting point'. (1998: 92)

In applying Crotty's description to this study and entering the hermeneutic circle, a priori knowledge of art therapy practice and a posteriori knowledge of meaning making through creative processes inform my interpretation of the literature being reviewed, while the literature influences my knowledge producing a synthesis or amalgamation towards new understanding.

Gadamer (1975) perceived understanding as a fusion or 'a projection of the horizon of the reader that meets the horizon of the text'. He signified the term horizon as the range of vision that included everything that could be seen from a particular vantage point. As more texts are engaged with, the fusion of horizons is broadened. In light of preunderstanding and preconception, Gadamer (1975) emphasised the importance of awareness of one's own bias in remaining open to the 'otherness' of truth or meaning of the text being reviewed.

From such reflection, an informed and clearer vantage point can lead to broader horizons.

In terms of this study I have assumed a theoretical position in exploring how art therapists can enhance a creative process in facilitating a restorative and personally assertive progression through the grief process. Theoretical assumptions from theories of grief that inform this study include the hypothesis that individual states of bereavement and the attendant activities of grief are socially inflected (Katz, 2001), influenced by social and

cultural factors that also impact the type of creativity engaged in by the bereaved.

METHODOLOGICAL LIMITATIONS

This study is taking a hermeneutic approach to the literature review, which acknowledges the interpreted relationship between a direct description of a lived experience and the structures of meaning that account for that experience (Kapitan, 2010). Patton (2002) highlighted how the meaning we attach to occurrences is contextual, so is dependent on the historical, cultural and scholarly contexts in which it was created and subsequently interpreted. As could be considered to be the case for many concepts which are discussed and analysed, Walter (2006) argued that complicated grief is socially constructed. From this perspective, factors such as diversity and deviation are seen as relative rather than absolute, and definitions of complicated grief are set within a culture-specific context.

CHAPTER 1. THEORETICAL BACKGROUND

'The holiest of all holidays are those kept by ourselves in silence and apart; the secret anniversaries of the heart.'

Henry Wadsworth Longfellow, (1878)

INTRODUCTION

The following chapter commences with a brief summary of theories of grief and models of bereavement before reviewing the literature on relevant perspectives from a psychoanalytic approach. A subsequent review of the literature briefly considers the extension of Bowlby's attachment theory to loss in adulthood. Finally the chapter contains a brief review of the Dual Process Model of Bereavement (Stroebe & Schut, 1999).

GRIEF & BEREAVEMENT THEORIES

The study of grief emerged in psychology with Freud's (1917) *Mourning and Melancholia*. His theory of grief work was ground-breaking, establishing a foundation and set the assumptions for the understanding of grief in the western world for many subsequent decades. These assumptions rested on a cathartic cognitive and emotional 'grief work' process of de-cathexis from a loved one and was assumed to be universally applicable. The influential publication of Kübler-Ross's (1969) *On Death and Dying*, an intended description of the psychological adjustment to dying, was widely utilised as a description of stages in the course of grief. This was followed by Worden's (1982) *Grief Counselling and Grief Therapy*, which introduced a hugely influential model where healing from loss involved the completion of a series of tasks.

Over the past thirty years, assumptions about the process and outcome of grief have been challenged as researchers have proposed new theories incorporating research from areas such as attachment, stress and trauma theories while other researchers have focussed on developing bereavement specific models (Lister et al., 2008). Assumptions including the idea that all bereaved people need to engage in 'grief work' in order to work through the 'stages' of grief were challenged as research increasingly raised questions about the efficacy of grief interventions and the models on which these were based (Allumbaugh & Hoyt, 1999; Kato & Mann, 1999). Subsequent research emphasised an appreciation of more complex patterns of adaptation (Attig, 1991) variation in the responses of the bereaved (Bonanno et al. 2004; Jordan & Neimeyer, 2003) and the need to design interventions that fit with the specific needs of the bereaved (Neimeyer & Jordan, 2013; Zech et al., 2010).

As a result trends in bereavement research have gradually progressed from the earlier strong emphasis on detachment or decathexis toward an increasing exploration of the restorative, reparative, creative potentials accompanying loss. Contemporary focus centres on how human faculties themselves shape and create adaptive processes in undertaking the central tasks of 'meaning reconstruction' (Neimeyer, 2001), the continuity of self-experience through change, in addition to preserving the internal relationship to a deceased figure of significance (Kaplan, 1995; Klass et al., 1996). In emphasising the diversity of factors that influence grief response and the complexity of bereavement, several models have emerged as influential including; the *Dual Process Model* (Stroebe & Schut, 1999), the *Meaning Reconstruction Model* (Neimeyer, 1998), and the *Two Track Model* (Rubin, 1999). While the Two Track Model focuses on the factors that affect bereavement, the Dual Process Model concentrates on the dynamic process of bereavement. The Meaning Reconstruction model emphasises the reconstruction of meaning in bereavement as the primary focus in grieving.

PSYCHOANALYTIC PERSPECTIVES

Freud (1923) identified the separation of infant from mother as the first and most significant of losses in life which serves as a trigger for the unconscious imagination. Experienced as both exhilarating and frightening, the infant compensated for such loss by re-creating her in the realm of fantasy, creating an object out of the mother. Klein (1937) highlighted how

manifestations of selfhood emerged from attempts to negotiate the depressive position first experienced in childhood where creative attempts at reparation are made for the damage done through destructive fantasies about the mother. The loss of an important love object in adulthood leads to a reactivation of the depressive position of infancy and the mourner experiences a wish to restore the lost and damaged 'good object' through a process of reparation re-creating internally what was felt to be lost. Segal (1952) identified the role of symbols in making such reparation through restoring and recreating the lost object in symbolic form;

Every aspect of the object, every situation that has to be given up in the process of growing, gives rise to symbol formation. In this view symbol formation is the outcome of a loss, it is a creative act involving the pain and the whole work of mourning.' (1952: 202)

Segal (1991) expressed how the capacity to symbolise required the ability to contain the anxiety of missing the object. In describing how an infant can only think or symbolise when he recognised the absence of the object, she referred to Bion's (1970) succinct description 'no breast – therefore a thought'. Segal (1991) suggested that the container-contained relationship was at the heart of creating this capacity for symbolic thought.

Coleman (2010) proposed that the most fundamental requirement of mourning was the capacity to symbolise absence and that difficulties in resolving the depressive position may be due to difficulties in symbolic representation as a result of a lack of internal containment, rather than an excess of hatred or destructiveness. In this context Coleman highlighted the intersubjective origins of the capacity to symbolise, as through the process of maternal containment the infant develops the means of representing to itself that which is absent. As such he expresses how the symbol emerges as a function and instrument of communication existing between, rather than inside people. In applying this to the therapeutic setting and referencing Ogden's (1994) intersubjective *analytic third* - a jointly created unconscious life of the analytic pair, Coleman (2010) emphasised the fluid nature of symbol that reflects the ever shifting dynamics of relationship in a greater way than is possible through verbal language.

ATTACHMENT THEORY & BEREAVEMENT

One feature of Freud's (1917) account of mourning that has been most widely contested is the detachment aspect of his theory. Bowlby's (1980) extension of attachment theory into the area of grief and mourning was a significant aspect of his theoretical work and on the basis of his comprehensive review of research on attachment and loss, concluded that a continuing sense of the deceased's presence was not pathological and could be found in many healthy individuals. Bowlby's concept of the internal working model which referred to individuals' internal representations of their experience of attachment relationships provided the foundation for a new method of studying adult attachment styles (Main, Kaplan & Cassidy, 1985). Importantly however it was acknowledged by Bowlby (1988) and emphasised by Consedine et al. (2012) that the internal working model was not limited to attachment but acts as a developing representational model of self, others and the world that incorporates ongoing life experiences and influences mechanisms of behaviour, emotion, and distress regulation. Main (2000) identified how the internal model or personal representation of an individual's experience was crucial in understanding adult attachment behaviour and how this corresponded to differences in displays of attentional flexibility between adults with secure and insecure attachment histories.

DUAL PROCESS MODEL

The Dual Process model of bereavement (DPM) (Stroebe & Schut, 1999) posits that healthy grief involves a process of *oscillation of attention* on the part of the bereaved from thoughts and feelings relating to the loss (a loss orientation) to a redirection of psychological and practical attention away from the loss (a restoration orientation). Incorporating Bowlby's (1980) assertions regarding the importance of flexible attention in healthy adult bereavement, Stroebe & Schut (2005) elaborated on the DPM and proposed that insecure attachment patterns contributed to specific types of disturbances in oscillation, which in turn were related to predictable problems in adaptation to loss. The behavioural patterns identified by Bowlby (1980) as insecure/anxious and insecure/avoidant were incorporated into the DPM. These patterns were explored by Mikulincer & Shaver (2007) who found that the secondary attachment strategies that insecurely attached children employed to emotionally regulate their separation distress such as hyper-activation (anxious attachment) or deactivation (avoidant attachment) can be functional in childhood but problematic in adulthood. In cases where an

oscillation of attention becomes a problem they suggest the need to support the bereaved in alternating the periods of attention to and away from the emotional reality of the loss.

SUMMARY

New paradigms in bereavement research have progressed beyond the constraints of traditional grief theories and the subsequently prevalent assumptions about mourning as a predominantly insular and inevitable sequence of emotional transitions. In contrast, newer models of bereavement such as the Dual Process Model (Stroebe & Schut, 1999), the Meaning Reconstruction Model (Neimeyer, 1998), and the Two Track Model (Rubin, 1999) view grief as a complex and active process that is intensely personal and inherently social. Research conducted into grief and loss has expanded in scope and depth incorporating aspects of stress, trauma, and attachment theories in investigating the multiple sources of both resilience and complication in bereavement. Psychoanalytic literature has evolved from Freud's delineation of the goal of mourning as the detachment of libidinal ties from the deceased, to a reparative emphasis on reconfiguring and internalising aspects of the relationship with the deceased. The capacity to symbolise the relationship is a crucial factor in undergoing such work in mourning. With his extensive work on attachment and loss, Bowlby proposed the internal working model and its continual influence on adult life arguing for the significance of continued attachments throughout the course of life as a feature of effective mental health. The consideration of a bereaved adult client's level of attachment security or insecurity serves to inform the development of an individual therapeutic approach relevant to the client's distinctive struggles and needs. The Dual Process Model as an attachment informed bereavement model places central focus on the bereaved individual's ability to flexibly attend to the oscillation required in the functional processing of grief.

CHAPTER 2. COMPLICATIONS IN BEREAVEMENT

'While bereavement is a universal phenomenon, the experience of grief is not.'

William Worden, (2009: xiii)

INTRODUCTION

This chapter initially reviews literature on complicated grief, its prevalence, related problems and treatment. Following this a brief review considers attachment literature in relation to grief complications and a survey of the physiological effects of grief on the bereaved including implications for attachment reorganisation in therapeutic interventions including art therapy.

WORKING WITH THE BEREAVED

Worden (2009) distinguished 'grief counselling' from 'grief therapy' in describing grief counselling as assisting the bereaved with uncomplicated grief to adapt in their mourning, a function traditionally facilitated by customs such as funeral rituals and support from family, community, and clergy. Worden described grief therapy as employing specialised focused techniques in working to identify and resolve conflicts of separation for those with complicated grief reactions. Such complications are discerned when the grief reaction is prolonged or manifests itself through bodily or behavioural symptoms or as a grief response outside the range of cultural or psychiatrically defined normality. The practice of grief therapy commonly occurs in psychotherapy across different theoretical frameworks particularly by therapists with additional training in the area of grief and bereavement.

COMPLICATED GRIEF

The term 'complicated grief' has been utilised widely across bereavement research in describing symptoms that persist for bereaved persons beyond six months of experiencing loss including intrusive thoughts or images of the deceased, intense and persistent yearning, excessive rumination related to the death and recurrent feelings of anger surrounding the death (Shear & Mulhare, 2008; Simon, 2012). Complicated grief was included in the 2013 publication of the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) as 'Persistent complex bereavement-related disorder' in a section entitled 'Disorders for further study' (American Psychiatric Association, 2013). The World Health Organisation (WHO) included 'Prolonged grief disorder' as a new mental health disorder in the 11th edition of the International Classification of Diseases (ICD-11) in 2019 (World Health Organisation: 2019).

In synopsising their comprehensive review of bereavement research, Stroebe et al. (2008) highlighted how only a minority of bereaved persons suffer from complicated forms of grief and require professional assistance. Whereas the majority of bereaved individuals experience a period of suffering and possibly some dysfunction, they are able to adjust to their loss without extended impairment or specialised support (Bonanno & Kaltman, 2001). Studies have estimated varying figures that between 10% - 20% of bereaved people experience complicated grief (Byrne & Raphael, 1994; Middleton et al., 1996; Prigerson et al., 1999; Prigerson & Jacobs, 2001), that between 10% - 15% of the bereaved exhibit complicated grief reactions (Bonanno & Kaltman, 1999, 2001), or that between 7 – 10% of bereaved individuals experience complicated grief or persistent complex bereavement disorder (Lundorff et al., 2017; Nielsen et al., 2017; Prigerson et al., 2009).

Research has emphasised how individuals with complicated grief reactions typically experience difficulties re-engaging in their lives due to guilt, unresolved inner conflicts and inadequate processing specific to the death or deceased (Middleton et al., 1996; Prigerson & Jacobs, 2001; Simon, 2012). In the absence of effective treatment, complicated grief may result in chronic medical or mental health problems (Prigerson et al., 2009) and an increased risk for suicide ideation and suicidal behaviours (Dell'osso et al., 2011). Two separate studies examining the efficacy of therapeutic grief interventions both concluded that the more complicated the grief process, the greater the prospect of effectiveness for therapeutic

intervention (Schut et al., 2001; Currier et al., 2008). Shear & Shair (2005) found that personalised treatment interventions which utilised valid methods displayed the best results for those experiencing complicated grief.

INSECURE ATTACHMENT

In the past two decades researchers have increasingly incorporated different aspects of attachment theory into the study of bereavement. Attachment orientation, in particular has been recurrently recognised as an influential factor in an individual's response to loss (Burke & Neimeyer, 2013; Parkes & Prigerson, 2010; Silverman, Johnson, & Prigerson, 2001; Stroebe et al. 2005; Thompson, 2010; Vanderwerker et al., 2006; Wijngaards-de Meij et al. 2007; Zech & Arnold, 2011). A number of theorists have suggested that attachment insecurities present a major risk factor for complications in the grieving process (Fraley & Bonanno, 2004; Lobb et al., 2010; Maccallum & Bryant, 2013; Meier et al., 2013; Mikulincer & Shaver, 2008; Shear & Shair, 2005, Stroebe et al., 2010). A systematic review conducted on forty empirical studies of complicated grief found evidence that traumatic death, excessive dependency on a spouse, and insecure attachments were identified as the three significant primary predictors of risk for complicated grief (Lobb et al., 2010).

DISORGANISATION

Sbarra & Hazan (2008) emphasised how initial acute grief reactions widely experienced by many bereaved people can present as disruptions in sleep, appetite, and energy levels and underlined the adaptive function of grief as such symptoms are part of a state that aids physiological recuperation. Kiecolt-Glaser et al. (2002) pointed to the effects of the persistence of such an acute phase negatively impacting levels of stress hormones and compromising immune functioning affecting mental and physical health. Mikulincer & Shaver (2008) interpreted grief as a dysregulation of multiple biological and psychological systems and highlighted how insecure attachment compromised the ability to flexibly attend

to thoughts and feelings related to the loss of an attachment figure and in accommodating the changes brought about by the loss.

Sbarra & Hazan (2008) emphasised the role of the physiological system in a loss and restoration process where a breakdown in a system of healthy oscillation between the two characterises the complications in grief. Initial stages of therapeutic intervention at this point would focus on disturbances in an oscillation of attention between loss and restoration as is emphasised in the Dual Process Model (Stroebe & Schut, 1999) moving from a dysregulated state to a more organised stress response (Mikulincer & Shaver, 2008) as a prerequisite to work focussed on integration of the loss including meaning making (Currier et al., 2008; Neimeyer, 2012).

The Dual Process Model of Bereavement (Stroebe & Schut, 1999) emphasised the need to help bereaved clients who lacked core emotional regulatory capacities to develop these abilities. While this work has been identified as important for all bereaved clients (Mikulincer & Shaver, 2013) it is viewed as a necessary foundation for individuals who have experienced a traumatic loss or those with unresolved early relational trauma or loss (Briere et al., 2012; Pearlman & Courtois, 2005; Pearlman et al., 2014). The loss of an attachment figure presents challenges for most people, however these challenges are amplified for those who may have less developed internal resources or external support. Kosminsky & Jordan (2016) highlighted how resource deficits are among the factors that complicate the grief of insecurely attached individuals and in addition the defensive strategies that many avoidant individuals employ frequently present obstacles to treatment. Such challenges therefore highlight how the establishment of a strong therapeutic bond based on emotional safety and trust with a bereaved person who is insecurely attached is essential (Zech & Arnold, 2011).

ATTACHMENT REORGANISATION

Bowlby (1988) underlined that therapeutic change begins with the formation of a secure attachment bond with a therapist who provides a secure base for the client as a necessity for exploring painful experiences. This security applies also in terms of exploring and reworking mental representations of self and others (Mikulincer & Shaver, 2012) and the bereaved client's assumptive world (Neimeyer, 2012). Kosminsky & Jordan (2016)

emphasised the role of the therapist as a transitional attachment figure empathically attuned to the needs, and limitations, of the bereaved client in carefully adjusting the bereaved person's exposure to painful reality and gradually assisting in increasing their capacity to tolerate and regulate painful emotions, thoughts, and memories.

Kauffman (2012) elaborated on this empathic process whereby the therapist, in being open and attuned to the client, provides a container wherein the client may begin to safely experience pain that had in some way been closed off and stuck within. By registering the client's grief as a mirror, the client may experience his or her grieving self as the therapist validates and encourages the pain of grief and the self of the griever. In terms of the provision of such a safe container, Mikulincer & Shaver (2012) noted that bereaved clients with anxious dispositions who frequently display hyper-activating distress responses can moderate their habitual responses as a result of increases in felt security accomplished through symbolic sources.

In contrast, Mikulincer & Shaver (2012) asserted that clients who had developed a defensive avoidant pattern of relating tended to encounter greater difficulty in attachment reorganisation and meaning making. Cassidy et al. (2009) conducted research into such defences and found that the habitual protective shield employed can be softened, if temporarily, through an infusion of felt security, hence providing the potential for exploration of inner pain. Eberhart & Atkins (2014) noted that in the case of art therapy, such therapeutic attunement extended beyond the dyadic relationship to the artistic product and to the process of the art making experience. In such an environment, both process and product when met with presence offer the possibility of necessary connection and security.

SUMMARY

A minority of bereaved individuals suffer from complicated forms of grief. Research studies conducted in the 1990s approximated this figure at between 10 – 20% of bereaved persons (Middleton et al., 1996; Prigerson et al., 1999) however studies as recent as 2017, have reassessed this number at between 7 -10% of bereaved individuals (Lundorff et al., 2017; Nielsen et al., 2017). Research examining the efficacy of therapeutic grief interventions revealed that treatment was most effective for those experiencing multifaceted

complications, with personalised interventions using well-founded methods demonstrating the best results. A growing recognition is emerging in bereavement research that attachment insecurities present a significant risk factor for grief complications. Such complications serve to prolong a dysregulation of the physiological system and compromise the bereaved persons' ability to attend flexibly to cognitive and emotional aspects of the loss and in adapting to subsequent changes in their lives. Experiencing a therapist as a transitional attachment figure closely attuned to a client's needs, limitations and related attachment histories can serve as a necessary container for clients in safely exploring painful emotions, thoughts and memories. In art therapy the art making process itself can serve as a practice of presence where therapeutic attunement extends beyond the client-therapist relationship to a triangular relationship incorporating the art product or image. Such dynamics may serve as formative factors in creating a secure base and assist in reducing the defences of avoidant clients who have developed an avoidant pattern of relating and who have been identified as encountering greater difficulty in attachment reorganisation and meaning making.

CHAPTER 3. RELATING WITHOUT

'Perhaps what I have lost 'in' you, that for which I have no ready vocabulary, is a relationality that is composed neither exclusively of myself nor you, but is to be conceived as 'the tie' by which those terms are differentiated and related.'

Judith Butler, (2003:22)

INTRODUCTION

This chapter commences with a review of literature that advances grief as a potentially creative endeavour. Subsequently the review of literature focusses on three particular aspects of art therapy with bereaved clients including the distinctive triangular relationship, multisensory regulation through engagement in art therapy and the potential impact of materials on affect regulation and reparation.

CREATIVITIY & CONTINUATION

Moules et al. (2007) explored the idea of grief as an experience of connection rather than severance of a relationship and proposed how the experience of grief related to acknowledging and attending to the evolution of personal connections. From this perspective, the connective structure of everything changes in grief and the bereaved individual is required to understand the relationship with the deceased in a changed way and in doing so, to understand, revise and engage in changing the relationship with one's self, family, society, and with grief itself. The conceptualisation of grieving as a creative endeavour making meaning of the experience through re-creating and re-connecting relationships seems akin to what influential grief theorists have described as reconstructing a fragmentary life picture (Parkes & Prigerson, 2010) or the creative and necessary rediscovery of identity (Worden, 2009). Quinodoz (2008) illustrated how the esteemed psychoanalyst

Hanna Segal viewed therapeutic sessions as an aesthetic experience, getting in touch with terrible things, containing and then sublimating them, leading to the point of restoration. This also reflects how Segal (1952) viewed the necessity of acknowledging loss and mourning for the creative impulse to exist;

It is when the world within us is destroyed, when it is dead and loveless, when our loved ones are in fragments, and we ourselves in helpless despair – it is then that we must re-create our world anew, re-assemble the pieces, infuse life into dead fragments, re-create life.' (1952: 199)

TRIANGULAR RELATIONSHIP

The distinct therapeutic relationship in art therapy comprising the client, image and art therapist has been conceptualised as a triangular relationship. This has been explored in terms of the relationship dynamics between client, therapist and image (Wood, 1990; Case, 2000; Skaife, 2000). Schaverien (2000) underlined how the power and formative nature of the art object is mediated within the boundary of the therapeutic relationship, creating a unique and dynamic field where transference interpretations can take place in relation to the art object in addition to the client-therapist relationship. She suggested that the main feature of art therapy is the client's non-verbal engagement with the art object which offers a means through which the space between inner and outer worlds can be negotiated. Case & Dalley (2006) observed how the image can become the focus through which the transference relationship is explored as the image can hold the significance of feeling and act as a container for fantasies, anxieties and unconscious processes that emerge into consciousness for the client.

In an exploratory study examining how art therapists perceived the role of the art medium in the treatment of bereaved clients, Bat Or & Garti (2019) found that three central themes emerged which exemplified the triangular relationship in art therapy. The first theme presented in the client-artwork axis, emphasised the intrapsychic processes of grieving using the art medium. Art therapists participating in the study highlighted how they perceived the medium as providing a platform for processing affect and as a strong container for the expression of intense and primal emotions. In addition it was noted that emotions not deemed to be socially legitimate such as anger towards the deceased found expression

through the non-verbal client-artwork axis. The potential implications of this for processing disenfranchised grief including losses that tend to be unacknowledged and invalidated by society (Doka, 1989, 2008) were underlined by the authors.

The second and third themes presented in the study as relational aspects, referred to the perception of the client's artwork as a bridge or communication channel with the art therapist (therapist - artwork axis) and subsequently influencing the therapeutic relationship.

Significantly, participants referred to the therapeutic impact of the clients' acts of depositing artwork that embodied their grief into the room and minds of the art therapists. Participants also affirmed that bearing witness to art expressions enabled the establishment of a closer relationship (therapist – client axis) which facilitated in some cases a shared space in creating a new narrative, reconstructing the client's relationship with the deceased. The provision of containment for the bereaved clients as mentioned in the study was an important factor in allowing the expression of painful affects and non-verbal memories relating to loss through art making, in addition to the therapist acting as container for the clients experiences of grief. Examples provided in the study exemplify what Schaverien (2000) described as an active dynamic field whereby the three parts of the triangle interact equally.

MULTISENSORY REGULATION

Research has indicated that the loss of a loved one can result in detriments to the physical health functioning of insecurely attached bereaved individuals, particularly those with avoidant attachment orientations (Meier et al., 2013; Wayment & Vierhaler, 2002). Mitchell (2012) described a feedback loop where physical reactions serve to validate grief for some bereaved individuals, particularly for those unable to access their emotions. Theories of attachment primarily view instinctive social behaviour as serving biological and evolutionary survival functions (Cozalino, 2006; Siegel, 2007, 2010). Aragno (2003) acknowledged the depth of Bowlby's research furthering the understanding of the underlying biological instinctual response and adaptation to loss;

'All genuine mourning reaches deeply archaic layers of the personality, but for those with lesions from real early loss or separation traumata, the current loss reopens profoundly embedded scars. Later losses reawaken the early traumatic affects, generally encoded

organically, their reliving obliging a reworking of symptomatic sequelae often with concomitant serious physiological repercussions'. (2003: 19)

With the preverbal nature of infancy, most attachment communication is through gesture, touch, voice tone, scent and gaze (Schore, 2003). The sensory pathways established early in life set down a template for multisensory and potentially aesthetic forms of regulation (Franklin, 2010). Drawing from his own extensive experience as an art therapist, Moon (2007) highlighted how the painful events that lead individuals to seek art therapy are also visual, auditory, olfactory and sensual in nature, and that verbal therapeutic intervention alone cannot be expected to resolve or heal such painful experiences. He referred specifically to the integration of the senses within art therapy in the physical procedures of making art which revolved around sight, sound, movement and touch. Similarly, Ogden et al. (2006) expressed the importance for therapeutic intervention to activate the body, emphasising how working with emotion and its connection to physical sensations in the body assists with affective learning, strengthening ego flexibility and a deeper understanding of more complex emotions.

Gudmundsdottir (2009) emphasised the physical symptoms or psychosomatic reactions which some bereaved parents and siblings experienced in relation to the loss of a family member, suggesting the persistence of such symptoms reflected a maladaptive coping style that required attention in accessing the psychological pain underlying the symptoms. Her study underlined the value of body based arts interventions and influenced Arnold's (2020) research in specifically exploring how engagement in visual art processes utilising a whole body approach could serve in navigating experiences of loss for practicing art therapists. This pilot study acknowledged the importance of physical engagement with diverse art materials in providing a means for bereaved participants to engage the senses, reconnect attention to the body and to somatically release and discharge their grief.

MATERIALS

Moon (2010) expressed how the materials used in the context of art therapy are the primary elements through which meaning is made, as intermediaries between private ideas, thoughts, feelings and concepts, and their external manifestation in actual, sensual form. She stressed

how materials serve as the sensory-based, tangible equivalents of the vocabulary used in verbal dialogue and as such, an intentional consideration of the potential impact of materials on clients, similar to the impact of the therapist's choice of words, was crucial. In a study focussed on the subjective experiences of art therapists working with bereaved clients, Garti & Bat Or (2019) reflected on art therapists' interventions in corresponding to the changing needs of clients in processing their grief. In particular they highlighted the need for careful intervention with regard to the choice of art materials and adeptly related the control of materials to the oscillations of approach and avoidance of the affective experience in loss, as identified in the Dual Process Model of bereavement (Stroebe et al., 2005).

Bat Or & Megides (2016) explored the therapeutic qualities of found objects as an aspect of the art therapy intervention in relation to the treatment of trauma and loss. The found objects served as the raw materials which the clients subsequently transfigured into artwork. This practice was conceptualised by the authors as bringing the real (found object) into the 'potential space' (Winnicott, 1971) and the real into a status of a symbol (Ogden, 1993). They speculated that the use of the real objects as symbols might reduce the distance between the art and the real, or between the symbol and the symbolised. Giving voice to injury and pain, Bat Or & Megides (2016) also integrated the use of damaged objects in their exploration and related this incorporation to Segal's (1957) description of art as a reparation activity in the course of psychic development. In offering bereaved clients damaged objects as raw materials for creative work, the authors integrated theory with their own clinical insight in communicating how deconstruction held charged potential to create the new.

SUMMARY

In acknowledging the biological, psychological and social challenges of grief and the primary importance of attending to affect regulation as a foundation for exploring grief further with bereaved clients, art therapy contains specific features that extend its potency as a therapeutic intervention. The value of a dynamic and evolving triangular relationship is particularly evident in the support and containment functions provided to the client. When considering the diversity of attachment histories, patterns and relational styles of bereaved clients, the triangular frame serves to support the individual needs of clients. Within this frame it was highlighted how the client is facilitated in the release of emotions, some of which may only ever find expression through the non-verbal art making process. In cases where the wider

society or the individual does not acknowledge their grief or previous losses, art making may enable the expression of such non-verbal and non-symbolised experiences. An under-explored area of study is the integration of the body in art therapy interventions with the bereaved. Research in attachment and other areas highlight the potential detriments to the physical health of bereaved people who could benefit from art therapy interventions that encompassed an active engagement of the senses and body in the art making process. The implications for art therapists include increasing awareness of how a client's insecurities may physically manifest and how this can be appropriately met and regulated through engagement in the art therapy environment. The role of the art therapist in closely corresponding to the changing needs of bereaved clients in processing their grief is evident in particular through the overseeing of the art materials, attuning to the client's cycles of oscillation of approach and avoidance of affective experience. The use of found and damaged objects in the art therapy session was speculated by Bat Or & Megides (2016) as potentially reducing the space between the real and the art bringing the bereaved client into a 'potential space' for greater engagement in symbolisation and reparative activity.

CHAPTER 4. EXPLORING WITHIN

'The metaphor, then, distils from reality - situations the deeper, underlying aspects of life, for whose sake alone art creates images of reality.'

Rudolf Arnheim, (1966: 279)

INTRODUCTION

This chapter briefly reviews literature on the restrictions of language in engaging the bereaved in exploring grief. Subsequently a review of literature focuses on the use of metaphor in therapeutic intervention, its function in grief and capacity for connecting with the client beyond their defences in art therapy. Following this a review of literature from a broader perspective considers interpretations of imagination and how its original representations are important to the process of adaptation. Finally a review of literature explores the relational significance of symbolisation in adapting to grief.

LIMITATIONS OF LANGUAGE

Aragno (2003) noted how language assists in organising, containing and mediating life experiences but conversely also constrains, defines and influences how these experiences are lived. In the introduction to the second edition of his influential book 'How We Grieve: Relearning the World', Attig (2011) explained that he wished he had a vocabulary of ego, soul and spirit available to him when he wrote the first edition. He subsequently described how the bereaved along with their ego needs, have other deeper needs of soul reflected in their grief reactions and that the ego is helpless in trying to deal with mysteries in the human condition such as death, love and suffering as if they were soluble problems. Therapeutic interventions that emphasise verbal language can collaborate with the ego's attempts to

remain in control, gain insight and command over what it does not fully understand. In contrast, Robbins (1994) highlighted how many creative arts therapists prioritise working with a language of the unconscious that allows for ego flexibility and an overview of patterns of attachment;

"Symbol and image have become the inner codifications of my experiences. They defy the reductionism of words as they hold and mirror the complexity of my early attachments, link past to present, and point to my future. As organizer of my past, this world of symbol and image holds my polarities of hate and love, bad and good." (1994: 4)

Significantly, a number of studies have found that an over-reliance on verbal expression has been ineffective in fully supporting the bereaved participant's abilities to share personal loss experiences (Iliya & Harris, 2016; Kouriatis & Brown, 2014). An alternative approach as expressed by Beyers et al. (2017) involves opening to reverberating images in attending to and allowing grief to express itself. Rather than verbal expression, this focus on listening prioritises enabling an individual to enter into the sadness so as to hear what it may tell about the deceased, the bereaved, the death and its meaning. Such listening interacts with soul's own knowing (Moules et al., 2007) and destabilizes an individual's habitual identity, reshaping the relationship with the deceased and oneself (Beyers et al., 2017). This shift in emphasis from primary attention on conscious expression to an increasingly receptive position reflects Attig's writing about the limitations of ego and represents a willingness to explore the unconscious and oneself more deeply.

METAPHOR

Rosenblatt & Bowman (2013) emphasised that one of the most underdeveloped areas within grief and bereavement research is the therapeutic use of metaphor and stressed how assumptions of understanding are frequently made instead of being skilfully followed by practitioners and researchers. Lakoff & Johnson (1980) argued that metaphor structures how we perceive, how we think and what we do. They also claimed that image schemas underlie the metaphors people construct and are themselves grounded in bodily experiences in the world. As such metaphors can be viewed as critical to the process of making sense of

our experience. Kopp (1976) argued the case for three ways to know something; through rational thought, empirical observation and metaphor, highlighting;

'In this mode we do not depend primarily on thinking logically nor on checking out our perceptions. Understanding the world metaphorically means we depend on an intuitive grasp of situations, in which we are open to the symbolic dimensions of experience'. (1976: 21)

Nadeau (2006) highlighted how the bereaved frequently choose metaphoric words in describing their suffering and that such metaphors reveal how the loss is being perceived and experienced at any point in time. She emphasised that this provides a less threatening way of discussing the experience and importantly that metaphors used by the bereaved can be utilised to explore alternative ways of responding to the loss. Nadeau (1998) examined story as a metaphorical form used by individuals and families to make sense of experiences of loss, referencing Shah (1969) who underlined how the use of story permits communication with the non-verbalised truth behind the customary limitations of familiar dimensions. Importantly with regard to storytelling, the 'adult attachment interview' developed by Main et al. (1985) established the link between attachment and narrative. Individuals with secure attachment histories possessed greater capacity to tell cohesive stories while those with insecure attachments more often told shorter, fragmented and often entangled stories. This study highlighted how storytelling can reflect ways in which adults regulate their emotions.

BY-PASSING DEFENCES

Barker (1985) asserted that the power of metaphor lies in the ability to reach an affective component of the personality which is overly defended to be reachable. As metaphor can encourage a lessening of resistance, Nadeau (2006) reflected that expressions of fear and anger which may have been socially engrained as unacceptable can find expression or be revealed through metaphor. This issue appeared in research conducted by Bat-Or and Garti (2019) who found that powerful emotions such as anger at a dead parent and similar feelings that are not deemed legitimate in the client's social environment can resurface through the nonverbal medium of art therapy. Similarly in emphasising the metaphor, Wise and Nash (2012) affirm the resourcefulness of art therapy to bypass verbal defences and internal censors; censors which they claim often reinforce habitual narratives that can mask true

emotional experiences. Thus the simultaneous function of metaphor in art therapy of generating safety while exploring material is facilitated carefully by the art therapist. Displaying respect of the safe distancing induced by the metaphor was addressed by Moon (2007) who stressed that artistic metaphors as indirect expressions are less psychologically threatening than direct statements and that the quality of safety experienced by the client significantly depends on the art therapist's ability to remain within the structure of the metaphor.

ACCESSING THE UNCONSCIOUS

Angus & Rennie (1989) found that metaphors tend to make aspects of the unconscious more readily accessible and that memories and images are elicited by the use of metaphor. Kerr (2015) compared the therapeutic use of metaphor to the image making process in art therapy where both emphasise linking affective material to an image before discharging conflictual material that may be too difficult to verbalise. Moon (2007) affirmed the powerful role of metaphor and art in the search for meaning highlighting that when people create artworks, they struggle with conscious and unconscious depths to free metaphoric images giving them life through the art work, uncovering both obvious and hidden realities. He emphasised how clients through engagement in their art-making, work through, play with, and enact life themes, with metaphors being expressed through the symbolic actions of making and the tangible art work that results. From another perspective, situations where an absence of art making is experienced can signify an avoidance as a reflection of intense grief and anguish (Malchiodi, 2003). In a similar way, Garti & Bat Or (2019) highlighted how the lack of engagement in art making may reflect a threat to a client's defences and that all expressions and pauses in the therapeutic process communicate the subjective experience of the bereaved client, such as expressing a lack of continuity, loss of meaning or emptiness. In honouring the presence and absence of art making, the art therapist's acceptance and containment of the lack of art is valuable for the bereaved. Such containment is aligned with an understanding of the client's need to oscillate attention between the approach and avoidance of grief emotions as corresponding to the Dual Process Model (Stroebe & Schut, 1999).

ENVISIONING CHANGE

Levine (1992) distinguished the productive imagination from what Kant termed the 'reproductive imagination' or fantasy that combines what is already present into novel formations, with the productive imagination giving birth to the new. Taking this perspective, the productive imagination creates original representations that make experience possible. Thus Levine argued, we are in the world in a vital way only through creative affirmation, the imaginative projection of our own possibilities. Plato's *Symposium* was the primary source of the term 'poiesis' which Heidegger (1962) referred to as 'bringing forth', bringing into existence something that was not there before, a moving away from one thing to become another. Cox & Theilgaard (1987) provided additional context in interpreting poiesis as the process whereby inner emptiness, initially experienced as insecurity, hollowness and fragility is gradually transmuted into affirmative depth. Similarly, Levine (1992) reminded us that creation depends on destruction, the willingness to give up a previous pattern to experiment with a new form. The growing ability to let go of attempts to control and to experience the emptiness before anything new can emerge is characteristic of the creative and therapeutic process.

A RETURN TO EMBODYING DISCOVERY

Milner (1956) explored how uninhibited movement of psychic energy was possible between the inner and external worlds and viewed the art making process as capable of not just recreating the lost object but in creating something new through the process of symbolisation. Winnicott's (1971) concept of the *transitional object* - that object (teddy bear/blanket) that is both given to the child and created by the child, represented the first attempt to reconcile phantasy and reality, the inner and outer world as the earliest expression of the creative drive and of symbolisation. As such, Winnicott proposed that the *transitional object* and space in which this exploration occurred or *area of experience* expressed the central characteristic of mental life; neither solely inside nor outside, but in-between. Gordon (1978) recognised the value of Winnicott's *area of experience* as locating the psychic area where sensuous experience meets imaginative invention and where the need for order and meaning found expression in the creation or discovery of forms that embodied experience. Schaverien

(2000) identified the art object as a means through which the space between inner and outer worlds may be mediated, where an analytical differentiation takes place and unconscious elements may begin to become conscious through the process of making and regarding the artwork. She highlighted how, for some clients, relating via the medium of an artwork facilitates the development of the ability to symbolise.

SYMBOLISING CONNECTIONS

Ogden (1985) asserted that it was within Winnicott's area of experience or transitional space where symbols originated and imagination developed and without such space, only fantasy remained. From a similar space, Ogden (2001) viewed mourning as not simply a form of psychological work but a process centrally involving the experience of making something, of creating something adequate to the experience of loss. Coleman (2010) identified symbols as emerging in the context of a relationship of meaning making and that symbolic communication with others precedes the capacity to use symbols as a means of representing internal states of mind to oneself. Such examination of symbol as a representation not of the object but of the relationship between objects accentuates the multiple, fluid nature of changing dynamics occurring in the movement between them. Gordon (1978) similarly underlined the richness of symbol in that it expressed facts, relationship, sensuous and emotional experiences far too complex to be conveyed solely by verbal means.

SUMMARY

The reviewed literature emphasised how a reliance on verbal language can serve to restrict exploration, while therapeutic interventions such as art therapy that facilitate a broader exploration can encourage grief to express itself revealing more complexity. The therapeutic use of metaphor was identified as an under researched subject in the area of bereavement but was also highlighted as a frequently used means of describing aspects of suffering and loss. The value in utilising the metaphors provided by the bereaved in exploring alternative ways of responding to loss was emphasised and in particular the use of

storytelling. Metaphors can by-pass verbal defences and internal censors that reinforce habits, patterns of thought and mask emotional experiences. Moon (2007) emphasised how metaphor is expressed through the symbolic actions of art making and in contrast an absence of art making can reveal various underlying reasons with implications for the art therapist (Malchiodi, 2003; Garti & Bat Or, 2019). Imagination in its productive sense was associated with generating original representations making new experience possible, with the term 'poiesis' emphasising the expressive aspect of the imagination in bringing forth the new. In relating poiesis to the creative therapeutic environment, a number of authors identified its significance as a concept when applied to a broken or deconstructed position. Winnicott (1971) identified psychic life as imaginal (that individuals live in the imaginative space of experience) and the centrality of the role of the other to the development of the self; as with the child's relationship to the mother in developing the capacity to explore in a transitional space of creativity. Such imaginative exploration as distinct from fantasy signified the earliest expression of a creative drive, a symbolising capacity and curiosity with meaning. The value in symbolic expression is appreciated in its ability to convey the multiple essential qualities and shifting dynamics of relations between objects to an extent that intellectual or verbal articulation cannot equal.

CHAPTER 5. CONCLUSION

'Art seems to bring us closer to what language cannot reach and to what poets prove evaporates in exploration and translation.'

Sandra L. Bertman, (2000:53)

INTRODUCTION

This final chapter will recount two key findings acquired from reviewing the literature in the previous four chapters. Subsequently a response to the initial research question posed at the beginning of the dissertation will be presented in the context of implications for art therapists working with bereaved adults.

KEY FINDINGS

As complications in grief are being investigated more comprehensively and increasingly incorporating research from wider academic and clinical fields including trauma and attachment, models of bereavement are being developed, adapted and refined for practitioners across the helping professions. The level of interaction between such models of bereavement and art therapy appears to be low, as evidenced by the paucity of literature in academic journals and other publications revealing this as an under researched area and also suggesting that these models are not widely employed instruments in art therapy practice. A number of studies have emerged in the past few years (Arnold, 2020; Bat Or & Garti, 2019; Bat Or & Megides, 2016) that have begun to explore the potential of integrating bereavement theories and models into the practice of art therapy. Interestingly all of these studies have focussed on art therapists themselves reflecting a research topic at an early stage of development.

In the context of containment within the triangular relationship in art therapy, it was stated in a number of articles how bereaved clients expressed anger and feelings which may not have found expression outside of a non-verbal art making process. Such findings emphasise the potential of art making in the art therapy setting for the discovery and expression of non-verbal and non-symbolised experiences. This is particularly relevant in relation to grief that may be unacknowledged by the individual or by others in the bereaved individual's environment. The investigation of experiences of disenfranchised grief through art therapy is a relatively unexplored research area where future studies could potentially yield very interesting results.

IMPLICATIONS FOR ART THERAPISTS

The specific question posed in the introduction to the extended literature review asked; 'How can art therapy potentially assist bereaved adults adapt to their grief?' This question could overlook an essential element inherent in determining the answer; that of the art therapists themselves and their appreciation of grief. Overall the dissertation was structured with this in mind and similarly a response to the question is most accurately delivered in the context of implications for art therapists. Four implications for practice expressed here relate specifically to working with bereaved adults who display complicated grief responses as a function of their attachment insecurities. The implications are presented in terms of; integrating theory into practice, building core emotional regulatory capacities, working with clients' defences, and nurturing the faculty to symbolise a changed relationship with the deceased.

INTEGRATING THEORY

With a growing recognition in bereavement research that attachment insecurities present as a significant risk factor for grief complications, the use of classical and contemporary attachment research provides a valuable framework to the study of the continuity of attachments after loss. Importantly it presents therapists with a more nuanced

understanding of how individuals can struggle in attempting to manage with and adapt to the death of a significant figure in their lives. Connecting an understanding of insecure attachment patterns in childhood and subsequent forms of relating and coping in adulthood with models of bereavement would serve as an informative foundation for art therapists working with bereaved adults. Findings from Shear & Shair (2005) regarding the efficacy of research-informed and personalised treatment interventions for those experiencing complicated grief reactions were encouraging. Art therapists are in a unique position to offer such individualised treatment to this specific subset of bereaved adults incorporating art as a third axis in a triangular relationship configuration.

The Dual Process Model (Stroebe & Schut, 1999) with its dialectical attention to loss and restoration coping provides art therapists with a supporting frame accentuating the two principal types of stressors encountered by the bereaved. Facilitating the bereaved client's oscillation of attention in the context of a triangular relationship presents art therapists with multiple channels to respond and attend to a client's affective and cognitive adaptation to their loss. Such attention extends from the varying levels of engagement with vastly diverse art materials, to exploring emotion and regulatory strategies through the senses and physical sensations in the encounter with art materials. Within this dynamic triangular relationship, the art therapist ensures containment for the bereaved client in facilitating the expression of painful affects and non-verbal memories relating to loss through art making.

DEVELOPING REGULATORY CAPACITY

The development of core emotional regulatory capacities is deemed to be a necessary foundation in assisting bereaved clients particularly those with experience of traumatic loss or early relational trauma and such work begins with establishing a secure attachment or therapeutic bond. Complications experienced by the bereaved can serve to prolong a dysregulation of the physiological system and compromise an ability to flexibly attend to thoughts and feelings. The potential to build core capacities encompasses the client's experience of the art therapist as a transitional attachment figure capable of containing the unique exploration of painful thoughts and emotions and the creation of a safe space to explore the personal significance of issues such as separation, meaninglessness and death.

Therapeutic connection extends beyond the client-therapist relationship in art therapy however as the client is facilitated to develop a close relationship with their own creative process. The evolving relationship between client and art incorporates physical engagement with materials and integration of the senses, in an exploration of the underlying difficulties and challenges relating to attention, security and personal capacity. An attuned art therapist's prudent pre-consideration of art materials can be a significant factor in the development and progression of the bereaved client's personal exploratory process.

CONSIDERING DEFENCES

Much of the literature reviewed around the theme of metaphor emphasised less reliance on literal thinking and perception in favour of an intuitive understanding that facilitated receptivity to the symbolic dimensions of experience. While metaphor may provide clients with a less direct and threatening means of expression, it can also serve as a safe vehicle for lessening resistance and bypassing defences. This simultaneous function of metaphor in generating safety while exploring content has been compared to the image making process in art therapy. Engaging with art materials, clients work through and enact life themes with metaphors being expressed through the symbolic actions of art making. The secure space provided in art therapy for such actions can serve as encouraging an increasing receptivity where the bereaved client can open to conscious and unconscious elements and difficult themes relating to their life and loss. In situations where art making is absent, the client's experience of containment is essential from an art therapist who is affirmatively responding to the natural oscillation of attention to and away from the emotions of grief.

INCREASING FACULTY TO SYMBOLISE CHANGE

In the reviewed literature, the value of symbol was emphasised in how it enabled expression of a multiplicity of experience too complex to be conveyed verbally. As the interpersonal contexts wherein symbols emerge precede intrapersonal use of symbol, the art therapist it could be argued is in a distinct, almost maternal, position working with bereaved clients

relating via art in search of meaning. The bereaved individual is initially supported by the art therapist in containing reactivated attachment anxieties concerning the now changed relationship with the deceased. Realising sufficient security the bereaved can progress in attempts to internalise the deceased. In the context of a triangular relationship, the bereaved client experiencing containment by the art therapist as a transitional attachment figure, works towards harmonising inner and outer reality through the process of art making. Importantly should bereaved individuals encounter difficulties symbolising their experiences the art therapist supports the development or growth of such a capacity. A bereaved client's repeated experience of the constant art therapist and their joint regard for the art work encompassing a reflection of unconscious processes can assist in uncovering significance and recovering meaning in unyielding or opaque symbols.

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