Rev. of Expressive Therapy: A Creative Arts Approach to Depth-Oriented Treatment

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An American journal of psychoanalytic psychology devoted to the understanding of behavior and culture. Founded 1913.

Expressive Therapy is an ambitious and important work. The author attempts to synthesize a theory of expressive therapy which draws from psychoanalytic theory, ego psychology, object relations theory, and brain research. He applies his findings to primary and secondary process thinking and to aspects of creativity and play facilitated through art, music, movement, and dance. This challenging task is undertaken with enthusiasm and sensitivity to the complex nature of these diverse areas. The work is rich and intense, at times perhaps overwhelming, but it is well written and often quite poetic in style. It is engaging, provocative, and at times controversial.

Expressive therapy utilizes a model of mother/child interaction at the symbiotic and separation/individuation level of development as a paradigm for understanding the treatment process. There is an emphasis upon the nonverbal quality of interaction between the therapist and patient, and upon the mother/therapist's ability to respond empathically to the patient and to foster a creative, playful environment. This "potential space" (as noted by Winnicott) is viewed as a reparative structure within which the patient may affirm his sense of self. Differing from another psychoanalytic "self" psychology, which focuses on the restoration or establishment of the "self," expressive therapy expands its goal to include the integration of primary and secondary process experience. To support this approach a review of left/right brain research suggests parallels between primary process and right brain function, as well as secondary process and left brain functions. As a result, a new emphasis is established regarding the patient's right brain function, thus supporting the use of creative modalities within the treatment framework.

The role of the expressive therapist is given extensive attention. The author believes that not all thoughts and feelings can or should be translated into words and interpreted. He further suggests that a creative, playful interchange between the therapist and patient may better meet the needs of some patients and facilitate self integration. This may indeed set a foundation upon which later verbal interpretations may be made.

The author views the expressive therapist as an artist and compares the expressive treatment process to the creative act. In his art, the artist often loses himself—he flows with his energy, utilizes inner processes and responses to decide where to go with his work. Similarly, the expressive therapist must have this ability to enter various ego states, to contain, frame, or visualize
whatever is induced within him through this process. The therapist uses this
enlarged ego capacity to respond to his patient's cues. His ego must therefore
be elastic and flexible enough to synthesize rather than introject or project
complex stimuli from his patient's projective identification. The concept of
using the therapist's ego as a container is discussed in detail. Through this
process the therapist can frame his patient's raw, unneutralized affects and
provide an atmosphere of visual, aural, or spatial play within which the pa-
tient may feel protected from his primitive affects. Through this experience
the patient may ultimately see, hear, and understand his feelings.

This type of intervention implies that the expressive therapist is receptive
to and employs his preconscious imagery in the treatment process. He may, in
this way, overcome resistances and discover authentic therapeutic interven-
tions through primary relatedness. The therapist/artist must be able to spont-
aneously shift from right to left hemisphere function or, put more psycho-
analytically, from primary to secondary process thinking. This ability to shift
back and forth is compared to an early ego state where energy is diffuse and
consciousness is undifferentiated.

The author's emphasis on creatively using countertransference continues
the emphasis on the therapist's experience. The term countertransference is
expanded here to include induced reactions. The synthetic function of the
therapist's ego is drawn upon to harness creatively primitive affects so they
may be used in the service of the treatment. It is the author's view that
"responsibility for an unworkable resistance must be shifted to the treatment
modality" and the responsibility for the persistence of such a resistance "to
the lack of personal resources of the therapist."

A weakness of the work is that while proposing a new conceptual under-
standing of the essence of the therapeutic process, it tends to overlook the
possibility that the concepts presented are often very similar to those em-
ployed by contemporary psychoanalysts. For example, most analysts will al-
ways consider a patient's ego strengths and early object relationships and
focus upon these areas when deficiencies are discovered before embarking on
a course of verbal psychoanalysis. This similarity is often lost and as a result it
is not clear whether this work is aimed at psychoanalysts or therapists. One is
never certain whether the author is proposing a whole new mode of therapy
or simply offering a broadened concept of psychoanalysis.

The danger then is that some readers may see this work as a totally new
therapy with an emphasis on unusual, innovative creative arts techniques
rather than a carefully founded, theoretically sound expansion of already
existing psychoanalytic literature. It may then be too easily overlooked as just
another "fad therapy" and not appreciated for what it really is: an extremely
valuable contribution to the field of psychoanalysis.

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