



The Power of Expressive Therapies

| By Trish O'Donnell, MA, ATR-BC, LPC, Program Director at EDC-D

In recent issues of HealthReach, we focused on the framework for treatment, the empowerment model, and the components of both the illness and return to health, the



bio-psycho-social-spiritual model of treatment. In this issue, we look at how these models are integrated into actual practice at EDCD. We high-

light the treatment modalities that empower our clients to experience their mind, body, and spirit in new and creative ways, through the expressive arts therapies.

Expressive therapies; art, movement, and psychodrama, are key elements of the partial hospitalization program at EDCD. The daily schedule is designed so that the client moves from the psycho-education format and information, through verbal processing groups, and into a deeper, more experiential process, beyond words, in the arts therapies, to be followed by returning to the cognitive realm of the psycho-education group at the end of a day. This structure, support, and containment, enables the eating disordered individual to identify and express emotions, to “move” through these emotions, and to be active in the process of experiencing their whole selves. In each modality, he/she is encouraged to be self directed by making choices, by connecting to

their self, their body, and others, and by taking risks to impact change.

There are those who believe that traditional verbal therapies are limited in their capacity to change habitual and automatic patterns of behavior of the client, especially the eating disordered client. Experiential therapies engage a client on an emotional, sensory, bodily and spiritual level, thereby potentially creating new behavioral pathways in the brain. The usual and relied upon defenses are bypassed within the safety of a structured group.

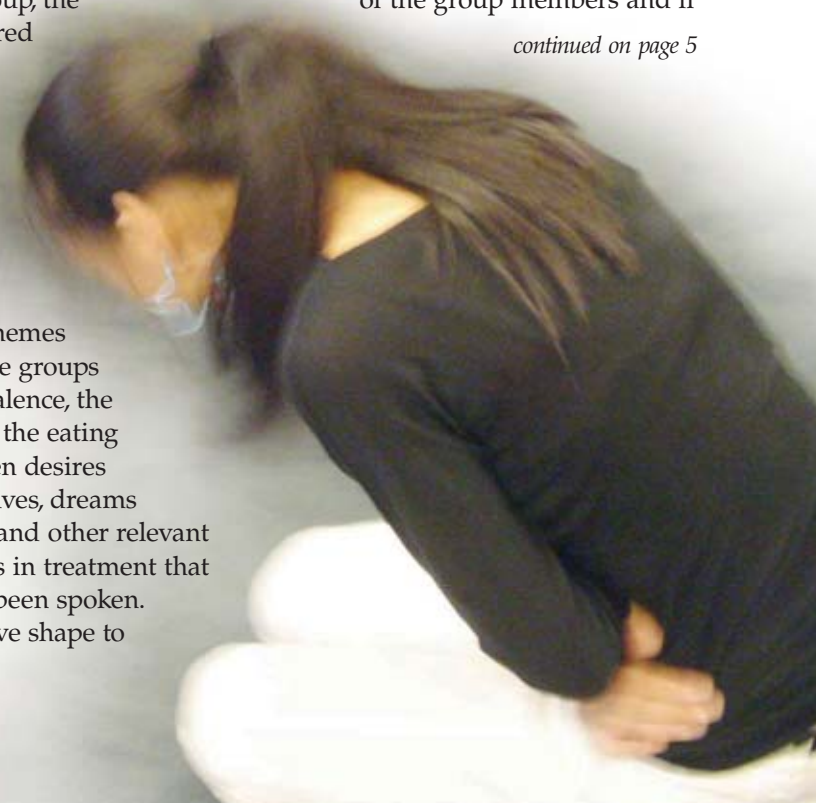
The following is a brief description of each expressive art therapy, which is then expanded on by our skilled and talented arts therapists.

- **Art Therapy:** In an art therapy group the eating disordered individual can choose from a variety of art media to give symbolic form to her self issues and emotions. Rich imagery and themes emerge in these groups such as ambivalence, the relationship to the eating disorder, hidden desires and life narratives, dreams for the future, and other relevant and core issues in treatment that may not have been spoken. He/she can give shape to

her distorted body image and “see” what he/she feels inside. Insight and self-awareness is gained. Often, the creative process, itself, is comforting, fulfilling, and cathartic. The group art process is organized so that the group works together on a theme and at the end of the group shares their commonalities and differences as reflected by the artwork.

- **Psychodrama:** The purpose of psychodrama is to offer the eating disordered client an action based learning experience in which he/she can take on roles from her life or another person's drama in their life. An emphasis is placed on first identifying what is happening internally for each of the group members and if

continued on page 5



The Power of Expressive Therapies

continued from page 1

they were to work on an issue what would it be, in that moment. Psychodrama techniques used can include scene setting, soliloquy, future/past projection, role retraining, mirroring, role reversal, empty chair, and sculpting. Members of the drama often experience catharsis never before felt in the company of others and a resolution of emotions connected to painful and/or difficult relationships or events in their lives that may have been factors in their eating disorder illness. Group sharing and processing offers another way to connect to and better understand their own, as well as the experience of others.

- **Movement therapy:** Much like the other therapies, movement therapy offers the eating disordered client an opportunity to be safely connected to their self and to be in their body as the group explores gestures, movement sequences, play, and even dance together. Movement therapy addresses body image issues, thoughts, and feelings as they occur. With the aid of a trained clinician, the group can move through discomfort, discover new postures or positions, express emotions in gesture and movement, and generally re-experience their bodies in ways never before explored or experienced. Self awareness and body awareness may increase and enhance the client's ability to nurture, to express, and to practice self-care, all areas of difficulty for the eating disordered client.

To summarize, the expressive arts therapies, as complements to traditional verbal therapies, treat the eating disordered individual as a whole person, enabling them to reconnect with the self, their body, and their spirit, in the pursuit of regaining health.



Art

| By Libby Neal, MA, LPC, Art & Milieu Therapist at EDC-D

Art therapy is a dynamic expressive arts modality that combines the use of art materials and verbal processing so that a patient can gain personal insights they would not achieve through the application of one modality alone. Art materials, creative process and final product



constitute three primary components of art therapy. A trained art therapist considers a patient's psychological and emotional capabilities before suggesting an art material or intervention. Art materials range from static and controlled to fluid and unpredictable. Static materials such as pencils, markers, or collage materials do not change after application. As such, these materials provide safety and containment, which allows patients to explore internal feelings, out side of the mind. Fluid materials such as

water color or wet clay, by contrast, are less predictable. Therapist's often use these more plastic materials with patient's who have had previous mental health treatment experience and therefore already possess greater prior insight. Static materials limit a patient's regression into overwhelming feelings. Fluid materials quickly

scaly skinned beast that had daggers protruding in all directions. Becky found that her eating disorder was terrifying and it enticed her to continue in self harming behaviors. Over the next few months, Becky created images of what she thought about when she binged or when she would cut on herself. Seeing the

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move patients into their unconscious. The goal is to match appropriate materials to each patient, to insure patients achieve psychological organization, not over stimulated affect, after each session.

Becky, a 35 year old woman, entered treatment at EDCD for restricting and purging behaviors. Becky was fearful of the art process and reported that she was a terrible artist who would never participate in group art therapy. To ground Becky's anxiety and fears of being out of control, I offered her pencils and paper. She first drew a "safe place", which turned out to be a hill top house surrounded by animals and a forest. Becky said it was an imaginary house that she thought of when she was scared. Becky carried this image in her notebook so that she could look at it daily. Using the same materials the following week, Becky created an image of her eating disorder. Becky drew a fire breathing,

images on the page, allowed Becky a safe distance from the memories of abandonment and shame, in order for her to find words for her narrative. By the end of treatment, Becky trusted her process enough to use paint and clay; she could verbalize as well as paint images for her feelings. Becky also used art work in the evenings as a way to distract from overwhelming thoughts and to soothe her desire to cut her arms and legs.

Art therapy is an integral part of the empowerment model of EDC-Denver. It is a form of expressive therapy during which individuals are empowered to identify and express internal resources to achieve and maintain change. Through this creative process, individuals have recognized their uniqueness, discovered meaning in their hidden life stories, and given new forms of expression to their own feelings, values and sense of self.



Former PHP Patient — Drawing of her relationship to her eating disorder

The monster image is her raging eating disorder and the curled up figure is herself portrayed as helpless and held prisoner by the eating disorder. This drawing enabled the patient to explore these feelings and the role of the eating disorder as both disempowering and protective.

Psychodrama

By Sue Woodmansee, MS, OTR, TEP, CAC
Psychodramatist at EDC-D

Psychodrama is a weekly group at the Eating Disorder Center of Denver that offers participants a safe and supportive environment in which to practice new and more effective roles and behaviors. Conceived and developed by Jacob Moreno, MD,



psychodrama uses guided dramatic action to examine problems or issues raised by an individual or a group. Using experiential methods, sociometry, role theory, and group dynamics, psychodrama facilitates insight, personal growth, and integration on cognitive, affective, and behavioral levels. It clarifies

issues, increases physical and emotional well being, enhances learning and develops new skills. Psychodrama is very effective in the treatment of eating disorders as it emphasizes active experiencing which helps develop an experiential sense of self that can be trusted. Psychodrama brings the physical and mental experiences of self into focus through use of action-oriented interventions by the therapist. In this way, individuals can become aware of emotions, body sensations, and a sense of personal power.

The basic components of psychodrama are:

- **The protagonist:** The person selected to represent the theme of group in the drama
- **The director:** The trained psychodramatist who guides participants through each phase of the session
- **The audience:** Group members who witness the drama
- **The auxiliary egos:** Group members who assume the roles of significant others in the drama
- **The stage:** The physical space in which the drama is conducted

In a classically structured psychodrama session, there are three distinct phases (structural components) of group interaction:

1. **The warm up:** All behavior begins with a warming up period. For example, the runner, the dancer, preparing to make a speech, etc. It is here that the group theme is identified and a protagonist is selected.
2. **The action:** The problem is dramatized and the protagonist explores new methods of resolving it.
3. **The sharing:** After the action work, it is important to come together to share with the protagonist what his or her work meant to each person.

Clients have enacted confronting significant others in their lives, setting limits, and most importantly finding their authentic voice to express unspoken issues that have

been held in for years. Recently, a client was able to confront her parents & tell them she wanted to make her own decisions. The final scene in the drama was enacted by the entire group engaging in a fantasy scene of risk taking symbolized by dancing a conga line. The hour and a half was filled with many tears and ending in gales of laughter. Courage and willingness to allow self to be vulnerable are present each week. Clients at EDC-D learn to use psychodrama to gain an improved sense of connection, increase acceptance of their internal struggles, and take action to assert healthy changes.

Dance/Movement

By Keli Laverty, MA, DTR
Dance/Movement Therapist
at EDC-D

Clients in the Partial Hospitalization Program of EDCD participate in one and a half - hour of Dance/Movement therapy a week. Dance/movement therapy (DMT) is a psychotherapeutic treatment that uses body awareness, expression and acceptance to facilitate physical, emotional, cognitive and spiritual integration to heal disorders of the body, the mind and the spirit. DMT uses verbal and nonverbal intervention to help clients work on expressing and coping with emotions in a holistic and integrated method.



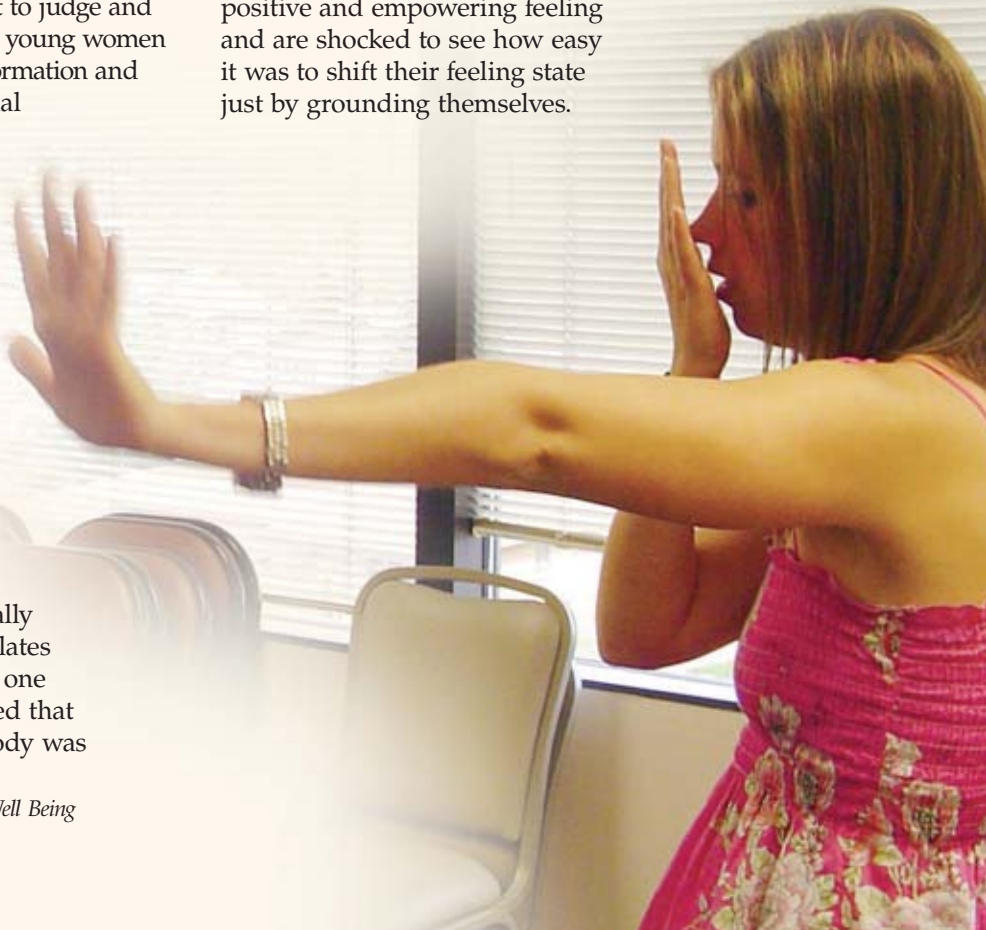
Dance/movement therapy is very effective with eating disorder clients. Current research suggests that awareness of our body is necessary to have self aware consciousness and a development of self. (Cloninger, 2004)* Clients at EDCD come into our program with a loss of self because they have made their bodies the locus of their struggle. They are continuously in a state of mind/body conflict because their brains are maintaining the body within a narrow range of functioning.

In our culture, young girls and women are continuously taught the message that their body is an object, something separate from themselves, to be symbolically displayed. Rather than learning to be comfortable with who they are in their bodies, they are taught to judge and attempt to control their bodies. This results in young women forming their identities based on external information and signals from others vs. developing an internal sense of who they are. It is important to learn to connect with our body in order to know our true self.

In each DMT group, clients work on moving from "object body" to "awareness body" by practicing tuning into body signals, trusting the information gleaned from their body and enhancing their ability to accept and communicate their true selves to others. Group themes develop that help clients examine how the eating disorder affects their lives and teaches skills such as grounding, boundaries, spontaneous play, relationships, assertiveness, relaxation, and body image. The group members then verbally process how their movement experience relates to how they "move" in their own life. After one group with the theme of play, a client related that she "was reminded of when moving her body was

Dance/Movement Therapy uses verbal and nonverbal intervention to help clients work on expressing and coping with emotions in a holistic and integrated method.

fun and freeing," and she expressed she has not had that experience for many years. Clients report that through DMT they are able to "let go of their eating disorder voice" that is always judging and trying to control the way they move in their lives. Grounding is another skill that is taught in Dance/movement therapy group. In this particular group, clients experience their bodies as a partner tries to move them when they are grounded vs. ungrounded (or as we describe in object body vs. awareness body). Clients are very nervous to have a partner move them, but then are very surprised by how different their body feels when grounded. They report that they feel "powerful," "strong," and "solid." They also report that this is a very positive and empowering feeling and are shocked to see how easy it was to shift their feeling state just by grounding themselves.



* Cloninger, CR. (2004) *Feeling Good: The Science of Well Being*

Programs at EDC-Denver

Partial Hospitalization Program (PHP):

Available to individual patients who are 16 years and older. Patients attend seven days a week, 11 hour days with shortened weekend schedules. This highly structured program includes: Medical and Psychiatric evaluation and follow-up, Individual therapy, Family/Couples Therapy, Group Therapy, Psycho-educational groups and Nutrition therapy including three meals and two snacks per day. **Housing is available.**

Evening Intensive Outpatient Program (EIOP):

An integrated program meeting three times per week comprising of: thirteen hours per week of therapy including psycho-educational groups, group therapy, multi-family group, DBT and three meals. Also included are a weekly individual session, nutritional monitoring/ consultation and psychiatric oversight. These groups are presented on a 12 week rotation and are open for patients to join at any time. Sessions are held for this program Monday, Wednesday, & Friday: 5-9 PM.

Outpatient Services provide an effective alternative for individuals whose symptoms do not require a more intensive setting. Patients can also participate in one or more of our Outpatient Services to enhance work with outside treatment providers.

Our services include: Individual and family/couples therapy; group therapy including DBT and aftercare; Psychiatric evaluation, therapy and medication monitoring; gastric bypass evaluations, and nutritional counseling.

Support Groups:

Aftercare Outpatient Process Group – Monday 5:30-7:00 & Wednesdays 5:30-7:00

An open recovery group consisting of individuals in recovery who have completed an intense eating disorders program at EDC-D or other national programs. \$50 per group

DBT Skills Training – Monday 5:00-6:30

Didactic and experiential education in four different skill areas: core mindfulness, interpersonal effectiveness, emotion regulation, and distress tolerance. \$75 per group

Body Image 101 – Tuesdays 5:30-7:30 & Thursdays 5:30-7:00

12 Week ongoing group utilizing cognitive behavioral and experiential techniques to mend the relationship between a woman and her body. \$50 per group

Minding the Body – Mondays 6:30-8:30

12 Week ongoing group for individuals establishing positive lifestyles while maintaining weight loss. \$75 per group. Please call 303-771-0861 for more information.

Please Contact Us For A Free Assessment
to our intensive programs or to schedule an outpatient appointment:
303-771-0861 Or toll free: 1-866-771-0861

Colorado Springs Networking Luncheons
Will be held April 14th, August 4th, and October 6th. Please call 303-771-0861 for location and details.

Boulder Networking Luncheon
March 30th, 2006 at The Boulder Cork
11:30 am - 1:30 pm "Practical Integrative Psychotherapy: Helping take insights out of the office and into the world"
Presented by Gretchen Kahre
Please call 303-771-0861 to RSVP

Denver Networking Luncheons
Will be held in May, July, September and November in 2006. Please call 303-771-0861 for dates and details

Austin Area Networking Lunch
March 22nd, 2006 at Austin Cool River Cafe
11:30 am - 1:30 pm "Treating Eating Disorders: Empowering Health through the Bio-Psycho-Social-Spiritual Model"
Presented by Ken Weiner, MD & Susan Peterson, MA
Please call 303-771-0861 to RSVP

National Eating Disorder Awareness Week – Feb 26th - March 4th

Upcoming Events:



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