

ATOL: Art Therapy OnLine

An Art Therapy Intervention in Oncology (KSKT[®]) using Collage for strengthening self-ascribed Autonomy (German: Kurze Strukturierte Kunst Therapie (KSKT[®]) short structured art therapy)

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Abstract:

In psycho-oncology the development of specific art therapy interventions is necessary to strengthen and to support the autonomy of inpatients. Some art therapy interventions have been developed for cancer patients but none specifically for inpatients.

The first step was to develop an art therapy intervention. Collage was used as a significant technique. A second step was to identify the power factors of this art therapy intervention (KSKT[®]) for the conditions of the inpatients. Therefore the art technique collage was analysed as a therapeutic tool. A further step was a qualitative study with 5 inpatients who were interviewed. The study population consisted of adult women (age ranged from 25 to 55 years) treated in an acute hospital for cancer. In the theoretical approach, collage was associated with supporting autonomy, establishing new life structures in the pictorial space, passing restrictive limitations and exploring emotions. These are therapeutic effects that can be attained by the use of the KSKT[®]. The qualitative study found the patients evaluated the intervention positively. They felt stabilized and their self-ascribed autonomy was strengthened. The intervention (KSKT[®]) meets the therapeutic objectives for oncology inpatients.

Keywords:

Art therapy intervention - psycho-oncology - special needs of inpatients - collage - autonomy - qualitative study

Introduction

In the field of oncology, the psycho-social distress of inpatients is immense. An art therapy intervention should meet the special needs of inpatients in this context by reducing pressure, anxiety and stress, enabling the perception and expression of emotions, supporting autonomy (Watson & Bultz 2010, Hopf 2011) and building up new life perspectives (Staroszynski, Vollmer 2004). With these objectives a specific art therapy intervention, the KSKT[®] has been developed.

Manual of the art therapy intervention KSKT[®] (Hopf 2011)

The KSKT is an intervention based on the collage technique. There are three stages. Firstly, a painted picture depicting aspects of self actualization, safe space and environment. Secondly, another picture depicting personal resources as shapes that are cut out. Thirdly, these external picture elements can be composed flexibly in the picture space. Instead of glueing the collages the different compositions are photo-documented.



Picture 1: self-actualization

Imagine yourself as an abstract form. Choose colours and forms. Choose some aspects of your own personality that you like! Transfer these aspects into shape and colour.

Picture 1: safe space

Choose colours and shapes to design a safe space around the form for yourself.

Imagine that the surrounding safe space protects you from everything negative. Inside it are all those qualities, in form and colour, that makes you feel safe.

Picture 1: environment

There still remains some space between the safe space and margin of the picture. It represents the impersonal environment. Imagine that there is much going on in this space, which can't be controlled. You can design this space.



Picture 2 and following: resources

Imagine people, relationships, interests and habits that are resources for you in this actual situation. Please transform their qualities in colors and shapes.

Please cut out the shapes!

Composition 1: ideal/wish

Compose the shapes/elements on the painted picture (picture 1).

Imagine the best places for the shapes. Please locate the shapes in the picture wherever they give you maximum support. Imagine a wish come true.



Composition 2: reality

Please locate the shapes for resources at those places where they show the actual situation. What does the composition look like if illustrating your reality?



Composition 3: synthesis

Is it possible to change the 'reality' of the composition? Please reflect, which elements/shapes - as aspects in real life - can be influenced and which ones cannot. Create a synthesis! Which are the positive aspects of this composition presenting your actual situation?

Conclusion

What does progress look like for you now?

How can you influence or change your situation in a strengthening and self-supporting way? What does the next step look like?

Therapeutic impacts of the collage technique

The question we posed was, with what kind of historical, artistic, biographical and emotional experiences is the art technique collage intertwined?

There are scarcely any specific publications to be found that focus on the impacts or reflect on the psychological effects of collage as an art therapy inter-vention in a more abstract way (Becker 2011, Menzen 2011).

In order to get further insights, we performed a detailed, profound content analysis (Mayring 2002, 2005, 2008) of publications in fine arts and art history, as well as publications on art education and art therapy, dealing with the recognition of therapeutic impacts of the collage technique (Adorno 1970, Bayerthal 1967, Becker 2011, Bürger 1974, Dengler 2007, Heartney 2004, Heiney & Darr-Hope 1999, Horst, van der 2009, Gebser 1986, Goldhahn 2009, Großmann 2010, Hopf 2010, 2012, Jürgens-Kirchhoff 1978, Kollmorgen 1988, 2008, Levine 1998, Legler 2002, Luzzatto et al. 1998, 2000, Menzen 2011, Moss 1999, Otto 1986, Pazzini 1986, Panofyky 1937, Reiterer 2002, Rubin 1990, Richter 2004, Saint-Phalle 2009, Schlingensief 2009, 2010, Sontag 1980, Sprenger-Gräßer 2000, Thorn-Prikker 2004, 2007, Wescher 1974, Zacharias 1986, Zepter 1981).

By analysing these sources with the method of qualitative content analysis (Mayring 2002, 2005, 2008), we identified six main categories which would be presented in the 'six-factors-model'.

Results for the therapeutic impacts of the collage technique

All aspects of the collage technique process, which are described in the literature mentioned above, match with the following categories.

The six-factors-model:

During the collage making, specific interconnected factors can be described (Hopf, Heussner, Elbing, Büssing 2012, 2013):

1. Experiment:

A creative experimental attitude determines the entire process of the collage formation. By playfully combining the different elements, the collage has an effect of relief.

2. Identification:

Each element or each composition taking place in the collage, is identified as meaningful to the artist. It can be seen as a symbolic aesthetic object or self-object (Dreifuss-Kattan, 1994).

3. Autonomy:

During the whole process, specific decisions relating to the collage elements and to the compositions are being made (i.e., selecting, accepting, rejecting, changing), indicating the creator's autonomy.

4. Documentation:

Each step of the creation is visible and can also be changed and ameliorated.

5. Integration:

The creating process of the collage includes positive and negative aspects, such as decisions for or against certain pictorial elements or compositions. Collage elements of different contexts are related to each other and integrated in one picture.

6. Reflection:

During the entire process of creating the collage, reflection takes place. This may lead to artistic or to personal insights.

In principle, all these aspects take part in collage formation processes, in fine arts, art education and also in art therapy, mostly under the accentuation of some few aspects (Hopf, Heussner, Elbing, Büssing 2012).

In the art therapy intervention KSKT[®], which is using the collage, four of the six factors are the most relevant, regarding support and emphasis for self-ascribed autonomy (Hopf 2012):

Experiment: The experimental aspects and the flexibility of collage in the intervention, make various compositions possible that can be proved and modified.

Autonomy: The openness of the collage was mainly specified by tracing subjective perceptions and promoting an inner realness. Decisions for or against certain forms or compositions can also be rejected and modified by experiences and feelings that arose during the collage process. These decisions re-establish autonomy.

Integration: The final composition, as the integration of all steps of the intervention and all experiences with it, is a document for the therapeutic process. Different feelings are visualized in forms that are related to each other in the collage compositions. This is an integrating process. Also, the forms are external pictorial elements that are integrated in the collage compositions.

Documentation: Finding and forming of abstract forms transfers internal emotional experiences into external pictorial objects. These are also visual objects that document and represent the identity of inpatients and strengthen stability.

Impact factors from the inpatients' perspective

Female inpatients have been interviewed in guided dialogues to evaluate the intervention, the KSKT[®] (n= 5; before the Intervention (VDI, T 0) after the Intervention (NDI, T 1); after three months (NDI 2, T 2). The answers have been also analysed with the qualitative content analysis (Mayring 2002, 2005, 2008).

Results for the impact factors from the inpatients' perspective

Below you will find a subsumption of the formulations of oncology inpatients referring to the experience of the KSKT[®] (Hopf, Heussner, Elbing, Büssing 2013, 2013):

The inpatients phrase the KSKT[®] as a positive approach, that helps to deal with the critical life event cancer. It supports a motivated handling with the actual situation and shows a visualization of inner processes. With the KSKT[®] an exact analysis of the whole situation during the cancer treatment is possible. It was described by one inpatient as "staging" in an emotional way. The intervention helps to give meaning, hope and structure and helps to change and modulate the selfimage during a crisis. One of the inpatients mentioned that it prevented her from problems during the cancer treatment. Other inpatients mentioned that the KSKT[®] increased the acceptance for art therapy. Apart from that it is no easy relaxed painting, but an intense inner work that requires concentration.

Here are two quotations of female inpatients on the impact of KSKT®:

"This is a kind of inner 'staging' to me: What is going on and where? What have I done? Where do I stand? What is the meaning of all this in my situation? What can I do, now?"

"Yes, this is a kind of work, with which I could go deeper. I couldn't imagine before (...) that it is possible to work on my feelings without always crying. It seems so true and meaningful to me. I didn't want to work on my feelings in psychotherapy before, because it tears me down. But this kind of work didn't stress me."

Discussion

We think that the six-factors-model is feasible and can be applied to many collage phenomena. Despite the many art therapy interventions that are open to the public, only a few papers are concerned with the therapeutic implications of fine art techniques in general (Becker, Menzen 2011). Therefore this study can be seen as an impulse for further research and discussion about artistic techniques in art therapy and about specific therapeutic impacts of the use of collage in art therapy.

Each collage composition of the KSKT® reflects emotions and is in these terms a meaningful scene. While working on the collage object emblematically, one's own capacities are vitalized. Experimenting with elements and moving them could work out conflicts with intense and ambivalent feelings (cf. Loos, 2006, p. 24). By experiencing autonomy and strengthening self-determination, the KSKT® constitutes an overall support in dealing with concomitant changes. The formal mastering of the composition during a critical life event can be seen as a resource in itself. In these terms, collage is an appropriate artistic technique to emphasize self-experience by creating flexible as well as structured art works, to express and transform emotional impulses into self-determined pictorial compositions and thereby emphasize autonomy. The creation of individual and formal compositions with collage elements helps to deal with strong emotional contents whilst dealing with personal crisis (Richter 2004). With the KSKT®

the control zone of inpatients can be provided. They feel stabilized and their self-ascribed autonomy is strengthened.

A limitation of this study is the limited availability of reference literature on the topic of the therapeutic impacts of collage. The six-factors-model can be seen as a first approach to understand collage in a more abstract way.

Notes

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