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## Presence through Expressive Arts and Buddhism

Akshita Desore

akshita.desore@gmail.com

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Presence through Expressive Arts and Buddhism

Literature Review

Lesley University

May 5<sup>th</sup>, 2020

Akshita Desore

Expressive Arts Therapy

Meg Chang

### **Abstract**

There is increasing research suggesting presence as the foundation of therapeutic work with clients and is becoming just as important a concept as theoretical orientation of therapists. This literature review focuses on understanding the skill of presence by looking at existing literature on the concept and suggests expressive arts and meditative practices as a tool to cultivate therapeutic presence. Using the Geller-Greenberg model of Therapeutic Presence as the foundation, I answer two questions in this thesis, what presence means conceptually and how therapists can achieve presence when working with clients. By its very nature, Expressive arts therapy with its focus on poiesis and imagination cultivates presence and engages individuals on a multisensory level. Similarly, daily meditative practices connect individuals to their inner thoughts, feelings and resources to respond to the environment and interact with others. All of these aspects are shown to foster presence and during this research I created a daily practice of beginning my day with my Buddhist practice followed by 30 mins of engagement in some creative process. Though, I explored my personal relationship to arts as an expressive arts therapist and a Buddhist meditative practice as ways to become present with clients, I view presence as an essential skill that can be cultivated through various practices and rituals.

*Keywords:* presence; expressive arts therapy; Buddhism; imagination; mindfulness

## Presence through Expressive Arts and Buddhism

### Introduction

I come to you in chaos,  
You offer me your brilliant hues,  
I pick up the brush and waves wash over me,  
taking with it the thoughts and concerns,  
I never know what will fill the white  
but the colors take me on a journey of their own.  
You make me forget the chaos and love the journey as it continues.

Therapeutic relationships are often like storytelling, occasionally putting the therapist in the role of a listener and a teller. As clients come in with their experiences, there is also an inner world of the therapist's thoughts, emotions, and concerns about their personal life that come into the relational space. Staying in the moment with a present-centered awareness is a skill that therapists constantly work on, quite similar to tuning a musical instrument frequently. But how can one cultivate this presence, an attunement to self and others and sustain it? According to Robbins (1997), "before a therapeutic alliance can be established a therapist must become centered and aligned with him or herself." This centeredness can be achieved through the therapist's constant efforts to cultivate their own moment to moment presence. This literature review looks at a therapist's personal engagement in arts and a Buddhist meditation involving chanting as a way to foster therapeutic presence.

I begin by reviewing existing literature on therapeutic presence which involves being fully in the moment on a multisensory level. Presence has always been suggested in psychotherapy literature, with some theories focusing more on the therapists' role in cultivating their presence, while others stressing the importance of a relational presence in therapist-client relationship.

Next, I review literature in expressive arts therapy. As reflected in my original poem at the beginning of this thesis, I use expressive arts as a companion to journey into my inner world and use the creative process for grounding and centering. According to Kossak (2015), “all art making makes use of a creative intelligence and when used in contemplative ways can produce understanding, truth and wisdom that involves our whole being, mind, body and spirit” (p. 6). It is this creative intelligence that expressive arts tap into for attunement to self and others.

Lastly, I explore the effect of mindfulness-based practices on therapeutic presence. I grew up as a Nichiren Buddhist and practice chanting on a daily basis. In my personal life I have observed how meditation through chanting helps me to be attentive to my own incoming thoughts, reactions and emotions while also listening to the person in front of me. This form of Buddhism empowers people to believe in their inherent capacity for growth and bring forth this energy or capacity when interacting with people in their environment. (Dockett, 2003, p.184; Ikeda, 1989, p.25)

The following review of literature further explores the concept of therapeutic presence through the lens of expressive arts therapy and mindfulness-based practices. My attempt is to investigate ways to cultivate therapeutic presence through personal engagement in the ‘creative process’ an important ideology of expressive arts therapy and a regular practice of a specific Buddhist meditative practice. Though I use examples and references from my own meditative ritual, research on mindfulness-based practices as a way to cultivate therapeutic presence are also be briefly explored.

### **Literature Review**

In the following pages I review literature from research about therapeutic presence, mindfulness-based practices and expressive arts therapy. Since early psychotherapy literature, presence has been mentioned in different contexts by theorists. It is often defined as the foundation and groundwork needed to form a therapeutic alliance with a client. However, not much research exists about the ways to foster therapeutic presence and measure it.

In the psychoanalytic tradition, a therapist's presence is understood in terms of attentiveness, wherein the therapist is detached, calm and open to receive from the client. Freud (1912) noted that the doctor "must turn his own unconscious like a receptive organ towards the transmitting unconscious of the patient. He must adjust himself to the patient as a telephone receiver is adjusted to the transmitting microphone" (p. 115). The therapists' inner experience and sharing it with clients or fostering an emotional connectedness in the therapeutic relationship was not emphasized in classic analysis.

Emphasizing the here and now moment between the therapist and client, gestalt theories highlight a present centered approach. Describing the relational space between the therapist and client, Yontef (2007) writes, "change happens through the contact between the therapist and patient. The emphasis is on 'meeting' the patient, on contact without aiming" (p. 18). Dialogical traditions in gestalt therapy explain presence as an I-Thou relationship, having the "power to allow one to meet and hence understand the other, for the purpose of healing" (as cited in Geller, 2012).

Some important contributions to therapeutic presence were made by existential theorists. According to Bugental (1987), presence can be defined as "an availability and openness to all

aspects of the client's experience, openness to one's own experience in being with the client, and the capacity to respond to the client from this experience." Therefore, both gestalt and existential theories highlighted the therapist's experiences and a relational space in therapy, acknowledging that a therapist's increased personal awareness can facilitate the healing process.

The creative process of an artist is also used to draw parallels between therapeutic presence and techniques to achieve it. Rollo May, a leading existential theorist writes,

The therapist's situation is like that of the artist who has spent many years of disciplined study learning technique; but he knows that if specific thoughts of technique pre-occupy him when he actually is in the process of painting, he has at that moment lost his vision; the creative process, which should absorb him, transcending the subject-object split, has become temporarily broken; he is now dealing with objects and himself as a manipulator of objects (p. 85).

In light of the above literature, presence is understood as the very foundation of therapist-client interaction, such that a therapist's present self can illuminate client experiences. Existential theories therefore view presence as a necessary value to be cultivated in therapists.

A spiritual aspect to presence was suggested in the later writings of Carl Rogers. He explained it as an "inner, intuitive self, often unknown" Further saying that being attuned to this inner experience leads to "profound growth and healing" (Rogers, 1980, p. 129) Recent literature in client centered approach to therapy views presence as a possible fourth and underlying aspect of therapist-offered-conditions of congruence, unconditional positive regard, and empathy. Natalie Rogers (1993) further explains presence through her concept of the Creative Connection,

emphasizing the use of arts as a “healing process for self-exploration and understanding” (p.98). According to Rogers, in order to facilitate presence in clients through expressive arts therapy, it is essential that the therapist herself uses the arts for self-awareness and an inner journey.

Body centered awareness is also emphasized as a way for increased presence. Therapist’s awareness of bodily experiences helps them to attune to the here and now and interact with a client based on inner cues about the client’s situation. An expressive arts therapist, Robbins (1998) described therapeutic presence as including an understanding of the client through his own bodily messages, which enables one to use self to help others. Further exploring Robbin’s concept of presence, Schwarz, Snir and Regev write, “ a therapist who is therapeutically present is able to attend to the movement between his or her own inner self and the self of the client; that is, the to-and-fro oscillations of cognition, feeling, and embodiment, as well as one’s own experience and experiences shared with another” (2018, p.11).

There is increasing research in Cognitive-Based Therapy (CBT) on the importance of technique and an interpersonal relationship between the therapist-client. The latter helping to facilitate positive outcome. An important aspect of Mindfulness Based Cognitive Therapy (MBCT) developed by Mark Williams, John Teasdale & Zindel Segal for people diagnosed with depression and anxiety is a therapist’s own practice of mindfulness. In the literature of acceptance and commitment therapy (ACT), Wilson and DuFrene (2008) describe therapist’s presence as follows,

By increasing our own ability to focus on what’s happening in the present moment, we can sharpen our clinical skills. Our interaction with clients is a sort of dance. We may lead, but we need to lead with flexibility, including the flexibility to know when to give



over the lead. We need to determine when it's time to intervene and when we'll accomplish more by sitting back and listening. Sometimes we need to speed things up; at other times, slowing down is what the situation demands. In all of these cases, studied and practiced attention to the present moments is one of our greatest clinical resources (p. 127).

### **Empirical studies on Therapeutic Presence**

In the following pages I review recent studies on therapeutic presence. Pemberton (1977) conducted a qualitative research by interviewing five therapists to understand their ability to be present with clients and concluded that presence requires commitment from both the therapist and the client and is a process that can be actively fostered by *Focusing*; clearing one's mind to feel centered, *Enfolding* -bringing the client's experience into your own. It "encompasses the skills of empathy, unconditional acceptance, and understanding" (1977, p. 96) and *Extending* the therapist's awareness to both self and others. The concept of self and others leading to greater presence is also explored in Buddhist and Mindfulness based practices and will be reviewed in the forthcoming sections of this literature review.

Phelon (2001) conducted a study on healing presence by observing clinicians and examining prevailing literature on presence and formulated a model of four concepts grounded in the therapist's self that promote presence. It includes therapist's own development and efforts for growth, spiritual beliefs and practices, awareness of self and others and the relational space between therapist and client.

Geller and Greenberg (2002) developed a model of therapeutic presence derived from a qualitative study of therapists' experiences. It articulated three main categories of therapeutic presence- (1) "preparing the ground for presence", (2) "the process of presence", (3) "experiencing presence" (p. 79). This framework for presence is elaborated in the next section and will be frequently referred to by the author in the course of this capstone.

### **A Qualitative and Quantitative Model of Therapeutic Presence**

Geller and Greenberg model of Therapeutic Presence is based on the research findings of a qualitative analysis of seven therapists' reflections on their experience of presence. The therapist interviews were systematically analyzed to identify themes and create domains. After series of revisions and analysis by experts, three emergent domains were generated as the foundation for the model of therapeutic presence.

**Preparing the ground for Therapeutic Presence:** Preparation can help create the conditions for presence. According to the model, two ways to prepare for therapeutic presence is *prior to or beginning of a session* and *in daily life*. As a result, preparation involves action orientated tasks undertaken by the therapist to set the stage for presence to emerge. Some ways to do so can be a clear intention setting to bring one's awareness to the client, taking deep breaths to self-regulate before stepping into a client's session, actively clearing space inside by putting one's personal thoughts & concerns out of immediate awareness and letting go of a perceived sense of control over the session.

An example of preparing the ground for presence can be the 'pre-meeting rituals' at my internship site. I am an intern at a grief and bereavement center that has a ritual as part of

preparing oneself to facilitate a peer support group. Before groups start, the facilitators meet for 30-40 minutes to go over client details and ground themselves in the present moment. It begins by ringing a singing bowl twice and focusing on the sound as a way to regulate breathing, next the clinician passes a stone around the group and invites the facilitators to leave any distractions or preoccupations in the stone and set an intention for their time with the clients. This active process of taking time to set an intention helps the facilitators to ground themselves and cultivate an attitude of openness for the session.

Another way to prepare for presence is through committing to presence in daily life. This model emphasizes the need for therapists to create time in their daily lives to attend to one's needs and engage in personal growth and development. Personally, I engage in Buddhist meditation and use the expressive arts to cultivate a self-relationship and presence. By engaging in the creative process and through meditation I engage in a deeper awareness of my thoughts, concerns of daily life and I am able to center and ground my emotions and thoughts as a way to prepare myself for the day.

**Process of Therapeutic Presence:** the second domain of the model is about the actions a therapist can take when in a session with client(s) to create presence. It has three subcategories- *receptivity*, *inwardly attending*, and *extending and contact*. Receptivity refers to taking in the experience of the session on a multisensory level. Thus, the therapist is open to the incoming information from the client in “a way that is kinesthetic, sensual, physical, emotional and mental” (Geller & Greenberg, 2002, p. 78). The therapist is open to what emerges in the session, pays attention to her/his body's responses and uses the information as cues that guide the session. Receptivity also involves taking in the client as a whole, i.e. not just focusing on the client's

words but their affect, tone, body postures, and the silence in between interactions. Based on the qualitative study by the authors, therapists reported an “extrasensory level of communication that occurs between themselves and their clients when in presence” (Geller & Greenberg, 2002, p. 78).

*Inwardly Attending* is the second process in presence. The therapist uses self as an instrument to guide the therapeutic process. “Inward information can be experienced in the form of images, visions, intuitions, guiding voices, techniques, emotions or bodily sensations” (Geller & Greenberg, 2002, p. 79). The model suggests that when present, a therapist is more aware of their internal cues and they can often be more creative and spontaneous. The author is of the view that through personal engagement in the arts, the process of presence naturally creates situations to introduce arts with clients. As an expressive arts therapist I use arts as a healing medium in my ‘daily life’ and consequentially I am more trusting of the emerging creative process within the session and can provide it as a tool to the client. As a result, the domains of the presence model do not happen in a sequential manner but impact each other and manifest throughout the session.

The third category in process of presence involves “*extending* one’s self and one’s boundaries to the client and meeting and *contacting* the client in a very immediate way” (Geller & Greenberg, 2002, p. 79). Thus, after recognizing the emerging internal cues, the third domain in process is offering that information to the clients, albeit in ways that guide the therapy process. As a therapy relationship can often be a vulnerable experience for the client, contact also involves being open and accessible to them as a human being willing to accompany the client in

their journey. Hence, process of presence includes taking in the information, becoming aware of it on a multisensory level and then responding to the client.

**Experience of Therapeutic Presence:** the last domain in the model of therapeutic presence is the actual experience of presence in a session. As a therapist creates the conditions for presence, it is experienced in the session as a way of “*being* with the client rather than a *doing* to the client” (Geller & Greenberg, 2002, p. 85). The model explains the experience of presence with the help of four subcategories. Therapeutic Presence involves an *immersion* in the here and now moment with the client, such that the therapist maintains a sense of self while also aware and alert of the client and whatever emerges in the session. The model further explains it as a moment of energy flow between the therapist and client and feeling a sense of connectedness.

There is also a sense of *grounding* that accompanies presence and adds to the relationship conditions. Explaining this subcategory, Geller and Greenberg (2002) write, “from this place of grounding, therapists can connect to a larger capacity for healing, as well as a more enhanced receptivity of the subtleties of the client’s experience, which can in turn elevate therapist understanding of the client’s experience” (p. 84). Lastly, the model defines the experience of presence from a person-centered lens of therapist’s intentionality for growth and healing for the clients and the client’s inherent ability to bring about a positive transformation, explained as *being with and for the client*.

### **Quantitative Model of Therapeutic Presence**

Based on the categories of process and experience of presence, Geller, Greenberg and Watson (2010) conducted a quantitative study and devised a 21-item therapist self-report measure called Therapeutic Presence Inventory (TPI-T) and a three-item client- self report version (TPI-C). Items of the measures were generated from the model of therapeutic presence, and then subjected to item analyses and expert ratings. The TPI-T and TPI-C were then provided to therapists and clients in two psychotherapy research studies. The study consisted of 25 therapists from diverse therapeutic orientations including CBT and client centered therapy and the client sample consisted of 114 clients from varied social and educational backgrounds who met the Diagnostic and Statistical Manual (DSM) criteria for major depression (Geller et al, 2010). Items on both TPI-T and TPI-C were submitted to a principal axis analysis to ensure that the scale reflected the quality of presence, this rigorous factor analysis shows that the inventories “reflect a unidimensional measure with good construct validity” (Geller et al, 2010, p. 605). Similarly, reliability of TPI was calculated by computing Cronbach alpha for both the inventories, it was reported as .94 and .82 for the therapist and client version respectively, hence indicating good reliability. The research found that clients reported a positive change in their experience of therapy when the therapist was felt as being present, “irrespective of the theoretical orientation” (Geller et al, 2010 p. 608), further reporting the “therapeutic relationship alliance as stronger when they felt their therapist was more present with them” (Geller et al, 2010, p. 609).

### **Therapeutic Presence in Group Psychotherapy**

According to Yalom (2005), “Presence is the hidden agent of help in all forms of therapy” (Yalom & Leszcz, 2005, p. 106). The development of presence in the process of group

psychotherapy is based on the stages of group process- Forming, Storming, Norming, Performing & Adjourning. (Yalom & Leszcz, 2005; Crane-Okada, 2011)

Presence for the therapist and group members begins with preparation of the physical space. As group members come together, it creates an opportunity for the therapist to prepare the ground for presence. Outside the group it involves therapist's own commitment to education, training and self-awareness. As the group meets and progresses over time, a therapist can prepare for presence by staying attentive to the stages of group development. The process of presence is described from the lens of countertransference considerations like the therapist's resistances, feelings and inner thoughts, and presence is established when a therapist is able to recognize and deal with countertransference with different group members. By not being present to inner cues a therapist is prone to feeling unsure of his/her next steps, taking sides with group members during the storming phase, too little or excessive self-disclosure or unknowingly placing their emotional needs ahead of group. All of this can impact group member participation and their experience of therapist's presence.

Lastly, the outcome or experience of presence is defined as visible signs of commitment by therapist, experience of satisfaction in the members about the group process, and an emphatic engagement with the members. It is also seen as a therapist's ability to draw on clinical experience, supervision, and intuition when responding to client and allowing oneself to be affected by the group members while maintaining a sense of self separate from the clients. Thus, therapist's sense of presence significantly impacts their performance. This authentic, present-centered awareness of the therapist is often carried by the group members to other relationships in the world. Therefore, therapeutic presence in group work is in many ways similar to individual

experience of presence where it is seen like a shared journey that affects both therapist and clients. (Crane-Okada, 2011)

### **Safety, Polyvagal Theory & Presence**

According to Polyvagal theory put forth by Stephen Porges, there are three autonomic subsystems in mammals that evolutionarily developed as a response to environmental factors of safety, danger, and life threat. (Porges, 2009). The theory explains that when humans experience safety they engage in effective social communication and the automatic defense systems in the brain are inhibited. Thus, in order to help clients down-regulate their defense responses, a therapist needs to create an experience of safety and positive interactions for the client. Such interactions help clients to access their feelings of openness and self-explorations and strengthens the neural pathways that inhibit defensive systems. According to the concept of neuroception, our brains have the capacity to “automatically evaluate risk in the environment without awareness” (as cited in Geller & Porges, 2014, p. 182). As defense systems are lowered, the client’s physiology becomes calm and regulated and allows them to be open and present to deeper feelings, meanings and needs. Further the theory explains that as individuals feel safe their bodies are regulated and promotes growth, and it manifests behaviorally as “controlled gaze, facial expression, head gestures, listening and prosody” (as cited in Geller & Porges, 2014, p.182).

Linking the polyvagal theory to therapeutic presence, the theory provides a neurophysiological perspective to the importance of presence with oneself and others and explains a bidirectional communication between the nervous systems of people engaging in social interactions. According to Geller & Porges, (2014), “ when features of safety are detected



autonomic reactions promote open receptivity with others, but when features of threat are detected reactions promote a closed state limiting the awareness of others...activating a sense of safety through being present with and for the client, can down regulate the client's defenses and promote positive growth and change" (p. 183). Further the authors write, "by allowing clients to develop feelings of safety over time through providing consistent presence, the therapist relationally regulates the client's nervous system stress responses. This, in turn, facilitates self-exploration through social contact, healing, and deepened self- understanding" (Geller & Porges, 2014, p. 185).

Polyvagal theory validates the significance of therapeutic presence and explains how relational presence that grows within and between therapists and clients is the foundation for effective therapeutic work. Since this thesis focuses on the therapist attuning to self as a way to be present with client, in the next part I explore the concepts of inner attunement and felt sense through the lens of expressive arts and mindfulness.

### **Arts as Healing**

Arts provide a structured way to zone in, to go in deeper and use the creative process to create meaning. Engagement in arts is often a present-centered activity, as in the experience of listening to music, making art or moving to a rhythm, where one is acutely aware of embodied senses and messages. According to McNiff (1982), all elements of creative expression from imagery to movement and sound work together are a part of human imagination. In my opinion, presence is a muscle that needs a daily workout and expressive arts can provide this experience of being fully aware and in the here and now.

Arts as healing is the foundation of the Therapeutic Drumming and Mindfulness Imagery (TDMI) technique created by Shari Geller. It is a technique that involves group drumming, relaxation exercises, and guided imagery to promote “health, wellness, and authentic expression while deepening connection with community, inner wisdom and potential for growth” (2009, p. 10). The program is designed to help therapists express their thoughts, feelings, concerns and release stress. TDMI is useful as a tool for therapists to make sense of their personal lives, to become aware of and process what comes up internally in order to create space for clients. It enables one to practice self-nourishment and become more present to connect with others. This ongoing self-awareness on the therapists’ part is in many ways essential for presence with clients and TDMI which I see as a method based on the concepts of expressive arts helps to express different emotions and establish a sense of personal safety.

The second domain of the model of therapeutic presence is the process of presence which includes taking in what the client presents on a multisensory level, attending to what comes up for the therapist and then extending it back to the client. Attending to the inner resources of the therapist can also be explained as trusting the felt sense or embodied knowledge. This felt sense is difficult to explain in words, but more often than not directs parts of the therapeutic encounter, influencing how a therapist responds to the client. Apart from discussing their clients through a specific theoretical lens, I have often come across professors and supervisors saying that it was an intuition or an inner sense that encouraged them to respond to a client in a specific way or in case of expressive therapists, introduce an art form or move to a different one. I believe that individuals are able to tap into this felt sense when they are present with self and environment. Thus, presence enables one to tap into this embodied knowledge. According to expressive arts therapist Laury Rappaport, “Through the artistic process, one is able to make discoveries and

have insights that could not be known otherwise. Art provides a language to capture, witness and unfold this somewhat mystical inner experience. Words alone cannot provide this” (2013, p. 99). Expressive arts by their very nature encourage a deeper self- awareness, develops an awareness of inner wisdom and further extends to presence with others.

Further, referring to the use of self in creative arts therapies, Edwards (2017) writes “rather than engaging a set of techniques or manualized exercises that instruct the therapist what to do, instead the therapist prepares themselves prior to session commencement with the aim of being present, attuned and open” (p. A1) Thus, both setting up the physical space for arts and therapists’ own preparation is crucial for presence in a relational context.

### **Expressive arts therapy and presence**

In previous sections I reviewed literature on therapeutic presence exploring early research on the topic to current empirical studies and further focused on a qualitative and quantitative model of therapeutic presence. I also looked at the interconnections between therapeutic presence and polyvagal theory and explained presence as a foundation for client’s feelings of safety. Then I moved on to introduce arts as a medium for healing and developing a self-relationship. The concept of presence is particularly important in working with the arts because of the very nature of expressive arts work as it has the power to “activate cognitive processes, evoke emotion, bypass personality defenses and make aspects of the unconscious conscious” (Eberhart & Atkins, 2016, p. 24).

I see cultivating therapeutic presence as a necessary part of a therapist’s ongoing self-care. Being an expressive arts therapist in training, I gravitate towards arts as a way to attune to

myself, to go in deeper to access my thoughts and feelings and experience a sense of calm as well as an awareness of self and environment. I see expressive arts therapy as a medium for enhancing therapist's presence and as a medium to sustain relational presence.

Some of the previous sections of this literature review mentions some aspects of Expressive arts therapy including the creative process and body-centered awareness. Both concepts are explained in different expressive arts theories. Much of the theoretical foundations of expressive arts therapy comes from the belief that every human inherently possesses creative intelligence and arts is a way to reconnect to this intelligence. Through using a multimodal approach, one becomes aware of the creative process and is able to utilize it as a method of inquiry. The language of play and imagination liberates this inherent creative spirit and finds ways to transform and heal (McNiff 2004, 2009; Kossak, 2015; Levine, 1999; Malchiodi, 2007).

### **Intermodal Theory**

Intermodal theory emphasizes that each art form contains within it the seeds for other art forms. As Expressive therapists, we create therapeutic spaces involving the therapist, client and the art process. Just as a stone thrown in a river creates a ripple effect so does introducing arts with clients as it engages the client's imaginative capacity. Then by paying attention to the interpersonal, intrapersonal and transpersonal functions of the arts, one is able to develop a deeper meaning and understanding of self. Since this imaginative and creative capacity can respond through different modalities, expressive arts therapists may work with arts, using the "language of imagination" (Knill, 1994, p. 322) in a sequence, use arts simultaneously or transition from one art form to another (Estrella, 2007).

Further describing the interpersonal aspect of expressive therapies, Natalie Rogers (1993) writes, “art enables one to tap into the unconscious and become aware of new aspects of self, thus gaining insight and empowerment. Then, by connecting to at least one other person in an empathic and supportive environment, we learn ways to relate to the community” (p. 9).

In my personal experience, the process of intermodality helps to both exercise presence and provides an opportunity to develop my capacity for presence. As I move through intermodal transfers in my personal explorations, I become more present to emerging meanings and able to expand them through the use of arts. This deeper connection and attunement to self is transferred to other interactions including clients at my internship site.

Engaging with the arts in an intermodal way also encourages me to approach it with all of my senses and respond to what emerges in the art, what emerges in myself and in the moment. Thus, being present to the process and product of the expressive arts work brings about new discoveries and insights. Explaining this interconnectedness, Herbert Eberhart and Sally Atkins in their book *Presence and Process in Expressive Arts Work* write, “by noticing and paying attention in expressive arts work, both client and change agent are also sensitized to each other and the present moment... each of the media and modalities of the arts calls us to be present with the senses, to see, hear, touch and respond, to be aware of sensations and emotions and associations. The arts call us to sense our own aliveness” (2016, p. 78-79)

### **Entrainment and Safety**

Everything in life has a rhythm or a flow. Entrainment refers to the resonance that occurs between what is creating a rhythm and the direct recipient of the rhythm. In physics, resonance is

defined as either sympathetic or forced. This is an important concept in therapy as it is this synchrony and flow of energy in the relational space between the therapist and client that can create safety and trust. According to Kossak, (2015) “each clinical situation is unique and brings with it a very individualistic rhythmic resonance. The therapist must tune in and understand what is needed in the moment in order to guide the client in a way that is useful and in rhythm with the sympathetic resonance being presented” (p. 102)

Thus, in light of the polyvagal theory, neuroception and the concept of mirror neurons; defined by Berrol (2006) as a neuropsychological phenomenon in which “the same sets of neurons are activated in an observer as in the individuals actually engaged in an action or the expression of some emotion or behavior” (p. 303), a therapist’s presence and sense of safety will elicit the same response in clients. In my personal experience, by enhancing this sense of safety within myself through arts, I am further able to provide the expressive arts to clients for their self-attunement and exploration in a safe way. Shaun McNiff who emphasizes the use of arts for healing and the therapists’ role in creating a safe space writes, “when we are truly present with one another and open to whatever needs to be expressed, this pervasive sense of safety and even sacredness can emerge. This is the most fundamental quality of the healing studio. Creative powers are exercised when people feel safe” (2004, p.29).

Lastly, the interrelatedness of therapeutic presence, expressive arts therapy and attunement are echoed in a research article by Mitchell Kossak (2009)

“Attunement in a personal and intersubjective sense can then be thought of as an integral part of the practice of arts based psychotherapies because engagement in the creative process itself increases awareness of the present moment, which includes a felt sense of

embodied flow, a feeling of being out of linear time, and a deeper connectivity to our true nature” (p.15).

### **Buddhism and Presence**

The quality of presence can also be developed through a regular practice of mindfulness. The purpose of meditative practices is to develop the skill to be fully present in the here and now, so as to “develop the capacity to access the ‘real’ world and live harmoniously within it” (Colosimo & Pos, 2015, p. 101). In a study conducted by McCollum and Gehart (2010) with graduate students in a marriage and family counseling program, practicing mindfulness was linked to an increased capacity to focus awareness in the present moment. Presence was defined as a quality that is difficult to explain but experienced by others as deep listening, an attitude of receptivity, and an open style of engagement (McCollum & Gehart, 2010, Epstein, 2003).

In this section of the literature review I very briefly explain my experience of presence as an effect of my Buddhist practice by exploring the research on Buddhist empowerment and psychology. My interest in adding this aspect to my thesis is that I view my daily practice of chanting and meditation as an important part of my therapist identity that also significantly influences my experience of presence with self and others.

One of the key concepts in Buddhism is the idea of dependent origination that emphasizes the interdependence of all things. All human and non-human life exists only because of their relationship with each other. Thus, this idea of interconnectedness with each other and the world at large is similar to the relational aspect of presence between therapist and client. This Buddhist practice emphasizes chanting and meditation as a tool to develop oneself and to further

create positive transformations in interpersonal and intrapersonal relationships. In my experience, as I start my day by focusing in through this practice of chanting, I am able to develop a deeper appreciation for my relationships which in turn affects my work with clients. It is a daily activity to prime my heart and mind, to set an intention for presence (Dockett, 2003; Ikeda, 2010).

Another concept that lies at the core of Buddhist philosophy is a belief in an internal locus of control. While western philosophies view individual and environment as two separate entities, many eastern philosophies see them as fundamentally one. As a result, whatever manifests internally for an individual is also simultaneously manifested in the environment. I often experience this phenomenon in my life. If my day starts with feeling rushed, scattered and all over the place, it more often than not is reflected in how I perceive my environment. Though it may be difficult to explain, but days that begin with setting an intention for presence somehow end up with an experience of feeling accomplished and happier. According to Dockett (2003) “this personal control is synonymous with the definition of psychological empowerment, which involves increasing perceptions of competence and control, understanding one’s environment, and taking action to produce change” (p.183)

Lastly, numerous Buddhist writings also emphasize a “challenge orientation” (Dockett, 2003) which means viewing the condition of “constant change as the nature of life and world” (Neimeyer & Young-Eisendrath, 2015, p. 265), and using obstacles as opportunities for growth. Nichiren Buddhism explains it through the concept of ‘changing poison into medicine’. It can be seen as a way of cognitively reframing negative events or deadlocks and obstacles in life and relationships as opportunity to reflect and transform them into positive outcomes. Thus, having



this philosophy as my basis and then meditating to bring forth presence enables me to be more aware of non-presence and moments of stagnation with clients and encourages me to ground myself back to the here and now and find ways to help clients experience positive shifts and healing.

Engaging therapeutic presence is a skill and needs a disciplined practice to cultivate. Research on presence shows that spiritual practices help therapists to ground themselves and sustain presence with others (Geller & Greenberg, 2002). In my personal life I see parallels between chanting and meditation, and expressive arts for sustaining presence as a daily practice. Both of these together help to activate the skill of presence and then explore it through the more tangible and visible medium of arts. Research on therapeutic presence shows that spiritual practices help therapists to ground themselves and sustain presence with others (Geller & Greenberg, 2002) and this literature review brings together a spiritual practice and expressive arts as a way of enhancing presence for therapists.

## **Discussion**

As an expressive arts therapist in training I am learning to be attentive to what is happening inside me, what the client is experiencing, information from the relational space between us and the insights of the arts process and product. Thus, presence for an expressive arts therapist, just like other helping professions is a multilayered concept. This literature review has been an attempt to understand this concept and my most important insight during this journey has been that presence is a practice. As a therapist and more so as a relational human being, I cannot always be fully present all of the time, but I can work on cultivating presence, to learn it and train myself. Just like any other skill requires persistence, commitment and hard work so

does cultivating presence and this capstone thesis looks at expressive arts and meditation as a way to develop this muscle.

The ongoing process of presence involves a cognitive, emotional and somatic self-awareness (Eberhart & Atkins, 2016) and arts can provide just such an expansive state of awareness. Expressive arts work involves exploring the messages art can bring out for an individual to foster healing. It has the possibility of surprise; it brings about new perspectives and connects one to their inner wisdom. Trusting the arts helps nourish the soul. Paolo Knill explains a '*third*' that comes up in an artistic process, an unexpected, special moment of heightened awareness of self in relation to the universe, an 'aha' moment. Exploring this moment leaves one with insights and dramatic shifts and can have a profound impact. I believe these powerful moments of expressive arts work to be the very embodiment of presence and a regular engagement in expressive arts work with its foundation in poiesis- creatively engaging with what emerges in life, can enable one to connect with self and environment.

My thesis was an attempt to understand therapeutic presence by answering two questions. First, what it means conceptually. This was answered by looking at different perspectives about the topic, recent researches and understanding it from the perspective of both therapist and client as well as individual and group therapy. Given the scope of this research I couldn't thoroughly explore clients experience of presence but focused on my own understanding of being in the here and now. The second question that I addressed was how I as an expressive arts therapist in training can take steps to achieve presence in my work with clients. This was answered by examining expressive arts work and mindfulness-based practices as ways to cultivate presence and through ongoing self-exploration using these processes.

In order to experience presence and identify moments when I was fully in the moment and when it was harder, I started a regular practice of my specific meditative ritual of chanting followed by artmaking and processing before going to my internship and working with the clients. I also want to add here that the environment at my internship site, a grief and bereavement center in Massachusetts in itself is a community that values therapeutic presence and has a ritual to help interns and volunteers tune in and ground themselves before beginning work with clients. While I see my daily practice as a preparation for presence in daily life, I see my internship rituals of ringing a singing bowl and setting an intention as ways of cultivating presence prior to the session.



The above image emerged during one such self-exploration. Having chanted for 30 mins to focus in and kickstart my day, I played music and sat down with oil-pastels and my journal curious for an image to come to life and present itself. That morning I had one specific client from my site on my mind who was the quietest group member and barely responded to me during group time. After furiously working with the oil-pastels almost as if the image couldn't wait to come out on paper, I ended up writing about it and the words "The roots are also flowers. They are still growing though unseen" emerged. Another time after focusing on my breath and moving, I wrote in my journal- "looking inside and outside today. Stay connected with inside". Reflecting on my time with group members afterwards helped me make connections between engagement in arts and meditation and a deeper awareness of client interactions with both me and each other. I also became aware of subtle non-verbal cues of clients as well as witnessed the impact of expressive arts work with grief and loss. I was not only more present with what was emerging for the clients in the room but also able to take it in with curiosity and openness without feeling weighed down and tired.

I have come to understand that personal presence above all creates the invitational space for clients to be open, comfortable and vulnerable. Cultivating presence in my life through arts provides me a powerful tool of self-awareness, a way to "connect to the soul" (McNiff, 2004), and a sense of inner safety which can then help me create safety and trust with clients so that they too can use the language of arts for inner exploration. Expressive arts therapy is not about interpretations, the very essence of expressive arts work is an engagement in imagination and becoming aware of the artistic process as it ignites emotions, sensations, thoughts and insights. It involves noticing and paying attention, thus expressive arts work in itself is a practice of presence. The more I engage in my personal meditative and expressive arts work it enables me to

become present and being an expressive arts therapist helps me provide arts to the clients in a trusting and authentic way.

Lastly, therapeutic presence is a skill that may come about easily and more naturally for experienced therapists but as a beginning expressive arts therapist, Presence is a topic that fascinates me and this thesis has been a journey of looking at my personal self-care practices and seeing them as methods of cultivating this skill. Going further, I am interested in continuing to record my observations about presence through my regular engagement in arts and meditation and use this research as the beginning point to understand this complex phenomenon. One way to do so will be focusing on the client perceptions of presence and how it may interrelate to expressive arts work in session. Arts add another dimension to therapeutic work and can provide interesting insights about presence. I would also encourage readers to view these methods as one way of cultivating presence and to identify how their own self-care practices also contribute to developing the art of presence.

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***THESIS APPROVAL FORM***

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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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