Drag as a Method of Expressive Art Therapy For LGBT+ Individuals

Nicole Soubosky
soubosky@lesley.edu

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Drag as a Method of Expressive Art Therapy For LGBT+ Individuals

Literature Review

Capstone Thesis

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Nicole Soubosky

Expressive Arts Therapy

Thesis Instructor: Tamar Hadar, PhD, MT-BC
Abstract

The field of expressive art therapies utilize the process of creativity to promote therapeutic healing. The focus of this thesis is the mental health concerns that impact the LGBT+ community, and how the art of drag performance can be implemented as an arts-based treatment approach for this population. Traditional forms of mental health treatment reflect majority values that discount the experiences of queer individuals, despite the disproportionately high levels of mental health challenges faced by the LGBT+ population compared to those who identify as heteronormative. The research included in this thesis explores the mental health concerns prevalent within the LGBT+ community, how the principles of the expressive arts are able to address such concerns, and the value drag holds as an art form for queer people. The specific therapeutic domaines identified as holding the most relevance to the mental health of the LGBT+ population are: community relations, societal rejection, identity expression, and self image.
Introduction

Within the field of the expressive art therapies creativity is utilized as a tool that can assist in healing (Hinz, 2009). In the time I have spent as an art therapy graduate student I have come to understand creativity as an invaluable component to the therapeutic process. During this time I have also been made aware of the Eurocentrism, sexism, and the prejudices that are at the foundation of modern therapeutic practices (Brewster et al., 2019). These have led to practitioner biases that perpetuate majority privilege and minority oppression; specifically in regard to accessibility to effective mental health treatment (Brewster et al., 2019). A population that has been exceptionally affected by this is the LGBT+ community; a minority group that experiences depression, suicidal ideation, anxiety, self-harm, and victimization at formidably higher rates than individuals who identify as heteronormative (Hardy & Monypenny, 2019).

The relevance of my sharing this information is to discuss the responsibility expressive therapists hold in regard to embracing the different cultural or communal beliefs held by their clients. Particularly via the inclusion of creative interventions that celebrate non-majority identities (Brewster et al, 2019; Hardy & Monypenny, 2019). It is my belief that the art of drag performance can be utilized as a method of expressive therapy that embraces the LGBT+ community. The following research serves the intention of identifying the properties of creative healing present within drag performance, while exploring how this information correlates with the expressive therapies. It is not the purpose of this paper to propose a specific intervention involving drag, but to inspire expressive art therapists to consider how drag can be utilized in their work with LGBT+ clients.
This discussion will consider therapeutic concerns within the LGBT+ community, and how they align with the creative healing that can be experienced when performing drag (Christian, 2010; Hardy & Monypenny, 2019; Rudnick, 2020). My research will include a discussion of the factors that belong to the Expressive Therapy Continuum (ETC) present within drag performance, and how these factors are manifested via the different creative components of drag (Christian, 2010; Hinz, 2009; Rudnick, 2020). The therapeutic concerns that will be expanded upon in the most detail are those regarding: community relations, societal rejection, identity expression, and self image.

I will also present information on drag performance from a historical perspective, which will include cultural elements associated with the craft. The purpose of this is to further explain why I chose to research drag as a method of expressive art therapy for LGBT+ people. Through this explanation I hope to widen the understanding of drag as an art form, and the role it has played in the fight for equality within the LGBT+ community. The history of drag includes its multi-decade presence among political protests and pride-related occasions (Christian, 2010; Bailey, 2011; Greenhalgh, 2018; Rudnick 2020). My discussion of drag’s historical significance will include the role it has played in the innovation of gender expression, and non-binary identification as well (Christian, 2010; Rudnick 2020). These qualities are meant to demonstrate the ways in which drag has acted as a symbol of safety and acceptance for generations of LGBT+ people. The objective of this paper is to raise awareness of the mental health disparities experienced by LGBT+ people, the factors within the mental health field contributing to such inequalities, and the need for more inclusive therapeutic approaches.

**Literature Review**
The research presented in this section serves the purpose of explaining the therapeutic concerns prevalent within the LGBT+ community, in addition to the corresponding healing prosperities that can be provided through the expressive art therapies. This will also include the healing benefits present within the creative processes associated with drag performance. The initialism “LGBT+” refers to lesbians, gays, bisexuals, transgenders, in addition to any individual who does not identify as both heterosexual and cisgender (Moagi et al., 2021). This might include people who identify as queer, intersex, asexual, pansexual, non-binary or gender fluid (Moagi et al., 2021).

**Mental Health Concerns Within The LGBT+ Community**

The mental health struggles experienced by LGBT+ people are related to both higher rates of mental health diagnoses, as well as difficulty in finding effective treatment (Moagi et al., 2021). An integrative literature review conducted by Moagi et al. (2021) explores the mental health challenges common within the LGBT+ community, revealing three major mental health concerns: emotional distress, “stigmatization, discrimination, victimization and social exclusion” (p.3), and disrupted access to mental health services. Moagi et al’s research included the use of both quantitative and qualitative data. These results were achieved by synthesizing the mentioned data through a thematic analysis (Moagi et al., 2021).

Emotional distress was reported to manifest within the LGBT+ community via: higher rates of depression and anxiety, self-injurious behavior, as well as suicidal ideation and attempts in comparison to the heteronormative population (Hardy & Monypenny, 2019; Moagi et al., 2021). Emotional distress is often experienced by LGBT+ individuals as internal conflicts regarding one’s sense of self and identity acceptance (Barbee & Schrock, 2019; Hardy &
Monypenny, 2019; Moagi et al., 2021). Stigmatization, discrimination, victimization, and social exclusion refer to the “social and structural determinants that contribute to sexual orientation-based mental health disparities” (Moagi et al., 2021, p.8). Such influences cause disruption in the LGBT+ population’s access to mental health services due to biased treatment, and clinician-stigmatization. Concerns of this nature correlate directly to LGBT+ individuals’ minority status, and should be viewed in a political manner (Hardy & Monypenny, 2019; Moagi et al., 2021).

Brewster et al. (2019) acknowledge the therapeutic concerns that specifically affect gender-expansive individuals by conducting a study that reviews a series of case illustrations involving non-binary clients. The study addresses the wide range of concerns that bring gender-expansive individuals to therapy, and how these concerns are often homogenized due to clinician ignorance (Brewster et al., 2019). When multiple clients identify within a single group, such as the LGBT+ community, clinicians often stop considering individual factors and perceive client concerns from a single lens (Brewster et al., 2019). This lack of individual consideration is detrimental to the therapy process, and can reinforce negative internalizations of self relating to the client’s identity (Brewster et al., 2019). Such experiences perpetuate feelings of emotional distress, often deterring LGBT+ individuals from receiving future treatment (Moagi et al., 2021).

This information acknowledges the wide range of mental health concerns present within the LGBT+ community, in addition to the need for therapeutic options that meet the needs of all queer individuals. For the purpose of this thesis the therapeutic domaines that will be discussed in further detail include: community relations, societal rejection, identity expression, and self image. These factors will be used to present research in a way that is both: an adequate
representation of how mental health is experienced within the LGBT+ community, and is able to be related to the healing benefits associated with the expressive therapies.

**Community Relations and Societal Rejection**

The way in which mental health struggles are experienced among LGBT+ individuals is heavily affected by their position within their social environment (Levitt et al., 2017; Quinn & Sinfield, 2004; Moagi et al., 2021). As previously mentioned, the heteronormative values in which society functions actively contribute to the oppression, marginalization, and discrimination of LGBT+ people. Quinn and Sinfield (2004) explain the detriment this has on mental health within the LGBT+ community using concepts based in queer theory. Their research examines the dynamics of being a sexual minority in relation to social hierarchies, politics, and sense of well-being (Quinn & Sinfield, 2004). These dynamics not only address overt acts of prejudices based on sexual-identity, but acts of implicit social rejection such as gender expectations and queer-representation (Quinn & Sinfield, 2004). Moagi et al. (2021) discuss how members of the LGBT+ community differ from other minority groups because “(1) they are not necessarily recognizable through physical characteristics and (2) they are still perceived as acting against natural processes (2).” These factors invalidate the experiences of LGBT+ individuals, which contributes to the alienation of LGBT+ people from greater community relations (Hardy & Monypenny, 2019; Moagi et al., 2021).

Hill and Gunderson (2015) explain the how resources within an individual’s social environment impact the ability to combat the mental health struggles that are prominent within the LGBT+ community. These resources are categorized as: interpersonal resources, institutional resources, and community/organizational support (Hill & Gunderson, 2015). Interpersonal
resources, or social support, at a basic level requires the embracing of a person’s sexuality or gender identity (Hill & Gunderson, 2015). This acceptance from family and peers is associated with “lower levels of depression and anxiety, as well as greater levels of life satisfaction and self-esteem” in LGBT+ individuals (Hill & Gunderson, 2015, 236). Additional components of interpersonal resources entail: perceived support, enacted support, and invisible support (Hill & Gunderson, 2015). Perceived support refers to that which is overtly expressed to an individual (Hill & Gunderson, 2015). Enacted support refers to the active support an individual receives, which might consist of advice or providing comfort through words (Hill & Gunderson, 2015). Invisible support refers to that which an individual is unaware of but receives the benefits of anyway, and is specifically associated with decreased levels of stress in LGBT+ individuals (Hill & Gunderson, 2015). Institutional resources refer to the political policies which protect the rights of LGBT+ people (Hill & Gunderson, 2015). Lastly, community/organizational support is that which is provided by people, groups, and resources within one’s community (Hill & Gunderson, 2015).

The benefits associated with the resources outlined by Hill and Gunderson are not guaranteed to LGBT+ people as a result of societal marginalization. Because of this the LGBT+ community itself often acts as a major beacon of support for queer individuals. The LGBT+ community is not only able to provide interpersonal validation through shared trauma relating to sexuality or gender identity, but companionship that is free of heteronormative expectations and ideals (Quinn & Sinfield, 2004). Jones (2007) elaborates on this through a discussion on the “performative dynamics” that lead to solidarity-building within a gay-male friendship circle. Jones explains how linguistic stylings, storytelling centered in shared experiences, and
conversation topics that relate directly to being a gay man fostered a sense of unification within the group. Engaging in behaviors that are specific to one’s membership within the LGBT+ community resists expectations of leading a heteronormative lifestyle, providing visibility to queer people (Hardy & Monypenny, 2019; Jones, 2007; Quin & Sinfield, 2004). Such community relations are beneficial to the mental health of LGBT+ individuals by promoting feelings of empowerment and acceptance (Hardy & Monypenny, 2019; Jones, 2007; Quin & Sinfield, 2004).

Hardy and Monypenny (2019) present the concept of “queer spaces” as a therapeutic approach that dismantles the gender and sexuality expectations instilled within dominant culture, encouraging LGBT+ clients to explore these parts of self based on their lived experiences. Queer spaces create room for clients to explore the collective trauma experienced across generations of LGBT+ people (Hardy & Monypenny, 2019). This serves the intention of providing “clients with tools that re-tell their experiences, highlighting their persistence and defiance of societal expectation” (Hardy & Monypenny, 2019, 5). Hardy and Monypenny note the complication of developing a therapeutic approach for the LGBT+ population due to the history of modern therapeutic practices discriminating against LGBT+ people. Despite this, the development of queer-informed communities create an outlet for LGBT+ people to receive support that might not be available otherwise.

Identity Expression and Self Image

The LGBT+ community encompasses all people whose sexual preference or experience of gender deviate from what is classified as heteronormative. While this unification has provided visibility and validation to community members, it can over-simplify how sexuality is
experienced among LGBT+ individuals. The LGBT+ initialism includes aspects of identity that refer to sexual attraction, gender identity, as well as “the cognitive and emotional meaning one attaches to expressions of sexuality” (Moagi et al., 2021, p.2). These different identities should be understood within an intersectional spectrum, and it should be noted that one’s sexual identity holds the potential to evolve across the course of one’s lifespan (Moagi et al., 2021). Experiences regarding identity navigation and acceptance present complications for LGBT+ individuals in which those apart of the majority population do not experience (Noble-Carr & Woodman, 2018).

Identity is an internal representation of self that develops in response to the intergroup socializations one experiences within their environment, as well as individual perceptions of such experiences (Noble-Carr & Woodman, 2018). This representation of self has major implications regarding autonomy, self-acceptance, and sense of self-worth (Noble-Carr & Woodman, 2018). While identity development should be viewed as a fluid process that can adapt over time, identity is greatly influenced by experiences encountered during childhood and adolescence (Noble-Carr & Woodman, 2018). LGBT+ individuals are at a heightened risk of encountering adverse childhood experiences, as well as poor familial and peer relations compared to heteronormative individuals (Moagi et al., 2021). This presents further considerations regarding the development of a healthy identity in LGBT+ people (Moagi et al., 2021; Noble-Carr & Woodman, 2018). If a young LGBT+ person is met with negativity or rejection when expressing important aspects regarding who they are it becomes the basis in which their self-worth is measured (Moagi et al., 2021; Noble-Carr & Woodman, 2018). The repeated experience of being devalued in this way leads to struggles related to poor self-image, and has the to potential manifest as identity concealment, internalized homophobia, transphobia,
and dysphoria in LGBT+ people (Moagi et al., 2021). Additionally, the inability to attain identity acceptance contributes to an increased likelihood that an individual will develop additional mental health issues, and engage in maladaptive behaviors that will interfere with their ability to lead a fulfilling life (Moagi et al., 2021).

Struggles relating to identity expression and self-image in LGBT+ people are experienced in response to internal factors as well (Brewster et al., 2019; Rudnick, 2020). It is common for LGBT+ members to be unsure of the implications regarding their sexual identity, or how they would like to present themselves within the context of their identity as a LGBT+ person (Brewster et al., 2019; Rudnick, 2020). As previously mentioned, the LGBT+ community represents a wide range of people, and the only guaranteed similarity among community members is that their identities do not abide by heteronormative ideals (Brewster et al., 2019). For some individuals their LGBT+ identity relates strictly to who they are sexually attracted to, while the LGBT+ identity of others relates strictly to their experience of gender (Brewster et al., 2019). There are LGBT+ individuals whose experience of sexuality is intersectional; meaning they do not identify with the binary assigned to them at birth nor are they exclusively attracted to the gender opposite of that which they identify (Brewster et al., 2019). Additionally, there are LGBT+ individuals who remove the concept of gender from their sexual identity entirely, as well as those whose sexuality involves multiple faucets of gender expression; such individuals might identify as non-binary, queer, pansexual, asexual or intersex (Brewster et al., 2019).

While these different identities are all represented within the LGBT+ community they each undergo different experiences of the world (Barbee & Schrock, 2019; Brewster et al., 2019). These different experiences can impact a person’s safety in how they choose to externally
project their identity, as well as their ability to cope with identity rejection (Barbee & Schrock, 2019; Brewster et al., 2019). When LGBT+ people are able to confidently explore the intricacies of their identity the ability to achieve a healthy sense of self is much more attainable. This is exemplified in a study conducted by Barbee and Schrock (2019) where they administer in-depth interviews to 17 non-binary participants as a method of gaining insight on how “un/gendering social selves” affects their sense of identity. The participants explained how alterations made to their appearance, way of speaking, and mannerisms which rebel from traditional gender perceptions provided a sense of identity validation (Barbee & Schrock, 2019). The un/gendered presentation of their appearance forced those around them to co-participate in their identity as a non-binary person, fostering congruence between their internal and external worlds (Barbee & Schrock, 2019). The content of the interviews attributed participant experiences with an increased sense of authenticity, confidence, pride, and liberation (Barbee & Schrock, 2019).

While the participants in Barbee and Schrock’s study were exclusively non-binary individuals, the results of the study can be applied within the context of the LGBT+ population as a whole. When an individual’s experience of oppression is acknowledged they can begin to move forward authentically (Barbee & Schrock, 2019; Noble-Carr & Woodman, 2018). Noble-Carr and Woodman (218) discuss identity formation from a narrative perspective; which attributes the process as being dependent on the meaning an individual is able to associate with the difficulties they have experienced in life. Barbee and Schrock’s study supports the benefits associated with understanding identity from a narrative perspective, but it is important to note the environmental context in which they conducted their research. Barbee and Schrock’s study took place within a controlled environment and the conducted interviews served the intention of
understanding non-binary individuals’ experience of identity, guiding the participants to reflect on their experiences with meaning. During this process participants also referred to experiences in which their un/gendered appearance were negatively received, which often resulted in high levels of fear and anxiety (Barbee & Schrock, 2019). This is extremely important to the struggles experienced by LGBT+ regarding identity expression and self image. The benefits associated with identity from a narrative perspective are much less likely to be received when the trials and tribulations of one’s story are ignored by those around them (Barbee & Schrock, 2019). As mentioned, identity is not stagnant. If an LGBT+ individual receives the necessary support a disrupted sense of identity can improve (Barbee & Schrock, 2019; Noble-Carr & Woodman, 2018). Bringing attention to the hardships members of the LGBT+ community experience in relation to identity and self image provides an accurate depiction of the adversities this population faces regarding mental health (Barbee & Schrock, 2019; Noble-Carr & Woodman, 2018).

The Expressive Therapies

The theoretical orientation of the expressive therapies is heavily based in psychodynamics. Within the field of the expressive art therapies creative engagement is anointed as an externalization of a person’s internal world, bridging communication between that person’s conscious and unconscious mind (Newcomb, 2020). Art in this sense acts as an object of projection that a clinician can utilize for insight regarding client needs (Heckwolf et al., 2014). The implementation of creativity within a therapeutic context serves the function of acquiring information that can aid clinicians in providing effective support to clients (Heckwolf et al., 2014). The expressive therapies include four specific artistic modalities: visual art, dance and
movement, drama, music, and can practiced inter-modally as well (Newcomb, 2020). The inclusion of the creative process in therapy results in a triadlogue between client, clinician, and client artwork, fostering elements of individual healing, interpersonal connection, and self-awareness (Heckwolf et al., 2014; Hinz, 2015; Newcomb, 2020).

From a psychodynamic perspective the creative process acts as a guide for “defended thoughts and feelings” within the unconscious to enter into awareness, and the creative product is an object which unprocessed thoughts and emotions can be reflected upon (Heckwolf et al., 2014, 331). Creativity is also understood as having “regressive potential”, accessing experiences from previous developmental stages (Heckwolf et al., 2014; Hinz, 2015). Heckwolf et al. (2014) highlights how the inclusion of art and therapy is clinically beneficial through a case study example focusing on a women in her early twenties who engages in creative interventions involving the visual arts to treat symptoms of depression and anxiety. The case study subject attributes these struggles to the confusion, anger and resentment she feels in response to her parents’ ongoing divorce, as well as the lack of a relationship she has maintained with her father. According to Heckwolf et al.’s research after months of participating in arts-based interventions the subject of the case study was not only relieved the symptoms in which she originally sought treatment for, she was able to uncover new meaning in her life, develop more trusting relationships, and was inspired to continue making art through a visual biography (Heckwolf et al., 2014).

The expressive arts disregard traditional artistic standards, and place emphasis on creative engagement, meaning it is not necessarily the artistic medium that is of importance but the artistic process (Hinz, 2015). Hinz (2015) utilizes the Expressive Therapy Continuum (ETC) to
explain the ways in which different modes of creativity impact the mind, and the relevance this holds in regard to the therapeutic process. The structure of the ETC is hierarchal based on developmental function, and is organized based on components associated with both the left hemisphere and right hemisphere of the brain (Hinz, 2015). The levels of the ETC include: the kinesthetic/sensory level, the perceptual/affective level, the cognitive/symbolic level, and the creative level (the creative level is located at the top of the hierarchy and intersects each level below) (Hinz, 2015). The components of each level are associated with different healing functions (Hinz, 2015).

The kinesthetic/sensory level of the ETC entails the repetitious movement and sensory engagement that occurs when one creates art (Hinz, 2015). The kinesthetic component of the ETC is related to motor movement, which is associated with the earliest stages of human development (Hinz, 2015). The corresponding healing benefits of the kinesthetic component include: reduced muscle tension, increased ability to self soothe, and reduced psychological numbing (Hinz, 2015). The sensory component includes the ways in which the senses are engaged when creating art. The healing benefits of the sensory component include “discovering, valuing, and expressing inner sensations, as well as increasing tolerance for internal and external sensations” (Hinz, 2015, 45). The perceptual/affective level of the ETC includes the formal elements of the creative process, and the emotional response that is evoked (Hinz, 2015). Formal elements refer to the “structural quality of images” (45); how line, shape, and color are representationally utilized by the artist to create an image (Hinz, 2015). The perceptual component aids in communicating both internal and external experiences via artistic representation, increasing one’s understanding of personal conflicts and self (Hinz, 2015). The
healing functions of the affective component are related to emotional regulation and identification (Hinz, 2015). The cognitive/symbolic level involves more complex mental functions, and is where meaning is ascribed to the creative process (Hinz, 2015). Hinz (2015) deems the healing function of the symbolic component to be “the consolidation and deepening of personal meaning through understanding universal symbols and themes” (46). The healing function of the cognitive component is the ability to communicate the thoughts and realizations experienced in response the creative process through either written or spoken words (Hinz, 2015).

This view of creativity validates the therapeutic value of all art forms, which is why the inclusion of drag as a LGBT+ inclusive method of expressive therapy would be an amelioration to the practice. Kuri (2017) brings attention to the ways in which globalization and neoliberalism have impeded on the inclusivity of how the expressive therapies are practiced, and the need for a more intersectional framework. Kuri defines intersectionality as “the need to acknowledge intragroup differences in identity politics” (119). Drag performance includes intersection themes that support those whose sexual orientation or gender identity are not in alignment with heteronormative standards. Introducing an art form such as drag is a step expressive therapists could take toward achieving a more intersectionality-based practice. Kuri does include the consideration that most expressive therapists are white middle-class women, making it important that clinicians consistently engage in self-reflexivity to ensure this intersectional framework is appropriately utilized.

**Drag Performance & the LGBT+ Community**
The most common conception of drag is that it consists of gay men performing a “female elusion” through the use of wigs, makeup, and other feminine stylings. While this form of drag does make up a large portion of performers, any physical display of self that challenges traditional gender constructs can be considered a performance of drag (Greenhalgh, 2018; Hillman, 2011; Levitt et al., 2017). Drag became a popular sub-community within the LGBT+ community in the 1960s, although it has existed in the United States for over a century (Levitt et al., 2017). Over the course of time drag performance has developed a controversial reputation via its refusal to succumb to gender-conformity, while simultaneously acting as a beacon of relief for many LGBT+ people (Greenhalgh, 2018; Hillman, 2011; Levitt et al., 2017). The following sections will discuss the historical significance of drag within the LGBT+ community, as well as the healing benefits received by drag performers.

**Historical Significance of Drag**

The presence of drag performance in the United States dates back to at least the early 1900s, although it gained notoriety within the LGBT+ community in the 1960s (Hillman, 2011; Levitt et al., 2017). Over time the way in which drag is understood has evolved greatly. As mentioned, drag is traditionally viewed as female impersonation despite the reality of drag being much less definitive (Greenhalgh, 2018; Hillman, 2011; Levitt et al., 2017). Greenhalgh (2018) describes drag as “the creative expression of queerness” and to be “a reflection and expression of the queer mind and the queer view of the world” (304). For decades drag performers have used their craft as a means of bringing awareness to the mistreatment that has been inflicted upon members of the LGBT+ community (Greenhalgh, 2018; Hillman, 2011; Levitt et al., 2017). In addition to this drag has been used to advocate for those who do not identify with normative
conceptions of gender, encouraging the inclusion of different elements of masculinity and femininity in physical presentation (Greenhalgh, 2018; Hillman, 2011; Levitt et al., 2017).

The historical significance of drag is discussed by Hillman (2011) in their account of the presence of drag’s presence within the gay liberation movement. While issues of oppression and discrimination are still of concern today, up until the mid to late twentieth-century simply existing as an openly queer person was a dangerous endeavor in the United States (Greenhalgh, 2018; Hillman, 2011; Levitt et al. 2017). Not only was victimization a constant threat, the hate crimes queer individuals were subjected to included police brutality and harassment (Hillman, 2011). As a result LGBT+ people were often denied legal protection or justice for the crimes committed against them (Hillman, 2011).

In the 1960s LGBT+ people began to take a stand against the mistreatment they endured, drag performers being at the forefront of the movement (Hillman, 2011). In 1966 the riot at Compton’s Cafeteria took place in San Francisco after drag performers attempting to dine at the establishment refused to submit to police harassment (Hillman, 2011). In 1969 the Stonewall Rebellion occurred in New York City after a police raid where drag performers and transgender women were arrested for wearing “cross-gender” attire (Greenhalgh, 2018; Hillman, 2011). These events inspired the development of organizations such as the “Berkeley Gay Liberation Front, Berkeley Gay Liberation Theater, San Fransisco Gay Liberation, and Gay Women’s Liberation” (Hillman, 2011, 167). Hillman also explains the role of drag performers in the rebellion against the social structures that enforced normative perceptions of gender. Gender-transgression was something that evoked discrimination from individuals belonging to both the heteronormative population as well as members of the gay-community (Hillman, 2011). Because
of this drag performers and other queer activists began to equate gender with sexual oppression (Hillman, 2011). By refusing to conform to a single gender drag performers challenged the “social constructions of masculinity” that devalue femininity (Hillman, 2011, 171). In doing so drag performers also advocated for the acknowledgement of gender as something much more complex than the binary of male or female (Hillman, 2011).

Another important element of the history of drag performance is a sub-community that is referred to as “ballroom culture” which has existed throughout the 1900s, although it was not until the 1990s to early 2000s that ballroom culture boomed (Bailey, 2011; Smith et al., 2020). The ballroom scene consists of gays, lesbians, transgender individuals, and other queer-identifying people (most of which also identifying as low income, black, or Latina/o) competing against one another via drag performances (Bailey, 2011; Smith et al., 2020). According to Bailey (2011) the categories in which performers compete are “based on the deployment of performative gender and sexual identities, vogue and theatrical performances, and the effective presentation of fashion and physical attributes” (368). Those involved in the ballroom scene form “houses” which replicate familial dynamics, including “houseparents” who are typically experienced performers that provide guidance to younger performers (Bailey, 2011; Smith et al., 2020). The guidance houseparents provide their children include preparing them for various ballroom competition categories, as well as how to navigate the complexities of being a young LGBT+ person (Bailey, 2011; Levitt et al., 2017; Smith et al., 2020). A large portion of house-children seek the companionship houses provide after being rejected by their biological families, making these “alternative families” their main source of support or stability (Bailey, 2011; Levitt et al., 2017; Smith et al., 2020).
Drag as Creative Healing

Within the LGBT+ community drag performance has not only acted as an object of revolution for performers, it has acted as a medium that allows creative healing to prosper. Drag continues to challenge societal ideals regarding sexuality or gender, and at the same time challenges LGBT+ people to expand their own perceptions of how the human condition is able to be experienced (Greenhalgh, 2018; Levitt et al., 2017). The benefits associated with drag performance are highlighted in a study conducted by Levitt et al. (2017). Levitt et al.’s study explored the experiences of 18 non-heterosexual male drag performers from rural and urban communities in the United States, this was accomplished via the conducting of a 1-hour interview with each participant. It should be noted that Levitt et al.’s research includes reports from the drag performers of experiences that are beyond the scope of what is able to be discussed in this literature review.

In Levitt et al.’s study 17 individuals reported their involvement in drag as a way of overcoming shame or rejection experienced in childhood (Levitt et al., 2017). Their participation in drag was described as fulfilling a need to “transcend” the disapproval of their sexuality or expression of gender from their family or culture of origin (Levitt et al., 2017). Through their engagement in drag participants were able to remain authentic to themselves, leading to improved self-acceptance (Levitt et al., 2017). Fifteen of the study participants mentioned the importance of the relationships they had developed within the drag community (Levitt et al., 2017). These relationships acted as a network for queer-individuals where mutual support can be provided to one another regarding gender expression, sexuality, and other tribulations that affect LGBT+ people (Levitt et al., 2017). Participants also addressed drag as a means for both
expressing and exploring gender complexity, 8 participants explained drag performance as an outlet to explore the complex nature in which they experienced gender. Additionally, 11 participants explained that because drag challenges gender roles, it also blurs the lines of how gender is experienced internally when performing (Levitt et al., 2017).

Farrier (2015) exemplifies how drag performance can be utilized as a form of creative healing via their report of LGBT+ people participating in an intergenerational theater project referred to as, *The Front Room*. The Front Room included “temporal drag” plays that were utilized as a part of the therapeutic process. *The Front Room* is a project which aimed to join LGBT+ people of various age groups for the purpose of fostering an intergenerational connection via performative arts (Farrier, 2015). Temporal drag is a concept developed by, Elizabeth Freeman, in the year 2000 which “revisions of concepts of time and reconnects historical identities committed to identitarian positions with queer post-identity” (Farrier, 2015). Drag by nature challenges “chrononormativity”; a cultural construction that is dependent on the majority-population abiding by the social expectations of their environment (Farrier, 2015). This concept of chrononormativity has contributed to a range of inequalities that members of the LGBT+ community have suffered for over a century (Farrier, 2015). Freeman’s concept of temporal drag encourages LGBT+ people to consider what it means to be a queer-person from a historical context, and understand the origins of the systemic oppression they continue to face (Farrier, 2015). The engagement in temporal drag allowed Participants in The Front Room to not only resist chrononormativity at an individual level, it also allowed performers to show solidarity to generations of LGBT+ activists (Farrier, 2015). The Front Room exemplified the therapeutic benefits LGBT+ people can receive from engaging in creative interventions that celebrate queer-
culture. This validation holds the potential for group members to put new meaning to what they have been told it means to be a queer person, and the agency to explore their identity authentically.

The creativity that is embedded within drag performance engages an individual physically, mentally, as well as spiritually (Smith et al., 2020). The artistry of drag can include a performer’s makeup and costumery as well as their inclusion of music and dancing. These elements allow drag to be practiced in a way that fosters creative individuality promoting a sense of mastery within an individual (Greenhalgh, 2018; Smith et al., 2020). Smith et al. (2020) discuss vogue, a style of dance prominent within the drag community, as a form of creative expression that holds the potential to curate a sense of liberation and wholeness within a performer. The positive affect voguing has on the psyche is associated with a concept referred to as “flow,” which is a state of consciousness that occurs when the target of an individual’s focus inspires a sense of joy and connection (Smith et al., 2020). Vogue is described as triggering this state of flow through the engagement of one’s entire body in a manner that is both creatively stimulating and kinesthetic, which is also true of many other creative aspects of drag performance (Greenhalgh, 2028; Levitt et al., 2017; Smith et al., 2020). The different artistic elements of drag also promote wellness and connection at a collective level of consciousness via the emotional communication that takes place between performer and audience (Smith et al., 2020). Such communication can occur via the attunement of the audience to the performer and their artistry resulting in an unspoken dialogue (Smith et al., 2020).

Many drag performers also take a more literal approach in how they communicate with their audience, often including overt political messages within their performances (Greenhalgh,
2028; Levitt et al., 2017; Smith et al., 2020). Such drag performances often focus on the social injustices that affect LGBT+ people, promoting solidarity within the community (Greenhalgh, 2018). Greenhalgh (2018) provides specific examples of how different drag performers have utilized their craft as a form of resistance toward Donald Trump’s presidency. The drag performer, Sasha Velour, wore a crown-like headpiece that spelt out the slur “FAG” during a 2017 lip-synch performance (Greenhalgh, 2018). In doing so Sasha Velour reclaimed something that had previously caused them pain and refashioned it as a symbol of “power and prestige” (Greenhalgh, 2018, 309). This utilization of political drag can also be seen in a separate 2017 lip-synch performance by the drag performer, Bob the Drag Queen, through their incorporation of Martin Luther King Jr.’s “I Have a Dream” speech (Greenhalgh, 2018). In this performance Bob the Drag Queen was able to utilize their creativity to raise awareness of the history of racial injustices that have taken place within the United States (Greenhalgh, 2018).

This ability to connect and have a voice through one’s participation in drag has been associated with feelings of empowerment within the performer, while enhancing their sense of purpose in life (Greenhalgh, 2018; Smith et al., 2020).

**Discussion**

The purpose of this paper is to discuss the importance of utilizing the expressive art therapies in a way that pays tribute to the unique identities of different clients. I have chosen to exemplify this concept via the use of drag performance as a form of creative therapy for members of the LGBT+ community. The introduction of drag as an arts-based intervention presents a treatment option that has the benefits of traditional therapy, the healing properties associated with creative engagement outlined by the ETC, and validates the therapeutic
considerations of working with LGBT+ individuals (Brewster et al., 2019; Heckwolf et al., 2014; Heinz, 2015; Kuri, 2017). The research that is the basis of this discussion reflects the preponderance of challenges LGBT+ people face regarding identity and social-relationships, as well as those regarding accessibility to effective therapeutic options to aid in coping with such experiences (Brewster et al., 2019; Hill & Gunderson, 2015). In addition to this, my research seeks to explain the capacity of drag to act as a form of expressive therapy in addressing the mental health concerns present within the LGBT+ community (Moagi et al., 2021; Smith et al., 2020).

Based on this research, the therapeutic domains I identified as holding particular relevance to how mental health is experienced by LGBT+ people included: community relations, societal rejection, identity expression, and self-image (Hardy & Monypenny, 2019; Noble-Carr & Woodman, 2018; Quinn & Sinfield, 2006; Smith et al., 2020). The minority status associated with being a member of the LGBT+ community leaves such individuals vulnerable to discrimination, violence, and hate which results in trauma that is felt both individually as well as collectively among queer people (Farrier, 2015; Greenhalgh, 2018; Moagi et al., 2021). Not only are LGBT+ people faced with an internalized battle regarding the navigation of their sexuality or gender, they do so while existing within an environment that does not value the complexity of such experiences (Farrier, 2015; Greenhalgh, 2018; Moagi et al., 2021). Because of this LGBT+ people are in the need of therapeutic services that prioritize their sense of safety, celebrates their identity, and validates the associated hardships (Farrier, 2015; Greenhalgh, 2018; Hardy & Monypenny, 2019; Moagi et al., 2021; Quinn & Sinfield, 2006).
The expressive art therapies align with these therapeutic needs due to the emphasis that is placed on individual understanding of self and meaning making (Heckwolf et al., 2014; Hinz, 2015; Newcomb, 2020). The implementation of drag as a method of expressive therapy for LGBT+ individuals not only pays homage to queer-culture, it does so while fostering the creative healing that is essential to the expressive therapies (Farrier, 2015; Hardy & Monypenny, 2019; Hillman, 2011). The application of the expressive therapies to the artistry of drag creates an outlet for client’s whose gender identity or sexuality contrasts heteronormative standards to express and explore the nuances of their identity (Farrier, 2015; Heckwolf et al., 2014; Hinz, 2015; Newcomb, 2020). This would benefit both the client and clinician in that this practice allows the clinician to become a witness to the client’s existence as a human-being, rather than limit their understanding of the client to stereotypes or stigmatizations that may be associated with being a LGBT+ person (Brewster et al., 2019; Hardy & Monypenny, 2019).

Drag is an art form that involves various modes of creative engagement, allowing a client to participate based on their personal strengths and interests. The unrestrictive nature of drag encourages the utilization of the creative process as a way of exploring one’s identity beyond binary perceptions of gender, or societal expectations relating to the expression of one’s sexual orientation. The research I have conducted links this ability to transform one’s outer appearance to reflect their internal perception of who they are with increased levels of identity validation, authenticity, and confidence. The meaning making that occurs via the creative elements of drag is exemplified in the discussions provided by Levitt et al. (2017) and Farrier (2015). Levitt et al.’s discussion included accounts from adult drag performers detailing how their participation in drag helped them to heal and move forward from feelings of shame and
rejection from their childhood. Drag was described as a way for these individuals to remain true to themselves which led to a sense of self-acceptance that they had not previously attained (Levitt et al., 2017). Farrier’s discussion of *The Front Room* project and the implementation of temporal drag served the purpose of encouraging LGBT+ people to consider what it has meant to be a queer-person across history, and how this relates to both personal and collective experiences of discrimination and systemic oppression.

The introduction of drag as a method of expressive art therapy also pays tribute to the benefits of queer spaces discussed by Hardy & Monypenny (2019). Drag performance is a direct product of the LGBT+ community and for decades has created environments where queer people can gather and take pride in their identities. In this sense drag has acted as a sub-community within the LGBT+ community providing LGBT+ individuals the relational support that they are often deprived of living in a heteronormative society. The support that is shared among drag performers is apparent in Bailey’s (2011) report of ballroom culture along with the formation of “drag houses” and the role of housemothers. The inclusion of a creative intervention based on this history might signify a sense of solidarity to a queer person seeking therapeutic support. Engaging in drag as a form of creative therapy might also inspire LGBT+ clients to practice drag outside of a therapeutic context, introducing a network of support from the LGBT+ community a client previously did not have access to. As mentioned by Hill & Gunderson (2015) the social and community resources available to a queer individual greatly influence their ability to effectively cope with the mental health issues prominent among the LGBT+ community.

Before concluding this discussion it is important to note the limitations and other considerations pertaining to my research of drag as a method of expressive art therapy for LGBT
+ individuals. There is little research available explicitly addressing the therapeutic benefits associated with drag performance, especially within the context of creative healing and the expressive therapies. Due to this lack of research, I explored these topics separately and constructed my discussion of them based on the similarities I identified. The considerations relevant to this discussion of utilizing drag within the context of the expressive therapies include this practice being perceived as an appropriation of queer-culture. It is necessary that expressive therapists research the history of any form of creativity included in an arts-based intervention, and that credit is paid to the proper cultural origin of that art form. In addition to this it should be considered that drag performance is not guaranteed to be of interest to every LGBT+ client, and that the client’s individuality should always be prioritized. Future research on these topics will hopefully educate the field of expressive art therapies on how to navigate such considerations in a fashion that promotes the best interest of the LGBT+ community.
Work Cited


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.

Thesis Advisor: Dr Tamar Hadar, MT-BC