Creative and Expressive Arts Therapy in Motivational Interviewing

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Creative and Expressive Arts Therapy in Motivational Interviewing

Capstone Thesis

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Expressive Arts Therapy

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Abstract

The practices of Creative Arts Therapies (CATs), Expressive Arts Therapy (EATs), and Motivational Interviewing (MI) are regarded as profoundly impactful for use in mental health professions. While there is extensive literature supporting the benefits of the practices individually, research to date on combining CATs or EATs with MI is limited. This Capstone investigates the combination of the fields, including research linking MI to the fields under the CATs umbrella of art, dance/movement, drama, and music therapies. The key elements of each practice are defined, and their overlapping similarities are identified, examples of complementary CATs interventions to the practice of MI are included, concluding with a discussion of challenges and suggestions for possibilities for future research. Results indicate that to date there is no existing literature on integrating the EATs modality into MI conversation style; however, literature does exist on the separate modalities of CATs of art therapy, dance/movement therapy, drama therapy, and music therapy. The literature endorses myriad benefits of combining the CATs with MI, including identifying need for change, strengthening therapeutic bond, and offering nonverbal forms of expression to MI’s predominantly verbal conversational style.

Keywords: art therapy; dance/movement therapy; drama therapy; creative arts therapies; expressive arts therapy; motivational interviewing; music therapy

Mary Hunt (she/they pronouns) goes by the nickname Molly, and is a white woman raised in rural Maine, now living in the city of Portland, ME.
Creative and Expressive Arts Therapies in Motivational Interviewing

**Introduction**

The practice of Motivational Interviewing (MI) is an evidence-based style of conversation frequently used in clinical mental health counseling which guides people towards defining and pursuing their own need for change in their life (Self et al., 2022). The internships in my Expressive Arts Therapy (EATs) graduate school experience have used Motivational Interviewing (MI) as their primary clinical approach. The intermodal field of EATs is an approach to counseling in which art, music, drama, dance, mindfulness, and other creative forms are used to help identify, express, and communicate emotions (Rogers, 1993). As an intern, I have had the opportunity to bring EATs and MI into my counseling practice.

There are shared intentions of MI and creating art in a therapy session (Crowe & Parmenter, 2012). Rogers (1993) contended that arts are useful in exploring the inner emotional world when words are too challenging to speak, and creating art can facilitate uncovering unconscious dreams, wants, and desires. Exploring talk of change, wants, needs, desires, and dreams as well as ambivalence towards goals, are MI’s central foci (Motivational Interviewing Network of Trainers [MINT], 2021). Despite these similarities, at times combining the two therapeutic styles of MI and EATs has been difficult for me because I haven’t observed other clinicians who are utilizing both approaches. The intention of this Capstone is to learn about what research has indicated thus far about using the two approaches in conjunction with each other.

Through a critical review of the literature, I had hoped to understand what research has suggested about the field of EATs specifically. This posed a challenge because, to the best of my knowledge, MI in relation to EATs has not been considered in the literature. For this reason, my
literature review includes consideration of Creative Arts Therapies (CATs) and MI, due to the similarities of CATs and EATs as separate fields. The titles of CATs and EATs share the words “arts” and “therapy,” but they are not the same. While EATs combines the arts (i.e., art, dance, drama, music, and more) in an intermodal style (Rogers, 1993), CATs is an umbrella term for the distinctly separate modal concentrations of art therapy, dance/movement therapy, drama therapy, and music therapy (National Coalition of Creative Arts Therapies Association, Inc. [NCCATA], 2022). Each modality under CATs of art, dance/movement, drama, and music are included in the literature review because these modes are used in EATs interchangeably and simultaneously. The goals of EATs of identifying and expressing emotions through the arts (Rogers, 1993), are like the goals of CATs which utilize the arts for self-expression and communication with self and others (National Coalition of Creative Arts Therapies Association, Inc. [NCCATA], 2022).

The guiding questions of this Capstone are, how do CATs lend themselves to MI conversations, and vice versa? What knowledge exists around the topic of combining approaches thus far? How might EATs, despite the absence of identified research around it and MI, apply to and amplify an MI conversation? The following is a review of the literature, beginning with operational definitions, descriptions and fundamentals of MI, CATs, and EATs, followed by a review of existing research on the combined topics of MI and CATs, concluding with a discussion of recommendations for future research.

**Literature Review**

Since there are a wide range of professionals who may utilize Motivational Interviewing (MI) (Miller & Rollnick, 2017) and/or Creative Arts Therapies (CATs) (National Coalition of Creative Arts Therapies Association [NCCATA], 2022) and myriad applications for people who are recipients of both practices, the following operational definitions will be used for consistency
of language. The term creative intervention refers to the activity, approach, and/or creative arts experiential that a person practicing CATs uses with the client. Clients or consumers receiving CATs and/or MI are referred to as participants. Professionals in mental health, medical, and educational fields using CATs and/or MI are referred to as practitioners.

The following sections describe principles of MI, CATs, and Expressive Arts Therapies (EATs), explore the existing literature on utilizing CATs in the MI context, and discuss ideas for future research. The process behind this literature review is inspired by Bergland et al.’s (2014) implementation of Smith’s (2012) common factor approach in their research on Dialectical Behavioral Therapy and art therapy. The common factor approach was used with the intention to improve and diversify therapeutic treatment through identifying the essential principles of separate therapies to find shared principles between the two (Bergland et al., 2014; Smith, 2012).

**Defining Motivational Interviewing**

The practice of MI is applicable among a diverse range of therapeutic approaches because it uses both person-centered and directive methods (Doumas et al., 2019). Communication using MI is utilized to support participants in defining their values and their desire to change, and then to promote their self-efficacy in moving towards the change (Self et al., 2022). Rather than a technique or intervention, MI is an evidenced-based style of communication (Miller & Rollnick, 2013). It was originally developed for mental health contexts centered around addiction in the 1980s by Miller (Rollnick, 2022), and has since expanded into healthcare, social and criminal justice, education, and beyond (Miller & Rollnick, 2017). The practice originated from the person-centered work of Rogers who viewed the relationship between practitioner and participant to be the catalyst for change in the client’s life (Miller & Moyers, 2017). Miller and Rollnick (2013) described MI as being particularly useful when
someone is experiencing ambivalence and is stuck in a decision, when there is a sense of low confidence that change is possible, when someone does not know if they are able to follow through to reach the desired change, and when it is not clear if change will be more appropriate than keeping circumstances the same. The following sections detail some fundamental aspects of MI: the spirit of MI, and the processes in MI which practitioners can use to move a conversation along.

The Spirit of Motivational Interviewing

Embodying the spirit of MI is the most effective way to set an atmosphere for participants to reach their goals (Fortier & Pastore, 2020). The spirit of MI incorporates four qualities: partnership or collaboration, compassion, radical acceptance, and evocation or empowerment (Miller & Rollnick, 2013; S. Andrew, personal communication, February 25, 2022). These four tenets are described below.

Partnership/Collaboration

Andrew (2022c) endorsed that the MI participant is the expert of themselves, of their own lives. The MI practitioner acknowledges they do not hold the expertise or the power to change someone, and they use MI in the conversation to emphasize the participant’s self-identification of steps towards change (Self, et al., 2022). There is no unsolicited advice; a practitioner must ask permission to offer information (Andrew, 2022c). Collaboration is sometimes called collaborative role enforcement in mental health literature at large and is a defining feature of the working alliance (Kuerbis & Wiprovnick, 2015). The working alliance is the collaborative relationship between participants and practitioners in progressing towards mutual goals (Kuerbis & Wiprovnick, 2015). Moving towards change is about the collaboration between participant and
practitioner, working together, and holding respect for the participant’s world views and values (Andrew, 2022c).

**Compassion**

When approaching with compassion, an MI practitioner attempts to sit with a participant who is in distress and listens for the wants of the participant rather than trying to sway the participant towards their own agenda (Andrew, 2022c). “To be compassionate is to promote the [participant’s] welfare and give priority to his or her needs, engendering trust. It is [the practitioner’s] ability to sit and effectively reflect with the person’s suffering” (Andrew, 2022d, p.6). Parsons (2005) endorsed that MI sessions supported their participants in reducing the feeling of pressure from the practitioner to make them change, and participants appreciated that their desire to change had to come from themselves. The accepting nature of this dynamic was for many of the participants a first-time experience (Parsons, 2005). Fortier and Pastore (2020) asserted that a participant’s self-compassion can be fostered by the compassionate therapeutic rapport with the practitioner.

**Radical Acceptance**

Radical acceptance occurs when the practitioner has confidence for and gives space to the participant regardless of where they are at in their process towards change, and the practitioner honors the participant’s autonomy in what they do or don’t want to change in their life (Motivational Interviewing Network of Trainers [MINT], 2021). The practitioner is not responsible for the outcome, but for the intervention and conversation (S. Andrew, personal communication, March 3, 2022). A practitioner may not always agree with a participant’s choices and want a different result than that of the participant, which can pose a challenge in the practice of avoiding giving advice (Reardon, 2015). A way for maintaining an accepting
presence is through a strategy called rolling with resistance, which means to accept if a participant is not making statements or steps towards their desired change (Alison et al., 2020). Another word for resistance which may be more destigmatizing towards a participant in the context of MI can be ambivalence (S. Andrew, personal communication, February 25\textsuperscript{th}, 2022).

Ambivalence is an important part of moving towards change, and change can happen when a part of ambivalence begins to feel heavier than the other, even though the other side remains as truth (Andrew, 2022b). The practitioner honors ambivalence, the contradictory feelings of the participant and the multiple truths of their situation, as a natural part of change processes (Parsons, 2005). Ambivalence is explained by MINT (2021) as a normal phenomenon, in which the practitioner nonjudgmentally welcomes the participant to explore their situation, including the parts which the participant may feel more sensitive or shameful about. The practitioner pays special attention to what the participant is hoping to change in their life and avoids persuasion or unsolicited advice (Motivational Interviewing Network of Trainers [MINT], 2021). The spirit of MI is a soft tone, participants who feel supported and nourished have increased chance of making momentous changes (Crowe & Parmenter, 2012).

\textit{Evocation/Empowerment}

Listening to a participant’s language is important when considering evocation and empowerment (Moyers et al., 2017). A practitioner using MI must have the ability to focus in on the participant’s desired shifts in behavior and reduce the amount of focus on participant’s language to remain in the same position (Moyers et al., 2017). Empowerment is reinforced when the practitioner listens for sustain talk and change talk (Gaume et al., 2021). Sustain talk is the language a participant uses around not changing, and change talk is the language a participant uses which is in support of the desired change (Gaume et al., 2021). Moyers et al. (2017)
emphasized that practitioners should intentionally pass over sustain talk and highlight change talk in the conversation.

**Moving the Conversation Along**

There are four main processes of MI which describe the phases of the conversation, and can be used in varying sequence: engagement, focus, evocation, and planning (Motivational Interviewing Network of Trainers [MINT], 2021). Engagement, focus, and planning are described below. Evocation/empowerment is excluded in this section as it is already a component of the spirit of MI and thus covered as a conversational skill.

**Engagement**

A practitioner may engage with a person by focusing on their strengths and values, asking open-ended questions, and making simple and complex reflections of what the participant is saying (Andrew, 2022e). One common approach of engagement is called OARS, or Open-Ended Questions, Affirmations, Reflections, and Summarizing (Motivational Interviewing Network of Trainers [MINT], 2021). Reflections as described by MINT (2021) are not simply repeating the participant’s problem back to them in different words, they are also communicating back to the participant the ways in which they spoke of their desires, hopes, and needs. Complex reflections take a gentle guess at the underlying meaning of what someone is saying, with attention to ambivalence and change talk (Gaume et al., 2021). Simple reflections remain close to what the participant has said (Andrew, 2022c).

There are various styles of complex reflections such as reframing, double-sided, amplification, affective, metaphor, emphasizing choice, coming alongside, and continuing a paragraph. Andrew (2022a) described the styles of reflection: reframing may address other approaches to viewing a situation. Double-sided reflections acknowledge multiple truths.
Amplification offers a means of deep exploration of the participant’s ambivalence by reflecting a more intense version of what they have said. Affective reflections cut through to the underlying emotion of a statement. Metaphor may invite a participant to view the situation in a symbolic and external way. Emphasizing choice directly points out the power and autonomy a participant does have in their life. Coming alongside is when the practitioner emphasizes the side of the person that doesn’t want to change to set the opportunity for the participant to explore the side of themselves that wants to change. Continuing a paragraph is when a practitioner takes a guess as to what the person’s next sentence would be. Complex reflections consider underlying meaning, seek to comprehend each part of ambivalence (Andrew, 2022a) and help the MI conversation move forward, keeping the participant engaged and focused.

**Focus**

The practitioner and participant develop an agreed upon agenda of why they are working together, and the area of their lives in which they feel ambivalent and want to change (Motivational Interviewing Network of Trainers [MINT], 2021). Andrew (2022b) noted that the practitioner should employ reflections of the participant’s core values and link them back to the focus topic.

**Planning**

When the practitioner plans with the participant, they listen for language of commitment and support the participant in developing their next course of action (Andrew, 2022e). Planning may not always be a mandatory part of the process, but if it is a part of the process then the participant’s thoughts, context of time, and self-perception that they are ready are of paramount focus (Motivational Interviewing Network of Trainers [MINT], 2021).
Defining Creative and Expressive Arts Therapies

The modalities of Creative Arts Therapies (CATs) are music, art, dance, drama, and poetry, each of which have their own credentialing, and the field of CATs itself is an umbrella for these therapies “governed by separate professional association with a unique scope of practice” (National Coalition of Creative Arts Therapies Association, Inc. [NCCATA], 2022, para. 1). The practice of Expressive Arts Therapy (EATs) is its own distinct field which integrates all the modalities (Rogers, 1993). The Expressive Therapies Continuum (ETC) is a model of using the expressive arts in therapy (Hinz, 2019). The following section defines CATs, EATs, and the ETC as described by Hinz (2019) which is a useful framework when integrating EATs into a session.

Creative Arts Therapies

The CATs became an official practice in working with people who were terminally ill with tuberculosis in 20th century Europe, and the term art therapy was invented in 1942 by a British author and educator named Adrian Hill (Junge, 2010). According to Junge (2010), art therapy carried over into the mental health field in the 1960s. As a category, CATs include the respective professions of music therapy, art therapy, dance/movement therapy, and drama therapy (Duffey et al., 2016). Outcomes of treatment may include development of communication skills, which enhances ability to express emotions and improves the participants’ cognitive, physical, and emotional experiences (National Coalition of Creative Arts Therapies Association, Inc. [NCCATA], 2022). People of all ages can participate in CATs in many ways: as families, dyads, one-on-one, and in contexts beyond mental health like such as in school, work in the community, rehabilitation centers, coaching, and on (de Witt et al., 2022). The field would benefit from more empirical evidence on the efficacy of the action-oriented CATs approaches,
Although acknowledgment of their importance in clinical mental health spheres is ever-increasing (de Witt et al., 2022). Action-oriented therapies emphasize defining steps towards goals and then taking those steps, as opposed to remaining exclusively conversation based (American Psychological Association Dictionary of Psychology, 2022).

**Expressive Arts Therapies**

An intermodal style of therapy, EATs can involve emotional expression through many outlets either separately or simultaneously, such as music, movement, visual art, drama, play, mindfulness, and more (Rogers, 1993). The field was originally founded at Lesley University in the 1970s by Shaun McNiff, Paolo Knill, and others (Lesley University, 2022). Practitioners of EATs may be counselors, educators, artists, consultants, community organizers, and more (International Expressive Arts Therapy Association [IEATA], 2017). Any artistic level and comfortability may engage in EATs (Rogers, 1993).

**Expressive Therapies Continuum**

The Expressive Therapies Continuum (ETC) was originated by Kagin and Lusebrink in 1978, and later by Lusebrink in the early 1990s and early 2000s as a framework for how to make decisions on incorporating the expressive arts into a session (Hinz, 2019). As described by Hinz (2019): “The ETC organizes media interactions into a developmental sequence of information processing and image formation from simple to complex” (p. 4). The same author explains the four hierarchical levels of the ETC from lowest to highest as kinesthetic/sensory, perceptual/affective, cognitive/symbolic, and the creative level. The first three levels are represented in binary language with kinesthetic, perceptual, and cognitive levels placed in the left hemisphere side of the brain, and sensory, affective, and symbolic in right hemisphere processes (Hinz, 2019). When one hemisphere is emphasized, the other hemisphere has a
decrease in awareness (Lusebrink, 2010). For example, “…emphasis on kinesthetic activity decreases awareness of the sensory component of the expression, and emphasis on the sensory component…slows down kinesthetic action because the focus is directed to the experience of sensations” (Lusebrink, 2010, p. 171). Finally, Hinz (2019) described the creative level as one which can exist on any of the other levels, or on all of them simultaneously, and indicates someone is functioning at their highest level. The first three ETC levels are described below.

**Kinesthetic/Sensory**

The kinesthetic/sensory level of the ETC relates to sensations and experiences in the physical body, as opposed to the emotional or cognitive self (Graves-Alcorn & Kagin, 2017). Some benefits of the kinesthetic/sensory level include that it has the following activating effects on the brain stem: “Activates awareness of basic bodily functions. Stimulates reticular activating system wakefulness. Initiates fight, flight, or freeze response. Connects states of energy and information flow. Enhances self-compassion. Breaks free from cortical control” (Graves-Alcorn & Kagin, 2017, p. 23). At the kinesthetic/sensory level, the EATs participant may explore the sensations of the materials such as touch, smell, sound, and/or they may explore the kinesthetic experience of the physical movements and energy put into using the materials (Lusebrink, 2010). According to Lusebrink (2010), the purpose of kinesthetic/sensory experiences is to absorb sensory input which helps enhance memory and awareness.

**Perceptual/Affective**

On the perceptual/affective level of the ETC, individuals begin to process information, form images around their experiences of artmaking and may process the images based on what they see or their emotional response to their creation (Hinz, 2019). Perception is the mental awareness of a sensory experience, and affect is the emotional response to the experience.
A person who is creating a piece of art at the perceptual component may process information based on the ventral stream, or what they take in visually (Lusebrink, 2010). The affective component is centered in emotional processing in the amygdala and how this impacts the ventral visual stream (Lusebrink, 2010).

**Cognitive/Symbolic**

At the cognitive/symbolic level, a person’s mental activity is engaged, they are thinking and learning about the experience of EATs and are using symbols to express meaning without words (Graves & Kagin, 2017). The cognitive/symbolic level is the most advanced ETC level in human development (Hinz, 2019). Cognition involves a person’s ability to analyze, plan, and execute the expressive arts process, while symbols heighten intuition, remind participants that their life experiences will not always be within their memory or comprehensible, and help them to trust and understand their body’s non-verbal experiences (Hinz, 2019).

**Integrating Creative Arts Therapies and Motivational Interviewing**

There are many similarities between the foci of CATs and MI, such as the mutual intended outcomes of empathy, discrepancy, rolling with resistance, and cultivating self-efficacy (Crowe & Parmenter, 2012). Rogers’ person-centered therapy is the approach from which MI developed (Miller & Moyers, 2017), and his daughter, Natalie Rogers was the creator of person-centered EATs (O’Hara, 2016). “The very action of creating artwork catalyzes internal and external processes linked to interpersonal connection that can enhance motivation, a key factor for generating lasting change” (Holt & Kaiser, 2009, p. 250). Crowe and Parmenter (2012) identified an increase in research around the benefits of integrating CATs into other counseling theoretical models, such as Adlerian and Cognitive Behavioral Therapy. Despite the similarities of MI and CATs, and increased research on incorporating CATs into other counseling models,
Crowe and Parmenter (2012) noted that literature combining CT and MI does exist but there is need for more.

The following sections elaborate on recent research on the combined topics of MI and CATs, break down how CATs may fit into the spirit of MI of partnership/collaboration, compassion, radical acceptance, and evocation (Miller & Rollnick, 2013), and how CATs enhances the processes of MI, engagement, evocation, focus, and planning (Motivational Interviewing Network of Trainers [MINT], 2021).

**Creative Arts Therapy and Motivational Interviewing**

This section identifies and describes studies which consider the key components of MI paired with the modalities under CATs of art therapy, dance/movement therapy, drama therapy, and music therapy. Crowe and Parmenter (2012) dissected MI and CATs into their basic tenets, provided a comparison of the two practices, reviewed the existing literature, and offered CATs interventions consistent with MI. They found CATs to greatly complement the principles of MI, specifically the expression of empathy, the client’s abilities of discrepancy, and encouragement of autonomy (Crowe & Parmenter, 2012).

Gutierrez (2021) explored approaching MI with CATs, specifically art therapy, through creation of a Professional Impact Project. They described creative interventions which fit under the MI framework, such as making a collage with two quadrants of costs and benefits of a situation (Gutierrez, 2021). Sewell and Walters (2019) explored how action-based methods like psychodrama and sociodrama enabled an MI practitioner to approach a participant’s resistance and ambivalence, examples of which are identified in upcoming sections. It is important to note in this example that psychodrama and drama therapy are not the same field and require different trainings, however, they do complement each other (Kellerman, 1996).
Ratanavivan and Ricard (2020) described the Making Positive Changes Counseling (MPCC) program which utilized CATs and MI in working with elementary school children in a disciplinary alternative education program (DAEP). Children who are involved with DAEPs, correctional facilities, or other behavioral mental health services, may struggle with physical aggression, academic issues, theft, vandalism, and more (Ratanavivan & Ricard, 2020). The same researchers found elementary children ages 8-12 engaged with DAEPs responded well to the non-coercive MI style. Ratanavivan and Ricard (2020) added creative interventions to the conversation-based MPCC program because children tend to learn better when using hands-on experiences. The MPCC program was intended to help the children examine what was happening in their lives and how they may improve any negative circumstances through self-identifying the change needed, while using a creative interventions which decreased their nervousness to participate (Ratanavivan & Ricard, 2020). The same researchers encouraged the conversation-based style of MI when working with children to be scaffolded with making artwork, because they are able to learn better through working with their hands. Examples of the CATs activities Ratanavivan and Ricard (2020) utilized in their MI based MPCC program are described in a later section.

Klasson (2014) acknowledged there is scant research on dance/movement therapy (DMT) and MI, except for an unpublished master’s thesis about dance/movement therapy with MI conversation (Baca, 2011). More research on DMT in MI may have broader implications in the clinical world, such as exemplifying the power behind connecting the knowledge of different types of therapy (Klasson, 2014). Klasson (2014) asked three dance/movement therapists about the ways in which they represented the spirit of MI in their sessions. The following questions were explored: how can DMT be used to encourage self-efficacy, why combine MI and DMT,
and what are the ways “…you can embody your expression of empathy towards a client as a dance/movement therapist?…develop discrepancy within a client’s perspective as a dance/movement therapist?…embody MI’s idea of rolling with resistance…?” (Klasson, 2014, p.179).

The results of Klasson’s (2014) interviews indicated the following themes: MI provided a map for participants to select which DMT interventions to use during session, and verbal tools to articulate what was happening somatically. The practitioners who were interviewed noticed many parallels between MI and DMT processes, and the two approaches combined were largely conducive to their clients’ self-efficacy. Klasson (2014) described resistance and ambivalence based on their interviews with dance/movement therapists:

‘[Resistance and ambivalence are] the next layer in the body before the impulse can move out,’ meaning that what may appear as a resistance to change and unwillingness to improve one’s situation is, in this context, a developmentally appropriate defensive reaction that has become patterned in the body/mind. (p. 185)

Cloud (2010) explored how music therapy used under the framework of MI encouraged change talk among college students who used alcohol. They hypothesized that a group therapy experience integrating both MI and music therapy, rather than solely verbal MI, would be more likely to change and/or reduce drinking behavior in college students which posed a risk to their health. Their method was to conduct two separate group therapy sessions with 22-23 participants recruited from the psychology program subject pool; one group using MI and Music Therapy, one only verbal MI. Results indicated that participants in the music therapy group were more likely to recognize their need to change; however, the two groups were the same in their levels of ambivalence towards acting towards those changes. The positive results for music therapy with
MI may be related to the ways in which music therapy can be more organized and structured when using MI, and the ways in which MI can be more flexible with music therapy. Cloud (2010) also acknowledged a drawback to the structure of MI and the flexibility of Music Therapy when the two combine:

The decisional balance discussion provided an excellent source of structure for the songwriting experience, and the song reflected elements of the discussion. The only disadvantage of the music therapy experiences being informed by motivational interviewing was that the session content needed to follow the structure of the decisional balance experience, and this did not always allow flexibility in the moment to explore thoughts, feelings, and/or emotions that may have been present related to aspects of alcohol use during the discussion. (p. 30)

A possible bias of the study is that both groups were facilitated by different people, so the information may have been delivered by the facilitator in different ways. Another bias is that the results may have been different for participants from each group because of the different ideas generated around risky drinking behavior during their sessions.

Other researchers have studied CATs approaches in application to change and ambivalence, without specifically naming MI as their process. DeWitte et al.’s (2021) review of the literature named common factors between the modalities of CATs and therapeutic mechanisms of change such as eliciting of emotions, therapeutic alliance, agency, and a state of flow. Mangeri et al. (2014) proposed the use of ballroom and Latin dance as a means of helping motivate people with type 2 diabetes out of ambivalence around taking care of their bodies, ultimately enhancing change around fitness goals. The Mangeri et al. (2014) study involved participants attending an MI based session for their physical health, and then enrolling the
participants in either a dance program or a fitness program. Goals of maintaining body mass index, metabolism, and physical fitness were more positively associated with the MI and dance program combination (Mangeri, et al. 2014). Music resonance therapy and MI have both been researched in relation to psychological treatment of people who are living with psoriatic skin disease, although not in combination with one another (Qureshi et al., 2019). There is inconclusive evidence in the literature around music resonance therapy in treatment of people with psoriatic skin disease, and strong support for MI, yet no exploration around the results of the two practices combined (Qureshi et al., 2019). Jones’ (2005) study found songwriting and lyrical analysis helpful for fostering emotional change with participants who were dependent on chemical substances. Research involved interviewing participants after two groups centered around either songwriting or lyric analysis and found that both types of music therapy approaches were nearly equal in their impact, and more impactful in encouraging joy and acceptance, decreasing guilt, fear, and distrust than using exclusively talk therapy.

**Creative Arts Therapies and the spirit of Motivational Interviewing**

According to Holt and Kaiser (2009), acceptance and compassion, two fundamentals of the spirit of MI, are reinforced by the practitioner through use of CATs interventions. Acceptance of the artistic output of the participant and compassionate witnessing of the artistic process may increase participants’ motivation to self-reflect, share information, and make faster the processes of inner movement towards change (Holt & Kaiser, 2009). Planning, a process of MI, is supported by CATs because creative interventions build problem solving skills and creative imagination (Duffey et al., 2016). Creative interventions may help participants identify their readiness to change and plans for moving forward (Palmer, 2014). An example of creative intervention which may promote assessment of readiness and planning to invite the participant to
draw an image of themselves now, and an image of themselves three months from now, or sometime in the future, then reflect on what needs to happen between now and then (Palmer, 2014). The application of CATs to the spirit of MI elements of partnership/collaboration and evocation/empowerment (Miller & Rollnick, 2013), and the processes of MI of engagement and focus (Motivational Interviewing Network of Trainers [MINT], 2021) are described below in more depth.

**Partnership/Collaboration**

Duffey et al. (2016) contended that the essential function using creative interventions in a session is that the therapeutic relationship is highly involved in the process of change. The working alliance between the practitioner and the participant may create an atmosphere for creative interventions, and if the practitioner sets the tone, then CATs may be a useful adjunct to MI (S. Andrew, personal communication, February 25th, 2022). “[Using CATs was defined] as a shared counseling process involving growth-promoting shifts that occur from an intentional focus on the therapeutic relationship and the inherent human creative capacity to affect change” (Duffey et al., 2016, p. 528). Change is an essential process in CATs (Duffey et al., 2016; De Witte et al., 2021), and change is a fundamental tenet of MI (Rollnick, 2009). Emotions and thought processes can shift when the practitioner is respectful of the dynamics of power which occur between practitioners and participants; creativity in a session can flourish when the relationship is in a place of trust and understanding (Duffey et al., 2016). Horay (2006) summarized the connection between a therapist of MI and art therapists:

The ideal characteristics of a motivational therapist include flexibility, a toleration of uncertainty, and a comfort with silence that generates anxiety-free thoughtfulness. It seems likely that these qualities are especially prevalent in art therapists—professionals
who advocate creativity rather than rigidity, tolerance in the face of ambiguity, and
contemplation as an alternative to rushed judgment. (p. 21)

Additionally, CATs can help people become more comfortable in the vulnerable situation of
participating in therapy, allowing space to decrease defensiveness and anxieties, and illuminate
new creative ways to navigate life situations (Rogers, 1993). Psychodrama is a means of
developing partnership among group participants and practitioners through bonding over mutual
experiences, easing anxieties both individually and with the group, naming opportunities for
change in ways that enable the participant to feel in control, and finding a place for practicing
new strategies (Walters, 2016). Cloud (2010) endorsed music therapy in addictions counseling to
build partnership partly due to the ways it can be less intimidating than using only talk therapy.

An example of a music therapy intervention which may lend itself to partnership is lyrical
analysis of a song chosen by the participant to match their mood, especially in a group scenario
(Cloud, 2010). Bonding, mutual truths among participants and practitioners may emerge (Cloud,
2010).

**Evocation/Empowerment**

Listening for sustain talk and change talk are ways in MI to evoke and empower people
(Gaume et al., 2021). One example of empowerment using CATs is how music therapy fosters
self-reflection around change and new opportunities, and enhances a person’s self-efficacy
(Cloud, 2010). Participants in substance use treatment may be more likely to interact with music
in treatment than with other interventions (Cloud, 2010). Connor (2017) endorsed creative
interventions which enable participants to externalize their ongoing issues, creating an
atmosphere of re-writing narratives which transform feelings of helplessness into ones of control
and power. According to Connor (2017), the intent of using visual artmaking around addiction as
a process of externalizing inner conflicts is to create space in conversation for people to find meaning in their challenges, to conversate around how the challenges have shaped their life experiences, to realize they do not have to face their challenges alone, and to empower them to find their own ways of easing these challenges how they so choose.

Palmer (2014) described CATs interventions that directly address ambivalence. For working through ambivalence, Palmer (2014) suggested an intervention called The Balancing Act, in which the participant is invited to portray through a visual art medium a choice they are trying to make, and the ways which decision making is a like a balancing act. Palmer (2014), described an intervention which addresses resistance, called Creator, Destroyer, and Transformer:

The patient creates an image, destroys that image, and then creates something new from the destroyed image. The ‘destroyer’ phase of art making may suggest metaphoric resistance, whereas the ‘transformer’ stage may be viewed as movement beyond this resistance. All three actions combined may motivate the patient to begin working through resistance and toward readiness to change. (p. 138)

**Engagement**

A practitioner may support people in recognizing their strengths by using “affirmations, reflective listening, and evocative questions” (Ratanavivan & Ricard, 2020, p. 6). An example of an engaging creative intervention is for the practitioner to present a list of positive attributes to the participant, and then to have the participant use a template of a human body to create a visual image representing self-identified positive traits they feel they embody from the list (Ratanavivan & Ricard, 2020). Practitioners may engage people through making the session a space to try out different creative strategies to deal with a situation, with the intent of sparking a
sense that change can occur from being uninspired and trapped through approaching from new angles (Duffey, et al.). Participants may transition from continuous trauma throughout their lives which impact their emotions and thoughts, to out of chronic or situationally disturbing experiences, thoughts, and feelings to a more sustainable sense of faith, autonomy, and ability to accept what is happening (Duffey, et al.). Klasson’s (2014) interviews with dance/movement therapists reveal ways in which reflections can be made through dance and movement:

‘[The practitioner] might…make a face and reflect what [they] imagine they [are] feeling…creating a complex reflection.’ Another [practitioner] described her ability to attune to ‘what’s moving emotionally, what’s moving energetically, what’s moving relationally…’ as important to embodying the spirit of Motivational Interviewing. If the structure of MI is a map for dance/movement therapists, then the metaphor might be expanded to include a dance/movement therapist’s somatic awareness as her internal compass. A map is only useful if you know where you are. (p. 184)

**Focus**

The next process of MI is focus, described by MINT (2021) as the development of a shared agreement between the MI practitioner and the person with whom they are working, which allows the practitioner to move the conversation in the direction of the participant’s desired change. In the CAT’s approach described by Duffey et al. (2016), a counselor does not prescribe creative interventions, and must ask permission from the client if they are interested in engaging in a creative intervention. The goal of MI is not to trick someone into change: “… you don’t do MI ‘on’ or ‘to’ someone… these speech forms imply a kind of expert/recipient relationship that is inconsistent with the underlying assumptions and spirit of MI. The appropriate prepositions are to do MI ‘for’ or ‘with’ someone” (Rollnick, 2009, p. 131).
An example of a creative arts modality to help bring focus to an MI conversation is psychodrama, which invites the participant to observe what their life experience is currently, play with alternative options, and consider the outcomes of making different choices, and help the practitioner find out more about where the participant currently is in their life physically, emotionally, environmentally, spiritually, and on (Sewell & Walters, 2019). Specifically, the psychodrama approaches named role reversal and/or doubling, which deepen the impact of reflective listening, and engage a person to focus on and express challenges in their lives that are vulnerable and hard to talk about (Sewell & Walters, 2019). Even if they are activated, triggered, or tempted to move in the opposite direction of their desired change, the psychodrama setting is a container for them to safely explore (Sewell & Walters, 2019). Doubling is a technique in which the practitioner or peers in a group sit or stand near another participant and act out that person’s experience or internal dialogue (Sherbersky & Gill, 2020). “The double articulates what is apparent but not being said or shown i.e. ‘I’m acting and being polite but really I’m feeling very cross’” (Sherbersky & Gill, 2020, p. 88), and then the person is invited to give input as to whether this interpretation was accurate. According to the same authors, this approach is like making reflections in MI, as a person’s experience is mirrored back to them when the practitioner steps into their shoes.

**Discussion**

The purpose of this literature review was to gain further understanding of the benefits of using CATs and EATs together with MI, and how these practices may amplify each other. Bergland et al.’s (2014) utilization of Smith’s (2012) common factor approach inspired the structure of this Capstone. A review of the literature first focused on the spirit of MI and the fundamental processes of MI, after which the definitions and primary elements of CATs and
EATs were described, also defining the ETC as a framework of using EATs in session. Literature exploring the combined topics was then reviewed and supported by creative interventions that reflect the spirit and processes of MI.

The critical review of literature combining the topics of CATs and MI indicated the following themes: (1) The CATs support identification of ambivalence, the need to change, and the desired outcome (Cloud, 2010; DeWitte et al., 2021; Duffey et al., 2016; Hadidi et al., 2017; Hora, 2006; Jones, 2005; Mangeri et al., 2014; Palmer, 2014; Sewell & Walters, 2019); (2). The non-coercive style of CATs is like that of MI and is appealing to participants who find it easier to warm up into the session and to feel less anxiety when creative arts are involved (Cloud, 2010; Duffey et al., 2016; Klasson, 2014; Ratanavivan & Ricard, 2020; Walter, 2016); and (3) participants responded best to practitioners using MI when there was partnership and collaboration, which CATs helped build (Cloud, 2010; Walters, 2016). The use of the CATs in MI sessions may support participants to develop discrepancy and realize their autonomy and self-efficacy, and to help practitioners roll with resistance (Crowe & Parmenter, 2012; Klasson, 2014, Walters, 2016). The combination of the CATs with MI may help participants externalize their inner processes for a more objective view of their ambivalence (Holt & Kaiser, 2009). The flexible style of CATs may lend themselves to the formal MI conversational style, and vice versa (Cloud, 2010).

There is a need for more research combining CATs and the MI style (Crowe & Parmenter, 2012; Klasson, 2014). Research increasingly supports means by which CATs and EATs may be considered evidence-based practices; however, Bauer et al. (2015) endorsed a clear need for more evidence-based research on these topics. For example, MI is often used in addiction counseling, and is sought after by addictions counselors as one of the most highly
preferred evidence-based practices (Doumas et al., 2019). The CATs have been linked to helping people who experienced addiction issues related to substance use and the quality of “switching from denial to recovery, but the details as to exactly how are missing” (Crowe & Parmenter, 2012, p.128). Access to evidence-based data on CATs, EATs, and their combination with MI is encouraged by Ratanivivan & Ricard (2020):

Counselors can be an agent of change by providing evidence-based information and data relating to the benefits and needs of school-based counseling programs and interventions to school personnel. By gaining this information, school personnel and staff may become aware of counseling services that can help children engage in the change process and achieve their optimal development. (p. 172)

Although the present literature supported the combination of CATs and MI, it is appropriate to recognize several potential challenges for future research, and suggestions for further consideration. A first challenge is that, to the best of my knowledge, there is no current research on the integration of EATs and MI techniques. In my view, the most compelling explanation for why this may be is because EATs are a newer field than CATs, whereas CATs began development in 1942 at the latest (Junge, 2010). If, as the present review of the literature suggests, there is no existing research on EATs and MI, then there is a need for future research which explores the combination of the two.

A potential challenge is a lack of accounting for cultural differences of MI participants and practitioners across studies. Self et al. (2022) explained:

Culturally adapted MI (CAMI) studies often combine MI with other health behavior treatments relevant to the population of interest (e.g., diet and exercise regimen planning, community events to generate support for change, health education courses, group
meetings, or pharmacological therapy). However, to date no summary or synthesis of these attempts to adapt MI to specific racial–ethnic minority groups exist. As a result, it is difficult to systematically evaluate how each study is distinctly adapting MI and what adaptations facilitate significant changes in outcomes. (p. 2)

Is there a means by which CATs and/or EATs may provide a link between practitioners and clients which may illuminate cultural differences and privilege, and perhaps find unexpected likenesses beyond the differences? Future research may shed light on using CATs, EATs, and MI with participants specific to their racial-ethnic minority groups, preferably with researchers who are representative of the minority group rather than a white researcher.

In terms of future research, it may be useful to extend the current findings by examining the coding process of MI, in which a session is audio recorded and then evaluated through the Motivational Interviewing Treatment Integrity Code or MITI 4.2.1 (Health Education & Training Institute, 2022). The MITI 4.2.1 numerically measures the degree to which a practitioner utilizes the principles of MI (Moyers et al., 2014). The coder listening to the recording gives feedback to the practitioner around what they are doing well and what they may improve upon (Moyers et al., 2014). Coding involves the measurement of MI only and does not include other types of counseling modalities. Is there potential to integrate other practices such as CATs or EATs into a coding process, or to code for a session in which an artistic approach to MI is taken?

Coding a session for a combination of MI and CATs or EATs may provide an opportunity for practitioners to sharpen their skills at approaching from the spirit of MI when offering a creative intervention. A suggestion of using CATs or EATs in an MI session is to emphasize the tenet of MI to let the participant lead, and to avoid giving unsolicited direction or advice. One suggestion for using the spirit of MI to offer a creative intervention would be to use
the approach of ask, offer, ask, which is a strategy in MI of asking permission to offer an intervention or suggestion, making the offer, and then checking in with what the participant felt and thought receiving this information (Andrew, 2022b). Ask, offer, ask sets a collaborative tone in an MI conversation (Andrew, 2022b).

Further research may also consider the levels of the ETC which MI can access. As a conversational style, MI focuses primarily on a cognitive/symbolic and perceptual/affective level. Reflections in MI can pinpoint underlying meanings through capturing what a person said using the single and double-sided reflections. The underlying meanings are based on the following assumptions: people want to be loved, to love well, to feel a sense of purpose, to feel included, and to feel they have power over their life (S. Andrew, personal communication, March 3, 2022). It is possible that these basic needs and emotions may be explored on the bodily kinesthetic/sensory level; however, in MI, needs are typically named on a cognitive/symbolic level. Furthermore, the cognitive/symbolic level doesn’t develop until the teen developmental years (Hinz 2019), so when using MI and CATs with children it may be useful to begin with thinking on more of a perceptual/affective and kinesthetic/sensory level to meet them where they are.

This research can be seen as a first step towards integrating two treatment models of EATs and MI. The intention of this Capstone is to stimulate further investigation of CATs and EATs in MI conversations. The growing body of evidence around the benefits of combining CATs with MI reinforces the necessity to include EATs in the conversation.
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