Magic at Work! Exploring How Expressive Arts Therapies Support Healing from Trauma and Adverse Childhood Experiences: Developing a Method for Adolescents

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Magic at Work! Exploring How Expressive Arts Therapies Support Healing from Trauma and Adverse Childhood Experiences: Developing a Method for Adolescents

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Abstract

This thesis investigated how expressive art therapy interventions based on imagination, creativity, and magical thinking can help facilitate adolescents' emotional development and healing. The study focused on how adolescents can grow and heal from adverse childhood experiences (ACEs) and/or trauma by revisiting imaginative play and creativity, where the impossible is possible and magic exists; a place where they can explore and play again through externalized methods. The use of imagination in the healing of adolescents was explored through the development of a two-phase intervention (a) creating their own mythical creature and (b) building a home for their mythical creature. There are three key findings of the present research. First, the imagination plays an important role in creativity, self-expression, and empowerment. Second, through the imagination, internal and external thoughts can be explored and invited into consciousness for deeper meaning-making. Third, through imagination, symbolism of unconscious thoughts can be explored through externalization and within a container that allows for a sense of safety and healing. The results of this thesis suggested it is possible that expressive arts therapies, used with adolescents with multiple ACEs and/or trauma, can allow for healing and growth.

Key Words: Imagination, unconscious, mythical creature, method, ACEs, trauma, expressive arts therapy, arts-based

Author Identity Statement: The author identifies as a white, cisgender woman from New England of mixed European ancestry.
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**Introduction**

Through the expressive therapies, we are helping to create a different language, a different perspective and identity...we mirror integration, and we meet ourselves through our creations.

(Graves-Alcorn & Green, 2014, p. 15)

I remember a time when dragons guarded majestic castles, fairies sprinkled star dust, Pegasus soared through the sky disappearing between clouds, goblins hid in my closet, and mermaids explored depths never before seen with human eyes. This was my magical world, a portal I walked through where mythical creatures helped me solve my problems and see with clarity what only my unconscious knew somewhere along the way, getting through the portal to my imaginary world became more challenging, but the ability was always there, just in hiding.

Expressive arts therapists work from an innately creative, imaginative, and playful space. They are equipped with the skills to integrate multiple artistic forms of expression (dance, movement, creative writing, visual art, and music) along with other counseling frameworks to support clients’ social, emotional, behavioral, and overall mental health (IEATA, 2017). While working at my internship, I have noticed how important imagination is within the creative process, especially when leading expressive arts therapy interventions using an open studio method. My internship site is an out-of-district therapeutic school serving multiple populations of students in need of varying extra support that the public-school systems cannot meet. I work with adolescents, ages 14 to 19 years old, with a range of social, emotional, learning, and mental health challenges. The open studio method’s guiding principle is that the “artistic creation has therapeutic value” (Finkel & Or, 2020, p. 2). The studio
method allows for my students to explore their emergent needs and nurture their innate spontaneous creativity; they get to access an array of art materials to create almost anything they desire.

Oftentimes, I find myself encouraging students to allow themselves to play and engage with their imagination. I have to express that not everything has to be “real” to be of value; there is value in not knowing and playing. Expressive therapies do not confine clients to the “realities” of the world and invite a deeper exploration of self. This takes place in a play space that Knill, Levine and Levine (2005) called the “alternative world experience” (p. 82). Encouraging engagement into their alternative worlds is where the magic happens. Knill et al. (2005) expressed that entering the “imaginary reality” (p. 82) is restorative and allows for symbolism to emerge that defies the logic of everyday life. It is through exploring our imaginations that one can find meaning that transcends into our daily lives for change and growth; our “imaginary reality” (p. 82) tells our story in a way everyday logic cannot. Encouraging engagement into their “alternative world experience” (p. 82) is where the magic happens.

In this thesis, I will be exploring how expressive art therapy interventions based on imagination, creativity, and magical thinking can help facilitate adolescents’ emotional development and healing. I will focus on how adolescents can grow and heal from adverse childhood experiences (ACEs) and/or trauma by revisiting imaginative play and creativity, where the impossible is possible and magic exists; a place where they can explore and play again through externalized methods (Bhattarai et al., 2021).

Many, if not all, of my students have experienced a range of ACEs in their lifetime. It is important to understand what ACEs are and what they mean for the treatment of adolescents. Adolescents are faced, at an alarming rate, to exposure of traumatic events. ACEs refer to a set of stressors that occur during childhood (Bhattarai et al., 2021). ACEs are measured through ten types of adversities children can experience before the age of 18. These adversities contain emotional and
physical abuse, emotional and physical neglect, sexual abuse, witnessing relational violence, divorce, parents with substance abuse, “living with a family member with mental illness” (Bhattarai et al., 2021, p. 2), and having a family member incarcerated. An ACEs checklist tool measuring these adversities is used by clinicians to get a better understanding of the historical and therapeutic dialogue needed with the client to maintain a trauma-informed approach. Bhattarai et al. expressed how there are significant long-term effects in regard to mental health and physical health for those that have experienced ACEs at some point in childhood.

Adolescents between the ages of 12 and 15 were reported by the U.S. Department of Justice as being victims of crime more than any other age group, and adolescents were two times that of the national average of those who were victims of crime (National Center for Mental Health Promotion and Youth Violence Prevention, 2012). Adolescents run the risk of being impacted by the consequences of their early trauma, exasperating feelings of shame and guilt, fear, and intense avoidance of school. These behaviors are explained as attempts to guard against feelings of hopelessness and fear. The need for adolescents to have access to supports for processing trauma and ACEs is crucial and more prevalent than expected within the adolescent population. Cook et al. (2005) argued that the “immediate and long-term consequences” (p. 390) that children have due to the exposure to traumatic experiences is layered and multifaceted.

While working as a clinical mental health counselor at my internship site, I developed an expressive arts therapy method to support adolescents in healing from ACEs. My hope for this intervention was that it would allow my students to access something already within them, their imagination and creativity, to process their trauma. Play and expressive arts therapy has been shown to support children with ACEs and/or trauma in developing healthy coping skills and processing their traumatic events (Stauffer, 2021). However, there is limited research demonstrating how imagination and play can support adolescents’ growth and healing. There is promise that adolescents would benefit
from symbolic and imaginative work through art (Goodman and Williams, 1998). The imagination has been shown to allow for building self-awareness, dialoguing with self and one’s unconscious thoughts, and an integration of social emotional learning (SEL) skills to manage trauma symptoms (Stauffer, 2021). Imagination and play are already innate gifts everyone has; it is about reigniting that flame and allowing one’s imagination to begin the healing in ways it already knows how (Malchiodi, 2020).

My intention in this thesis is to increase understanding of how these imaginative methods and studies can support adolescents healing from ACEs and/or trauma. In this thesis, I review literature on trauma, play, expressive arts therapy, and imagination as a healing agent for adolescents with ACEs and/or trauma. I introduce an expressive arts therapy method for inventing mythical creatures to engage adolescents in creative, imaginative, and playful healing. I report on the results of the method and how it relates to future recommendations for imaginative and expressive arts therapy practices with adolescents. Hopefully, furthering this research will allow for a better understanding of the role and benefits imagination, magical thinking, and play within the creative process to support adolescents healing from trauma and ACEs.

**Literature Review**

**The Impact of Trauma and Adverse Childhood Experiences in Adolescents**

According to the National Center for Mental Health Promotion and Youth Violence Prevention (2012), traumatic experiences can have a significant negative impact on school performance, interpersonal relationships, and healthy growth and development. It is reported that 60% of adults report childhood trauma, and 26% of children will have witnessed or experienced a traumatic event before the age of 4. Also, children have an increased chance of experiencing multiple traumatic events after experiencing just one. The authors site three types of stress. The first was “positive stress” (p. 3), everyday stress, which is “normal stress” (p. 3). Second was “tolerable stress” (p. 3), which is experiencing a heightened state of arousal for a certain amount of time due to a single traumatic event
such as death of a loved one or a natural disaster. The third was “toxic stress” (p. 3), which is the experience on prolonged activation of the stress response system with no supports. “Toxic stress” (p. 3) can cause impairments in brain development and social emotional development. Each stage of social development is significantly impacted by traumatic experiences.

From infancy through adolescence there are lasting consequences in adulthood from affected developmental stages affected by traumatic experiences. Challenges in adulthood arise when these traumatic events are not attended to. Adults with trauma histories were at risk for continuing the cycle of trauma to future generations (Cook et al., 2002). The National Center for Mental Health Promotion and Youth Violence Prevention (2012) expressed that when provided “protective factors” (p. 6) through family and external supports, children have an increased opportunity to develop resiliency and adapt well to adversity by processing their trauma to develop healthy coping skills that will transpire throughout their lifespan, and to future generations. Protective factors include children’s temperament, the family’s circumstances, and the external supports available to the child. Early intervention has been shown to “build strengths as well as reduce symptoms” (Cook et al., 2002, p. 397). Preventative treatment helps minimize the effects of trauma outcomes in adulthood.

According to the National Center for Mental Health Promotion and Youth Violence Prevention (2012) the developmental stages of infancy to toddlerhood are a critical time for acquiring verbal and communication skills as well as a sense of self. An overwhelming sense of helplessness may be experienced during this time if infants and children experience a traumatic event. According to Berk (2018) Erikson’s psychosocial theory expressed the important social and emotional stages in the life cycle that need to be met and what is experienced if they are not met. In infancy (0 to 8 months) trust or mistrust occurs; this is when children find out if their world is safe and if their needs will or will not be met. In two to three years, autonomy vs. shame and doubt occurs; this is where toddlers get more of a sense of self and discover if they can do things on their own or if they are dependent on others to fulfill
their needs. Then, in ages three to five, toddlers discover the concepts of if they are good or bad and begin to ask themselves: who am I? They discover their identity through a lot of play and exploration.

Gray (2011) stated the absence and decline of play has an overwhelming impact on children’s mental health. Play serves the growth of many developmental functions for social emotional skills needed for healthy psychological development. The Center for Mental Health Promotion and Youth Violence Prevention (2012) reported children respond to their trauma through play and re-creating the traumatic event and exploring it through an imaginary lens or even through recurring nightmares. The play facilitates much needed processing of the traumatic events through unconscious imaginal play.

Early childhood social and emotional development needs to be nurtured to help build the necessary protective factors to develop resiliency skills related to social and emotional development that transpire into adulthood.

**Neurological, Physiological, and Psychological Disruptions**

Dye (2018) explained how trauma exposure has been revealed to alter changes in hormonal systems and interrelated brain circuits that have the purpose of regulating stress. These specific changes to the brain affect processing information and impair memory function. After experiencing a traumatic event, the perceived threat activates the hypothalamic-pituitary-adrenal (HPA) axis which increases the amount of corticosteroids, a stress hormone. Subsequently, if there are multiple traumatic events resulting in chronic and severe stress, the HPA can become dysregulated, releasing excessive amounts of corticosteroids and ultimately creating a hormonal imbalance. The constant re-experiencing of stressors causes the HPA to become dysregulated and the ability to regulate stress and intense emotions gets deactivated. The deactivation of emotional regulation allows for the suppression of the emotional response, making it easier to manage the chronic stressors experienced from recurring traumatic events. The deactivation serves as an emotional protection to the constant trauma exposure, but ultimately has a significant impact on normal brain development. However, the person affected by the
trauma is in constant threat surveillance where emotional memories get trapped in the brain and left unprocessed. The key areas affected in the brain from a dysregulated HPA are the brainstem where stress is regulated; the midbrain and diencephalon, which plays a part in sensory motor activity, appetite, and sleep; the limbic system, which regulates emotions and moods; and the cortex which is responsible for cognition. The impairments in these functions have lasting impacts on development such as “incongruence between biological age, and developmental age” (p. 383).

**Using the Instrument of Play with Expressive Arts Therapy**

Graves-Alcorn and Green (2014) communicated how play therapy is a critical part of life for all children, but when faced with distressing or traumatic events, it is even more necessary to help children restore a sense of understanding and processing of life’s events. Play therapy is a developmentally appropriate and supportive method for children’s emotional and social well-being due to two main factors. Play offers two critical roles in children’s lives. First, play is by nature curative, and two, play is how children make sense of and learn about the world. Pretend play is how children make sense through “symbolism, fantasy, and make-believe” (p. 18). Through play, children can communicate and work through distressing memories to make new meaning and understanding. Play and imagination are synonymous with each other in using creativity to access the make-believe and to inform new meaning-making and ways of knowing. Shen (2017) expressed that while adolescents are not children anymore, they are in a transitional period to adulthood. Play therapy is still a way to help them process in therapy since for most adolescents their primary form of communication is not verbalization as it is for adults.

Internal Family Systems Therapy (IFS) protocol originated from Richard Schwartz’s ideas and experiences in engaging with his clients (Spiegel, 2017). IFS is based on the concept that, “the internal structure of the human mind and personality consists of multiplicity of parts that consistently interact with each other” (Hsieh, 2015, p. 31) and that,
Internally, the individual parts of a person interact uniquely with each other like members of a family would. This is a play-based way of exploring ones inner-self.

Externally people interact with each other’s parts in a continuous cycle that either create conflict of develop connection. (Hsieh, 2015, p. 31)

Therefore, in being able to help clients identify their parts, which are internal subpersonalities that have a range of their own experiences, feelings, personalities, and sensations, one is able to gain insight into what their motives, wants, and needs are that come from those parts of themselves (Spiegel, 2017). When those parts are explored, meaning-making can happen and this supports the client’s ability to build self-awareness and increase communication with others in the family to resolve conflict. The goal is to befriend those parts to gain understanding and to develop a positive relationship with one’s parts or self-energy. This work is playful in nature and allows one to understand the multifaceted parts of oneself and how those parts interact in the world around them. Sometimes a part may be referred to as a dragon stating that their angry part is a ferocious dragon. This brings the client to an imaginal space where they can explore and understand different parts of themselves.

**The Imaginative Role in Creative Arts Therapy and Self Expression**

Malchiodi (2020) described in her book, *Trauma and Expressive Arts Therapy: Mind, Body, and Imagination in the Healing Process*, how the creativity in expressive arts therapy is fundamental to the ability to use one’s imagination within the healing process. The expressive arts therapies go beyond the use of verbal communication and tap into self-expression, feelings, and perceptions of self through embodied experience. These embodied experiences defy expression through verbal therapy and logic. Expressive therapies help survivors of traumatic experiences tell their story without talking and therefore allow for deeper and safer exploration of trauma with the goal of growth and healing. Frequently trauma survivors have a challenging time verbally communicating their experiences of what happened. Traumatic events expressed through art allow for "the implicit ‘felt sense’ of the events to be
very real,” (p. 13) while safely contained to “their drawings, collages, movement, and other nonverbal forms of communication” (p. 13). The containment offered through expressive arts therapies minimizes the threat of the traumatic event and creates an invitation for it to be processed at a safe distance. Expressive arts therapies have made it much easier for clients with trauma to process and their experiences. Art has a long history of being used to tell stories and express the collective histories as well as other forms of imagination “as a response to trauma and loss” (p. 18). The expressive arts therapies access the innate powers of healing that have been practiced since the beginning of time.

Imagination plays a critical role in the process of engaging with the arts and expressive arts therapies. Knill et al. (2005) believed that imagination through the creative arts allowed for deeper and meaningful exploration. They called this imaginative space the “alternative world experience” (p. 82). The messages within the logic of one’s imagination have symbolism that lead to a deeper level of understanding one’s reality. The “imaginary reality” (p. 82) is restorative. Through a process called “decentering” one can enter and exit their imagination; in this process “the client leaves the logic of daily life and enters the logic of imagination” (p. 83). Through a range of play through the arts, the client is able to engage in a world that does not have the restrictions of “the narrow logic” (p. 83) of everyday thinking.

Lewis (1993) expressed how there are different vessels of the imaginary realm. There is the vessel of the individual’s body, the vessel of the therapist’s body, and the vessel of the group. All of these vessels allow for transformation into the imaginary realm of unconscious and conscious thought. Lewis clarified that it is not the act of needlessly participating in any form of expressive art therapy, but it is “their connection to the unconscious” (p. 13) through the mediums they engage with that navigates to “the unconscious-to-conscious link” (p. 13). The art and body are the vessels to the imaginary realms where one can interact with their unconscious. The creative process of art meeting imagination allows
conscious awareness of unconsciousness. Therefore, when this link is present, the client can build self-awareness and understanding of their thoughts and feelings.

Haas and Ray (2020) stated imagination has been shown to be supportive in the healing process for children and adults that have experienced trauma and ACEs. Hass and Ray conducted a single-case quantitative study to explore how child-centered play therapy (CCPT) impacts children who have faced four or more ACEs. Specifically, they wanted to investigate the effects of CCPT on “emotional symptoms, child’s interpersonal relationships, and problem behaviors” (p. 226). The method involved two child participants, age 8 and 9 years old, of low socioeconomic status, with four or more ACEs and no other form of current or past counseling. Each participant had 24 bi-weekly play therapy sessions for 45 minutes. There were multiple instruments used to measure and track progress including a modified ACE Checklist, Strengths and Difficulties Questionnaire (SDQ), and the Trauma Symptom Checklist for Young Children (TSCYC). The participants’ parents reported that their children presented with emotional dysregulation, lacking self-confidence, self-worth, self-acceptance, and a sense of belonging. Throughout the study both participants showed a considerable increase in prosocial behaviors and a notable decrease in negative social and emotional behaviors. Major improvements came when they began self-actualizing, which developed their self-acceptance and self-confidence. CCPT fostered positive regard, allowing the children to freely express themselves creatively and authentically.

Pliske et al. (2021) conducted a retrospective and grounded theory study to explore how childhood access to play, art, and creative expression within their communities countered the effects of ACEs once in adulthood. Their study consisted of 10 adult participants, between the ages of 25-65 years old, who experienced four various ACEs in childhood. The participants completed two 50-minute interviews. The first interview utilized play family genograms; the second interview was semi-structured and focused on furthering their experiences related to their family genograms. During the play family genogram portion of the study, participants were asked to create a visual representation of
their family dynamic and relationships. Through further interviewing, they were asked to use miniatures to ascribe to family members and themselves within their genograms. Pliske et al. discovered that early access to creative expression indicated that participants were able to create a toolbox for coping with ACEs to decrease the effects of trauma from their childhoods in adulthood. Play was the number one resource for participants coping with their trauma as children. Therapeutic powers of play and creativity cultivated self-expression, stress-management, catharsis, abreaction, indirect teaching, self-esteem, and creative problem solving. Participants voiced that they felt “connected, heard, and understood” (p. 250) through the relationships forged by the creative process. Having access to the arts and encouragement of an active imagination, from an early age, increased the likelihood of developing healthy coping skills navigating ACEs later in adulthood.

Jung et al. (2016) demonstrated how deeper levels of consciousness can be accessed through imaginative and creative activities. Jung et al. showed how imagination plays an important part in cognition and creative functioning within the brains network for “remembering the past, envisioning the future” (p. 6) and taking multiple perspectives. Gerber et al. (2018) found that arts-based expression, which showed how “letting meaning merge,” (p. 11) allowed for deep exploration of different levels of consciousness attained through the imagination. Through imaginative thinking, different levels of consciousness can be accessed and explored (Jung et al., 2016).

Malchiodi (2020) explained eight key reasons to include expressive arts” (p. 24) into one’s therapeutic practice. The first one is “letting senses tell the story” (p. 25). The body is known to “keep the score” (p. 25). Expressive arts therapies support healing from trauma because they have a “sensory nature” (p. 25) to the arts themselves, and this allows for somatic and sensory experiences that allow for processing the energy from trauma in the body. The second is “self-soothing brain and body” (p. 25). This is how expressive arts therapies have been shown to help with self-regulation in clients; most clients with trauma are actively seeking ways to regulate and find “refuge and respite” (p. 26) from the
hyperarousal of thoughts and feelings. The third is “engaging the body” (p. 26). This is the incorporation of “embodied intelligence” and what the body already knows about its environment, experiences and needs for healing. Learning to trust the bodies way of knowing is the reconnection to “body-centered intelligence” (p. 27). “Body-kinesthetic intelligence” (p. 27) is how “the body is a source of memory storage, emotions, and associations to oneself, others, and the world” (p. 27). Connecting to this intelligence brings awareness of the body’s “felt sense” (p. 13) into consciousness for healing.

Malchiodi (2020) identified the fourth reason for using the expressive arts in therapeutic interventions as “enhancing nonverbal communication” (p. 26), allowing the art to speak for itself when one cannot speak. The fifth is “recovering self-efficacy” (p. 28); the arts allow for a sense of mastery that is often decreased when one experiences trauma. Sometimes it is as simple as knowing you can arrange, put together, and build artistic pieces with art supplies; the symbolism of art allows for a sense of newfound mastery. Feelings of disempowerment turn into empowerment through the continuous experiencing of achievement and mastery through the arts. The last three reasons for using the expressive arts in therapeutic interventions are “rescripting the trauma story, imagining new meaning, and restoring aliveness” (pp. 30-31). The foundation for corrective experiences is through the imagination and being able to make new meaning through those imaginative explorations. Through imaginative, playful, and creative work, expressive arts therapies can restore a sense of joy for individuals who have experienced trauma and give way for experiencing aliveness that is free from the distress of their trauma.

**Externalization and Containment**

Addressing trauma memory is highly activating, but “the ability of the arts to offer containment and distance, along with playful elements, can assist children with accessing the memory without too much arousal” (Richardson, 2016, p. 40). Haen (2015) proposed an intervention for adolescents using drama therapy for inviting the monsters that represent their trauma into their play and imagination.
Haen demonstrated how through the imagination, clients are able to become conquerors of their monsters and vanquish them with a new understanding and coping skills. In order to confront their monsters, they needed to have a sense of control and that “safety can be achieved” (p. 239). Haen explained how distance is attained through methods utilizing the creation of characters that hold symbols of meaning for the client in relation to their trauma. The creation of monsters used a form of externalization, where the problem had some distance from the person and allowed for self-protective barriers to invite exploration without offense. By using the imagination to explore metaphors, the clients were able to investigate the problem safely from a “depotentiated place” (p. 239) when they were removed from reality.

Make-believe play and expressive arts therapies allow for externalization. Externalization is very supportive through play therapy and family therapy techniques to facilitate exploration of challenging topics. IFS is based off the premise that people have many parts of themselves that inform one dynamic, complex and unique identity (Spiegel, 2017). Externalization uses IFS in “the process of representing parts in concrete form such as drawings, figurines, clay models, or objects” (Spiegel, 2017, p. 64). Externalization allows the parts or feelings to be expressed in the external world of play instead of in the internalized world. When a part is explored externally, there is more opportunity to play with it and explore it without it being too emotionally or developmentally challenging; it allows for more exploration.

Stauffer (2021) posed the idea that a superhero play therapy intervention could support two upper-elementary school aged boys, ten and eight years old, who have experienced sexual abuse, overcome feelings of “stuckness and stagnation” (p. 14) within their treatment. Stauffer found that curating a narrative through representation of superheroes helped clients explore their boundaries and build confidence in their abilities. The clients were able to create a new narrative through visual representations of superheroes, narrative storytelling, movement, and role play. Stauffer found that
“stories create reality” (p. 21). The positive outcomes for these children were possible through the therapeutic process and exploration of engaging in play and the imagination.

The image of a container can be used in therapeutic work to externalize and hold traumatic experiences. Containers can take many shapes and forms in expressive arts therapy interventions and can provide boundaries and spaces to explore challenging material. Farrell-Kirk (2001) described how “boxes are a central part of many art therapy techniques used today” (p. 88). Boxes and containers provide “distance for the client” (Farrell-Kirk, 2001 p. 89) so it is easier to engage with the challenge or problem they are facing. Boundaries act as a container for those who needed to express inner turmoil. Ferrell-Kirk stated, “often it is only within this safe space that clients find the security and freedom to investigate and conquer their fears in a symbolic manner” (p. 89). By providing spaces for containment, clients can begin to access challenging thoughts and emotions. There are a few common themes between the different ways in which boxes are used as a form of containment within expressive arts therapies. Containers offer the client a free and protected space. Containers give value to something. They can be used to conceal, and they can unify opposites. Within trauma work, containers allow for experientials in boundary setting, regaining a sense of control, and rebuilding safety and security. These containers can come in many different forms. Sometimes containers can be physical representations such as a box or jar. Other times, containers can be the boundaries of the canvas or the imaginal world they are playing in.

Inviting Clients to Explore Expressive Arts Therapies

Richardson (2016) stated that safety within the therapeutic relationship is the number one priority to setting the foundation for the process of creating. The aspect of choice is critical in the client being able to engage in the method that feels the safest to them. Until safety is established, other art mediums are not accessible to the client, so giving the client time to guide their creative process initially allows for the foundation of taking more risks in the process later with other modalities. Richardson
stated that “helplessness and powerlessness are often at the heart of traumatic experiences” (p. 66). Therefore, an approach with “restoration or power, safety, and mastery” (p. 66) needs to be the priority and focus for all interventions with children and adolescents with trauma. Richardson shared that there are four phases for using the arts with traumatized children and adolescents. Richardson’s four-phase model was created with the intention to give a framework for expressive arts therapies that keeps the sense of safety, choice and control at the forefront for compassionate and safe treatment of trauma. The four phases are “(1) understanding the child’s inner world, (2) cultivating safety and resources, (3) trauma processing, and (4) reclaiming, reframing, and repairing, and reorienting” (p. 66).

Richardson (2016) effectively introduced new ways to expand the practices and methods of expressive arts therapy to adolescent clients. Through “invitation” (p. 11), Richardson connected with her adolescent clients to encourage exploration through the expressive art therapies so her adolescent clients could develop “personal stories of creation and meaning-making” (p. 14). Richardson expressed that it was important for the client to feel heard and understood through their past experiences and personal belief systems. This provided a foundation of trust and acceptance for the client to safely express themselves through the arts without fear of judgment. The use of “permission statements” (p. 14) also helped the clients feel a sense of control, choice, and safety throughout the expressive arts therapy interventions. Richardson stressed the importance of “finding the portal” (p. 12) and the way into their creativity, because once this trust is established, the client is more willing to engage in the artistic experience, seeing it as familiar, interesting, and accessible. Finding the portal is a way through the resistance and aversion adolescent clients may have to the arts. Richardson stated,

I have rarely met a teen who was not interested in music. Often, this is the way in. We can ask about the music he has on his phone or music he currently listens to. At this early stage it is about finding the portal, no matter how small or narrow. (p. 12)
Richardson created a safe, compassionate, and welcoming therapeutic container so adolescents could engage in expressive arts therapy. Once the adolescent client starts the creative process, there is potential for it to grow and expand overtime.

Malchiodi (2015) provided reference for understanding how to approach expressive arts therapies from a trauma-informed lens. Malchiodi introduced a method called, “trauma-informed expressive arts therapy” (p. 28). Malchiodi’s trauma-informed expressive arts therapy approach is based on the foundations from the Substance Abuse and Mental Health Services Administration’s (SAMHSA) evidence-based trauma-informed approach as well as trauma-informed practices. Trauma-informed practice consists of four key frameworks to implement with clients to maintain safety and cultural competence with clients. This approach:

(1) emphasizes knowledge of how the mind and body respond to traumatic events; (2) recognizes that symptoms are adaptive coping strategies rather than pathology; (3) acknowledges clients’ cultural sensitivity to values, perceptions, and worldviews of illness and treatment; and (4) maintains the belief that individuals are not only survivors, but also ‘thrivers.’ (p. 29)

This is a strength-based perspective for supporting clients of varying ages “with many different interpersonal, cognitive, and psychical challenges” (p. 29). Malchiodi addressed that trauma-informed expressive arts therapy consists of “sensory-based methods, posttraumatic play, and culturally sensitive intervention” (pp. 29-36). She stressed how all aspects of trauma-informed practice are central to all creative interventions and the success of clients.

**Barriers to Accessing Play and Imagination**

Trauma has the ability to freeze and stop developmental progress of young children in a critical time of psychological, social, neurological, and biological growth (Malchiodi, 2015). Malchiodi expressed how trauma can be seen as “failure of the imagination” (p. 236). The trauma of young people’s pasts
can overtake their present, and adolescent clients can become overwhelmed by their own internal memory and struggle with being able to see future possibilities for themselves. Imagination is critical in meaning making, but Malchiodi is also finding that when an adolescent client experiences trauma from an early age, their mind gets stuck in survival mode and struggles to access their imagination. An individual with a history of complex trauma or developmental trauma may have a “fixed physiological and emotional response” (Malchiodi, 2020, p. 34) that interrupted the natural instinct and ability to be creative, playful, and “imagine new possibilities” (p. 34). It is possible that using expressive arts therapy interventions with adolescents can help reignite imagination and creativity into their daily lives, therefore providing them access to meaning-making and understanding their trauma. Getting clients to engage in imaginative play is a primary goal and an indicator of successful therapy (Winnicott, 1971).

**Method**

After reviewing the literature on how play and imagination can support healing from trauma and ACEs, I developed my own expressive arts therapy intervention for adolescents. My expressive arts therapy intervention introduced adolescents to a magical world where mythical creatures walk the earth and magic exists. The Mythical Creature Intervention allowed for the exploration of magic, make-believe, and imaginary realities to promote healing from trauma and/or ACEs. The Mythical Creature Intervention consisted of two phases, which included (a) the development of a mythical creature, and (b) the building and designing of a home for the mythical creature. I facilitated this intervention for a high school student. I met with the student weekly for four, 60-minute sessions over the course of four weeks.

**Community**

This method was implemented at my internship site, which is an out-of-district therapeutic school serving multiple populations of students in need of varying extra support that public-school
systems cannot meet. The student was 14 years old with multiple ACEs and a trauma history. The student identified as a white, cisgender, female student who used she/her pronouns. The student was moved to an out-of-district school collaborative to better support her individual needs both academically and therapeutically. All sessions were conducted during the school day at her out-of-district school collaborative.

**Phase One, Session One**

In phase one, the student was instructed to create a mythical creature of her choosing. She was asked to create anything that she wanted; it could have been a mythical creature that already existed in folklore, a combination of two mythical creatures that existed, or something entirely created by her. She was asked to draw her mythical creature on paper and explore textures, color, and shapes. We spent one session just designing her mythical creature. She was invited to create her mythical creature with the materials provided which included pencils, markers, scissors, canvas, acrylic paint, and brushes.

**Phase One, Session Two**

In the second session of phase one, we explored her character more in depth. The student filled out a character sheet that gave her prompts for traits about her characters. She shared about her characters once she was done creating them. I provided prompts after filling out the character sheet such as: What do they like? What do they not like? What are their strengths? What are their weaknesses/do they have any? What kind of magic do they possess? When do they use it? Do they have a catchphrase, and where do they live? After they shared what they wrote I asked more questions like: What do you notice that may be similar about your characters to yourself? What is really different from yourself? What do you want to know more about them? The goal of exploring the creatures was for the student to really understand her mythical creatures and uncover the unconscious thoughts that emerged in the creation of her character. Throughout this process, she was prompted to recognize the imaginary reality and how those two worlds combine. Knill et al. (2005) theorized that “aesthetic
analysis is what we call looking at the presented art work” (p. 150), giving it meaning, and “accepting the imaginal realities presented as they are” (p. 150). The questions I asked throughout the method served as the aesthetic analysis to validate the experiences of her mythical creature and to explore how it related to her life.

**Phase Two, Session One**

In phase two, the student was instructed to build a home for her mythical creatures. She had access to clay, cardboard, pipe cleaners, paint, sea glass, nature materials, paint, pom poms, and more. I sat with the student supporting her as she built her home for her mythical creature. I asked prompting questions such as: What does your creature need? Where do they live? What things would they like in their home? What is important for them to survive? What are some things they like to do? Once the student was done creating the mythical creature’s home, she shared them with me, and explained what she made for her mythical creature.

**Phase Two, Session Two**

In the second phase of session two, we spent time creating closure with her character and her character’s home. We spent the first part of the session continuing to work with her mythical creature’s home. I followed up with questions such as: have we learned anything new about your mythical creature from building their home? Is there anything you would want in your home that you see your mythical creature having? Why did you choose the items you did for them? Through these questions, we explored how her mythical creature perceived the world, and how they interacted with their surroundings. I assisted in helping her try to draw parallels to their lives and her needs through her mythical creatures and the home for her mythical creatures.

**Anticipated Outcome**

I anticipated that my student would respond hesitantly to the process as first. Adolescents are at a stage developmentally where they want to be seen as adults, so it was challenging for my student to
engage in the playfulness of this method right away. Once the initial resistance wore off, I predicted she would openly explore her mythical creature’s identity in depth, and she would be able to apply that information to real life scenarios and experiences. I anticipated she would engage with The Mythical Creature Intervention if I created a culture that was playful, flexible, and accepting of all forms of creativity. The student I worked with is already used to having expressive arts therapy at least one time per week. Thus, she had existing experience engaging with her creativity in the studio. I anticipated that using methods such as play, imagination, and magical thinking with adolescents would support their emotional development and healing. I also expected that The Mythical Creature Intervention would add to the gap in research of how to support adolescents in processing their trauma and ACEs in ways that are generally only used with children. I hoped to be able to show that age does not define one’s ability to access play, magical thinking, and imagination through creative expression, and that if expressive arts therapists open the door to explore trauma and/or ACEs through imagination and play, more people of all ages could find healing.

**Tracking and Analyzing Observations Through Arts-Based Research**

I tracked my findings through progress notes I wrote after each session with the group. I identified themes and symbolism that emerged throughout the process. I then reflected on what happened in the sessions though my own arts-based research after identifying themes, feelings, or other areas of exploration from the sessions. I analyzed my own reflections and conclusions by making arts-based responses to the individual sessions. My goal was to recognize not only my student’s experiences within this intervention, but my own as well. Chilton (2013) created her own artistic inquiry to arts-based research. Arts-based research consists of the researcher using “visual, performing, and/or literary artistic practices in the systematic generation of new knowledge through aesthetic discoveries” (Chilton, 2013, p. 458). I implemented my own arts-based research through an altered book. An altered book is made from a “previously existing book” (p. 458) that is being repurposed to create a “new work of visual
art” (p. 458). To alter a book, one can use an array of art processes such as collage, drawing, painting, writing, poetry, adding embellishments, and other artistic mediums. A new story can be brought to life after a book is altered. Chilton explained that creative expression throughout her altered book allowed her to take on the perspective of a witness to her own thoughts that “may allow for transcendence” (p. 462) and the exploration of deeper unconscious thoughts. I created my own altered book to explore my observations and incorporate my aesthetic analysis of The Mythical Creature Intervention. My documentation through my altered book allowed me to access my imaginative and creative process to contextualize and understand the results from this method approach.

**Results: Explorations Through an Altered Book**

The results of The Mythical Creature Intervention were discovered through themes and insights that came into consciousness through my own altered book explorations (See Appendix). After every session, I added one to three pages in my altered book expressing my own internal dialogue of my observations and thoughts after working with the student. This allowed me to keep a record of what each step of the process brought up for my student and for me as an expressive arts therapist. I think it was productive and allowed for great insight into how the expressive arts therapies paired with play and imaginal thinking can allow for transformative experiences and insight into the unconscious mind. This was not only transformative for my student but for me as well. My expectations for this activity, which I explored when making the cover of my book (See Appendix, Figure 1) were different than what occurred, but what happened was magical and unique to the student and her needs.

**Resistance and Fear of the Unknown**

This first session was met with a lot of resistance, hesitation, and fear of the unknown. I observed confusion over what kind of creature my student should create, and my student vocalized not knowing what the “right” mythical creature would be. Gray (2011) expressed the importance of adolescents allowing themselves to play and embrace the invitation. I found that working through this
resistance was as much a part of the work as all the other stages. The resistance was the result of other concerns or challenges that might come up in the process and exploration (See Appendix, Figure 2). We had to get through the resistance before we could go anywhere else.

After further exploration of what was underneath the resistance, we found fear. More specifically it was fear of the unknown. My student mentioned not knowing what she would find, and not knowing how to explore her character. When I asked questions about her character, I was often met with, “I do not know.” This was not an act of defiance, but a genuine confusion for how to formulate a character and allow parts of themselves to be seen (Spiegel, 2017). I explored this concept of fear and the unknown through my altered book, and I developed a blackout poem to express how digging into the unknown could illicit a fear response (See Appendix, Figure 2). Blackout poetry is the art of redacting words from a piece of writing that is already published or written. Landenheim (2014) described blackout poetry as poems that are just “waiting to be revealed in the columns of print” (p. 45). In the black out poem, I crafted a reflection of fear that is exhibited in the poem. The blackout poem was:

“hesitated a moment. Welcome to my old life. The trunk was crammed with all sorts of curiosities” (Fodi, 2020, pp. 24-25). Getting to the root of the feeling behind the resistance allowed for the artistic process to continue. There is great risk in exploring one’s imagination because who knows what one will find there. I explored this feeling in my altered book (See Appendix, Figure 3). I found that a major barrier to doing the imaginative and playful work was getting through the self-judgement and fear of the unknown.

**Embracing Their Imagination and the Mythical World**

As the session continued, I noticed that once the student had access to paint, her resistance started to fade. She began to embrace her imagination through different creative choices. As the student began painting, you could see the mythical creature coming to life. Richardson (2016) referenced “finding the portal” (p. 12) as the way into the client’s imaginative and creative world. The
portal was a way for me to use expressive arts therapy with the student that maintained a sense of safety while engaging in her creativity. Richardson mentions that the initial process of starting expressive therapy work is met with fear and resistance, but once you find the portal, a world of creativity is possible. Paint was the portal for this student.

My creations in my altered book evoked a sense of exploration, adventure, and play after this session (See Appendix, Figure 4). The excitement of playing in our imagination is alive in these images just as it was coming alive for my student. I started asking her questions as she drew and painted her mythical creature. However, she was not able to verbally process her arts’ meaning, and instead she needed to stay within the imaginal realm of exploration. Malchiodi (2020) explained that trauma survivors struggle to articulate their traumatic events. Malchiodi expressed how articulating the events can be retraumatizing of the experienced trauma, and that returning to art as the main communicator alleviates that stress response. I decided that just being a witness to her art-making was what my student needed in that moment to feel safe and to not have to verbalize it into consciousness.

**Symbolism, Externalization, and Meaning Making**

Expressive arts therapy capitalizes on the importance of symbolism within the art. The art tells a story through the representations that are found from within (Malchiodi, 2020). As the student began painting characteristics, facial expressions, and color choice, all intentional and important choices made by the student created a story of symbols. Externalization, which is the “process of representing parts in a concrete form” (Spiegel, p. 64, 2017) allowed for distance from the creator’s internal world. The products of the externalization are expressions of the internal world. The inner world allowed for that feeling or need to be expressed through play and creativity away from one’s self, making it easier to explore. The student started painting huge butterfly wings around her mythical creature. There was a lot of emphasis on the wings being big and as she said, “beautiful and happy.” When it came time to draw the background, she drew a dark sky with an even darker line at the top of the canvas. When I
asked, “What does this line mean?” She answered, “I do not know. It is just there. I don’t know where it came from.” I asked, “Can your mythical creature fly?” She answered, “I think so. Actually, I don’t know.” The contrast in her imagery was stunning and led me to a lot of curiosity.

I turned to my altered book to understand what I witnessed in this session. I found the symbolism of wings, bright and gold (See Appendix, Figure 5). These wings in my mind are magnificent; they cannot even be contained on the page (See Appendix, Figure 5). She expressed the need to fly, to soar through the sky, but are trapped and stuck. There was symbolism around being magnificent and flying, but stuck and unable to do so. I curated a poem that stated, “It’s a place where everything is amazing. She said, I’m trying to fly. Let me…” This expressed the “stuckness” in the symbolism of her mythical creature as well as the needs of their mythical creature and those needs not being met (See Appendix, Figure 5). By saying, “let me…” I am able to express there is something not letting my wings soar; I am stuck even if I want to go,” I externalized the feeling of “stuckness” onto the wings that became a symbol for my needs and wants. Through the symbolism, I was able to engage in meaning-making just as the student found meaning in her mythical creature. Through externalization and symbolism, there is “an opportunity to express metaphors representing their thoughts and feelings” (Nickum and Purgason, 2017, p. 349). Through externalization of her mythical creature, within the imaginal realm, the character held symbols of meaning that were able to be expressed from “depotentiated place” (Hein, 2015, p. 239) allowing for deeper exploration and less resistance.

**Containment as a Vehicle for Exploration**

As the sessions continued, I noticed a theme of containment and the sense of safety and boundaries the mythical creature provided my student in her processing. Containers serve many purposes within expressive arts therapies, but most commonly they allow for distance from the traumatic event and an externalized place to explore and contain safely challenging feelings (Farrell-Kirk, 2001). Containers were used throughout the whole process with the student. The canvas served as a
container to hold the mythical creature. The box she chose for the home was also a form of a container. Each container provided allowed the client to explore with safety measures in place. At the end of every session, the student would put the canvas of her mythical creature in the box and put the box (the box was the home for the mythical creature) on a high shelf away from all other projects in the room. This became a ritual and practice for the end of every session. It kept the content contained and safe until she came back for her next session.

I explored this concept continuously within my own altered book. My altered book served as my container; it was the holder of all my thoughts and experiences throughout this process. I noticed multiple forms of containers showed up within the artistic explorations in my altered book. On one page there is a door stating, “Beware, run, don’t look” (See Appendix, Figure 6). There is also a door that physically opens to hold my poem about my magical paint brush (See Appendix, Figures 9-10). There is the treasure chest at the bottom of the sea holding all my precious thoughts; it is open, but it has the ability to close when I need it to (See Appendix, Figure 4). There are the words of my poems held on the pages of the altered book as a container (See Appendix, Figures 2-9). Much as my client in this method, I too have created versions of containers to hold my thoughts and feelings safely. I, too, can close my book and put it on the top shelf when I am done. Being able to close it and know it is safe allowed me to come back to engage my imagination once again much like my student could return to her mythical creature. Even the imaginal world is a container that could be opened and closed as one chooses (Farrell-Kirk, 2001).

**Self-Regulation as a Refuge from Trauma**

The process of creating the mythical creature and their home was supportive in self-regulation. For each step of the process, the student turned to paint. I realized this when I started painting consistently in my own altered book (See Appendix, Figures 1, 3, 4, 5 & 9). Every time she used paint, she seemed much calmer and more regulated. I also found respite in painting, and I embraced the
soothing nature it provided me within my altered book. Malchiodi (2020) stated that children often seek out ways to soothe their stress response through self-regulation techniques, painting being one of them. Malchiodi explained that expressive art therapy can lead to “rhythmic kinesthetic, sensory-based experiences” (p. 26) which allow for relief from the stressor symptoms. The mere act of painting her mythical creature and home was providing much needed refuge and self-regulation for my student.

**Boundaries, Voice, and Choice**

For the last session, the student decided that she did not want to work on her mythical creature’s home anymore. After a little bit of prompting, I noticed that the project with the mythical creature was complete. For the longest time I felt that this method was unsuccessful, and that it was left “undone.” There was an everlasting theme of “stuckness” that I was pushing against upstream. There was this frustration that the method seemed incomplete and undone, but then I realized it was done; it was complete (See Appendix, Figure 7). The student had said so much. She was expressing her needs to me all along.

The student had gone as far into that imaginary world as she wanted to. I was a witness as she explored her mythical creature in her drawings, paintings, and buildings with full attention to detail and curiosity as they led and determined the next step. I am reminded that art has a way of “restoring equilibrium and aspects of the self that can often be sensed but often cannot be articulated” (Malchiodi, 2020, p. 15). The student was able to investigate her boundaries, wants and needs, as well as make choices by designing her mythical creature from start to finish. By designing her character from her own imagination, she was able to make all the choices. There was not a “right” or “wrong” choice to be made; this gave the power back to the student. Her mythical creature was made with the choices that were true to her and what appeared to her in her imaginal world of the unconscious.

Rogers (1993) expressed that there is an “innate capacity of each person” (p. 3) to reach their full potential by trusting their intuition and self-knowledge. I embraced this practice within The Mythical
Creature Intervention. The student was able to experience their inner world and bring attention to those ideas and thoughts in meaningful ways by attending to the emergent, allowing space for self-reflection, giving the power of choice, and trusting the artistic process. The mythical creature, and all that it offered her, allowed her to listen to her inner world and to attend to what was needed in the now. There was not a need for language, because the student was able to express themselves through symbols, color, form, and images. The student saw what she needed and said “no” when she needed. Her voice was found, and her autonomy was practiced.

This became clear to me when I turned to my altered book and created a mirror with a shadow looking in saying, “Hello?” This image reflected how the unconscious world of knowing meets the conscious world of knowing; through art they collide. As represented in Figure 8, sometimes the art finds me, especially when I go into my imaginal world. I am not always looking for what it shows me, but it is always asking for my attention. The moments when the unconscious meets the conscious can feel like looking at myself in a mirror (See Appendix, Figure 8). My inner world meets the external world, and as jarring as it can be, there is an opportunity for meaning making. Art transcends all language. Art can bring someone to look into their internal world in ways that otherwise could not be accessed without threat to mind, body, and spirit (Rogers, 1993). Art is the language, and it has something to say.

**Empowerment and Autonomy**

Often, trauma causes an increase in disempowerment and a need for mastery and confidence. Malchiodi (2020) stated, “trauma challenges the very core of not only who we are, but what we can eventually be, achieve, and enjoy” (p. 29). The mythical creature allowed for a sense of mastery in design and creation. There was pride in creating the mythical creature and the skills needed to do so. The student demonstrated how experiencing empowerment through mastery, resilience, and choice gave her confidence.
When I turned to my altered book, I created a picture that has a black out poem and an image. I perceive the image as empowering and strong (See Appendix, Figure 6). The words of the poem express distress, fear and anger. In large letters I wrote, “RETREAT” and “don’t look...beware...run...it’s not safe.” This poem is foreboding and frightening, but when I look at it, I also see power and strength. There are many ways to say “no” and “not right now” or “I’m done now.” It is empowering to take control of the situation and to know you can say no, and that you can retreat. The student was able to do this when she said no to completing the mythical creature’s home. The student had enough corrective experiences to know it was okay to say no. That sense of control is critical in feeling empowerment and achievement (Richardson, 2016; Malchiodi, 2020).

Within my altered book, I created a strong door with beautiful rubies wrapped in vines and flowers. The two black doors with ruby handles open up to a poem I created (See Appendix, Figures 9 & 10). I made this poem as an artistic response to the student’s mythical creature and her creature’s home. The magical paint brush symbolizes taking back control and creating the story she wants and needs. The magical paint brush is a symbol for all the possibilities that are available to her and her mythical creature. The magical paintbrush is a symbol for strength, resilience, and empowerment.

**Attending to the Emergent**

During the imaginal process, it became apparent that attending to the emergent was most necessary. Attending to the emergent allowed the student to turn to her immediate needs and to trust her intuition (Rogers, 1993). This allowed the student to continue the process of developing her mythical creature time and time again. This allowed her to revisit it even after taking some time away from it. Discovery of self came from within and allowed for great transformation when she was able to lead and when I trusted the student knew where to go (Neukrug, 2018). I discovered this when I turned to my altered book. I wrote in blackout poetry (See Appendix, Figure 11), “can we? I don’t know how. That doesn’t mean what you think it does. That moment everyone went quiet. I don’t know how. A
situation like this. They found themselves surrounded by the starscape. Now” (Fodi, 2020, p. 62). The images and words are blooming with vines and flowers, and the window is showing the way through. When the student was able to attend to the emergent, almost anything was possible; she found herself “surrounded by the starscape. Now” (Fodi, 2020, p. 62). Maybe here, in the emergent, the imagination can help us find the way.

**Discussion**

The seeds of much of our creativity come from the unconscious, our feelings, and our intuition. (Rogers, 1993, pp. 4-5)

The purpose of this study was to gain a better understanding how expressive art therapy interventions based on imagination, creativity, play, and magical thinking could help facilitate emotional development and healing for adolescents who have experienced multiple ACEs and/or traumatic events. To explore how the imagination and expressive arts can support growth and healing in adolescents, I developed a method that focused on externalization, where the student was asked to create their own unique mythical creature and home for the mythical creature. There were three key findings of the present research. First, the imagination played an important role in creativity, self-expression, and empowerment (Malchiodi, 2020; Jung et al., 2016; Stauffer, 2021; Pliske et al., 2021). Second, through the imagination, internal and external thoughts can be explored and invited into consciousness for deeper meaning-making (Richardson, 2016; Ferrell-Kirk, 2001; Rogers, 1993; Spiegel, 2017). Third, through imagination, symbolism of unconscious thoughts could be explored through externalization and within a container that allowed for a sense of safety and healing (Knill et al., 2005; Lewis, 1993). Through The Mythical Creature Intervention, it is possible that imagination used with adolescents with multiple ACEs and/or trauma can allow for healing and growth.

**The Imagination’s Role in Creativity, Self-Expression, and Empowerment**
The very basis of creativity is found through the use of the imagination; without our imaginations there is no creativity. Our imaginations offer us so much in regard to our social and emotional well-being (Malchiodi, 2020). On a fundamental level, the imagination serves a critical role in our day-to-day functioning. The imagination is responsible for helping us with decision making, taking on multiple perspectives and problem solving (Jung et al., 2016). Jung et al. explored how our imagination plays an important role in cognition and creative functioning within our very brain networks. These are the executive functioning skills we need to make decisions and relate to others on a day-to-day basis. This was demonstrated throughout my method by how the mythical creature allowed the student to take on multiple perspectives, express themselves through symbolism, make decisions about the needs and wants of themselves and their creature, and problem solve when it became difficult to engage in the process. The imagination allowed for exploration without the restrictions of real life controlling what can and cannot be true (Knill et al., 2005).

The imagination played a key part in allowing the student to engage in self-expression. Through her creature, my student was able to access a universal language to explore her trauma in a safe and contained way. Through art, my student learned how to tell her story without talking, because words could not encapsulate her feelings and experiences fully (Malchiodi, 2020; Stauffer, 2021). Art became a language that did not threaten the safety of the student and the needs, feelings, and thoughts she needed to express to begin to process and heal from her trauma (Rogers, 1993). Stauffer (2021) expressed in his superhero intervention that “stuckness” is a psychological trauma that tends to silence victims, because “certain violations of the social compact are too terrible to utter aloud: This is the meaning of the word unspeakable” (p. 14). The imaginal mythical creature opened up an avenue for self-expression void from the barriers of language as a main form of communication. The student experienced “stuckness” when language was asked of them throughout the process. However, when
they could talk through their art and the imaginal world, that “stuckness” subsided and room for self-expression followed.

Empowerment was also experienced by the student through the use of her imagination. The Mythical Creature Intervention validated the creative process as empowering through her ability to have creative choice and control in the creation of her mythical creature. Rogers (1993) expressed that through “The Creative Connection” (p.4) each person has an innate ability to express themselves through freely and through multiple arts modalities. The Mythical Creature Intervention fostered the inherent ability for my student to explore deeply through her connection to self and “intuitive expression” (Malchiodi, 2020, p. 19). The student demonstrated this when she engaged with the symbolism and innate wisdom that came from the creation of her mythical creature. She was able to access her inner voice and express her boundaries by saying no when she needed to. She found her voice, asserted her boundaries, and developed mastery. Her growth showed an increase in self-efficacy and confidence, and trust in her intuition (Rogers, 1993; Malchiodi, 2020).

The Imagination Through Symbolism, Externalization, and Containment

Symbolism, externalization, and containment offered the student a sense of safety that is the foundation for any therapeutic relationship and expressive arts therapy experience (Richardson, 2016). Ferrell-Kirk (2001) stated, the use of boxes and containers provided “distance for the client” (p. 89) and a way to set boundaries, regain a sense of control, as well as rebuild a sense of safety and security within themselves. All forms of containers were present throughout the process of inventing their mythical creature. The containers offered the student a place to hold her adventures and explorations within the imaginary realm.

Expressive arts therapy relies on symbolism and externalization throughout the art process. The many forms of expression allowed the art to tell a story; the story was told through all the representations found within the art that are reflections of oneself (Malchiodi, 2020). The story that
unfolded around the student’s mythical creature held many representations and symbols relevant and important to the student personally. The symbols came as metaphors that represented feelings, thoughts, and ideas that needed a voice and a witness. Many of the symbols that came up for my student throughout the process led to new meaning-making and an understanding of herself that illuminated areas that needed attending and healing.

The Imagination in Meaning-Making and Unconscious Awareness

The findings from the development of the method and literature reviewed suggest that through the imagination, one can engage with unconscious thoughts and bring them to awareness, providing the opportunity for new meaning-making and self-discovery. Knill et al. (2005) expressed that the expressive arts therapies allow for a deeper and meaningful exploration, capitalizing on the imaginal space and the symbolism that arises from that place. Lewis (1993) mentioned “the unconscious-to-conscious link” (p. 13) that engages the art and body to meet with vessels of the imaginary realms allowing for a “connection to the unconscious” (p. 13). This connection brings awareness and understanding of one’s thoughts and feelings. Knill et al. (2005) and Lewis (1993) suggested the way into the unconscious is through the imagination. The student was able to make new meaning by engaging in her imaginal realm. Through her creative process and imaginative exploration, stories, metaphors, and symbols revealed themselves and allowed the student deeper exploration of self.

Implications of Research

Based on the research presented in the literature review and the results from the Mythical Creature Invention method, I believe that the imagination has an important role in our creative lives. The results implied that the imagination had an important role in healing from multiple ACEs and/or trauma within an adolescent population through expressive arts therapy. It is interesting that there is limited research on using the imagination as a focal point within the expressive arts therapies for all age groups, because the research in the literature review and the results from the method demonstrated
how interconnected creativity and imagination are in the expressive arts therapies. The findings implied that allowing adolescents to return to a place of play, curiosity, and imagination allowed for a deeper exploration of emotions. I believe there is much more to explore around the imagination and its ability to help adolescents grow and heal from ACEs and/or trauma. This method demonstrated the need for more research in the effects of imagination as healing within the expressive arts therapies. Existing research suggested that the imagination is a key to the gate of unconscious thoughts. There is so much more opportunity to explore how the imagination can be utilized to support adolescents with ACEs.

**Suggestions for Future Research**

As promising as the results from this method are, I imagine that the results would change drastically if there had been a larger population that was inclusive of a wider and more accurate portrayal of the identities of the United States population in regard to race, gender, sex, socioeconomic status, sexuality, and age. My study was conducted with one, 14-year-old, cisgender, white, female student. These findings are only indicative of one age, race, gender, and sexual orientation, and they are not conclusive of the results for a more diverse population. In the future I hope to be able to expand this study to a larger and diverse sample size that more accurately reflects the multitude of identities within the population. Further research would be needed with populations of multiple racial and cultural backgrounds, socioeconomic status, mental health diagnoses, sexuality, and gender identities to fully conclude that imagination, play and creativity through expressive arts therapy does promote healing for adolescents with ACEs and/or trauma.

Another area of further exploration of this method would be to diversify the forms of information gathering. Due to the limitations of what information was ethically available to me during this method in regard to confidentiality and program requirements, the results are strictly self-reported data of the researcher. In future research, I would want to include a way to incorporate students’ reflections and personal accounts of the experience as well as what they self-report the method
provided them. The findings are solely based on my own observations and the art I created in response to those observations with the student. A broader range of reported results would conclude with less bias.

**Imagining Future Research**

This method demonstrated the need for more research in the effects of imagination for healing within the expressive arts therapies. With research on imagination being the gate to unconscious and conscious thoughts (Knill et al. 2005; Lewis, 1993), there is opportunity to explore how the imagination can be utilized to bring forth the underlying needs, thoughts, and feelings of adolescents who have experienced multiple ACEs and/or trauma (Malchiodi, 2020; Stauffer, 2021; Pliske et al., 2021; & Richardson, 2016). Since imagination is such a key component of creativity, it would be beneficial to explore how working through the imagination can offer language to adolescents who cannot articulate or process verbally.

Future research could explore how to emphasize imagination as a legitimate portal into helping adolescents who have experienced multiple ACEs and/or trauma heal. Research around the imagination has the ability to address questions such as: How does creativity support adolescents’ development of social, emotional and learning skills? How do we help adolescents engage in processing and understanding their trauma through imaginative practices? What forms of imagination allow for deeper explorations of unconsciousness with adolescents? How do we introduce imagination to adolescents who have been conditioned to not play? How do we incorporate imagination into our own practices to further enhance our knowledge and skills working with adolescents who have experienced significant trauma? Future research around imagination could provide much needed techniques to help adolescents process their trauma in developmentally appropriate and enriching ways.

**Conclusion**
Imagination is the key to unlocking copious amounts of innate knowledge to support one’s healing and self-discovery. This thesis demonstrated how using the imagination through playful and creative expressive arts activities can support growth and healing of adolescents with multiple ACEs and trauma. Malchiodi (2020) states, “imagination is really what is at the center of most arts-based sessions” (pp. 30-31). It is promising that encouraging the imagination within expressive arts therapy is fundamental to the creative process, allowing for deeper levels of meaning-making and self-expression to support healing for those who have experienced trauma in their lives. I am brought back to Bloom (1997) as cited in Haen and Brannon (2002) that stated,

artistic creativity and performance are necessary forms of human expression...the arts give form, shape and sound...which can therefore be brought into full awareness and integrated into overall functioning. Without this we are doomed to obtain knowledge about only a very limited aspect of ourselves, others, and the world. (p. 39)

Artistic expression is a voice to the human experience and all the multifaceted ways we exist in this world and the imaginal world coming to fruition.
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Appendix

Figure 1

The First Page of my Altered Book Portraying my Predictions for the Method

Figure 2

Resistance, Hesitation, and Fear of What Could Exist in the Imaginal Space
Figure 3

*Fear: The Risk of Exploring the Unknown and the Unconscious*

Figure 4

*Finding Treasure: Diving into the Unknown and Allowing Yourself to Embrace the Mythical World*
Figure 5

*Symbolism Through Externalization and Allowing the Art to Speak as the Art*

![Image of a book with pages torn and text]

Attack of the Cosmic Storm
As holding an imaginary dream
"Come see what I've found"
Out of the gloom
See the curiosity, playfully
Up from the ground
A feeling
How to power up
It’s a place where everything is amazing
She said, I'm trying to fly
Let me...

-Adapted by Kendra Grant from (Fodi, 2020).

Figure 6

*Boundaries, Voice, and Choice*

![Image of a book with a page titled RETREAT]

-Adapted by Kendra Grant from (Fodi, 2020).
Figure 7

Frustration and the Feeling of “stuckness”

Figure 8

Internal World Meets External
Figure 9

*Empowerment and Autonomy*

Figure 10

*With My Magical Paint Brush*

Boundaries I cannot see  
I know they exist on the edge of my mind  
Frayed by others  
Places, lines undone  
Left for me to smooth over  
Boundaries of mixing colors  
A story I cannot tell  
Words I don’t have  
I pick up my magical paint brush  
Both soft and strong  
Both capable and unsure  
And I try to make sense of it all  
I’m painting with my magical paintbrush, my lines  
Undoing others inflicted frayed edges  
Retelling my story of the warrior brewing inside  
With my magical paint brush  
There are lines left untouched  
With my magical paint brush,  
I turn misunderstood dragons into warrior princesses  
With my magical paint brush  
I paint buds on weeds  
-Kendra Grant
Figure 11

Attending to the Emergent
THESIS APPROVAL FORM
Lesley University
Graduate School of Arts & Social Sciences
Expressive Therapies Division
Master of Arts in Clinical Mental Health Counseling: Expressive Arts Therapy, MA

Student's Name: Kendra Grant

Type of Project: Capstone Thesis

Title: Magic at Work! Exploring How Expressive Arts Therapies Support Healing from Trauma and Adverse Childhood Experiences: Developing a Method for Adolescents

Date of Graduation: 5/21/2022
In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: Dr. Jena Leake, REAT