Art and Rehabilitation: An Analysis of Art in the Treatment of Individuals Recovering from Substance Use Disorders

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Art and Rehabilitation: An Analysis of Art in the Treatment of Individuals

Recovering from Substance Use Disorders

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Abstract

Substance use has been a huge problem in the United States for a long time. Typically, techniques such as behavioral therapies or 12-Step Programs are used regarding treatment for those trying to recover from substance use disorders. While these treatment options are useful for many people, it is also important to look at nonnormative options for treatment to help the greatest number of people. One of these treatment options is the use of art, either as art therapy or as therapeutic art-making. Previous research on art therapy and people with substance use disorders demonstrates that there are many benefits of art therapy, including increased reflection, improved management and expression of emotions, and enhanced social support. The current study looked at a particular rehabilitation center in Omaha, Nebraska and focused on interviewing program members within the facility about how their weekly Art Group, in which they engaged in therapeutic art-making, had impacted their treatment and recovery. The results were very similar to those shown from previous studies. In addition, it was discovered that their art offered them respite from their treatment activities and provided increased connection to their loved ones outside the facility. Additional research is needed on the impacts of therapeutic art-making on the treatment of substance use disorders. Furthermore, longitudinal studies should be conducted to examine the progress throughout treatment and any potential long-term effects.
Art and Rehabilitation: An Analysis of Art in the Treatment of Individuals

Recovering from Substance Use Disorders

Substance use addiction is a serious and debilitating disorder that impacts so many people around the world. Substance use disorder can be defined as the frequent use of alcohol and/or drugs in which case there is significant clinical impairment, including problems with the individual’s health, as well as decreased ability to engage properly in daily activities at work, school, and/or home (SAMHSA, 2022). In 2020, there were 38.7 million people in America that reported suffering from a substance use disorder (Delphin-Rittmon, 2022). While this number is high, it does not even include those that may not be diagnosed or do not consider themselves to have the disorder. In Nebraska alone, there were over 100,000 people that reported having an alcohol-use disorder in 2019, and, since 2015, the amount of people who excessively use alcohol and/or drugs continues to rise (Dawson & Hanlon, 2021).

Excessive drug or alcohol use can have many harmful effects, some of which can include incarceration, hospitalization, or even death. There are some people with substance use disorders that spend years in jail or prison due to their substance use, which is a problem that some organizations are trying to remedy (Dawson & Hanlon, 2021). However, the main concern surrounding drug and alcohol misuse is the amount of individuals who overdose and end up hospitalized or dead. “According to the Centers for Disease Control and Prevention (CDC), from 2011 to 2015, excessive alcohol use led to approximately 95,000 deaths” (Dawson & Hanlon, 2021, p. 24). In addition, from 2019 to 2020, the rate of alcohol-attributable deaths increased by a total of 64% in the state of Nebraska (Dawson & Hanlon, 2021).

These statistics demonstrate that the increasing rates of substance use in America and in Nebraska are significant issues that need more attention. While prevention is one way in which
society can focus more attention on this continually rising need, another way is through the lens of treatment for individuals who are suffering from substance use disorders. In many cases, treatment for substance use disorders comes in the form of behavioral therapies, like cognitive behavioral therapy, or 12-Step programs, such as Alcoholics Anonymous. These programs can be extremely beneficial for some people, but more research is needed on other variations of treatment so that a greater number of individuals are better able to find treatment that works for them. Additionally, if more non-traditional types of treatment are further researched, treatment programs may be able to combine treatment techniques to create better overall treatment plans for the individuals seeking help.

One such variation of treatment for substance use disorders that has been minimally researched is the use of art therapy and/or therapeutic art-making. Engaging in artistic activities has demonstrated many benefits for those who participate. Some research has found that mental health outcomes for people who engaged in artistic activities over a five-year period were positively increased, and those people had an easier time expressing their emotions than they did previously (Pamelia, 2015). Furthermore, visual art interventions have been shown to decrease stress levels, improve self-reflection, and normalize other physiological responses such as raised heart rate, blood pressure, and cortisol levels (Belkofer, 2012). “... Art therapy can help initiate expression that leads to reflection, articulation, and a better understanding of [an individual’s] experiences, which allows them to better integrate their experiences into a life narrative that feels empowering and manageable” (Kaimal, 2019, p. 129). These are just a few of the ways in which art therapy and therapeutic art-making have been valuable to a wide range of individuals.

Knowing all of that, it is necessary to research and examine how these techniques might be beneficial to individuals that are specifically pursuing support for substance use disorders. In
doing so, a greater understanding of how this treatment may or may not be useful in rehabilitation facilities can be obtained and treatment plans can potentially be improved to offer a more unique and integrated treatment experience. Previous literature demonstrates that art intended for therapeutic purposes in treatment facilities can lead to increased reflection, improved management and expression of emotions, and enhanced social support, indicating that it should be included in more treatment centers.

**Literature Review**

**Art Therapy vs. Therapeutic Art-Making**

The majority of the research focusing on art and substance use treatment has been conducted using art therapy specifically. There is an important distinction between art therapy and therapeutic art-making, which is necessary to discuss before continuing to analyze the research. Art therapy is considered one of many different types of expressive arts therapy (Pamelia, 2015). There are other types of expressive arts therapies, such as dance therapy, music therapy, and play (theater) therapy but, regardless of the expressive arts therapy being conducted, it is intentionally conducted by a trained and licensed therapist with specific training to be considered an expressive arts therapist (Pamelia, 2015). Another important factor in art therapy is that the art therapist and the client(s) work together to create and move towards very specific and defined therapeutic goals, just as a therapist and client would do during psychotherapy (Pamelia, 2015).

Therapeutic art-making differs from art therapy because it is not conducted by an art therapist, and sometimes is not conducted by anyone particular at all (Pamelia, 2015). Therapeutic art-making means that someone is engaging in the act of making art of their own accord with no set therapeutic goals in mind. The individual might notice throughout the process
of making art that they are experiencing positive mental health outcomes or that it is helping
them in a therapeutic way, but that is not the specific intention when the individual initially
started participating in the activity (Pamelia, 2015). Therapeutic art-making is not a service that
people pay for and can be done at home in one’s free-time. With all of that in mind, it is
necessary to mention that the research discussed within this paper is focused on art therapy in
treatment, while the present study, which will be further explained after the literature review,
focused on therapeutic art-making in a treatment facility.

**Art Therapy in Substance Use Disorder Treatment**

Although it is less utilized and researched than other, more prominent methods of
treatment for individuals struggling with substance use, art therapy has been practiced as a form
of treatment for decades (Horay, 2006). Many benefits have been shown throughout these
studies. In one study by Dickson (2007), they examined the impact of art therapy on individuals
engaged in a treatment program. In this study, 66% of the program members thought that their art
therapy sessions were an important aspect of their treatment, while only 9% reported that they
did not find the sessions to be at all helpful (Dickson, 2007). This study and studies with similar
findings are important because they highlight that not every individual is going to experience the
same outcomes with the practice. It is essential to note that, especially for individuals who may
have experienced a lot of trauma, what is relaxing and helpful to one person may produce
anxiety and frustration in another (Belkofer, 2015). Some of those in treatment programs that
utilize art therapy report many benefits, particularly better reflection, increased expression and
management of their emotions, and improved social support.
Reflection

Many studies have found that individuals who are recovering from substance use disorders experience improved reflection after engaging in art therapy. One study by Hanes (2007) focused specifically on doing self-portraits in their art therapy sessions. He states, “The self-portrait is a true-to-life representation of the individual’s addictive practices. Often it is a candid reflection that refutes the individual’s false sense of self and distorted worldview” (Hanes, 2007, p. 33). The portraits allowed the individuals to see the reality of their substance use as it had impacted them. It forced them to reflect on the consequences that may have derived from their substance use face-to-face because they could see some of those consequences in the images they had painted of themselves (Hanes, 2007). In addition, this visual representation of a person’s own condition may help when that person is ruminating over the condition and having a hard time visualizing a more promising future (Kaimal, 2019).

Feen-Calligan (2007) also discovered some ways in which art therapy contributes to increased reflection in their study, which focused on art therapy specifically during the detoxification or withdrawal stage of an individual’s recovery. In many hospitals and treatment centers, the individuals who are engaging in support for substance use disorders are almost constantly busy. Art therapy sessions, because they involve sitting in a space and making time specifically for art, can be a time in which these individuals have a moment that is quieter and calmer than most of their treatment activities (Feen-Calligan, 2007). It can provide respite from those other activities while also giving them time to reflect and organize their thoughts (Feen-Calligan, 2007). Their artwork might also provide a point of reflection as they work through the meaning and significance of each of their pieces with their art therapist. They might discover feelings or aspects of themselves that they had not noticed before.
Expression & Management of Emotions

Expression and management of emotions can be difficult for a lot of individuals who are dealing with substance use disorders. In many cases, turning to alcohol and/or drugs is a way for individuals who might already be struggling with their emotions to cope with those feelings that they do not want to experience. Art therapy can present one way in which these individuals may be better able to develop good coping mechanisms when it comes to emotional management and expression, which also includes dealing with triggers. This is because art therapy includes the either intentional or unintentional externalization of feelings and emotions that a person may be experiencing, which could be positive or negative (Kaimal, 2019).

There were multiple studies on art therapy and substance use treatment that found that emotions such as anger/aggression, shame, guilt, and denial were particularly prominent and were examined in sessions and in participants’ works of art. Examining shame and denial in artwork was helpful throughout treatment, but especially towards the beginning when participants may not have come to terms with their substance use and their lack of control over it (Horay, 2006). Focusing on those emotions while engaging in artwork helped to lessen and decrease them (Aletraris et al., 2014; Dickson, 2007; Horay, 2006).

In Dickson’s study (2007), there was one participant that created a mask as one of their pieces of art. “Given the fierce appearance of the mask, and the intensity with which it was made, it could well represent the expression of otherwise threatening material, which has been safely externalized in the image” (Dickson, 2007, p. 23). This is one of the many examples of how art therapy can allow individuals to create pieces that encourage the appropriate expression of intense feelings, like anger. That example also leads to coping mechanisms. As demonstrated, that individual expressed their emotion in their artwork instead of some other way that might
have caused them more issues. It was also mentioned how the mask itself, not just the depiction of the art on the mask, may represent a coping or defense mechanism because masks cover our faces and the emotions we may exhibit with our facial expressions (Dickson, 2007). Sometimes there are previous defense mechanisms that might distort the individual’s sense of their identity, which can also be potentially analyzed within the art they create (Hanes, 2007).

Another aspect of improved expression and management of emotions that was found in the literature was the expression of triggers and barriers to the individuals’ treatment (Feen-Calligan, 2007). Creating artwork focused on their triggers allowed participants to actually visualize what those triggers looked like for them, which meant that they might have an easier time identifying and avoiding triggers that could be harmful to their recovery (Feen-Calligan, 2007). In addition, Feen-Calligan’s research (2007) also mentioned the importance of feelings themselves being triggers or barriers for recovery and sobriety, which art therapy can help individuals work through in a safe way and in a safe space.

**Social Support/Connection**

Yet another way in which art therapy can be a helpful addition to treatment for those recovering from substance use disorders is because it can help facilitate social support and connection with peers. Within treatment centers and hospitals for substance use, if art therapy is provided, it often comes in the form of group therapy sessions, which are more interactive by nature (Dickson, 2007). The group aspect of the therapy sessions can be helpful for this population considering that individuals dealing with substance use disorders may have increased difficulty relating to others. Being in a group of people who are going through very similar situations can encourage a sense of belonging among participants, as well as camaraderie and support (Dickson, 2007; Feen-Calligan, 2007). Furthermore, being able to view, analyze, and
discuss each others’ artwork within group sessions allowed new perspectives to be examined and interpersonal relationships to be explored (Dickson, 2007). It is in those moments that individuals were able to experience aspects of treatment such as a motivation to change (Aletraris et al., 2014).

12-Step Programs

In addition to the aforementioned ways that art therapy can help recovering individuals struggling with substance use disorders, it is also important to mention that many studies have discovered value in art therapy as it relates to 12-Step programs, such as Alcoholics Anonymous (AA). This is meaningful to acknowledge because there are many individuals within the considered population that incorporate 12-Step programs as a main foundation for their treatment. Some research reports that the two types of treatment are complementary to use at the same time because art therapy can be especially helpful in promoting Step 1, which is when the individual is able to admit that they are powerless over their drug of choice and that their substance use has become unmanageable (Aletraris et al., 2014). Within that context, art therapy can break down the individual’s resistance to accept their substance use as a disorder and a serious problem. This might also make it easier for individuals to construct positive ideas of their recovery (Aletraris et al., 2014; Horay, 2007).

Present Study

All of the information discovered within the previously mentioned research has been helpful to the field and has allowed for progress to be made regarding the use of art therapy in treatment centers. However, more research is needed on if and how therapeutic art-making may be beneficial in treatment centers. As different geographical areas have different cultures, it may also be beneficial to examine how these treatment approaches have different impacts on program
members depending on their location. For the purposes of this particular study, the interest was centered on therapeutic art-making within one residential rehabilitation center located in Omaha, Nebraska. It is essential to note that, because the population is so few and limited in gender and location, these results cannot be generalized to the greater population.

Method

Participants

The participants involved were from a convenience sample. All participants were program members at the NOVA Treatment Community (TC) located in Omaha, Nebraska, in which the researcher was employed. Only those in the treatment center that wanted to be a part of the study were included. NOVA TC is a mostly male facility with only a few female program members. The length of treatment for those that graduate the program ranges from approximately three to five months, depending on the individual’s program. A total of 10 participants were involved in the study. Participants included seven males and three females, and their ages ranged from 19 years old to 50 years old. The length of time that the participants had been in the treatment program at the time the interviews were conducted ranged from three days to four months. A further breakdown of participant information is described in Table 1. Participant pseudonyms were randomly assigned to participants based on their gender identity using a generic name generator to protect the program members’ confidentiality. No compensation was given for participation in the study.
Table 1

Demographic Information

<table>
<thead>
<tr>
<th>Participant Pseudonym</th>
<th>Age (in years)</th>
<th>Gender Identity</th>
<th>Time Spent in Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bob</td>
<td>24</td>
<td>Male</td>
<td>2 months</td>
</tr>
<tr>
<td>Cassie</td>
<td>50</td>
<td>Female</td>
<td>3 weeks</td>
</tr>
<tr>
<td>David</td>
<td>19</td>
<td>Male</td>
<td>4.5 months</td>
</tr>
<tr>
<td>Dustin</td>
<td>20</td>
<td>Male</td>
<td>1 month</td>
</tr>
<tr>
<td>Emily</td>
<td>32</td>
<td>Female</td>
<td>4 days</td>
</tr>
<tr>
<td>Frank</td>
<td>33</td>
<td>Male</td>
<td>2 months</td>
</tr>
<tr>
<td>Jade</td>
<td>30</td>
<td>Female</td>
<td>1 month</td>
</tr>
<tr>
<td>Joe</td>
<td>37</td>
<td>Male</td>
<td>4 months</td>
</tr>
<tr>
<td>Mike</td>
<td>29</td>
<td>Male</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Steve</td>
<td>34</td>
<td>Male</td>
<td>3 days</td>
</tr>
</tbody>
</table>

Materials

A list of interview questions was created and printed for each participant, whose answers were recorded on the printed page (See Appendix A for the list interview questions). All participants received the same set of questions. The interview included general questions about each participant’s age, gender, and the length of time they had been in the program. There were two scaled questions. The first scaled question inquired about how often they engaged in artistic activities before going to NOVA. This question had a scale from 1-5 in which 1 correlated with “never” and 5 correlated with “daily”. The second focused on how much the individual thought art had helped in their treatment. The scale was from 1-10 with 1 being “not helpful at all” and 10 being “extremely helpful”. All of the other questions were open-ended and related to their
experiences creating art in a treatment facility. Once the questions were completed, the researcher kept all the papers in a specific folder, which was located either with the researcher or in the researcher’s home in a secured place at all times. Pieces of artwork completed by the participants were also examined (See Appendix B for pictures of participants’ artwork). Any materials used for the artwork were supplied solely by NOVA TC.

**Procedure**

The researcher printed off the interview questions and then arrived at NOVA TC to complete the interviews. The researcher first explained to all the program members what the study was for and everything that would be included if they participated in the study. They were told that the study was completely voluntary and that they could drop out at any time. At that point, the researcher asked for any volunteers who wanted to participate in the study. After volunteering, the researcher and the participant went through the list of interview questions prepared by the researcher while staying in the room where the Art Group was held. Because it was in the same room as the Art Group, the other program members were also in the room and working on their own artwork. Each interview lasted approximately 15 to 20 minutes. After concluding with the interview questions, the researcher answered any questions that each participant might have had and took pictures of any artwork that the participant wanted to include in the study. Then the researcher moved onto the next participant and repeated the process.

Interviews were conducted with a single program member at a time. They were conducted during Art Group, which program members at the facility had every Saturday from 1:30 PM to 2:30 PM. This was the only time throughout the week in which program members had this particular group. Art Group consisted of light music playing while all the program
members were engaging in some form of artistic creation, or therapeutic art-making. They could choose to work silently or to talk with their peers, but their projects were always individualized. Each participant also had the choice of what kind of artistic activity they engaged in, however, they had to use the time to do something artistic. The interviews were conducted while the researcher was off the clock to avoid any job related interruptions. It is important to note that the pre-established relationships between the researcher and the participants could have impacted the participants’ answers. This aspect of the research is discussed in more detail later in the paper.

**Analysis**

A qualitative analysis was conducted by the researcher on the 10 sets of interview answers to gather central themes and outliers. Hand-written notes were taken during the interviews that included keywords that the participants had used when describing their experiences. For example, if a participant had said that their Art Group was good for their mental health because it helped them think about other things other than their treatment, the notes could have been “positive mental health impact” and “takes mind off treatment”. The interviews were not video/voice recorded due to confidentiality and recording procedures within the NOVA TC facility. Due to this, direct quotes were not recorded.

Once all interviews were completed, the researcher examined each set of notes and circled keywords and phrases that were repeated almost exactly in multiple participants’ answers, such as “takes mind off treatment”. After coming up with a list of these keywords and phrases, the researcher went back through the notes and interview answers and took out other keywords/phrases that could be related to those that were previously collected, even if they did not match exactly. An example of this would be the responses “taught new coping skills” and “relieves stress” because these responses are related even if they do not mean the exact same
thing. Once all the responses had been filtered into lists of related keywords and phrases, the researcher turned to the literature to examine how these keywords fit into themes.

The main themes were a reflection of the most predominantly mentioned effects of engaging in creative activities. Those effects were categorized into main themes that were informed by previous literature. The majority of the questions were open-ended and thus, participants’ answers varied more so than they likely would have if they were only given a specific set of answers for each question. Because of this, each of the central themes were effects that reflected in at least three of the participants’ answers, even if the participants did not specifically state the theme directly. For example, effects such as “stress relief”, “calming”, and “coping mechanisms” were all considered related to the theme of management of emotions, even if that is not exactly what the participant stated.

Results

The demographic questions included participants’ ages and gender identities. There were seven male participants and three female participants. Participants’ ages ranged from 19 years old to 50 years old. The scaled questions revealed that, of the 10 participants, three of them reported to never engage in artistic activities before going to NOVA, two reported to engage in art maybe once every three months, one reported to engage in art once a month, two reported to engage in art once a week, and two reported to engage in art on an almost daily basis. In addition, when asked on a scale from 1-10 with 1 being “not at all helpful” and 10 being “extremely helpful” how helpful art had been in the individual’s treatment/recovery, one participant reported a 2, one participant reported a 3, one participant reported a 6, one participant reported a 7, four participants reported an 8, and two participants reported a 10. See Tables 2 and 3 for visuals on the data from the scaled questions.
Table 2

On a scale of 1-5 with 1 being “never” and 5 being “daily”, how often would you say that you engaged in artistic activities before coming to NOVA?

<table>
<thead>
<tr>
<th>Participant Ratings</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Participants</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 3

On a scale from 1-10 with 1 being “not helpful at all” and 10 being “extremely helpful”, how much would you say art has helped you in your treatment/recovery?

<table>
<thead>
<tr>
<th>Participant Ratings</th>
<th>1-2</th>
<th>3-4</th>
<th>5-6</th>
<th>7-8</th>
<th>9-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Participants</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>2</td>
</tr>
</tbody>
</table>

The most common themes were respite, management and expression of emotions, connection (particularly with those outside of the facility), and improved self-esteem. Some of the themes presented themselves after participants were asked in what ways art had impacted their treatment, while other themes came up when participants were discussing the artwork or piece of art that had been the most impactful for them and why.
Of all 10 participants, six of them mentioned how engaging in artistic activities in Art Group helped them to take their mind off treatment, which was often exhausting and sometimes quite difficult. Their treatment consisted of treatment groups such as Accountability Group (a cognitive behavioral therapy based group based on changing “character defects”), AA, and other groups from about 6:00 am to 8:00 pm everyday Sunday, which was more relaxed. Three of the participants also mentioned how engaging in artistic activities was grounding for them and helped them stay in the present. For one participant, Frank, Art Group was a time for him to forget his treatment, if only for a little while, and focus on something that made him feel good. He mentioned how art allowed him to take a breath and focus on art that connected him to his spirituality and faith. One piece of artwork that he created that reminded him throughout the day of his faith was a cross necklace made from blue and white yarn. Figure 1 displays this necklace. Another participant, Dustin, discussed how even though he has never been very good at art and never engaged in artistic activities before going to the treatment center, he appreciated Art Group because it was different from many of their other groups, which were focused specifically on treatment. For him, it was nice to have something else to think about.

There were also many participants that mentioned how engaging in artistic activities at NOVA has been beneficial for the management and expression of their emotions. There were two participants that mentioned stress relief, two that mentioned how their artistic activities were calming, and three that mentioned coping mechanisms. Emily mentioned how coloring in inspirational coloring books helped relieve stress and taught her a new way to cope with some of
the many feelings that were surfacing during her treatment. She also thought that creating dream catchers was a helpful coping mechanism for when she was feeling anxious because it gave her something else to focus on. Bob mentioned how he has always participated in artistic activities, even outside of NOVA. As someone who gets angry easily, he has noticed that art is a way to calm himself down and focus his mind on something he enjoys. One participant, David, created art that helped him to express how he was feeling. His favorite artistic activity to do while at NOVA was to paint masks. He mentioned how upset he was when he painted his first mask, and how the mask represented those feelings of anger. After completing the mask, he noticed how much calmer he was. Painting the mask helped soothe him and express how he was feeling without him even having to say anything. After a while, he had a collection of these masks, which can be seen in Figure 2.

Connection, though not something that every member mentioned, did seem to be of significant importance to a few of the program members. There were three participants that mentioned how engaging in artistic activities during Art Group at NOVA allowed them to deepen their connection and relationships with others. In particular, Art Group was a way for parents within the program to show their children that they loved them and were thinking about them while they were away. One father, Mike, discussed a coloring page that he was in the process of coloring for his daughter, who was from a multicultural background. The coloring page included the word “love” written in different languages. He stated how coloring the page for her made him feel closer to her. Another father was creating bracelets for his family members. Steve discussed
how making the bracelets was something he used to do with his family and kids. The bracelets were important to him while in treatment because it reminded him that he had people who cared about him. He wanted to give him the bracelets as a token of his appreciation. Yet another father, Joe, was drawing a Dragon Ball Z poster for his son, who loved the show. Joe discussed how the show was important to his son, so drawing the poster for his son was a way for him to rebuild parts of their relationship that were damaged due to his substance use. Figure 3 displays the poster.

The final main theme that emerged from the participants’ answers was improved self-esteem. Overall, there were three participants that mentioned how engaging in artistic activities improved their self-esteem. Cassie mentioned how, when she first learned that the program members had Art Group every Saturday, she was worried because she did not think she was creative enough. After creating more in Art Group, she gained more confidence in herself and her artwork, and she felt proud of the things that she had created. Another participant, Jade, stated that she never engaged in artistic activities before coming to NOVA and that she felt she was bad at art. She also stated how she felt that art did not have much of an impact on her treatment. However, she did mention that she had learned to view doing her makeup as a creative activity, which made her feel better about herself and improved her self esteem.

There were also some results from the interviews that may be important to consider even though they did not present themselves as central themes regarding the benefits of engaging in artistic activities while in treatment. Five out of the 10 participants stated that engaging in art was challenging at NOVA while the other five participants stated that it was not. Those that said...
it was challenging gave three different reasons. The first reason was that they felt they were not skilled at art. The second reason was that there was not enough time set aside for Art Group each week. The final reason that was mentioned was that the individual was not patient enough and always tried to rush their art. These findings were shared with supervisors within the facility.

When the participants were asked if they had anything else to add to the study that they thought would be helpful, four of the participants mentioned that Art Group was more beneficial than they thought that it would be and that they looked forward to it each week. Joe said something regarding that same question that is also necessary to examine. He stated that, because he did a lot of art while he was engaging in substance use, engaging in art when he was sober and in recovery was sometimes triggering for him. This demonstrates that art has different impacts on different people and may not always be a helpful addition to treatment for some individuals.

Discussion

While some of the results from the current study align with the results from previous studies in the literature, there are also some of the results that seem to contrast with the previous findings. For example, previous studies demonstrated that reflection was a prominent aspect of art therapy for individuals with substance use disorders. The current study found that participants enjoyed engaging in art because it allowed them to take their mind off of their treatment, which contrasts the previously mentioned findings because, to reflect on their treatment and their pasts, the individual’s concentration would need to be on those particular parts of their lives. It seemed that Art Group actually offered a time for the individuals in the treatment program to, for just a little while, be focused on something other than their treatment and their pasts. This could be because art therapy is more reflective by nature. Participants doing art therapy are supposed to
reflect on their work and what it means to them, while this was not a requirement for the participants that were simply engaging in artistic activities.

Both the previous research and the current study demonstrated that art therapy and therapeutic art-making could aid in the management and expression of emotions for those who participated. Especially for those who are recovering from substance use disorders and experience intense feelings such as guilt, shame, and anger, art therapy and/or therapeutic art-making may offer ways of expressing those feelings that are easier than sharing them verbally. In addition, creating art can offer coping mechanisms to individuals, which would also help them manage their emotions. Viewing art that they have created while feeling a certain way might help elevate those feelings, but it can also help individuals better understand their emotions, such as with Participant T and the masks that he created when he was feeling frustrated.

Both the previous research on art therapy and the current study on therapeutic art-making demonstrated that participants increased their relationships or connection with others. This varied though because the previous studies showed that the participants had improved connection and social support with others that were also in their art therapy group. The participants in the present study may have also experienced something similar to this with the other program members in their Art Group, however, they did not mention that during any of the interviews. Instead, the type of connections that seemed to be the most improved through their art were the connections with their loved ones outside of the treatment center. This was especially true for the participants that made art specifically for a family member or loved one. The difference could be that art therapy is more collaborative than the Art Group at NOVA TC is and, in art therapy, the participants often talk with each other about their pieces, which is not required at NOVA.
Limitations

First, it is important to mention once again that the results from the current study cannot be generalized due to the limited sample in regard to the amount of participants, the participants’ genders, and the location of the participants. Despite this, the findings add depth and nuance to the current literature. In addition, there are some other limitations that need to be considered. Being the researcher worked at the treatment center utilized for the study, they already had some rapport with the program members involved, which may have influenced the participants’ answers. Only the program members who wanted to be a part of the study and volunteered to do so were the ones to be interviewed. Although it is uncertain why the other program members did not volunteer for the study, it could be that the majority of those that did choose to participate liked doing art or at least saw some benefits of it while those who did not volunteer were less likely to enjoy art. It is necessary to consider this as an additional way in which the data could have potential bias. Another limitation was that the interviews were conducted during Art Group in the same room as the group was held in. Most often, the program members had music playing or may have been chatting with one another, which may have posed as distractions during the interviews. The participants may have also overheard other participants’ answers due to the nature of the Art Group, in which program members are sitting next to one another at a table. Hearing others’ answers may have also had an impact on participant’s own answers.

Future Directions

Future studies should use more defined methods of gathering data from participants, as open-ended questions can sometimes be left up to interpretation. Open-ended questions can add valuable contributions to research, but it would be beneficial to conduct studies in which a variety of questions are asked, such as both open-ended and yes/no or multiple choice questions.
In addition, it may be helpful to have more studies focused specifically on therapeutic art-making and the impact on individuals recovering from substance use disorders being most of the previous research focused on art therapy. Once there is more literature about the impact of therapeutic art-making, including across various locations and treatment centers, more research can be conducted on how the benefits or detriments are different for recovering individuals depending on if they engage in art therapy or therapeutic art-making. More longitudinal studies may also be beneficial to see the progress throughout treatment as well as the long term effects.

**Concluding Thoughts**

Art impacts many different people in a variety of ways. For people recovering from substance use disorders, art therapy and/or therapeutic art-making can have several benefits. The most prominent benefits appear to be reflection, respite, expression and management of emotions, and connection/social support. Additionally, it may be helpful to add art therapy or therapeutic art-making to already existing treatment options, such as 12-Step programs, to include even more benefits. It is important to remember that sometimes people may have negative responses or experiences with art. Because of this, those processes may not be beneficial to everyone recovering from substance use disorders. More research is needed to have a better understanding on the differences between the processes and their impact on those recovering from substance use disorders to better understand the benefits and explore potential treatment options.
References


https://scholarworks.iupui.edu/bitstream/handle/1805/6900/Thesis--ElisaPamelia.pdf?sequence=1

SAMHSA. *Mental health and substance use disorders.* (2022).

https://www.samhsa.gov/find-help/disorders#:~:text=Substance%20use%20disorders%20occur%20when,work%2C%20school%2C%20or%20home
Appendix A

Interview Questions

Each participant was asked the following interview questions:

1. Age:

2. Gender:

3. How long have you been in treatment?

4. On a scale of 1-5 with 1 being “never” and 5 being “daily”, how often would you say that you engaged in artistic activities before coming to NOVA?

5. On a scale from 1-10 with 1 being “not helpful at all” and 10 being “extremely helpful”, how much would you say art has helped you in your treatment/recovery?

6. Can you explain how, if at all, engaging in artistic activities has been beneficial to your recovery?

7. Was there anything challenging about making art at NOVA?

8. Is there a specific kind of artistic activity or piece of art that you have created that has impacted you the most?

9. Can you talk more about why that particular activity or piece had a lot of impact on you?
   What were you thinking or feeling when you made it? What does it mean to you?

10. Is there anything you would like to donate/let me borrow to display while I’m presenting my research? If not, would you mind if I took some pictures of some of what you’ve created?

11. Is there anything you’d like to add that you think would be beneficial for my research?

12. Do you have any questions for me?
Appendix B

Participants Art Projects

The following are the selected art pieces that the participants volunteered to take pictures of. Some participants chose not to have any of their artwork documented, while other participants offered multiple pieces to be photographed. Some participants’ artwork was not finished when the pieces were photographed, but they still wanted the picture to be taken.

Participant: Bob

*Wooden box created from popsicle sticks*

![Popsicle Stick Box](image1.jpg)

![Popsicle Stick Box](image2.jpg)

Participant: David

*Painted masks*

![Painted Mask](image3.jpg)

![Painted Mask](image4.jpg)

![Painted Mask](image5.jpg)
Participant: Emily

*Dream catcher and designed journal cover*

![Image of a dream catcher and a journal cover with designs.]

Participant: Frank

*Cross Necklace made from yarn strands*

![Image of a cross necklace made from yarn strands.]

WEIS 28
Participant: Jade

DC character Anarky logo made from pipe cleaners

Participant: Joe

Dragon Ball Z poster for son
Participant: Mike

*Coloring page for daughter*

![Coloring page](image1)

Participant: Steve

*Bracelets made for his loved ones*

![Bracelets](image2)