

A Snapshot of Loss: A Case Study of One Bereaved Nine-Year-Old Boy's View of
the World Through his Art and Photographs

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ABSTRACT

A Snapshot of Loss: A Case Study of One Bereaved Nine-Year-Old Boy's View of the World Through his Art and Photographs

Sarah M. Waldman
Concordia University, 2005

A child who has experienced the death of a parent may be traumatized by the loss. The nature of the child's reaction depends on a combination of several factors, including the circumstances surrounding the death, the nature of the child's relationship to the deceased parent and the existence of remaining, supportive, family members. The creative arts therapies have been successfully employed as a means of therapeutic intervention with bereaved children. One medium in the field of the creative arts therapies is the use of photography, or phototherapy. This research paper explores the use of photography, in conjunction with other forms of creative arts therapies with a parentally bereaved child. A combination of clinical examples and the writer's personal experiences and observations are employed to develop the notion that the camera (and photographs in general) can be used as a research tool, a therapeutic medium and as a metaphoric parallel in relation to working therapeutically with traumatically bereaved children.

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A special thank you to the children with whom I have worked and to those who continue to share their stories with me. I wish you all the best.

Lastly, I would like to honour the memory of my father, Aili Waldman, whose death fifteen years ago completely changed my world view and left in me a desire to reach out and connect with others who also have experienced the death of a parent. This paper is the first step in my quest.

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A Snapshot of Loss: A Case Study of One Bereaved Nine-Year-Old Boy's View of the
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Part I. Introduction

This research paper will explore the world of trauma as experienced by a parentally bereaved child. The loss of a parent or primary caregiver can signify the loss of a sense of security and assurance that the child will be taken care of. Each child experiences the death of a parent differently as each circumstance is unique to the particulars of that child, his/her family environment, their social and economic reality and countless other variables that create the story in which that child's loss is, and may always be, the climactic event. The event of losing a parent is an event that can take up to a lifetime to integrate into a child/adult's conscious thought. It may forever remain a deeply rooted mystery in the child's life as they grow into adults and, perhaps, parents themselves (Harris, 1996).

My therapeutic work with bereaved children has led to the following discoveries that will serve as the basis of the exploration in this paper. Among these discoveries, the camera can be used not only as a fitting and eloquent metaphor to explore and gain insight about the world of a traumatized child, but also as a powerful tool in the therapeutic relationship between an art therapist and child.

In this paper, the camera is explored as a research tool, as a therapeutic medium and as a metaphoric parallel in relation to working therapeutically with traumatically

bereaved children. The paper consists of two main sections, a theoretical review of the existing literature, including clinical and personal examples, and a clinical case study component. The theoretical review begins with an overview of the literature on childhood bereavement and the trauma that may be associated with early loss, providing a foundation for understanding the developmental, psychological and emotional reactions to early loss. A discussion of the bereaved child's world, as glimpsed through the use of the creative arts will follow, with the inclusion of two clinical examples highlighting the potential benefits of the creative arts therapies with such a population. This leads into an exploration of two applications of the camera and photography in therapy. The first is an exploration of the use of the camera as an effective research method. This is followed by an outline of the metaphoric parallel relationship existing between the capturing of photographic pictures and traumatic memory. A personal story has been included into the text (in Italics) as a method of introducing the reader to some of my experiences with loss and the creative arts. By including my own voice throughout the text I intricately link myself to the research and therapeutic work (Finlay, 2002) – creating a more balanced experience for myself as writer and hopefully for the reader as well. The second section of the paper will be a presentation of the case study of one nine-year-old child's experience with loss, as interpreted by me through his imagery.

Part II. Theoretical Review & Clinical/Personal Examples

Childhood Loss

The loss of a parent, at any age, can be an emotionally devastating event. When a child loses a parent, however, the very ground, on which they stand and grow, can seem like it is crumbling beneath them. When a child's parent dies the child's entire perception of the world and themselves may forever be altered. They may find themselves looking at the world through a new lens, having to refocus all that was previously taken for granted. Chaos can replace routine and the sense of security they may have taken for granted may become a thing of the past (Harris, 1996).

In a couple of ways a parentally bereaved child is more vulnerable, than an adolescent or adult, to the traumatic stress associated with significant loss. Firstly, the young child has fewer existing coping skills or known resources to draw upon following the loss (Brandell, 1998). Secondly, a child's parents are often a huge part of that child's safety/survival network. To lose one or both parents means that a child often feels a decreased sense of security (Clements & Weisser, 2003). In children, grief and trauma are often intimately intertwined (both in sudden and anticipated deaths) and can lead to significant anxiety responses in children and possibly a diagnosis of Post Traumatic Stress Disorder (PTSD) (Clements & Weisser, 2003; Saldinger, Cain, & Porterfield, 2003).

The world of the bereaved child is often described as chaotic (Harris, 1996; Brandell, 1998). In her touching re-telling of the memories of adults recalling their childhood loss, Maxine Harris (1996) describes the world of a child who has just lost a parent. She expresses, "From the moment that catastrophe happens, a child's world actually looks different...the death of a parent marks the end of childhood...It is the psychological Great Divide, separating the world into a permanent 'before and after'" (p. 6-13). This loss may be a traumatic one in that, if it is to be fully processed, a breach in the child's stimulus barrier results and the ego is overwhelmed. The situation threatens the child's psychic equilibrium. A shattering of the child's self-fantasies and sense of omnipotence occurs (Stranarch-Buschel, 1990).

For the bereaved child directly following the loss of a parent, it is normal for regression to occur, previous ego gains may be lost, nightmares and sleep disturbances are not unusual and the child will most often become sad and depressed (Altschul, 1988). In short-term analyses of bereaved children, teachers in the United Kingdom have reported these pupils to be significantly more depressed, aggressive and delinquent than age- and gender-matched controls (Lowton & Higginson, 2003).

Controlled long-term studies based on population samples have confirmed earlier clinical impressions that bereaved children have a significantly increased risk of developing psychiatric disorders and may suffer considerable psychological and social difficulties throughout childhood and even later in adult life. Standardized diagnostic interviews with bereaved children have shown a high incidence of affective symptoms. For example, Downey, Wilson, Maugham, Allerton, Schofield, & Skuse, (1999) found

that 37% of their sample of 38 bereaved pre-pubertal children met the criteria for a major depressive disorder one year after losing a parent. Empirical studies of parentally bereaved children report increased psychological disturbance, with a wide range of symptoms including anxiety, depression, withdrawal, sleep disturbance, and aggression.

Furthermore parental death in childhood has also been associated as a predisposing factor in adolescent suicide (Chan, 1994). Mack (2001) also reports the link between childhood parental loss and adult suicide alcoholism and depression.

In contrast to these studies, Eisenstadt, Haynal, Rentchnick and de Senarclens (1989) profile the extraordinary creative, political and social impact of a significant proportion of individuals who have lost a parent in childhood. The concluding assumption about these high achieving individuals is that the deprivation brought on by loss may propel the individual to continually strive to create that which is irreplaceable, their lost parent. Therefore, the loss in itself becomes the source of extraordinary strength leading to personal success. Furthermore, the loss of a parent in childhood has also been attributed to positive traits in various long-term studies and has been a highlighted factor in the success of several individuals. Eisenstadt et al. (1989) point to the loss of a parent(s) in childhood as a main contributing factor in the achievements of successful and highly creative individuals.

From the available literature on childhood mourning it is understood that the child mourner, like the adult, must go through a process of grieving after the loss of a loved one. However children, due to developmental differences, have a unique experience of grief. Children are more likely to use primitive defenses than adults. These defenses will

often hide the child's grief, leading caregivers to believe the child is less traumatized than he/she actually is (Brandell, 1998). The child's acting out behaviours may be addressed more readily than their harder to observe inner conflicts and feelings. A child's ability to mourn adequately necessitates a supportive and understanding environment where the child's safety and needs will be met and other healthy relationships will continue (Furman, 1986; Zambelli, Clark & Heegaard, 1989). Other factors associated with the child's healthy mourning include a previous concept and experience of death, inclusion in the funeral and other mourning ceremonies, a positive past relationship to the deceased and a space for free expression without reprimand (Goldman, 2001).

Childhood grief literature stipulates that, unlike adults, children's understandings of death and dying is concrete, uncomplicated by the metaphors we have been conditioned to use when speaking of death. They are curious to know more and, if not discussed, may develop "magical thinking" to explain what has occurred. This magical thinking can often be more damaging and traumatic than the truth as the child may believe that they have in some way caused or contributed to the death of their loved one (Bowlby, 1980; Goldman, 2001; Harris, 1996).

The Understanding of Death in Children

At various stages of a child's development, his/her concept and understanding of death will be different. For example, infants may react to the loss of a parent through protest and loss of speech while toddlers may react through physiological changes in sleep and eating habits as well as regressive behaviors. The young child until about the

age of seven is in what Piaget has coined the Pre-Operational stage of cognitive development. At this stage, thinking is concrete and the concept of death as final and universal is not yet fully appreciated (Webb, 2002). During the latter part of this stage, often depending on the child's exposure to death, children may begin to develop a more accurate cognitive understanding of the concept and permanence of death. The average latency-aged child (around age 7 – 11) is in the Concrete Operational stage of development that is recognizable by a reduced egocentricity and improved capacity for reasoning. It is during this stage that children come to the realization of the universal and irreversible nature of death. Children at this age are just beginning to test their autonomy. The loss of a parent at this age may shaken this journey and leave the child feeling helpless and out of control. Denial is a common defense at this stage of development (Webb, 2002). Altschul (1988) speaks to the “defensive” type of mourning in childhood where the child denies the impact of the loss. Altschul states that it is this type of defended adaptation that is most likely to produce disturbances and pathology later in life. Usually, during the pre-pubertal years an appreciation of the abstract nature of death is developed as the children enter the stage of Formal Operational development (Webb, 2002).

Early Loss and Art Therapy

“...he who remains passive when overwhelmed with grief loses his best chance of recovering elasticity of mind” (Darwin as cited in Bowlby, 1980 p. 345).

As many parentally bereaved children may not have the verbal means of communicating their pain and confusion (Harris, 1996) the need exists for a modality of communication that is rooted in the non-verbal, or the symbolic. Art therapy is such a modality. It provides the child with the space and materials to express their inner emotions and conflicts while respecting their necessary defensive coping mechanisms to the painful stimulus (Malchiodi, 1988). Therefore, the use of art therapy with parentally bereaved children could be a method of encouraging expression, permitting for a gradual process of mourning to emerge and possibly prevent the development of pathological symptoms and ways of coping. Creative arts therapies can also provide the bereaved child with a sense of control over their art making and, by extension, their lives, while working in a containing environment, in which a secure attachment can be created with the creative arts therapist.

The drawings done by children coping with loss in a relatively “normal” way will often include images of the deceased or of something that represents the deceased to that child. Their pictures may also contain elements of fantasy and express their anger, sadness and confusion. It is only through the expression of these mixed emotions and overwhelming sadness that the grieving process can move forward (Goldman, 2001).

Children coping with the death of a parent will usually be able to, and be relieved to, depict their emotional experience of the loss through their visual images. Direct access to a child’s world is often achieved by way of his/her imagination, where thoughts, ideas, and feelings interact freely with facts. Therapists can capitalize on this, finding

that therapeutic communication can be easier or more direct through the use of symbols or images rather than through the complex world of spoken language. Image making can be powerful for the child and significant for the therapist (Webb, 2002).

Peter Fonagy (1998) discusses the relationship between childhood trauma and attachment theory. He explains that attachment theory makes the assumption that the cognitive strategies developed early in life will play an essential role in one's future interpersonal relationships. This is based on the assumption that early "attachment patterns have continuity into adulthood" (p. 150). Therefore, the attachment first experienced with a primary caregiver will play a significant role in the client's type of attachment to the therapist and, by extension, to the art materials within an art therapy context (Fonagy, 1998; Mitchell & Black, 1995). The client, in her relationship to the art therapy session, will attempt to recreate the same types of patterns and attachments as first experienced with the mother. If this was a space of pain and neglect, clients will unconsciously attempt to recreate this pain and neglect within their transference to the therapist and to the artwork (Mitchell & Black, 1995). Furthermore, if this first attachment was a space filled with the insecurity and sorrow brought about by an early loss, it is to be expected that the child's attachment to the art therapist and the materials will also be insecure, with a heightened sense of sadness.

Laurie Wilson (2001) links the notions of the transitional object and the symbolic object. She connects Winnicott's concept of the transitional object as an object that represents the transition from the object as substitute (i.e. baby blanket as substitute for mother) to the object as symbolic (i.e. baby blanket as a fond memory of what mother felt

like). Wilson continues with an account of David Beres' (1968) description of the symbol as the conscious representation of unconscious mental content. This conscious representation is not an exact replication of the state from which it was derived but rather has been distorted by the culmination of various feelings, memories, experiences, etc. It is through interaction with the symbol that we can attempt to better understand the initial stimulus, and the reaction to that stimulus, from which it was born. When in an art therapy session with a bereaved child, the art produced can be used by the art therapist as a means of empathically the child's experience.

Babits (2001) has stipulated that the use of the therapeutic metaphor can create a holding environment and may be used to "organize, focus or facilitate dream work, or handling of transference and/or countertransference issues" (p. 21). Babits associates metaphor with the visual image but states that it can involve all the senses. He relates his notion of therapeutic metaphor with Winnicott's holding environment provided for the infant by the "good-enough mother". Babits locates the transitional space, within the metaphor, between its primary and secondary areas. It is the transitional space that an element of playfulness is brought into the therapy, providing the client with a protective buffer from the possibly overwhelming communications of the therapist.

Working symbolically can be compared to working within the space of the therapeutic metaphor, as symbolic work also provides for a "potential space" (Babits, 2001). Symbolic work can be very powerful, yet a safe and contained way of approaching painful memories and experiences. Symbolic representation allows the client to negotiate their own material at their own pace, providing for a sense of control at

a time when they may feel powerless. This can bring forth feelings of confidence and a higher sense of self-efficacy or control over their own life.

Clinical Examples

The following clinical cases occurred during my second year Art Therapy internship from September 2002 – April 2003 at an inner city elementary school in a large urban centre in Quebec. Both examples demonstrate how the art materials and art products utilized within the therapeutic space help to establish a safe and containing, yet powerful space for expression and healing.

Amanda

Amanda*, an 8 year old, experienced her father's sudden death at he age of four. At the age of 7 she was separated from her mother and sister by social services. She was placed in foster care after an incident described very vaguely in her school files as "putting her at risk in the community". Amanda's former teachers reported having to "constantly watch her" and expressed feelings of frustration regarding her non-compliance. She was referred to art therapy for issues related to her "aggressive and non-compliant" behavior. At the time of the art therapy sessions Amanda saw her mother and sister on Sundays. She longed to be returned to her mother's home, describing her Sunday visits as difficult to end.

Amanda approached her art therapy sessions with a determined and independent

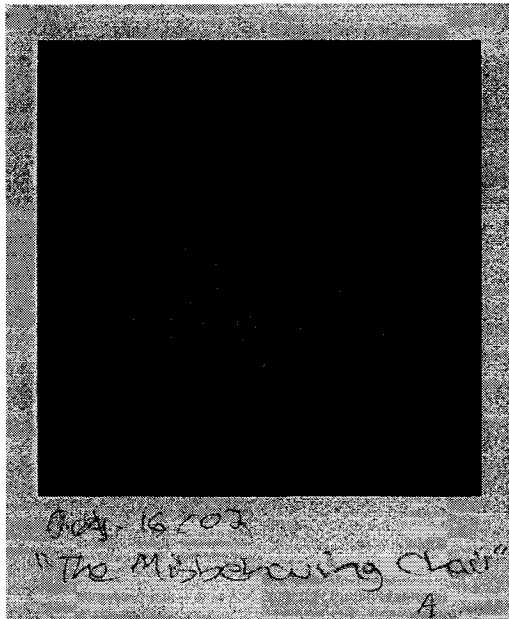
* Names have been changed to protect the client's identity.

attitude. The beginning phase of her therapy was occupied with her construction and, the subsequent, destruction of a chair made of wooden clothespins (Figure One). This “project” was of her conception and she worked on it devotedly for several sessions. Amanda worked very independently in the art therapy room. It was clear from the beginning that my role there was meant to be as witness. There was an obvious lack of trust of adult figures and a desire not to elicit help from me. However determined Amanda was towards the creation of her chair, she repeatedly built it in such a way that she was doomed to fail. We both watched as the chair came crashing down session after session. I was placed in the role of “bad” therapist who could not intervene to the re-living of this trauma and Amanda positioned herself as both powerless victim and controlling perpetrator.

These roles seemed familiar to Amanda and could be closely related to the early attachment relationships she has experienced with both her mother (who was unable to protect her from harm and to adequately give her the care she needed) and her father (who abandoned her and her family by dying, when he was much needed). As Amanda continued to perpetuate the traumatic breaking-down of the chair, she was, I hypothesized, showing me what it felt like to be her; a girl trying to stay together and be held yet unable to reach out for help and not being able to stand-up alone. Although I would remind her that I was there to help, she continued to place me in the role of witness. Despite all my urges to intervene and put the chair together permanently, I remained patient and moved slowly as I felt that Amanda needed to gain some sense of mastery over this trauma.

On the fourth session with the clothespin chair, after discussing the case in supervision and through much reflection, I decided to make an intervention, and

Figure One

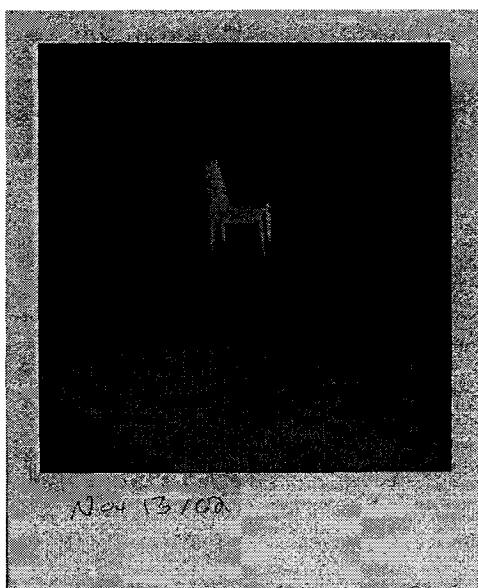


brought in a glue gun. Amanda, upon taking notice of the glue gun seemed to lose interest in the chair that she had worked on so dedicatedly for close to a month. Amanda told me she was going “to paint today”. She told me I could fix the chair and proceeded to draw a step-by-step “instruction manual” to guide me through the process. She found a private corner and quietly painted while I, following her instructions, glued the chair, which was finally able to stand (Figure Two).

The chair became a symbol of the environment Amanda and I, in response to her and her creative process, had created together. The chair stayed together (which Amanda “proved” by placing several heavy objects on top of it in the following session). Amanda

was finally able to take control of the process in a successful rather than a destructive way. The chair became a symbol of Amanda's heightened sense of self-efficacy (in a world where she probably rarely felt in control) and the sense of a "holding" relationship between Amanda and me was born.

Figure Two



Alison

Alison experienced her mother's death one week before her ninth birthday. Alison began coming to art therapy about 9 months after her mother's death. Her mother died from a drug overdose. Her parents were separated at the time of the death and after her mother's death Alison moved in with her father, his girlfriend and the girlfriend's teenage daughter. Her homeroom teacher referred Alison to art therapy for issues related to her low self-esteem. She was overweight and was often teased for this by her peers at

school.

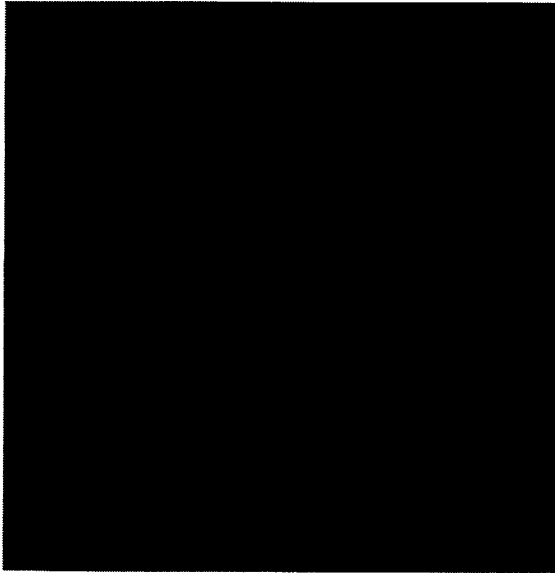
As Alison became more comfortable in the art therapy sessions with me, she began to speak more and more of the loss of her mother. Both with her words and her pictures she started to tell me about her difficult relationships with her father and his girlfriend. As we approached a school break, Alison's anxiety at the separation (which was also very near the anniversary of her mother's death the year before) became more heightened.

On our third last session before the break she announced that she would need a "very big box". The following week I brought in a box, to which she gave her approval. Alison told me that we would "paint it blue"- because that was her mother's favourite color. We spent the next couple weeks painting that "big box" blue (Figure Three). It was quite a process as there was much surface to cover and we needed to work diligently to have it finished by our "deadline" (which was silently understood to be before the break and the impending anniversary of her mother's death). As we painted the last coat of paint, Alison smiled and stated proudly, "We did it!" I reflected her statement, "We painted that big box from start to finish". We talked a bit about what we would do with the box (perhaps it would make a good stage for a puppet show), but mostly we shared the understanding that "We had done it!"

For Alison the box could be a symbol of her ability to create a safe holding space. She took control of this process from start to finish and was able to appreciate the extent of her work. As we painted together, a close and comfortable space emerged. We were connected in our combined effort to finish painting the box blue - which seemed to pay

homage to her mother's memory. We often

Figure Three



"Blue Box"
Dec 102.

worked in a state of silent concentration, as I concentrated on Alison's process and she concentrated on the product and all that it meant for her. I believe that what we ended up doing with, or putting in, the box was secondary to its motherly holding capacity.

Summary of Vignettes

Both Amanda and Alison had used the space of the art therapy sessions to create "holding" symbols, which helped to facilitate a "holding" environment, as Babits (2001) states. This sense of holding was especially significant, as they have both lost, through

death and separation, those primary caregivers that held them. These girls also shared a need to gain a feeling of mastery over their own creative process. They were successfully able to include me in their process, while remaining “in charge”. For Amanda and Alison the use of creative arts therapy contributed to the creation of a containing therapeutic relationship between me, in the role of therapist, and them, as clients. The art therapy also aided in the strengthening of their feelings of self-efficacy. It is through these gains; heightened feelings of self-efficacy and the creation of healthy interpersonal relationships that the creative arts therapies may contribute to the positive development of parentally bereaved children.

Photography in Art Therapy

In the above clinical examples the art product (the Popsicle stick chair and the painted box) are used by the client as transitional objects in the client’s transference to me, as the therapist. In these two examples it is not so much the type of art materials used but rather the symbolic meaning those materials had for the client that made their creation therapeutic. As each client is very different in terms of his or her issues that bring them to therapy, the individual personalities and backgrounds, their preference and/or ability to use certain art media therapeutically will necessarily vary. As the field of the Creative Arts Therapies matures and expands, the available repertoire of modalities within the field also develops. In the past quarter century the growing popularity of and accessibility to photography has naturally lent itself to the therapeutic arena. The structured frame of the camera’s lens views and captures a distinct reality. A tangibility

and permanence is bestowed upon an otherwise fleeting moment of time. When working with a bereaved child, photography can offer a solid foundation and sense of stability in an environment that may be filled with chaos and uncertainty. The camera can provide a sense of solidity – a tool used to view, understand and communicate to others, the world with the absence of the loved one – at a time when such tools are desperately needed.

When working with a child who has experienced the grief of losing a parent, it is essential for the caregiver (whether that be a parent, teacher or therapist) to explore his/her own relationship with loss and grief. It is quite common for adults to be triggered by a child's grief and find it extremely difficult to tolerate a child's experience of grief. However, if we are to help a child through this painful period, it is necessary to empathically allow the child's affects to resonate within us. This is a task that may trigger the flooding of repressed childhood grief and pain in the adult and become, to some degree, unbearable. (Parens in Akhtar, 2001).

Looking through the lens: Working on myself and with the Client

I am in the courtyard of my grandmother's nursing home. The sun sets slowly, casting long sprawling shadows on its descent. I gently hold on to my grandmother's frail hand, feeling each bone and vein beneath her waxy, thin layer of skin. My grandmother, Hannah, sits complacently in her wheelchair. A bright red and orange afghan drapes awkwardly over where her left leg would once have rested. Her one good eye wanders off lazily to the left. I imagine she is tracing the path of her shadow, its once elegant lines now distorted by the presence of the wheelchair. I reach for my camera and

take Hannah's picture, busying my hands with the details of focusing and aperture. I am unaware that this image will be "the last" one...

Almost ten years have passed (can it really be?), and Hannah remains a faded yet distinct presence. I am rummaging through some old photography materials and come across a roll of negatives I have yet to develop – it is labeled "Hannah Zack, 1997". I immediately know "the last image" will be there. Once in the darkroom, I patiently go through the process of cleaning, enlarging and developing "her" negative, each step taking me closer to holding "her" once again. As I gently lift the wet print out of the fixer, my heart beats rapidly in anticipation. Pushing back the heavy black curtains, I make my way towards the light. The experience is at once painful and necessary, as the light will always blind before it can reveal...

In the above personal narrative, my aim is to recount my subjective *experience* of the moment of loss (Finlay, 2002). This experience is not one that can easily be interpreted into words, nor, in my opinion, could a visual image alone give it the depth and quality it merits. In this example the photographic and metaphoric images serve as catalysts and containers to the deeper, inner understanding of loss, which enters my consciousness gradually, over an elapsed period of time.

This section will look at *how* I, as the researcher, may attempt to gain some understanding of the loss-experience of one child and communicate this experience, for the purpose of research. I will explore how I attempt to frame an inquiry of the client-participant's subjective experience and perception of the world. I will discuss the realm

of photography, *in* and *as* narrative, as a useful and eloquent method of researching an individual's lived experience.

As I examine a photograph taken by my nine-year-old client, I realize that what I was seeing was *my* encounter with the image and will, therefore, be different from the encounter that my client experiences. Both of these encounters will also vary from the original occurrence that prompted the taking of the image. In my role as therapist, it is my goal to attempt an empathic understanding of the client's experience of the image and what it means for him. In my role as researcher I need to conceptualize how to best communicate my client's felt experience with the image and all that it represents for him, with the least amount of interpretation.

Art as a Pre-Intentional Record

When working with a client in art therapy, the client's art making has a double advantage. Firstly, it provides an immediate physical and emotional release of inner tensions and turmoil. This creative gesture may be considered a "pre-intentional record" (Betensky, 1987, p.150) of the client's experience of and attempt to escape from inner turmoil. Secondly, the physical production of the creative work serves as a workable object of this initial experience (Betensky).

To return momentarily to my narrative of my experience of the loss of my grandmother, the taking of the photograph can be viewed as a "pre-intentional record" of the grief that was sure to follow. By creating a physical record of the experience, I

provided myself with the means to work and re-work the loss experience. This is one of the gifts of the creative arts.

Martin Heidegger (1994) locates art as the “origin of the work and of the artist” (p. 273). His inquiry into the nature of art leads him into the work produced and, furthermore, into the production of the tools which have created the work of art. In this way he equates the work of art to the craft and returns both constructs to their Greek origin of *techne*, which refers to “a mode of knowing” (p. 274). He continues by explaining, “To know means to have seen, in the widest sense of seeing, which means to apprehend what is present, as such” (p. 274). Thus, the creative process is an exploration of the artist’s apprehension of what is present, of their conscious experience. It is not the nature of her/his production that is of importance in this understanding but rather that the production is a truthful rendering of the experience. The art then is a description of the experience, the visual retelling of what has occurred or, in other words, a visual narrative. Narratives may be presented in a variety of ways, including photographs (Creswell, 1994). This will lead me to the next section of this paper - an examination of the use of photo-based narrative in research.

Photo-Based Narrative in Research

“A way of certifying experience, taking photographs is also a way of refusing it-by limiting experience to a search for the photogenic...” (Sontag, 1977, p. 9).

“I wanted to explore it [photography] not as a question (a theme) but as a wound: I see, I feel, hence I notice, I observe, and I think” (Barthes, 1981, p. 21).

Researchers in the social sciences have used photography since the late 19th century. However, it has only been since the latter part of the 20th century that photography has been considered a substantial source of data rather than just a recording device. Data collection through photography has involved the use of photographs taken directly by research participants, as a source of visual narrative to answer pre-determined research questions (Blynn & Harrist, 1992; Stuhlmiller, 1996; Wang & Burris, 1994; Wang, Ling & Ling, 1996). Photographs have also been used as part of the interview process, as a means to elicit valuable knowledge and memories that may be difficult to obtain through conventional interview techniques (Blynn & Harrist, 1992; Fry, 1995; Norman, 1991). This latter method is referred to as “photo-elicitation” (Blynn & Harrist).

In my example of a narrative based on a single visual image of Hannah, my grandmother, the taking and printing of a photograph prompted the telling of a personal narrative, describing a conscious experience of loss. When a sequence of photographs is employed, the necessity for the verbal interpretation is less (or not necessary at all) as the images, placed in sequence, may “speak” for themselves. Douglas Harper, in *Reimagining visual methods: Galileo to Neoromancer* (2000) explains that, “To expand the idea of empirical data in single images to a sequence of photos is to introduce the concept of visual narrative...it [the narrative] embodies the flow of human experience”

(p. 724). Harper conducts a narrative inquiry into the cultural phenomenon of bicycling down a specific street in Italy. He uses both native photography (he actually takes the photographs while riding his bike) and photo-elicitation to garner responses from interviewees as his sole research data.

Harper addresses several modes in which photographs presented, as research data may be understood, including the “phenomenological mode”. He explains that from the phenomenological perspective “photographs express the artistic, emotional, or experiential intent of the photographer” (p. 727). It is here that we can begin to envision a method of research, within the creative arts therapies, that explores narrative photography.

In their article *Narrating the self*, Elinor Ochs and Lisa Capps (1996) explore the psychological difference between two extreme-types of self-narrative. The first type is the *relativistic*, in which the individual experiences a possibly overwhelming range of frameworks for interpreting and telling their narrative. This type of narrative stays open and flexible to change however its indeterminacy may prove paralyzing. The opposite extreme-type is the *fundamentalist* type of narrative in which only one true version may exist. This type of narration may be beneficial in its ability to provide consistency to an otherwise fragmented experience; however, it may lead to stasis and a dooming state of acceptance without growth. This discussion of these two types of narration lends well to an exploration of the benefit of photography as promoting a more balanced narrative. The photograph, while being constant in its finished paper form, is readily manipulated (through placement, captions or collage) to provide a changing narrative. It is in this

manner that photography can provide the therapist/researcher with a balanced and full account of the individual's experience, while assisting the client/participant to experience a sense of control over their personal narrative.

Barbara Harrison (2002) outlines the various ways in which researchers have used the camera. She relates the practices of everyday photography to a form of story telling and invokes a discussion concerning the presence of memory and identity construction. When working with research participants, both the taking of photographs and the use of existing family photographs can be a valuable method of eliciting narratives that can then be bracketed into common experiences.

Photographs relate to both the therapeutic and research components of the creative arts therapies. The "reading" of photographs can garner valuable psychological information on the subject(s) of study. James Hamilton (1995) investigates the experience of photographer Edward Weston's loss of his mother as a child. Hamilton employs Weston's unique style of photography to explore his psychological trauma and his process of mourning.

Also looking at photographs as a means of rich psychological information Marianne Hirsch (1999) reveals the rich content contained in the common family photograph. She describes the family photograph as the place of intersection for numerous looks and gazes, each denoting different realities of power and privilege within that family unit. She refers to the family photograph as a "document in which this complex exchange of looks and gazes is reflected and can be read" (p. xvi). When an understanding of the meaning behind this exchange of gazes is acquired, family

photographs and albums can be strong sources of valuable information to the researcher/therapist.

Shaun McNiff (1989) explores the possibilities available to creative arts therapists to use art as a fundamental aspect of their research practices. He comments on the popular use of the case study with creative art therapy graduate students, stating one of its basic attractions as “its descriptive power, its ability to include so many of the different qualities of the therapeutic experience, and its capacity to convey a sense of process” (p. 162). He links the use of the case study to a cultural preference for story telling and, encourages the creative usage of literary devices in the telling of narrative case studies. McNiff also explores the idea of narrating the case study from the perspective of the images produced in therapy, postulating that, “these exercises will deepen our empathy and our ability to look at life in novel ways” (p. 165). It makes sense that if photography was employed as a part of the therapeutic process, that these photographic images would also be included in the case study.

In my therapeutic work with a nine-year-old child, Tom*, who experienced the traumatic loss of his mother, at age two, and his maternal grandmother (who became his primary care-taker upon his mother’s death), at age eight, photography was used as a primary component of the art therapy. The photographs took and the narratives he told with the images were a great resource to my understanding of his experience of loss. What he was unable to express in words, came through quite beautifully in his unique perception of the world, captured through the camera’s lens. In my inquiry into how this

* Name has been changed to protect client’s identity

boy's early and repeated experience of loss impacted his world-view, imagery (in the form of photographs) provided the narrative that informed my case study.

Participant photographs can provide the reader of a research paper with the opportunity to come to their own subjective understanding of the participant's experience without the distortion of the researcher's interpretation. In my work with Tom, photographs are taken by him and of him outside of the immediate art therapy space. The photographs are then used creatively within the therapeutic environment. His images, which are a reflection of his perception of the world, are often a "pre-intentional record" (Betensky, 1987) of the themes he seems to need to work through in the therapy. Consequently, his images should reflect how his perception of the world has changed (or stayed the same) throughout the course of therapy. It is in this way that I propose to use photography as narrative in my case study of one child's experience.

Camera as Metaphor

The camera as a metaphor in relation to the therapeutic process with a bereaved child can be explored in a couple of ways. Firstly, the mechanics involved in the taking of photographs can provide us with an eloquent metaphoric parallel into the working of traumatic memory. Secondly, the images captured by a camera are visual metaphors of the world-view of the person wielding the camera.

Beginning with the latter perspective, I asked, "Why is it that two individuals, when each given a camera and placed in the same setting, will produce two different photographic images?" Humans do not merely perceive their world but rather they

actively create it as they experience it through their own individualized world-view lens or filter. Our lens is created by our collective consciousness, the sums of our life experiences and our individual character. Through the camera we are able to obtain a tangible image which may metaphorically represent the individual's world-view. As Judy Weiser (1993) states, "photos clients take or collect become metaphors of themselves or intimations of perceptions not yet in their conscious awareness" (p. 23). For example, a woman is quite surprised when she first views photographs she has taken. Her photographs, with few exceptions, are pictures of people from the chin or nose down. Entire heads are "chopped" out of the camera's frame. These photographs can be viewed as merely her lack of photography skills, or rather, as a metaphoric parallel of how she views the world. This woman has been suffering from depression. She spends much of her day looking down at the ground. She rarely looks at anyone's face and finds it quite difficult to connect with others or the world around her. Her photographs metaphorically depict her depression and feelings of being "cut off" from the world around her. It is in this way that photographs can provide us with a visual metaphor of the photographer's world-view.

The camera can also be employed as an eloquent metaphor for the workings of traumatic memory. Sigmund Freud was the first to compare the inner workings of the camera to the inner workings of traumatic memory (Baer, 2002). More recently, the notion of the photographic process as a metaphor for the processing of trauma and the "freezing" of memories has been explored further by some writers (Baer, 2002; Hirsch, 1999; Weiser, 1993). With both apparatuses an event is "captured" and an imprint left.

This capturing of the image, to some extent, substitutes the complete experiencing of the event in the present. A sacrifice of sorts is made. While the image is permanently captured (whether it is on light-sensitive paper or in the unconscious) for future reference, the immediate experience is, to some degree, bypassed.

In the instance of the photographer wielding a camera, the ability to preserve the moment briefly outweighs the experience of “being in” the moment. The images captured are “frozen memories we can hold in silent stillness in our hands” (Weiser, 1993, p.1) and remains still and constant as the world continues to change around it. Although the photographer plays a unique role in any captured event, that role is necessarily different than if the camera had not been present. In most circumstances, the photographer instantly becomes a partially removed observer, relinquishing the role of subject.

Sometimes, for the individual in the midst of a traumatizing event, the psyche works to transform the individual into a partially removed observer, relinquishing the position of victim and/or participant. The psychic memory captures the event and distances it from the person. The event is then stored within the unconscious (sometimes so deep it is never retrieved). This event may remain stuck in a psychic “time-warp”, frozen and static as other aspects of the individual develop and change (Putnam, 1997).

The camera can and has been used as a therapeutic tool to ‘unfreeze’ traumatic material, work with it and then move forward (Spence, 1995). Through the camera’s trauma-mimicking distancing and freezing capacities a gentle glancing/touching of the traumatic memory is permitted, at the traumatized person/photographer’s own arm-length. The photographic process provides a sensible and controllable understanding of

the capturing of memories while no sense or control could be attributed to the traumatic experience. This sensible control allows the traumatized person to gain a lost trust in their own abilities to control their surroundings. As they record their environment through the camera's stillness, their level of self-efficacy rises. They eventually feel safe enough to re-enter the world, on their own terms and begin to process their surroundings on a deeper level.

Summary

Through the processes of my research, my therapeutic work and my own creative work I have discovered the value of employing the camera as a tool to help the traumatized individual reframe their traumatic experience and move forward from their "frozen" state in relation to their trauma(s). The narrating, distancing and empowering capabilities of the camera allow the individual to feel safe and in control of an existence that may not feel safe or controllable. This too is the power of all the creative arts when used therapeutically. When it comes to the child traumatized by the loss of a parent, often the words will not be available for the child to openly express their feelings in relation to their loss. The creative arts therapies, including photography, can provide the bereaved child with the tools necessary to safely express and communicate their inner feelings and thoughts to the therapist and to gain a sense of empowerment in the process.

Part III. Case Study

Introduction:

“...rehearsing/ for the time when garages with/ empty trucks/ and covered cars will not suggest/ threadbare/ ghosts that lurk in /darkness/ and light forever striving to hurt children/ of the night/ already hurt yet filled with/ compassion/ for those bereaved whose tragedy/ composed/ my favorite things on a perspiring bass...”
(DeCarava, 2001).

This study presents the case of Tom^{*}. At the time of therapy Tom was nine-and-a-half years old. Tom was referred to me through his grade four teacher at the inner city school at which I was the art therapy intern. Over a six-month period, Tom and I met once a week for 45-minute sessions for a total of 17 sessions (some sessions were missed due to school holidays or cancellations). Throughout our time together, Tom used mainly collage (both from magazine photos and his own photos), and pencil on paper. Closer to the end of therapy, he began to experiment with colored pencils, pastels and modeling clay.

I have chosen to focus on the case of Tom as a means of highlighting my research into the literature on childhood bereavement. Specifically, I will focus on the use of phototherapy, in conjunction with art therapy, in its relevance to the process of traumatic grief in childhood. I find Tom’s story (as told through his art) to be at once extraordinary and painfully revealing. His methods of coping and defending are of particular relevance in regards to my interest in the psychosocial development of children who have

experienced significant losses. However, it is the personal emotional involvement I experienced working with Tom and my response to his story as it was unveiled that captivated me the most. I found Tom's case to be very emotionally compelling. Tom's specific circumstances and the extent of his losses were drastic, drawing in myself, as therapist, writer and reader, deeply. My goal in presenting this case is to highlight the profound sense of sadness, anger, fear and the growing glimpses of hope and joy that were evident through Tom's artworks (including his magazine photograph collages, his own photography and his drawings) and art process. These are pertinent reminders of the revealing and healing capacities of the creative arts therapies.

Tom's Background

Tom's file indicated that he had a very tumultuous and traumatic early childhood. Tom and his siblings were first signaled to the Department of Child and Youth Protection for reported neglect. Tom was one year old at the time. When he was two years old, the file stated, his mother was fatally shot in what the file described as "a drug deal gone wrong". The children were separated. His maternal grandmother took Tom into her care.

At the age of seven, Tom was reported to his school's social worker for his non-compliant behavior in the classroom. Tom reported that he was teased by other students and that he hated being at school. During the following school year, Tom was taken to the emergency room for making the statement that he "would rather be dead than go to school". While in emergency, in front of the hospital staff, Tom made a suicidal gesture by attempting to choke himself with his shirt.

Tom was evaluated at the hospital and diagnosed with Early Cumulative Trauma with depression and some traits of Oppositional Defiant Disorder. He tested in the high average range on the Global Assessment Scale; however, he was performing below grade level in most of his subjects. Upon Tom's release from hospital, his file was sent to a day hospital treatment program for evaluation. For the nine months following his release, Tom remained out of school and out of any treatment programs. He reported spending his days watching television at home with his aging grandmother (who was sick with terminal cancer). In the summer, his grandmother died.

After some shuffling around, it was decided that Tom would stay at his grandmother's home and his uncle would move in and assume custody of him. Tom returned to school after close to a year's absence. He was placed in a regular grade four class but had been assigned an Individual Education Plan as he tested significantly behind his peers.

The following case study will explore several specific themes as they relate to the artwork produced by Tom during the course of therapy. Although there is much material that could be covered, I have chosen to remain within the discussion of Tom's losses and both his methods of defending against them and his ability to cope with them, as observed through his art-making, particularly his photography and collages. I will explore images and themes pertaining to Tom's struggle with accepting the loss, his attachment style to me as a female therapist, and his struggle to feel "real" as ego development has been halted or frozen by the traumas he had endured and continues to endure (Altschul, 1988). As an ensemble, this study will highlight Tom's specific view

of the world, from my interpretation based on his relationship to me, to the art materials and to his own images.

Tom seemed to see the world as a frightening and unpredictable place. He treaded in his world softly and carefully, as experience had shown him that with any step, he might step on a metaphoric landmine. He seemed to be facing a fierce internal battle as his defenses tried to guard him against both past and future losses, while he struggled to make sense of his past and to integrate his experiences into the person he was now becoming.

The Sessions

Ancient Losses

My first encounter with Tom was in the brightly-lit hallway just outside his fourth-grade classroom. Tom appeared somewhat uncomfortable as he shifted awkwardly on his feet. His teacher made the introductions and then we headed downstairs for our first art therapy session together. As we made our way down the four flights of stair to my basement office, Tom was silent. He asked no questions about where we were going or the purpose of this encounter. Tom appeared somewhat apathetic to this experience and I wondered how many school social workers, nurses, doctors and child-aid workers he had encountered in the past. His movements were slow and calculated, and, I would soon discover, so were his speech and his manner. I found myself feeling slightly uncomfortable with, yet strangely drawn to, this boy.

When we reached the tiny basement art therapy room, Tom sat down quietly, looking steadily at his lap. He appeared complacent and listless. He did not appear curious about his location or the materials that were laid out on the desk in front of him (I had previously set the room up for the Landgarten PhotoCollage, 1993 in preparation for this first assessment). Although Tom did not avoid eye contact or conversation, he did not appear interested in seeking it out. At best he was polite.

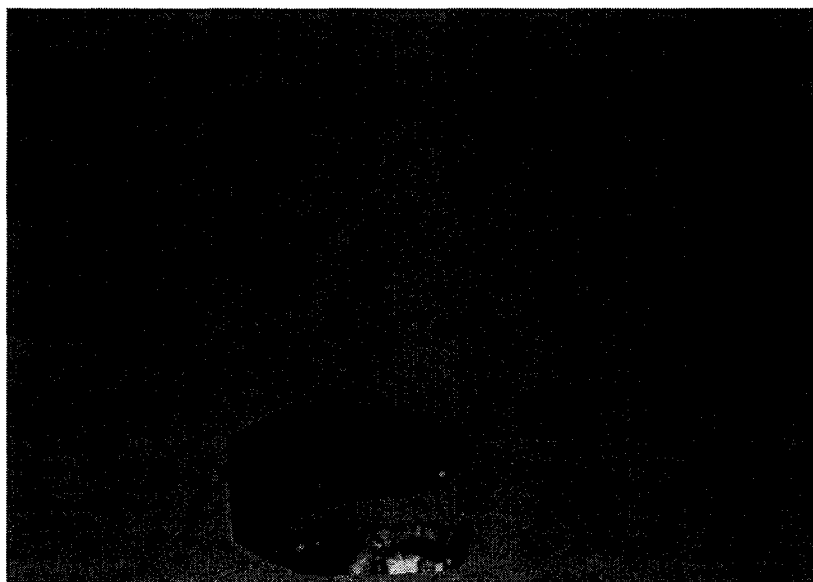
Loosely derived from the Thematic Apperception Test, Helen Landgarten's Magazine Photo Collage Assessment, (MPC) requires the client to complete four collages using previously selected, culturally relevant, magazine photos. The MPC is designed to facilitate a non culture-bound understanding of a client's problem areas, conflicts, defense mechanisms and styles of functioning. I chose to use the Landgarten's Assessment with Tom for a variety of reasons. First, because I was still in training with limited experience as an art therapist intern, I felt an established assessment was necessary to assess the extent of Tom's emotional and psychological challenges. Knowing his history, including the past suicidal gesture, I also felt a firm understanding of his specific needs was required. I chose Landgarten's assessment in particular as it is specifically designed to be used as a multi-cultural assessment tool and it had the added benefit of using photographs (taken in advance from magazines), a tool I was hoping to introduce into Tom's therapy. I also employed Buck's House-Tree-Person assessment (1966) with Tom as a means of gaining further insight into his possible inner conflicts. The results of these two assessments proved to be very relevant to the therapeutic issues Tom presented during the six months in art therapy as well as being relevant to the

subject matter of this paper. It is for this reason that I will include a detailed overview of these assessments with Tom while investigating his depiction of past losses through his imagery. It is to be noted that the interpretations based on these two assessments were not used as facts, but merely hypotheses that proved helpful in the continued therapeutic work and in forming general impressions of Tom.

The first instruction in Landgarten's assessment is to rummage through a pre-prepared folder of magazine photos of various "things". I asked Tom to choose any image and paste it onto a provided piece of 11" x 14" newsprint. Tom methodically looked through all the pictures before gently placing each of them to the side. He did not linger on any particular image, but briefly glanced at each before moving on to the next. He was neat but not engaged in this process. Tom went through the pile a couple of times before he was able to find a single image that was of interest to him. He finally settled on a photograph from a National Geographic magazine of an animal's skull (Figure four). He carefully cut around it and pasted it onto the bottom middle of the large paper. When prompted he wrote, "it's ancient" to the right of this image. When asked, he had nothing more to say about it.

I have found that the importance of the client's first image is often quite relevant to the main issues revealed throughout the course of therapy. It is with this

Figure Four



first image that the client permanently introduces him or herself to the therapist. I found it fascinating that Tom chose this image of an animal's skull with which to greet me.

Although I was not aware of it at the time, I have since felt that this collage told the first chapter of Tom's story. To me, the skull represented "ancient" pains and death. These pains were so deep that they went past the skin, right into the bone structure of this boy. His pain, derived from the loss of two of the most important people in his life, was his underlying foundation. The pain was so powerful that it could no longer be understood as human – the vast empty space covering the paper above the skull might have been indicative of the vast emptiness inside Tom. He was unable to fill the page because he was not full. I kept the hypothesis of a depression and feelings of emptiness in the back of my mind.

I noticed Tom's careful, yet unengaged, picture selection process and the cutting and pasting of the images. It reminded me of a factory worker performing precise work on an assembly line. The worker knows he must do an accurate job - he must perform, but has no investment in either the process or the final product. I found myself asking if this activity felt like a duty for Tom and, if so, why didn't he object? Tom displayed a rigid control over his actions along with a lack of spontaneity. It is often very difficult for children who have suffered multiple traumas to engage in play and spontaneous behavior. All their energy is focused on the maintenance of a non-chaotic internal and external stasis (Putnam, 1997).

According to Landgarten's assessment, Tom displayed signs of rigidity (in cutting, pasting and arranging the collages) and feelings of depression and loneliness (in choosing images that were 'alone' and in an inability to have the images relate or interact with each other in the collages). Another theme that could be hypothesized through Tom's image selection and image placement was Tom's need of nurturance while simultaneously viewing this need as "bad" (Figures Five, Six, and Seven). Themes of helplessness were also evident (Figure Eight) through Tom's choice to use images of baby animals and place them at a distance from each other, somewhat isolated on the page, and with no caregivers. By continuing to use the medium of collage in the two sessions following the first assessment, Tom displayed a resistance to change or spontaneity.

Figure Five



Figure Six



Figure Seven



Figure Eight



The second assessment administered to Tom was Buck's House-Tree-Person drawing test. During this session, Tom was, at first, very resistant to drawing anything and needed much encouragement in order to try. When asked to draw a house, Tom told me he would draw a building. He drew a very large bleak-looking building covering most of the page (Figure Nine). The unusually large size may have indicated "feelings of inadequacy with compensatory or repressive defenses" (Ogdon, 1984). The image's overall lack of detailing has been associated with "possible withdrawal tendencies, empty feelings, or disregard for convention" (Ogdon, 1984). Yet, his detailing of the doorbell could have pointed towards "obsessive compulsive tendencies, rigidity and or anxiety" (Ogdon, 1984). He was very unhappy with the finished image, possibly implying a low self-image.

Tom was next asked to draw a tree to which he replied, "I can do anything but a tree. I really suck at trees". I asked if drawing a person might be easier to start with, to which he agreed. His person drawing (Figure Ten) floats in the lower middle quadrant of the page. Especially noted is the lack of a ground line possibly

Figure Nine

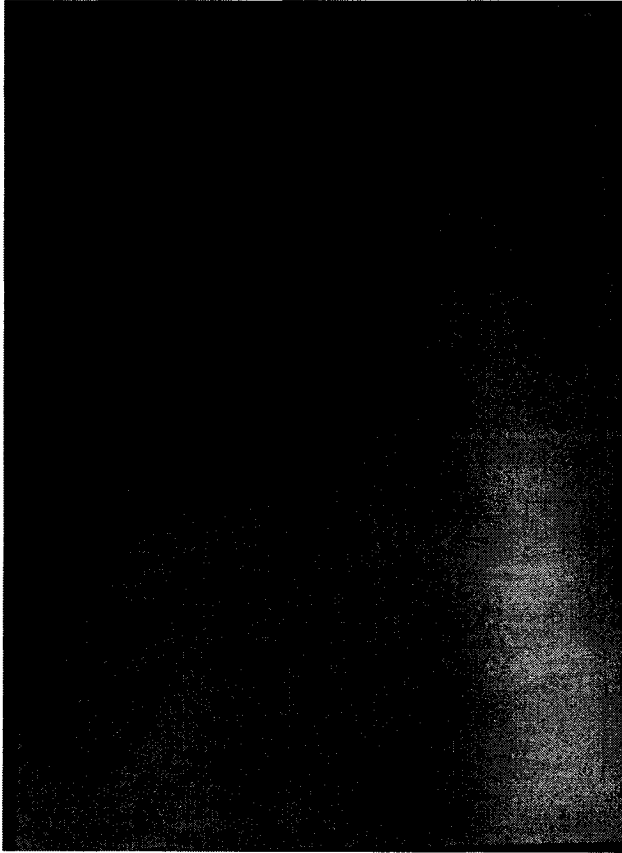
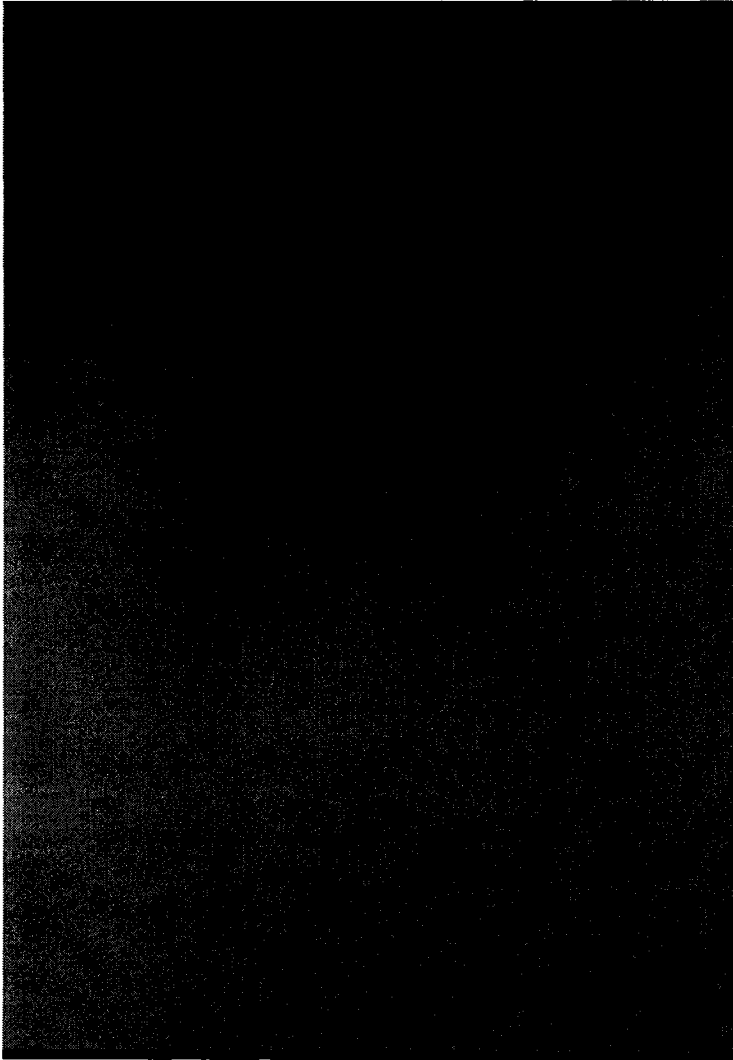


Figure Ten

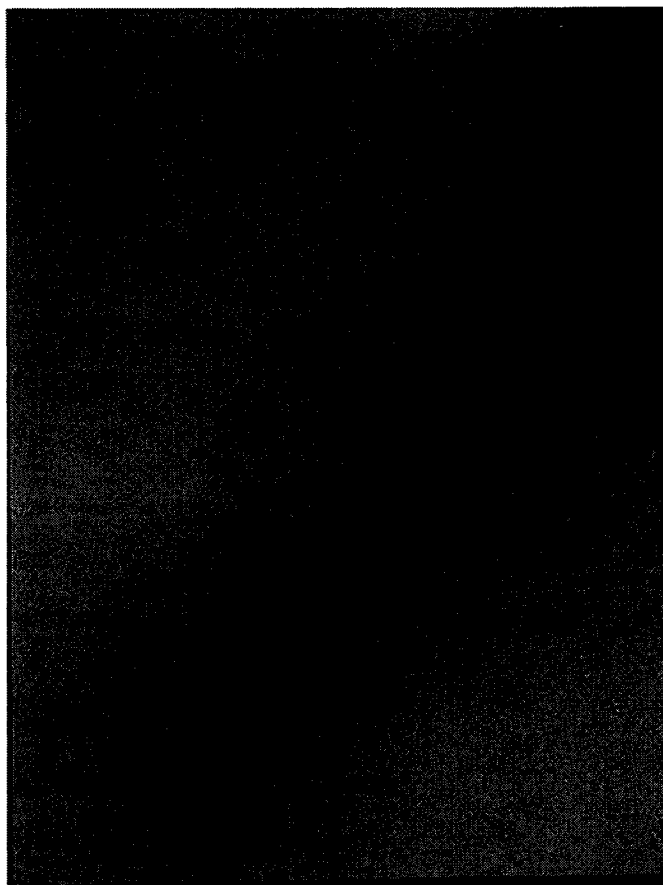


indicating a sense of instability in Tom's life. Also, the vacant, pupil-less eyes of Tom's person drawing have been interpreted as "an introversive self-absorbed tendency in withdrawing persons who are not interested in perceiving their environment, or who perceive it and themselves only vaguely, a condition seen in neuroses and schizoid personalities which may be due to an inability to cope or a communications difficulty" (Ogdon, 1984).

Although he still continued to make self-deprecating remarks, Tom's anxiety towards drawing appeared to diminish as he drew. He was asked again to draw a tree to which he responded by moaning jokingly, but he did not resist (Figure Eleven). This tree is again floating on the page, with no ground line, reaffirming the lack of stability in Tom's life. Three striking elements of Tom's tree drawing are the emphasized knot with two inner rings in the middle of the trunk, the double layer of cloud-like leaves, and the stubby, shortened branch coming out of the right side of the tree.

The drawings of trees have been noted as containing some of the most clinically revealing material. The tree tends to symbolize our relationship with our environment, our intrapersonal relationships and how we understand ourselves. (Ogdon, 1984). Tom was, at first, quite hesitant to draw a tree. This could be

Figure Eleven



an expression of his difficulty and confusion with both his relationships to those around him and his understanding of himself. When he did draw a tree, Tom was very careful to draw a knot in the middle area of the tree's trunk. He then drew another circle inside the knot and said, "this is where the squirrel lives". The drawing of the knot or scars on tree trunks has been associated with trauma (Ogdon, 1984). One possible interpretation of the "dual-lined" knot could be that Tom was showing both the trauma of the loss of his mother at age two and then the loss of his grandmother at eight. The "dual-lining" could

also be interpreted as a protective barrier blocking both Tom and others' access to the painful traumas that he had been unable to mourn. This manner of using the "dual-lining" can also be noticed in his cloud-like leaves, suggesting the need to protect the inner self from the external self and from others. It has been noted that a cloud-like crown is associated with "active fantasy, low energy level, and possibly a childish avoidance of reality". (Ogdon, 1984).

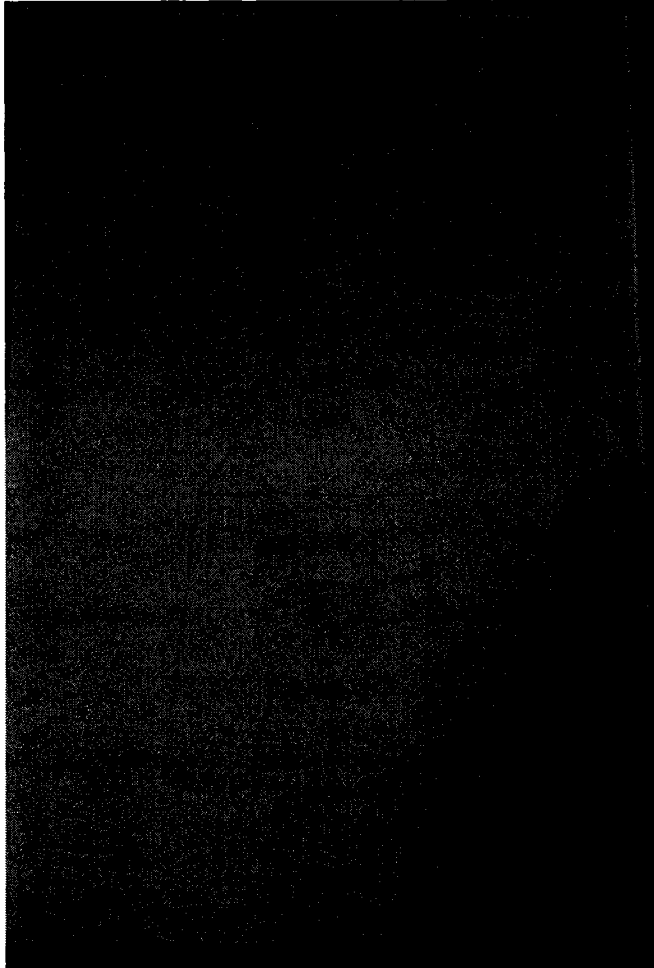
Of special interest was the presence of a shortened branch emerging from the upper right side of the trunk. The presence of this type of shortened branch and the overall lack of any other branches possibly suggested that Tom perceived his environment as bleak and unhappy; it also possibly suggested infantilism or regression and suicidal tendencies (Ogdon, 1984). Another point of interest was the small branch inside the crown of the tree. The presence of this branch seemed to suggest a bit of hope that was carefully buried under a double-lined cloud of foliage.

After completing the drawings of the house, the tree, and the person, Tom spontaneously picked up another piece of paper. With a new confidence and determination previously absent, he drew a house with a cross on the roof, a tree and a single flower to the right of it, a sun and cloud in the sky and a double layer of grass to serve as the ground line (Figure Twelve). Tom invested a lot in this picture and seemed quietly pleased with the end result. This image was full and complete and radiated warmth. This seemed representative of happiness, perhaps a memory of a safe time in the past or a reaction to his feelings of pride for having completed the daunting drawing tasks I had asked of him.

Besides the images produced during these two assessments, other images of Tom's seemed to speak of his losses. One of these images was a picture from a magazine Tom chose for a collage (Figure Eight see page # 43). I think it is important to note that two days before this session (on Halloween), Tom had unknowingly knocked on my door, as he was trick-or-treating in his neighborhood, which turned out also to be my neighborhood. We were both somewhat taken aback by this chance meeting. I believe this meeting may have set the foundation for some early transference and countertransference in my relationship with Tom, and I believe it was referred to in the following session's artwork.

Although various materials were pointed out to Tom, and I encouraged him to use anything, Tom immediately reached for the folders of magazine photographs to make another collage. This collage began as a pyramid structure of three baby animals, under which Tom wrote, "lookin [sic] for food". Beside this pyramid, he pasted an image of a very unhappy looking teenage boy with spiky hair. He wrote "weirdo" under this image. He then found a picture of a Black baby girl in diapers, crawling away from the camera's lens. Under this picture Tom wrote the words

Figure Twelve



“looking for mome [sic].” This collage in its entirety seemed to speak of desperately seeking and not finding nurturance. It was a very revealing image that showed Tom’s paradox of being simultaneously a helpless baby animal, yet also a ‘weirdo’ whom no one could love. The image that particularly struck me in relation to Tom’s losses of his mother and his grandmother was the one depicting the back of the crawling baby. This

image seemed to show a search yet also an anger, as the baby is turned away from the camera and not looking back. I asked myself if Tom was expressing his anger at his “mothers” for leaving him and possibly at me as well, for shutting my door when he came knocking on it on Halloween.

The Food Chain

Our first attachments are the basis for the framework of all future attachments (Fonagy, 1998). In this section, I aim to look at images made by Tom that seem to indicate his way of attaching to me as therapist, with the intention of connecting these ideas to his early attachments and losses. When in session with Tom, there was often an atmosphere of something that didn't seem to make sense. My own countertransference art-making and poetry (which I completed after some of the more difficult sessions with Tom) showed much of this ambiguity. I found my responsive creative works after these sessions, to be at once childish and simple in style yet containing a sense of confusion as well as a mature sense of sadness. I had found myself thinking of Tom often when not in sessions and had experienced dreams and awake-state “rescue” fantasies concerning him. When I looked at this countertransference as vital information of Tom's transference to me, and looked at how this transference related to his ability to attach, my feelings towards Tom then became a rich source of therapeutic information.

Tom's conflict was an ambiguous one. He was a child of nine, who was academically and socially behind his peers. However, he had experienced a lifetime's worth of significant losses. He presented to me as aloof and uninvolved, yet needy and

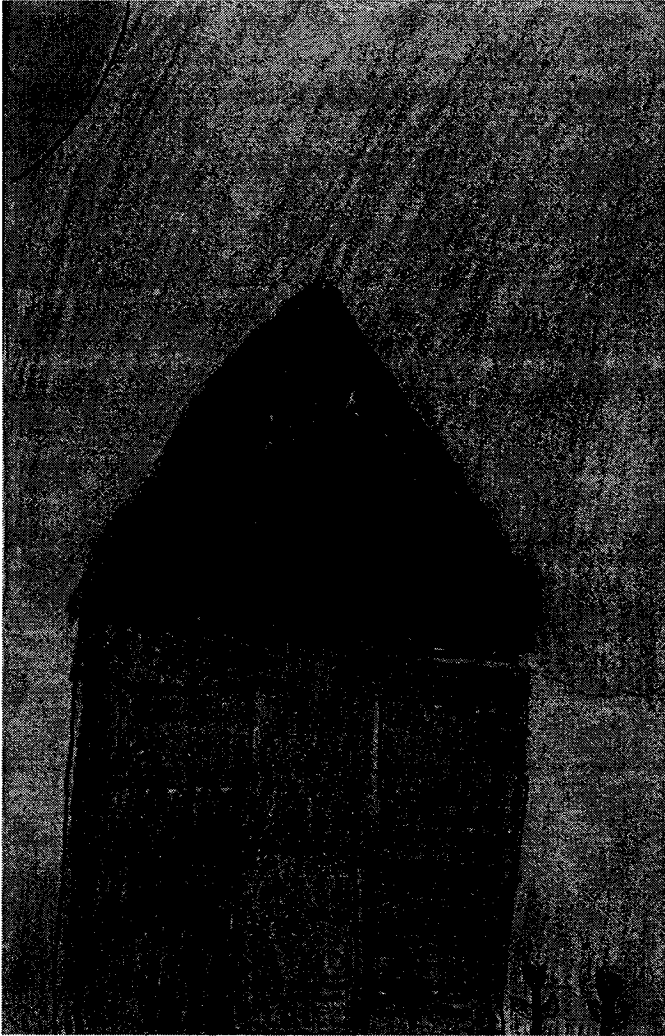
lost. I felt that Tom attached to me insecurely (Shaver & Hazan, 1993). His attachment was insecure in the anxious-ambivalent style, which is defined as a sense of insecurity in the response patterns of others, while maintaining a strong desire for intimacy along with a great fear of being rejected (Shaver & Hazan, 1993). Although there was a constant sense of mistrust and skepticism from Tom towards me, the need to experience a love relationship with a “mother” figure seemed to override this distance. Altschul (1988) discusses the common fantasy a parentally bereaved child will harbor while in therapy “that the therapist will become a substitute for the lost parent” (p. 157) and the child will then attach accordingly to the therapist. Altschul states that this is one of the most challenging components of the transference-countertransference issues that emerge in this type of work. Accompanying this initial attempt to “put the therapist in the place of the lost parent” (p. 158) will be the inevitable mutual anger, disappointment and frustration of both the child and the therapist when the child’s indirect efforts are thwarted. The following three images have been chosen to further discuss the conflicting and confusing nature of Tom’s attachment style.

The first image is one that I highlighted in the previous section. It is the pyramid collage completed a few days after Halloween (Figure Eight see page # 43). This collage spoke of Tom’s desperate situation of being terrified of “getting too close” yet craving and needing to be cared for and nurtured. The pyramid he created with the baby animals seemed to represent a sort of hierarchy in which “the fox eats the chick” and “the bear eats the fox”. Although the fox was meant to be a predator, he appears helpless and scared. The fox lies in a fetal position. His posture is tightly closed, yet he manages to

look vulnerable and exposed. The chick also seems somewhat exposed. The bear is scaled smaller than the other two animals and does not seem threatening. Tom wrote under the fox “lookin [sic] for food”. I read these three images as Tom’s way of telling me he is looking for “food” or nurturance. I felt he was reaching out to me by telling me of his neediness and vulnerability. The images he added to the left of the “weirdo” teenage boy and the baby who wants her “mome [sic]” felt like a warning to push me away as he is weird and he will turn his back on what I have to offer. This collage seemed to exemplify Tom’s insecure attachment style and paradoxical position between needing and fear of needing.

The next artwork was a card (Figure Thirteen) made for me in our last session before the Christmas holidays. This card also showed me the confusion in Tom’s attachment to me. On the front of the card Tom carefully drew a house, with a green cross on the roof, and a tree and a sun. Inside Tom wrote “I love you/ for Sarah”. When I received this card my first reaction was one of surprise, as I did not expect the openness of these words. I felt extremely sad for Tom. I found it difficult to put these strong emotions and thoughts aside and adequately receive the card. Again feelings of confusion came over me, as I was unsure how Tom was relating to me. I sensed in him a fantasy for me to be his mother and was frightened by this perceived desire. I finally managed to say, “Thank-you” and commented on my lack of words as I honestly was left “speechless” by his gesture and need.

Figure Thirteen



The third image I wish to discuss in relation to Tom's attachment is an image made in our tenth session of a "porcupine fish", which is what Tom titled it (Image unavailable as Tom chose to take it home at the end of the session). This was a marker and pastel drawing that took Tom close to 30 minutes to complete. He worked slowly and deliberately, accentuating the 'quills' several times in a repetitive motion. He was mostly quiet throughout this session, his level of focus being quite high. When finished he informed me he had drawn a porcupine fish. When asked who or what the fish was looking at, Tom told me, "He is looking at his enemy...He is alone because he can't have friends. He will hurt anyone who gets too close".

Webb (2002) explores the concept of magical thinking in young children. She describes how the child who is still very egocentric may believe that it was their anger or inappropriate behaviour that may have caused the death of their loved one. Bowlby (1998) discusses the relationship between guilt and mourning, normalizing these feelings in children especially when the child's relationship with the bereaved may have been ambivalent or chaotic. I asked myself if Tom felt he was as dangerous as a porcupine fish. Will he hurt anyone who gets close to him, like his mother and grandmother? If I get too close to him, will I too disappear? Like the fish, must Tom too constantly face his enemies? Is the world a cold and dangerous place for Tom? Will he ever have a friend he will not hurt? It is these outer quills that protect Tom from further trauma, yet it is also these quills that hinder him from getting too close to any other possible caregivers or

to me. I asked myself, how does one soften the quills without leaving the fish defenseless?

Aliens and taxidermy

If Tom, during his first interactions with his mother, didn't receive "good-enough" mothering, this would have been sufficient to eradicate the creation of a transitional space in which he could develop a subjective self (Winnicott, 1960). We may speculate that Tom's mother could not provide "good-enough" mothering because of her drug problems. According to this line of reasoning, inadequate mothering may have led Tom to rely on a False Self which was able to compensate for his mother's lacking caregiving skills. This False Self would have been encouraged to the point that it would become the dominant self that Tom exhibited to the world.

Another way of looking at the possible development of a False Self in Tom could be to see it as a defense against the trauma and chaos in his world. Due to his inability to understand this defense, he is left feeling "weird". Tom repeatedly expressed this sense of weirdness and feelings of not being himself in his work, particularly in his photography. In this section I will discuss photographs taken by Tom as representative of his struggle with understanding who he really is.

When I originally presented a disposable camera to Tom during our third session together, he responded by declining it, stating that he could not accept it because he had been "grounded". The following week, however, Tom did accept the camera when offered to him. I explained to Tom that this camera was to help me see his world as he

saw it and told him he could take pictures of whatever he wanted. I showed him how to operate the camera and explained that he was in control of how he wanted to “frame” what he saw through the camera’s lens when taking the photograph. Finally, I explained to Tom that I would be having two copies of his photographs developed. One of these copies, along with the negatives, would be his to keep. The other copy would be for him to use in the sessions with me.

During the course of therapy, Tom took three rolls of colour film from disposable cameras that he took with him outside the therapeutic space. I presented Tom with his first set of developed pictures at the beginning of our 6th session [Photographs not included in order to ensure client confidentiality]. He appeared excited to get the photographs back and was able to engage me in the narratives his images revealed. In this first roll of film, many of the images were self-portraits and close-ups of friends on the school bus that takes Tom to and from school. Some of the pictures were taken looking outside the window of the bus. About five of the photographs had bright blurs of white light from being aimed directly at a light source or the glare from the reflection of the school bus. Almost all the images were shot on a grey, rainy day. There were two images from the inside of Tom’s home. One was a picture of the dog his grandmother had left in Tom’s care and the other was of his bed, tidily made, with a teddy bear placed carefully on top (Tom later told me that this teddy bear had been given to him when he was two-years-old, which was his age when his mother died). Tom had no pictures of his family or himself at home.

During this session and in subsequent sessions, Tom found all the photographs with the bright white spots on them and set them aside. He made a series of collages with these images. The first was in reference to “Aliens invading the World”. The aliens then moved closer to “invade a man body”. These images possibly spoke of Tom’s feelings of being both alien and alienated. He seemed to feel weird and different from others. Tom didn’t seem to feel in control of his life, as if aliens had invaded his body. This could be interpreted as a metaphoric representation of his False Self.

I also observed in the first set of photographs, that a large percentage of pictures were of Tom himself, either taken by a friend or by Tom holding the camera at arm’s length in front of him (these frequent self-portraits are again repeated in the third roll of film). I wondered if these photographs were the beginnings of self-explorations, in an attempt to uncover his True Self. These images reminded me of a baby, who had just discovered his own reflection and gazed in amazement at the mirror image. Or perhaps the questioning pre-adolescent, seeking for some recognition as he viewed the foreign image peering back at him in the mirror.

The second set of photographs I returned to Tom were all images that were shot in the school’s Discovery Room. The Discovery Room is a science room for students. It is filled with taxidermy animals, stuffed and rigid, perched with open eyes on pedestals and plaques and peeking out behind Plexiglas barriers. Tom and I went into this room, at his request, after our ninth session.

When the photographs of the taxidermy animals were returned to Tom in session 11, he made a collage with several of them. He was very pleased with these photographs.

Next to the images of him posing beside the “stuffed” crocodile he wrote, “it is fake” and “it is stuffed”. This, to my understanding, was Tom telling me that he was fake and that inside he did not feel real. Here Tom was showing me his False Self. He was able to relate to these taxidermy animals, as they, like he, were merely representations of the beings they once had been. They were now dead inside. Tom will return and thrive again, with time, patience and love. For the child whose psychological development has ceased due to “adaptive compliance with the deficient environment”, development will be sparked once again when, “a holding environment can be found that allows the emergence of a more spontaneous, authentic, subjective experience” (Mitchel & Black, 1995, p. 129).

The use of the disposable camera, as well as the incorporation of photographs taken from various magazines, contributed to Tom’s engagement in the therapeutic process. Because the use of the camera and photographs were “safe” in the sense they allowed for a controlled distancing from the emotionally-charged material, Tom was able to engage in the therapy without feeling overwhelmed and too vulnerable.

The Last Session

When Tom arrived for our last session together I noticed his mouth was set straight and his look was determined. Tom began by looking through his folder of images, knowing he could choose which ones he wished to take with him and which would stay behind. He decided they all would stay behind. He then reached for the modeling clay and began to mold it. As he had done on other days, he made a flat

pancake, a ball and a long coil snake – one after the other. Unlike other days however, he took his clay coil and slowly and deliberately began to wind it into a vessel. He created a small container in the palm of his hand. Upon completion, Tom turned to me and asked me one of the first questions he had ever asked me, “Can I take this home, Sarah?” I nodded yes to which Tom replied by standing up. Although we were only 15 minutes into our session, he announced it was time for him to leave. Before his departure, he reached deep into his jeans pocket and pulled out a small object. Curious, I leaned forward. Tom opened his hand to show me a small silver cross. “This was my grandmother’s”, he said solemnly. With that Tom took the cross and gently placed it into his soft clay vessel. “That looks like a very safe place for such an important object,” I reflected quietly. Tom smiled and nodded and turned away from me to make his way back to class, leaving our sessions for the final time.

Conclusion

The case of Tom was filled with contrasting emotions, beauty, grief and hope. In Tom and his images, the devastating pain and confusion caused by the loss of his two primary caregivers were quite apparent to me. These losses most likely contributed to a diminished sense of security (Clements & Weisser, 2003) for Tom. This insecurity could be observed in Tom’s photographs and artworks and in Tom’s attachment to me, in my position as art therapist and in his attachments to the world around him. Through his artworks and art process Tom displayed a fear of attaching which conflicted with a desire to be cared for and make attachments. This quality of Tom’s attachment patterns may

have been established in Tom's early relationship with his mother. Peter Fonagy (1998) states that the attachment patterns developed in infancy have continuity into adulthood.

"Magical thinking" is a common phenomenon among bereaved children, especially when appropriate explanations about the death have not been provided (Goldman, 2001). Tom's image of the "Porcupine Fish" seemed to relate to Tom's sense that he was dangerous to others, perhaps based in the erroneous belief that he was in some way responsible for his mother's and grandmother's deaths. This possible belief may have impacted Tom's psychological and social well being, which are often affected among bereaved children (Downey et al., 1999).

Tom's ambiguity, his fragility yet resilience, resonated sharply in his photographs. Looking at the photographs taken by Tom (from his at-arm's-length self-portraits to his blurred images from the inside of his school bus) his images seemed to capture a certain quality. To me this quality is best described as a child's awkward search for self and quiet exploration of his place in the world. The camera provided Tom with a safe and containing tool through which this search could be conducted. The camera, in Tom's case, could be compared to a set of training wheels on a child's first bicycle, allowing for safe risk-taking at a pace which the child could set for him/herself.

The use of photography within the therapy with Tom was useful in eliciting Tom's story and providing him with a context in which he could creatively manipulate his own story on his own terms. The permanent nature of the photographs in combination with the shifting nature of the collage medium permitted for a healthy balance between a fundamentalist and a relativistic narrative (Ochs & Capps, 1996).

In my final session with Tom, he created a clay vessel in which he placed an object that seemed to have great significance to him. This clay vessel acted as a “holding” environment” (Babits, 2001) for Tom’s object. It can be hypothesized that because Tom was “held” by the art therapy, he was then able to internalize this process and to recreate it for himself.

As an art therapist intern, the privilege of working so closely with Tom brought me more questions than answers, but what incredible questions these were: questions on life and death, on innocence and growth and despair and hope. Tom’s images permitted me access to his world-view and provided me with a tool to receive his communications and, hopefully, provide him with an opportunity to safely begin to grieve his losses and begin to hope for an uncertain future.

IV. Final Statement

Photographs taken by a client within the parameters of a therapeutic relationship permit for a deeper level of empathetic understanding and communication between the client and the therapist, as the client is literally able to bring his/her outside life into the therapy room. When a child is given a camera, they become empowered by their role as photographer, as it is necessarily the photographer who is the observer and who has control over what is captured by the camera’s lens. For a child who is bereaving the loss of a parent, the camera can take on a whole new symbolic meaning of control, storytelling and connecting with a world that is most likely being experienced as quite unpredictable and frightening.

The creative arts therapies create a space for parentally bereaved children, who may not have the verbal means of relating their feelings, to express their emotions and inner conflicts in a safe and containing way. Through the use of the art materials, the child's experience can be better understood by the therapist, helping to create and deepen the therapeutic alliance, and encouraging the grieving process necessary for the child to regain a sense of security.

References

- Altschul, S. (1998). *Childhood bereavement and its aftermath*. Madison, CT: International Universities Press.
- Babits, M. (2001). Using therapeutic metaphor to provide a holding environment: The inner edge of possibility. *Clinical Social Work Journal*, 29 (1), 21-33.
- Baer, U. (2002). *Spectral evidence: The photography of trauma*. Cambridge, MA: MIT.
- Barthes, R. (1981) *Camera Lucida: Reflections on photography*. New York: Hill and Wang.
- Betensky, M.G. (1987). Phenomenology of therapeutic art expression and art therapy. In J.A. Rubin (Ed.), *Approaches to art therapy: Theory and technique*. (pp. 149-166). NY: Brunner/Mazel.
- Blynn, L. & Harrist, A. (1992). Combining native instant photography and photo-elicitation. *Visual Anthropology*, 4, 175-192.
- Bowlby, J. (1980). *Attachment and loss: Vol. 3. Loss, sadness and depression*. New York: Basic Books.
- Brandell, S. (1998, Spring/Summer). A time to grieve, a time to grow. *Healing Magazine*. Retrieved September 9, 2005, from <http://www.kidspace.org/pdf/grief.pdf>.
- Buck, J. (1966). *The house-tree-person technique: Revised manual*. Western Psychological Services.
- Burne, J. (1993). Mind games. *The British Journal of Photography*, 28, 10 –11.

- Chan, Y. (1994). Children and adolescent suicide: An overview. *Asian Journal of Counselling*, 3(1-2), 79–88.
- Clements, P. & Weisser, S. (2003). Cries form the morgue. *Journal of Child and Adolescent Psychiatric Nursing*, 16(4), 153-164.
- Corr, C. A., & Balk, D. E. (Eds.). (1996). *Handbook of adolescent death and bereavement*. New York: Springer.
- Creswell, J. W. (1994). *Research design: Quantitative & qualitative approaches*. Thousand Oaks, CA: Sage.
- DeCarava, R. (2001). *The sound I saw: Improvisation on a jazz theme*. New York: Phaidon.
- Downey, L., Wilson, R., Maughan, B., Allerton, M., Schofield, P., & Skuse, D. (1999). Psychological disturbance and service provision in parentally bereaved children: Prospective case-control study. *BMJ*, 319, 354 – 357.
- Eisenstadt, M. Haynal, A. Rentchnick, P., & de Senarclens, M. (1989). *Parental loss and Social documentary photography: The Japanese Canadian interment experience*. Unpublished undergraduate paper, York University, Toronto, Ontario.
- Finlay, L. (2002). Negotiating the swamp: The opportunity and challenge of reflexivity in research practice. *Qualitative Research*, 2(2), 209-230.
- Fonagy, P. (1998). An attachment theory approach to treatment of the difficult patient. *Bulletin of the Menninger Clinic*, 62(2), 147-169.
- Furman, E. (1986). On trauma: When is the death of a parent traumatic?

- Psychoanalytic Study of the Child*, 41, 191-208.
- Goldman, L. (2001). *Breaking the silence: A guide to help children with complicated grief, suicide, homicide, AIDS, violence, and abuse*. (3rd Ed.). New York: Brunner- Routledge.
- Hamilton, J. (1995). To see the Thing Itself: The influence of early object loss on the life and art of Edward Weston. *Journal of the American Academy of Psychoanalysis*, 23(4), 671-691.
- Harper, D. (2000). Reimaging visual methods: Galileo to Neuromancer. In N. Denzy & Y. Lincoln (Eds.). *Handbook of qualitative research* (2nd ed.), (pp. 717-732). Thousand Oaks, CA: Sage.
- Harris, M. (1996). *The loss that is forever: The lifelong impact of the early death of a mother or father*. New York: Plume.
- Harrison, B. (2002). Photographic visions and narrative inquiry. *Narrative Inquiry*, 12(1), 87-111.
- Heidegger, M. (1975/1994). The origin of the work of art. In S.D. Ross (Ed.). *Art and its significance: An anthology of aesthetic theory* (pp. 254-280). State University of New York.
- Hirsch, M. (Ed.). (1999). *The familial gaze*. London: Dartmouth College.
- Landgarten, H. (1993). *Magazine photo collage: A multicultural assessment and treatment technique*. New York: Brunner-Mazel.
- Lowton, K. & Higginson, I.J. (2003). Managing bereavement in the classroom: A conspiracy of silence? *Death Studies*, 27, 717-741.
-

- Mack, K. Y. (2001). Childhood family disruptions and adult well-being: the differential effects of divorce and parental death. *Death Studies*, 25, 419-443.
- Malchiodi, C. (1998). *Understanding children's drawings*. New York: Brunner Mazel.
- McNiff, S. (1989). *Art-based research*. London: Jessica Kingsley.
- Mitchell, S. & Black, M. (1995). *Freud and beyond: A history of modern psychoanalytic thought*. New York: Basic Books.
- Norman, W. (1991). Photography as a research tool. *Visual Anthropology*, 4, 193-216.
- Ogdon, D. P. (1984). *Psychodiagnostics and personality assessment: A handbook*. (2nd Ed.). Los Angeles: Western Psychological Services.
- Parens, H. (2001). An obstacle to the child's coping with object loss. In S. Akhtar (Ed.). *Three faces of mourning: Melancholia, manic defense and moving on*, (pp. 157-184). North Bergen, NJ: Book-Mart Press.
- Putnam, F. (1997). *Dissociation in children and adolescents: A developmental perspective*. New York: The Guilford Press.
- Saldinger, A., Cain, A., & Porterfield, K. (2003). Managing traumatic stress in children anticipating parental death. *Psychiatry*, 66(2), 168.
- Sontag, S. (1977). *On photography*. New York: Farrar, Straus & Giroux.
- Spence, J. (1995). *Cultural snipings: The art of transgression*. London: Routledge.
- Stranach-Buschel, B. (1990). Trauma, children, and art. *The American Journal of Art Therapy*, 27.

- Stuhlmiller, C. M. (1996). Narrative picturing: Ushering experiential recall. *Nursing Inquiry*, 3, 183-184.
- Sumi, G. (2005, February 17 – 23). Moving picture: Directors Zana Briski and Ross Kauffman use photography to get prostitutes' kids out of brothels. *Now*, p. 86.
- Wang, C. & Burris, M. A. (1994). Empowerment through photo novella: Portraits of participation. *Health and Educational Quarterly*, 21(2), 171-186.
- Wang, C., Ling, Y. & Ling, F. (1996). Photo voice as a tool for participatory evaluation: The community's view of process and impact. *The Journal of Contemporary Health*, 4, 47-49.
- Warden, W. (1996). *Children and grief: When a parent dies*. New York: The Guilford Press.
- Webb, N. (2002). *Helping bereaved children: A handbook for practitioners* (2nd ed.). New York: The Guilford Press.
- Weiser, J. (1993). *Phototherapy techniques: Exploring the secrets of personal snapshots and family albums*. San Francisco: Jossey-Bass.
- Wilson, L. (2001). Symbolism and art therapy. In J. Rubin (Ed.). *Approaches to art therapy: Theory and technique* (2nd ed.), (pp. 40-53). New York: Brunner-Mazel.
- Winnicott, D. W. (1960). Ego distortion in terms of true and false self. In *The maturational process and the facilitating environment*, (pp. 140-152). New York: International Universities Press.
- Zambelli, G. C., Clark, E. J., & Heegaard, M. (1989). Art therapy for bereaved children. In H. Wadeson, J. Durkin, & D. Perach (Eds.), *Advances in art therapy*. New York: John Wiley & Sons.

**APPENDIX A:
CONSENT FORM: PERMISSION TO USE ARTWORK FOR EDUCATIONAL PURPOSES**

Date: _____

Child's Name: _____

Parent/Guardian: _____

PLEASE CHECK OFF ONLY THE FOLLOWING TO WHICH YOU CONSENT:

- I consent for my child's artwork to be shown and discussed for the purpose of supervision. I understand that my child's identity will always be protected
- I consent for photographs to be taken of my child's artwork for educational purposes only (including research). I understand that child's identity will always be protected.
- I consent for my child to be audio taped for educational purposes only. I understand my child's identity will always be protected and that any audio tapes made will be erased after supervision is completed.
- I consent for my child to be video taped for educational purposes only. I understand that these videos will be viewed only in supervision for the sole purpose of supervising the art therapy intern. I also understand that all videos will be destroyed after supervision has been completed.
- In consent for photographs of my child's artwork to be reproduced for educational purposes. I understand that my child's identity will always be protected.

(I understand I may retract my consent at anytime)

Signature of parent/guardian:

X _____