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How the Expressive Therapies Continuum Informs Intermodal Transfers

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How the Expressive Therapies Continuum Informs Intermodal Transfers

Capstone Thesis

Lesley University

May 10, 2021

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Expressive Arts Therapy

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Abstract

Expressive arts therapy (ExAT) is a therapeutic approach that incorporates visual art, music, drama, and dance/movement into the counseling environment. An essential element in ExAT practice is the intermodal transfer, an intentional shift between arts modalities to enhance clients' understanding and realization. Currently, no theoretical guidelines for intermodal transfers exist in the field of ExAT. In search of a theoretical structure, the author of this Capstone Thesis proposed that the Expressive Therapies Continuum (ETC) informed intermodal transfers. Predominantly presented as an art therapy approach, the ETC originally intended to include all expressive therapies. Yet, there is minimal recent literature that directly connected the ETC with the therapeutic modalities of music, dance/movement, drama, and expressive arts. To further illustrate this relationship and suggest a potential framework for intermodal transfers, this literature review analyzed the ETC and linked it to each of the expressive therapies modalities through commonalities and neuroscience findings. The concepts and information gleaned through research confirmed and validated the ETC's ability to inform ExAT intermodal transfers.

Keywords: Expressive arts therapy, Expressive Therapies Continuum, intermodal transfers, art therapy, drama therapy, dance/movement therapy, music therapy

How the Expressive Therapies Continuum Informs Intermodal Transfers

Introduction

The roots of creativity trace back to ancient humans nearly 164,000-years ago (Morris-Kay, 2010). Linked with ancient Egyptian practices (Lesley University, n.d.), ancient healing and spiritual rituals (Brancatisano et al., 2020), and carried via forced migrations (Brathwaite, 2017), the vast interconnection between the arts and the human species is evident. It is imperative to note that many of the ideas, theories, and philosophies in the field of psychology and "popular conceptual models in Western education [were] built on the wisdom and sophistication of a First Nations society, which [were] then made completely invisible in the literature" (Safir, 2021, para. 6). The author of this Capstone Thesis recognizes the intelligence, insight, and creativity appropriated from those who have not been named and wishes to acknowledge their presence in this text.

Despite the history of interconnection, the current Western view of arts in psychotherapy separated and divided the arts modalities into specific categories: art therapy (AT), dance/movement therapy (D/MT), music therapy (MT), drama therapy (DT), and expressive arts therapy (ExAT). The psychological approach of ExAT incorporated visual art, dance and movement, music, drama, and other creative expressions into a supportive therapeutic environment to foster healing, realization, and growth (Rogers, 1993). In 1974, ExAT became a formal major at Lesley University (Lesley University, n.d.) and taught future clinicians what our ancestors knew, art heals.

The inclusion of arts modalities in therapy invited alternative processing opportunities and offered clients support through their creative experience. Creative therapeutic expression "use[s] all parts of our brain: painting provides a visual manifestation of the inner world; music allows one to listen to oneself and others; and drama and movement allow the acting out of or moving through an experience" (Gombert et al., 2017, p. 22). Whole-brain stimulation aided in preverbal memory processing, nonverbal understandings, shifts in habitual response patterns,

or novel approaches to repetitive behaviors (Chong, 2015; Davis et al., 2018; Perryman et al., 2019), and thus facilitated personal growth and understanding. Each creative therapeutic approach has its own attributes and nuances.

Art therapy used visual art media in the therapeutic environment as a mechanism of change (Hinz, 2019; Lusebrink, 2014), focused on somatosensory and visual processing to enhance personal understanding (Lusebrink, 2004). Gombert et al. (2017) suggested that AT allows clients to be "more aware of their own experience in the present moment... [to] understand, accept, and transform" (p. 20) through their interaction with the art medium used. Formal elements of visual art or low-skill visual creation bolstered the therapeutic process by offering an external expression of the internal states.

Medical and psychiatric practitioners have recognized music's therapeutic effects for hundreds of years. Branched into two practices, MT comprised either active music-making or passive music listening (Wheeler, 2015). It is known to "provide increased awareness...expression, and purposeful outer action" (Gombert et al., 2017, p. 23). Music creation or listening in therapy boosted mood and fostered interpersonal and intrapersonal connections (Chiu et al., 2015), to offer clients healing, processing, and realization.

Psychological processing in D/MT consisted of the connection of the mind and the body through movement and dance (Koch et al., 2019). Movement is considered the body's primary language in the field of D/MT (Halprin, 2003) and includes bodywork, authentic movement, yoga, formal dance, choreographed dance, and performance (Brown, 2008). Through dance and movement, people explored both logical and emotional intelligences (Brathwaite, 2017). Understanding gathered through D/MT's nonverbal and verbal processes supports clients' therapeutic development.

Drama Therapy used the healing aspects of drama in the therapeutic environment. Incorporating AT, MT, and D/MT occurred in DT (Wu et al., 2020). According to Gombert et al. (2017), DT offered the "means to revisit moments [and] move through and resolve inner

conflicts of blockages" (p. 23). Techniques of DT strengthened internal and external understanding (Frydman, 2016) through improvisation, roleplay, theater warm-up activities, projection, and imagination-based movement (Ram-Vlasov & Orkibi, 2021; Wu et al., 2020). Each of these exercises served clients in various ways to process life experiences.

Expressive arts therapy used creative modalities (e.g., drama, dance and movement, music, and visual art) to offer non-threatening access to emotions, memories, and past experiences (Perryman et al., 2019). Chui et al. (2015) wrote, "ExAT moves the individual into the emotional world while introducing playful and creative aspects into the therapeutic process" (p. 34), where the realization of new thoughts and changes in perspective change one's way of thinking. Perryman et al. (2019) "explained that creative arts therapies tap into several senses simultaneously, helping to connect with parts of self not readily available in traditional talk therapy, such as inner feelings and unconscious thoughts (Malchiodi, 2005)" (p. 83). Clients often recognized the arts' less complicated nature than verbal therapies (Chiu et al., 2015) since the emphasis fell on the act of creation as an essential part of the therapeutic process (Rogers, 1993). With the flexibility of ExAT, clients partake in the creative experience in whichever modality they feel drawn to.

The practice of shifting between two or more arts modalities in an ExAT session is an intermodal transfer. This transition between arts approaches encouraged changes in perceptions and lived experience, disruption of previously experienced destructive patterns with a focus on the present moment, clarification and understanding gleaned through the creative process, and the multimodal healing experience of imagination (Chiu et al., 2015; Davis et al., 2018; Ram-Vlasov & Orkibi, 2021). "Human imagination is inherently intermodal since we imagine, as well as dream or daydream, [in] not only visual images but also sounds and rhythms, movements, actions, and spoken and written words" (Ram-Vlasov & Orkibi, 2021, p. 3), as is ExAT. Similarly, the intermodal transfer of creative processes helped clients process conscious

and unconscious thoughts, feelings, emotions, and memories in the therapeutic environment (Ram-Vlasov & Obki, 2021; Rogers, 1993).

Intermodal transfers embodied flexibility of thought processes and imagination to make these inner experiences tangible for therapeutic processing and combined ideally with specific ExAT processes. Crystallization theory is where therapeutic understandings are interpreted through interaction with arts materials and inner consciousness to further self-reflection (Ram-Vlasov & Obki, 2021). Also linked, the decentering process, where the client is separated from the presenting problem through the arts and views the problem as something separated from the self, is a large part of intermodal transfers. Intermodal transfer benefits included outside-of-the-box or creative thinking experiences, changes in awareness and self-understanding, recognition of strengths, and identification of healing via the arts (Davis et al., 2018). The practice of intentionally transferring modalities offered the client broader understanding, self-knowledge, and opportunity for realization (Ram-Vlasov & Orkibi, 2021).

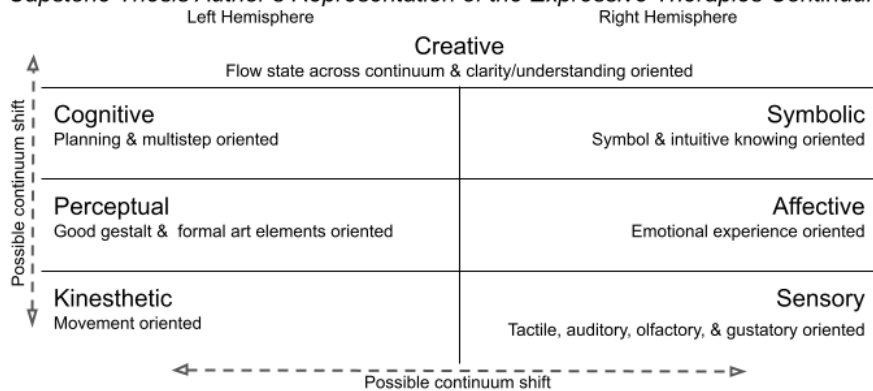
No theoretical guide for intermodal transfers was found during the research for this Capstone Thesis. Davis et al. (2018) explained, "intermodal expressive arts is a relatively new and expanding field, born from the idea that the arts belong together despite the long trend in separating specific art modalities from one another" (p. 69). Incorporating numerous artistic approaches into single sessions while facilitating an evidence-based and ethically sound therapeutic practice with clients is a challenging expectation. When no guidance is available, it becomes a daunting prospect for emerging expressive arts therapists entering the field to use intermodal transfers. Since a specific theoretical format for intermodal transfers is not readily available, the author of this Capstone Thesis proposed merging ExAT intermodal transfer concepts into a cohesive framework, such as the Expressive Therapies Continuum (ETC). This literature review set out to discover available research that suggests future ETC and ExAT intermodal transfer commonalities.

The ETC is a structured, hierarchical, and scientifically based approach "designed for, and of use to, the various fields of the art and expressive psychotherapies" (Kagin & Lusebrink, 1978, p. 171). The focus on visual art arose from the founders' training as art therapists and through subsequent literature (Graves-Alcorn, 2011; Kagin & Lusebrink, 1978). In this model, a client-specific selection of art directives dictated therapeutic interventions (Hinz, 2015, 2019; Lusebrink, 1991; Lusebrink et al., 2013). Yet "the ETC does not provide a 'cookbook' approach to assessment or therapy; each client is approached as an individual" (Hinz, 2009, p.193), and this individual approach correlated with the individualized nature of intermodal transfers.

Structured on the stages of human development, the ETC's lowest level is a duality of the Kinesthetic and Sensory components and comparative to early childhood. On the second level, the contrasting Perceptual and Affective components are related to middle childhood. The third level is where the Cognitive and Symbolic components balance one another and correlated with early adolescence. The ETC culminated with Creative level processing, similar to adolescent

Figure 1

Capstone Thesis Author's Representation of the Expressive Therapies Continuum



Note. This model demonstrates the ETC's structure and potential shifts between levels and components based on research by Hinz (2009, 2015, 2019) and Lusebrink (1978, 1991, 2013).

development (Hinz, 2015, 2019; Lusebrink, 1991). The ETC is a cumulative continuum where lower levels or components informed the upper ones (Hinz, 2015, 2019).

Functioning occurred through an inverse relationship between each level's components where, as one component became the focus, the attention on the parallel component decreased. For example, a client fully immersed in a Sensory experience may not be aware of the Kinesthetic action taking place at that time.

With the ETC, clinical intervention trial and error attempts were reduced by observing initial art media interactions and noticing client processing, skills, functions, approach, and difficulties (Hinz, 2015). Recognition of blocked or preferred components and levels indicated client functioning in the moment and necessary focused intervention and which arts media to use (Kagin & Lusebrink, 1978). Once determined, the client-focused therapeutic starting place enhanced self-understanding and recognition (Hinz, 2019). The intentional use of media bolstered the growth experience and enabled emotional responses and understanding, to encourage top-down, bottom-up, or horizontal shifts to other ETC levels and components (see Figure 1) (Kagin & Lusebrink, 1978; Hinz, 2019). The goal of the ETC is for the client to identify the feelings and emotions associated with Creative level experiences in therapy and connect these with daily life functioning beyond the therapeutic setting.

A determination of how the ETC can inform ExAT intermodal transfers is a matter of connecting the dots of ETC attributes, modality-based research, and neurological evidence. Based on the premise that interaction with art material mirrors information processing, i.e., thinking, feeling, reacting, and behaving (Hinz, 2015; Lusebrink, 2004), the inclusion of additional artistic modalities into the ETC is possible (Lusebrink, 1991). The examination of research in this Capstone Thesis deepened the multimodal arts connection and consequently generated an understanding of how the ETC informed intermodal transfers in ExAT.

Literature Review

Literature and research are essential elements in psychology to enable the study of people, their experiences, and interventions and how these interrelate. This literature review will summarize current research across the broad field of expressive arts therapies, including single-modality research, multimodal research, and intermodal transfer research. It will explain the history of the ETC, its current presentations, and the intermodal connections. From there, the literature review narrows to general ETC and individual expressive arts modalities neuroscience research. Finally, an examination of attributes and neuroscience data associated

with ETC levels and components in correlation with the expressive therapies modalities will follow.

General Expressive Arts Therapy Field Research

Expressive arts therapies research grounded the field in scientific data and informed clinicians of effective methods and new theories. Yet, research lacked exploration into the commonalities of the expressive arts, cross-modality guidance manuals (Carr et al., 2021), and investigations into specific populations (Yuan-jiao et al., 2021). It also demonstrated a scarcity of multimodal supervision in the field (Davis et al., 2020) and an absence of a unified method to arts psychotherapy in general (Lusebrink et al., 2013). Compared to non-arts-based psychology, few quality evidence-based studies exist, and many secondary research methods have few primary resources (Koch et al., 2019). Empirical evidence and case studies created the foundation of ExAT research available (Bat-Or, & Garti, 2019; Berrol, 2016; Brathwaite, 2017; Brown, 2008, Carr et al., 2021; Chiu et al., 2015; Davis et al., 2018; Duhovsk, & Millere, 2020; Gerber et al., 2018; Gombert et al., 2017; Hinz, 2015; Kim et al., 2018; Koch et al., 2019; Péntzes et al., 2018; Ram-Vlasov, & Orkibi, 2021; Wu et al., 2020; Yuan-jiao et al., 2021). Chiu et al. (2015) reflected on the scientific community's push for quantitative data collection and how, at times, quantitative data did not demonstrate the full impact of an intervention on a participant. Qualitative analysis, including observations and participant remarks, was necessary to assess the results thoroughly. Despite the existence of these limitations, past research continues to inform the future of the field.

A majority of expressive therapies research focused on a single-modality. Studies in D/MT included qualitative explorations into the overall impact of dance and movement on mental health and wellness (Koch et al., 2019) and the effect of African holistic dance in 21st-century education (Brathwaite, 2017); a quantitative analysis of yoga's positive impact on creativity (Bollimbala et al., 2020); and a research synopsis of 50 years of D/MT and neuroscience (Berrol, 2016). Research in the field of MT included a summation of rhythmic

entrainment data (Kim et al., 2018) and a neuroscience examination of MT's impact on neurological disorders (Brancatisano et al., 2020). Wu et al. (2020) offered DT to homeless children in China, and Frydman (2016) neurologically analyzed the DT technique of Role Theory. Chong (2015) and Lusebrink (2004, 2014) correlated visual art therapy with neurological findings and mirror neurons (Franklin, 2010), while other researchers examined the impact of art mediums on clients (Bat-Or & Garti, 2019) and formal art elements (Pénces et al., 2018) in the AT process. Two articles summarized and compared the therapeutic experiences of single-modality creative therapists, one through case studies (Gombert et al., 2017) and the other through the creation of a unified group therapy manual spanning arts modalities (Carr et al., 2021). The burgeoning connection of single-modality research sets the stage for future collaboration across specializations.

The intentional incorporation of multiple arts modalities in the therapeutic environment is exemplified in ExAT qualitative research in a quasi-experimental cognitive impairment group at an elder-care facility in China facilitated by Yuan-jiao et al. (2021) and through arts-based research via international clinician self-care workshops offered by Brown (2008). Additionally, Perryman et al. (2019) researched ExAT's effect on trauma through a neuroscience perspective. Incorporating more than one therapeutic arts modality offers clients various ways to process their experiences in a therapeutic setting.

Research into the deliberate shifting between arts modalities, or intermodal transfers, was shared by Chiu et al. (2015) in an open arts group inpatient psychiatric setting which offered clients the opportunity to create music, dance, paint, or watch the creative process of others. The sessions' open-door atmosphere provided high-sensitivity, low-skill media and invited flexibility, inclusion, and acceptance among the group because it allowed them to participate however the client deemed appropriate. Another study with doctoral students recorded year-long open studio course journals for intrinsic arts-based intermodal research, focused on the process of creation and changes in modality facilitated by Gerber et al. (2018). Davis et al.

(2018) shared a case study of intermodal transfers in graduate-level supervision facilitation focused on group connection. Ram-Vlasov and Orkibi (2021) conducted a study on intermodal transfers shifting from drawing to writing to DT acting techniques, known as Kinetic Family in Action. The research of intentionally shifting of arts modalities broadened the spectrum of clinical understanding and documents the possibilities.

As the field grows, so does the opportunity for more thorough research and multiple-modality inclusion. Despite the professional struggles with managing data collection methods, a lack of expressive arts unity, single-modality focus, and research gaps, each of the previously mentioned research studies strengthened the correlation between the ETC and the various art modalities. Further data is explicitly highlighted later in the literature review.

Expressive Therapies Continuum Research

Kagin and Lusebrink's (1978) article initially presented the ETC to the field of psychology as an expressive psychotherapies theory, explaining the developmental structure and hierarchical levels using visual art examples. In reviewing the ETC changes, Graves-Alcorn (2011) stated that the new text revisions made the ETC more accessible by simplifying the language and expanding the theory and its scientific underpinnings. The ETC is incorporated into counselor training programs across North America and Europe (Lusebrink et al., 2013). The ETC supported common language and theoretical foundations with typically trained psychological colleagues to encourage clinical discussions and care team collaboration (Hinz, 2015, 2019). It was also intended to unify the field of art therapy (Graves-Alcorn, 2011).

Initially proposed as a conceptual model for all expressive therapies, the ETC has lost its multimodality intentions between its inception and the current widespread visual art therapy focus (Kagin & Lusebrink, 1978; Lusebrink, 1991; Hinz, 2019). One of the founding ETC therapists, Lusebrink (1991), bolstered the premise of ETC multimodality inclusion with the intent to unite "the expressive therapies within the framework of a systems approach. Such a viewpoint incorporates and accommodates the multileveled character of the different expressive

therapies and provides a unifying basis for all the expressive therapies" (p. 395). The article incorporated music, drama, and dance/movement modalities into every level and component of the ETC. For example, like the ETC, the essential elements of D/MT included non-goal-directed experiences, nonverbal processing, exploration of aesthetic experiences, authentic expression through movement, enactments, rituals, spirituality, and creativity (Koch et al., 2019; Lusebrink, 1991). Also, DT experiences frequently aligned with the ETC levels progressing from pure sensory or movement-based to cognitive integration and reflection. Another link between the ETC and MT influenced both the inner and outer experience, impacted emotions, perceptive responses, cognitive structures, memory retrieval, and personal symbol creation.

In an elaboration of this concept, Duhovsk and Millere (2020) used MT in an ETC framework with Latvian oncology patients. Clients shared perceptions and experiences that spanned the continuum through qualitative data collection, frequently accessing multiple levels or components in one intervention. Although written 30 years ago, Lusebrink's (1991) revolutionary multimodal explanation is still mentioned in current ETC literature (Hinz, 2019), influenced an ECT case study shared by Hinz (2015), and is included in the explanation of ETC foundations from Lusebrink et al. (2013). Based on the literature reviewed for this thesis (Duhovsk & Millere, 2020; Hinz, 2009, 2015, 2019; Kagin & Lusebrink, 1978; Lusebrink, 1991), strong correlations can be drawn beyond visual art in the ETC to include dance/movement, music, and drama experiences.

Neuroscience

Neurological links between the ETC and the expressive arts modalities furthered the possibility of intermodal transfers being informed by the ETC. Lusebrink (2004), Lusebrink et al. (2013), and Hinz's (2015, 2019) research created a foundation of recent data on brain processes and the ETC. Other researchers added to the discussion with investigations into hemispherical activity, neuroplasticity, mirror neurons, and the neuroscience behind AT, MT,

D/MT, DT, and ExAT (Berrol, 2016; Brancatisano et al., 2020; Chong, 2015; Franklin, 2010; Gombert et al., 2017; Perryman et al., 2019; Wheeler, 2015; Yuan-jiao et al., 2021).

Expressive Therapies Continuum and Neuroscience

Initially, the neurological premise of the ETC integrated the left hemisphere (LH) and right hemisphere (RH) to support full functioning, as explained by Lusebrink (2004) in their analysis of neuroscience literature and neuroimaging methods in conjunction with AT.

Structurally divided into hemispherical processes (see Figure 1), the left side Kinesthetic, Perceptual, and Cognitive processes correlated with LH brain processes. On the right side, the Sensory, Affective, and Symbolic components manifested in RH brain processes (Hinz, 2009, 2019; Lusebrink 2004). The Creative Level encompassed both hemispheres, as illustrated by Lusebrink's (2004) assertion that an increase in cerebral activation enables one hemisphere's activity to spread through the other. Shifts through the ETC encouraged bilateral brain functioning and connection.

Logical, intentional, organized, sequential, linear, rational, and analytical, the LH processed explicit memory storage, labeling, and categorization, verbal information processing, serial movements, and spatial relationships (Hinz, 2015, 2019; Lusebrink, 2004; Perryman et al., 2019). The LH contained Broca's Area of speech production and Wernicke's Area of speech comprehension (Chong, 2015; Lusebrink, 2004; Perryman et al., 2019). Through research in clinical vignettes of early relational trauma, Chong (2015) suggested the LH claims dominance between two and three years of age when verbal communication dominates. The structured nature of the LH processing juxtaposed its counterpart on the RH.

The RH is recognized as the emotional regulatory hemisphere where facial expressions, emotional demonstrations, unconscious negative emotions, and traumatic memory storage occurred. The RH had quick, intuitive, conceptual, spiritual, symbolic, and associative thought processes ideal for coping and survival strategies and the storage of implicit and autobiographical memories (Chong, 2015; Hinz, 2015, 2019; Lusebrink, 2004; Perryman et al.,

2019). As the dominant shape encoder, it is known to be in charge of visual messages, including spatial, imagery, and implicit memory (Lusebrink, 2004; Perryman et al., 2019). The RH "integrat[ed] information across modalities more readily than the LH" (Lusebrink, 2004, p. 126). The RH governed the preverbal years of life and processes in the language of sensations, images, and impressions (Chong, 2015). Hemispheric connections laid the ETC's neurological foundation, and as the field of neuroscience has grown, so does the ETC's theory of the brain.

Neuroplasticity and Mirror Neurons

Hinz (2019) suggested that movement between the ETC levels encouraged neuroplasticity, the neural network's ability to change and reorganize throughout life. Lusebrink et al. (2013) investigated the ETC in conjunction with AT, using brain imagery and noted positive influences in neuroplasticity. Several scholars have documented associations between expressive arts therapies and neuroplasticity (Berrol, 2016; Brancatisano et al., 2020; Yuan-jiao et al., 2021). In ExAT work with older adults living with dementia or mild cognitive impairment, Yuan-jiao et al. (2021) determined the "integration of multiple sensory modalities [are] more likely than unimodal training [to] enhance neural plasticity in both sensory and association areas of the brain" (p. 129) and could mitigate neurological decline and provide positive psychosocial support. Similarly, nonverbal communication created new neural pathways, brain information tracks (Chong, 2015; Perryman et al., 2019), and understanding gleaned through nonverbal creative output shifts when processed verbally, creating new neural pathways (Lusebrink et al., 2013). The expressive arts modalities and the ETC created new neural pathways leading to neuroplasticity and shifts in brain processing.

Another essential element of expressive therapy modalities and neuroscience is mirror neurons, defined as neurons that activate when a person is experiencing an emotion or behavior and witnessing another's emotions or behaviors. This mirroring occurred in both animals and humans (Berrol, 2016; Brancatisano et al., 2020; Franklin, 2010; Gombert et al., 2017; Wheeler, 2015). Mirror neurons impacted creative processes and art-making across all modalities (Berrol,

2016; Brancatisano et al., 2020; Franklin, 2010; Lusebrink, 2014), including witnessing visual art creation (Franklin, 2010; Lusebrink, 2014), engaging in music creation, and experiencing group music-making (Brancatisano et al., 2020). These neurons impacted and organized group activities such as dance or movements (Franklin, 2010). Beyond the arts modalities, mirror neurons significantly impacted empathetic connection (Berrol, 2016; Franklin, 2010). As the study of neuroscience grows, so will the evidence-based connections between the creative arts therapies and the brain.

Neurology and Expressive Arts Modalities Overview

Art Therapy

Brain imaging research highlighted AT's brain-wide impact, including visual processing in the primary visual cortex, visual association cortex, and ventral stream and the ability to process emotions and memory through AT in the neocortex, thalamus, amygdala, hypothalamus, and limbic system (Lusebrink, 2004). Furthermore, AT processed memory in the cortical network, encompassing the posterior cortex, frontal cortex, basal ganglia, and hippocampus. New or reconstructed images triggered the sensorimotor cortices and the association cortices of "visual perception, memory, emotion, and motor control" (Lusebrink, 2014, p. 87). Art processed unconscious emotions through the RH, autonomic nervous system, amygdala, and hippocampus (Chong, 2015). The art-brain neurological connection fortified the clinical value of AT and its impact on human functioning.

Music Therapy

Brancatisano et al. (2020) speculated that music-making requires similar motor activities as visual art creation and therefore triggered a similar neurological response. Brain activation associated with MT is known to be extensive, "including cortical regions spanning temporal, frontal, parietal, occipital and motor cortices, as well as deeper mid- and hindbrain subcortical regions (e.g., basal ganglia) and the cerebellum" (Brancatisano et al., 2020, p. 603). Music memory occurred in the hippocampus, amygdala, and hypothalamus. The frontal cortex

stored music-evoked autobiographical memories. Emotions and music impacted the autonomic nervous system and the right ventral stream. Rhythm and melody work is associated with the basal ganglia, frontal cortex, cerebellum, supplementary motor area, premotor cortex, and multi association area of the parietal lobe. The premotor cortex is associated with mirror neuron activation. In Broca's Area, melodic intonations and singing triggered audio motor feedback loops differently than regular speech (Brancatisano et al., 2020; Wheeler, 2015).

Dance/Movement Therapy

Neuroscience research focused on D/MT included mirror neurons, body posture work, interpersonal processing, cognitive functioning, motor abilities, and quality of life through movement (Franklin, 2010; Koch et al., 2019). Berrol (2016) noted that D/MT brain functions need to be understood from a down-up perspective compared to the traditional verbal therapy top-down perspective. The information came from the body rather than the mind. Research indicated that D/MT stabilized responses to stress in the sympathetic nervous system (Frydman, 2016). Dance and rhythm impacted movement queuing through the premotor cortex, cerebellum, and supplementary motor cortex. Motor movements bolstered long-term memory processing in the hippocampus and the basal ganglia's management of executive movements and kinesthetic action (Brancatisano et al., 2020; Lusebrink, 2004).

Drama Therapy and Expressive Arts Therapy

The essential nature of both DT and ExAT incorporated the modalities of music, dance/movement, and art into the therapeutic processes. Thus, the neuroscience supporting MT, AT, and D/MT supported DT and ExAT processes, as well. Frydman (2016) explored the DT technique of Role Theory and purported activation of both brain hemispheres. In their investigation of international case studies, Gombert et al.(2017) noted that ExAT enabled the use of all parts of the brain. The creative centers are accessed through intermodal transfers (Davis et al., 2018). The multimodal nature of DT and ExAT linked the individual modalities

across the brain. Over the last 40 years, advances in brain imaging technology and neurology revealed research possibilities throughout the expressive arts therapies and the ETC.

Expressive Therapies Continuum Explained and Connected to Expressive Arts Therapies

Kinesthetic and Sensory Level

The first level of the ETC is the Kinesthetic and Sensory (K/S) level (see Figure 1), and Hinz (2015, 2019) explained that fine and gross motor movement parallel sensory exploration during this stage. Processes focused on feedback through nonverbal, sensory, rhythmic, and movement exploration, not the creative product. Lusebrink (1991) suggested that "rhythm is a common healing denominator for different expressive modalities on the K/S level" (p. 399), inviting both MT and D/MT approaches to be easily accessed via the K/S level. Additionally, non-verbal communication via music (Brancatisano et al., 2020), visual art (Carr et al., 2021), and dance/movement (Halprin, 2003) made implicit knowledge explicit. Non-goal-oriented expression, exploration, and play in ExAT and D/MT exemplified the attributes of the K/S level (Koch et al., 2019). The DT study by Wu et al. (2020) described multi-sensory movement-oriented drama interventions that expanded children's world perceptions, emotional understanding, and independence.

Neurologically, the K/S level is associated with processing preverbal memories within the limbic system and corpus callosum transcortical transmissions between the LH and RH (Hinz, 2019). Affiliation between rhythm and the central nervous system (Lusebrink, 1991) and rhythmic neural entrainment were crucial elements of MT (Brancatisano et al., 2020) and functioned on the K/S level. The K/S level created the ETC's foundation and easily incorporated multimodal creative experiences into the theory and practice.

Kinesthetic Component. Psychological healing on the Kinesthetic component is based on movement experiences with resistive arts media such as pencil, pen, hard clay, stone, or wood carving (Kagin & Lusebrink, 1978) with limited quantities, boundaries determined, and

no reflective distance between the creator and the material. Hinz (2019) listed potential Kinesthetic component actions included "pounding, pushing, scratching, stabbing, [and] smashing" (p. 44); these actions translated to other arts modalities, such as pounding drums or pushing oneself off the floor. The ETC stipulated that movement encouraged and emphasized learning; in addition, repeated movement is self-soothing, work with heavy objects is cathartic, and large muscle movements are relaxing (Hinz, 2019). Movement research determined yoga improved imagination and creativity (Bollimbala et al., 2020) and supported trauma processing (Perryman et al., 2019). Mirroring movements (Berrol, 2016; Halprin, 2003; Koch et al., 2019), the attunement of movements (Gerber et al., 2018), and rhythmic entrainment, i.e., synchronized rhythms (Kim et al., 2018) facilitated empathy and person to person connection.

Kinesthetic attributes are found in every modality. In AT, "movements lead to feeling, which would imbue the artwork with more meaning" (Hinz, 2019, p. 17). The release of tension facilitated healing and can be done via visual art (Hinz, 2015), music (Wheeler, 2015), or dance (Halprin, 2003). "Spontaneous movement and improvisation" (Lusebrink, 1991, p. 398) and authentic movement are known as Kinesthetic D/MT practices, and DT practices included DT games (Wu et al., 2020) and dramatic improvisation without planning (Lusebrink, 1991). Kinesthetic MT explored the physicality of musical instruments (Lusebrink, 1991), heartbeat rhythms, painting to music (Hinz, 2019), attunement to nature and self, musical entrainment (Gerber et al., 2018; Kim et al., 2018), musical improvisation (Brancatisano et al., 2020), the use of the body as instruments or forceful use of voice, (Duhovsk & Millere, 2020), and non-verbal music to process trauma (Perryman et al., 2019). Improvisation and rhythm functioned across modalities to exemplify Kinesthetic processing.

The LH-oriented Kinesthetic component cognitively processed information through the basal ganglia and primary motor cortex's movement control functions, whereas the hippocampus processed the stimulatory and reconstructive motor actions on memory. These occurred in conjunction with the visual-motor cortex and the primary visual cortex for visual art

creation (Hinz, 2015, 2019; Lusebrink, 2004, 2014; Lusebrink et al., 2013). The physical movement of creating a scribble activated the sensorimotor cortices; this, in turn, activated the association cortices when incorporating a scribble into a drawing (Lusebrink, 2014). In D/MT and MT practices, mirror neurons triggered the brain's motor system using the primary motor cortex, premotor cortex, and prefrontal motor cortex (Brancatisano et al., 2020; Lusebrink, 2004). The Kinesthetic goal achieved a state of relaxation and release/retention of energy, with the emergence of Perceptual component functioning (Hinz, 2015, 2019).

Sensory Component. On the right side of the ETC's first level and focused on the engagement of tactile, olfactory, auditory, and gustatory senses (Hinz, 2019), the Sensory component is where conscious or unconscious experience shifted from passive sensory noticing to active sensory awareness. Incorporation of the senses occurred across arts modalities. During sensory exploration, clients are frequently asked to close their eyes and explore the media with no reflective distance. This process supported attention to internal experiences, emotional regulation, disconnection from the environment, memory access, and internal and external regulation. Finger paint, traditionally a tactile experience, can be an olfactory immersion with shaving cream or a gustatory encounter with whipped cream (Hinz, 2019) and can also be associated with bodywork (Perryman et al., 2019). The beginning process of D/MT's authentic movement is associated with the Sensory component due to the intensity of the inner noticing prior to movement (Lusebrink, 1991).

The Sensory process of noticing environmental stimuli or internal rhythms is frequently associated with mindfulness practices (Gerber et al., 2018; Hinz, 2019). Auditory investigations included exploring instruments, listening to pure sounds or music without the connection of mood or meaning, and receptive music visualization (Duhovsk & Millere, 2020; Lusebrink, 1991). Additionally, an examination of the ocean drum (Gerber et al., 2018), sense response to sounds, and vocal production without words (Duhovsk & Millere, 2020) were incorporated in MT. Other examples included DT's sensory integration processing (Lusebrink, 1991; Wu et al.,

2020) and ExAT's multimodal practice of intentional painting with color and line to music (Hinz, 2019) exemplified Sensory arts approaches.

Single-arts modality Sensory processing occurred in the primary sensory cortices and unimodal association cortices, whereas cross-arts modality processing occurred in the parietal lobe (Hinz, 2019). Tactile experiences stimulated the basal ganglia due to emotional response from art materials. The spine/dorsal column, the medulla, the thalamus, and the somatosensory cortex processed body-wide sensory information and sent this information to the rest of the brain (Lusebrink, 2004). The brain's sensory processing neural pathways are known to be the same as mental imagery pathways (Lusebrink, 2004, 2014). Increased coping and self-soothing skills, sensory integration, and sensory tolerance comprise the Sensory component's goals, with emergent features in the Affective component (Hinz, 2015, 2019).

Perceptual and Affective Level

The second level of the ETC is the Perceptual and Affective (P/A) level (see Figure 1). Located at the middle of the ETC, the P/A level supported the client's understanding bilaterally, linked creative work on other levels (Hinz, 2019), and is "a developmental sequel to the actions and sensations of the K/S level" (Kagin & Lusebrink, 1978, p.173). Developmentally, this level corresponded with childhood from four to twelve years old (Duhovsk & Millere, 2020; Hinz, 2019). According to Hinz (2015, 2019), the contrast of the Perceptual component's formal art elements with the Affective component's emotional awareness created the basis for exploration. The Perceptual aspect opposed overly emotional states with order and structure. In contrast, the Affective component nullified the Perceptual rigid nature with an immersion in emotions and feelings. Hinz (2019) indicated the give and take between the Affective and Perceptual components enabled recognition and containment of emotions. With the introduction of art utensils, reflective distance is greater here than the K/S level; the separation offered more distance for reflection and understanding (Hinz, 2019).

Perceptual Component. The LH-oriented Perceptual component is known to be the emotional container of the ETC. When emotions become overwhelming, the structured nature of the Perceptual component held the experience through clear and organized visual representation with good gestalts and demonstrated "regularity, symmetry, and simplicity" (Hinz, 2019, p. 74) and formal art elements (Hinz, 2015, 2019; Lusebrink, 2004; Pénczes et al., 2018). Hinz (2019) specified that each client's Perceptual systems vary based on their neurological makeup and cultural influences. Order is made out of chaos through balance and harmony in visual art and indicated order and organization in life. However, an emotional release must coincide with this organization. Art materials in the Perceptual component consisted of resistive media to create pattern, form, and line, with a limited color palette.

Perceptual arts modalities demonstrated structure and containment. D/MT incorporated reenactment movements (Brown, 2008), posture exploration (Halprin, 2003), formal or prompted movement, and planned emotional expression (Lusebrink, 1991). The aesthetics of D/MT emphasized structure and boundaries through distinct movements, with a focus on form, space, and qualities of movement (Koch et al., 2019; Lusebrink, 1991). Perceptual MT activity is demonstrated through rhythm and timing, good musical gestalts (Lusebrink, 1991), work with motifs and melodies, or a distinction between the soloist and the background music (Duhovsk & Millere, 2020). Dramatic preplanned roleplay activities (Lusebrink, 1991) and physical or spatial awareness DT techniques (Wu et al., 2020) also fulfilled Perceptual therapeutic attributes. Triggered by witnessing good gestalts, the visual association cortex gathered and sorted visual stimuli related to the Perceptual component. Brain imaging indicated neurons fired on the ventral stream when viewing form and color and on the dorsal stream when viewing size, distance, and orientation (Lusebrink, 2004; Lusebrink et al., 2013). The limbic system is engaged in musical processing on this level (Lusebrink, 1991). Internalized understandings, perspective-taking, and lowered stress are the Perceptual component's goals, with the Cognitive component as the emergent function (Hinz, 2015, 2019).

Affective Component. The Perceptual component's opposite is the Affective component (Hinz, 2009, 2015, 2019; Lusebrink 1991, 2004). Achieved through an external expression of emotion in visual art, the Affective component reduced stress, anxiety, depression, and enhanced mood to allow new understandings (Hinz, 2019). The creative experience depicted emotion outside of the body for processing (Hinz, 2009, 2019), "thus making it accessible for conscious observation" (Lusebrink, 2004, p. 130). This raw emotional purge materialized through low complexity, low structure artistic creation with fluid media like clay or watercolors. Vivid colors and color theory helped identify emotions and mood states to discover their psychological necessity (Hinz, 2015, 2019). When engaged in Affective expression, there is no reflective distance between the creator, the emotional experience, and the media.

Emotional cleansing occurred through all arts modalities. "Music sounds to us the way emotions feel to us" (Wheeler, 2015, p. 1) and promoted emotional understanding (Davis et al., 2018). Suggested Affective MT processes included drawing or painting to music (Hinz, 2019), the use of receptive music to capture, identify, and understand moods (Brancatisano et al., 2020; Hinz, 2019), the use of voice as an instrument (Duhovsk & Millere, 2020), and entrained rhythm (Kim et al., 2018). Musical exploration can be a form of guiltless emotional expressions (Lusebrink, 1991) and increased efficacy (Duhovsk & Millere, 2020).

The Affective component and D/MT are linked via non-verbal phenomenology (Koch et al., 2019), movement-oriented dynamic expression exploration (Lusebrink, 1991), exaggerated posture enacting emotional extremes, and the practice of Expressionistic Performance (Franklin, 2010; Halprin, 2003). Many Affective DT techniques aided emotional understanding, such as repetitive scene work, the sculpting of others to externalize emotions, and dramatic doubling (Johnson & Emunah, 2021), reliving or acting out the past for emotional understanding, and improvisation of emotional memory focused on present moment reconstruction (Lusebrink, 1991). Inexorably linked, arts processes and emotional expression bolstered psychological growth.

Brain imaging indicated a physiological response to emotions that activated vast brain areas (Lusebrink, 2004), including the autonomic nervous system functions (Hinz, 2019), which is correlated with music's effect on emotions (Brancatisano et al., 2020). Chong (2015) affirmed that "emotions use the body as their theatre" (p. 121). Neurological research demonstrated the amygdala is the "smoke detector" of the brain (Perryman et al., 2019), determined how to react to external and internal stimuli (Lusebrink, 2004; Lusebrink et al., 2013). During the Affective component, the thalamus processed incoming sensory information, the limbic system stored memory, and the orbitofrontal cortex held traumatic memories (Lusebrink, 2004). The brain's RH is associated with Affective emotional recognition and facial expression deciphering (Hinz, 2019, Lusebrink, 2004). The Affective component's goal included "expressing and soothing [of] emotions appropriately through art-making and other creative endeavors" (Hinz, 2015, p. 45).

Cognitive/Symbolic Level

The Cognitive and Symbolic (C/Sy) level, the third ETC level, diverged from the previous levels of the ETC due to the inclusion of verbal and linguistic processing, past and future time exploration (Hinz, 2019; Kagin & Lusebrink, 1978; Lusebrink, 1991), the introduction of abstract thought (Kagin & Lusebrink, 1978), and anticipatory discovery through the arts (Hinz, 2015). Work on the C/Sy level included complex thought processes and planning (Duhovsk & Millere, 2020; Hinz, 2019). Similarly, D/MT and ExAT explored the intentional use of dialectical rupture and resolution (Gerber et al., 2018) and the enactive transitional space where the inner experience and outer reality entwine (Koch et al., 2019). The linear processes of the Cognitive component juxtaposed the Symbolic component's imaginative processes and concluded the polar levels of the ETC (see Figure 1) (Hinz, 2019).

The C/Sy level began the ETC's association with Large-Scale Brain Networks (Hinz, 2019). Lusebrink (2004) identified the neurological components as the parietal cortex, the multimodal area of working memory, the frontal cortex, and the prefrontal cortices, which processed executive functions. Broca's area of speech production and Wernicke's area of

comprehension activation appeared on the C/Sy level using the spoken word and written language in creative output (Lusebrink, 2004), including singing, Audiomotor Feedback Loops, and Melodic Intonation Theory (Brancatisano et al., 2020).

Cognitive Component. Hinz (2015, 2019) described the Cognitive component as an area where information is processed analytically and sequentially outside of the personal experience in a complex or structured manner. The LH-oriented component accessed executive functioning abilities, problem-solving skills, delayed gratification, cause and effect understanding, planning and decision-making, abstract concept formation, event sequencing, and cognitive restructuring of previously held knowledge and beliefs. The acknowledged use of sarcasm, humor, or irony in the Cognitive component is relatively common (Hinz, 2019). Tangible creative products enhanced client understanding (Bat-Or & Garti, 2019; Hinz, 2019).

Hinz (2019) explained that Cognitive visual art media included resistive materials and those with the most significant reflective distance. Core Cognitive processes included planning and executing multi-step creative endeavors such as labeling concrete images, drawing three-panel cartoons, and collaging work. Predictive drawing, observational drawing, imaginative drawing, lifeline creation, abstract representations, cognitive maps, storytelling, and verbal self-instruction translated into other modalities such as DT scene creation, MT songwriting, and D/MT lifeline movements. Lusebrink (1991) suggested Cognitive interventions of D/MT included interactional dance, specific movement sequences, and externally-oriented action. Movement as communication (Lusebrink, 1991), embodied storytelling (Halprin, 2003), and the impact of body movements in Hatha yoga (Bollimbala et al., 2020) also occurred here.

Cognitive component MT activities consisted of planned and structured music creation with logical and sequential processing, musical coordination with others, analytical reasoning, concentration on the process (Duhovsk, & Millere, 2020; Lusebrink, 1991), and increased attention span (Brancatisano et al., 2020). Here, DT experiences included preplanned techniques followed by discussion, the technique of separating thought from feeling, and the

practice of over distancing (Lusebrink, 1991). Other DT processes included thinking through Educational Drama scenes, role play of social scenes, and role reversal for empathy-building (Lusebrink, 1991; Frydman, 2016; Johnson & Emunah, 2021; Wu et al., 2020). The Cognitive component inclusion of linguistics introduced the modality of therapeutic writing and poetry (Hinz, 2019); examples included lyric writing (Duhovsk & Millere, 2020; Gerber et al., 2018), writing dream narratives (Hinz, 2019), story and poetry writing, therapeutic writing homework, and journaling (Perryman et al., 2019). Creative art processes connected across modalities on the Cognitive component and included language-based processing.

The Cognitive component correlated with the LH, complex thinking, and top-down processing, i.e., signals originated from thoughts rather than the body. These influenced the prefrontal cortex and the orbitofrontal cortex, whose functions included working memory and multimodal parietal cortex's inhibition and attention neurons (Hinz, 2019; Lusebrink et al., 2013). Moreover, it created a connection with the dorsomedial prefrontal cortex and the anterior cingulate cortex, which linked the limbic system to the prefrontal cortex, therefore linked emotions to cognitive function (Lusebrink et al., 2013). Functioning along with the same neurological receptors, the Central Executive Network, part of Large-Scale Brain Networks, managed working memory information systems, rule-based analytics, and objective-based culpability (Hinz, 2019). Cognitive component's goals included increased creative problem-solving abilities, decision-making skills, delayed gratification, and coherent storyline development. Emergent functions consisted of the ability to generalize experiences across understandings, throughout time, and between the real and the abstract (Hinz, 2015, 2019).

Symbolic Component. The Symbolic component embodied the external processing of thoughts, feelings, and events unique to each client through the unity of self-discovered parts through intuitive or idiosyncratic thought processes with personal/universal meanings, embracement of the shadow-self, multi-dimensional symbolism, belief systems of spirituality, religious beliefs, mythology, fairy tales, folk tales, and metaphor (Hinz, 2015, 2019; Kagin &

Lusebrink, 1978). Kagin and Lusebrink (1978) highlighted, "emotionally charged internal structure symbols have to be externalized before they can be resolved on internal terms" (p. 176). Symbolic work encouraged resistance to the easy answers when searching for personal meaning and finding acceptance of the whole self without denying parts. The symbolic level visual art included quantity determined low complexity and low structure materials such as mask making, self-portraiture, clay symbols, or personal shields (Hinz, 2015, 2019).

Perryman et al. (2019) emphasized that Symbolic type artistic creations "become a psychological mechanism for change" (p. 83). Music Therapy practices encouraged symbolic elements, especially metaphor, symbolism, and intuitive creation in the form of free improvisation or receptive listening (Duhovsk, & Millere, 2020; Lusebrink, 1991). The autobiographical nature of music is emphasized in the personal identification experienced through lyric writing, music-making, or listening (Duhovsk, & Millere, 2020), meaningful lyrics and visualizations, or induction of shamanic trance experiences (Brancatisano et al., 2020). An MT exploration of the unconscious lead to energy release (Lusebrink, 1991).

The nature of D/MT experiences was symbolic and communicated preverbal sensations and imagination via nonverbal metaphors (Brown, 2008; Kosh et al., 2019; Lusebrink, 1991). The ability to freely dance encapsulated myth, ritual, and spiritual experiences and fostered metaphorical connections (Halprin, 2003). The psychological technique of free association correlated with improvisational dance (Lusebrink, 1991); other correlations included introspection, focus, meditative techniques (Koch et al., 2019), and frequently symbols flowed through physical relaxation (Hinz, 2019; Kagin & Lusebrink, 1978).

Symbolic DT techniques encompassed projected beliefs on inanimate objects, intentional environmental awareness and interaction (Hinz, 2019), imaginal role enactment, and symbolic ritual expression from a predetermined process (Lusebrink, 1991). Wu et al. (2020) researched the use of projective play with young children and found adaptive coping skills strengthened. Other DT techniques included Role Theory to create life metaphors and expanded

view of self through the Spiritual Transformational Story (Johnson & Emunah, 2021). Work on the Symbolic component also incorporated sand tray scene creation (Perryman et al., 2019), imaginal journeys (Gerber et al., 2018), dream work, guided daydreams, and dream amplification (Hinz, 2019), and the inverse relationship of songs and dreams (Lusebrink, 1991). This component's linguistic aspects included creating poetry, folklore, myth, and metaphorical storytelling (Hinz, 2019). Intermodally, the process of visually representing an object followed by writing the object's story is a way to gain further Symbolic understanding. Creative exploration, intuitive meaning-making, and abstract concepts lead to Symbolic understanding (Hinz, 2015, 2019).

The RH-associated Symbolic component's neurological functioning comprised the orbitofrontal cortex's cognitive decision-making and autobiographical consciousness (Lusebrink et al., 2013). Lusebrink (2004) explained the Symbolic component activates primary sensory cortices to process memories and symbols according to their visual elements. Other brain components included the limbic system, the decision-making medial prefrontal cortex, the fact and events memory storage medial temporal lobe, and the angular gyrus linked surrounding brain regions. Hinz (2019) correlated the Symbolic component with the Large-Scale Brain Network Default Mode Network, where the brain functions when not otherwise actively engaged. The brain's self-regulator monitored, assessed, and judged conscious and unconscious thought processes, and included internal speech, autobiographical thought and memory, and episodic memory. The Default Mode Network formed daydreams and symbol formation, supported cognitive neural processing and creative thought. Symbolic goals included recognition of meaning and functioning with ambiguity, and the emergent feature accepted the disowned shadow-self and tolerated discomfort (Hinz, 2015, 2019).

Creative Level

When clients have the ability to shift between or function on multiple levels and components, they have reached the ETC's pinnacle, the Creative level (see Figure 1) (Hinz, 2015,

2019, Lusebrink 1990, 2004). The Creative level's key elements embodied enthusiasm and joy in the act of creation, connection with the arts materials or modality during expression, and incorporated the outer reality with inner experience (Hinz, 2019; Lusebrink, 1991, 2004). The Creative level is where the ETC functions pulled together to ignite a flow state where "ah-ha" s of discovery or "ah" s of perfection arose, time altered, goals shifted, problems got solved, and feelings of challenge and mastery connected. Work on the Creative level occurred across the ETC spectrum or in one level or component. The emergence of the true self and the extinction of the false self-epitomized therapy's positive effects and translated into daily life (Hinz, 2015, 2019).

Creative level experiences also arose through the Creative Transition Area of the ETC. Each level's polarities functioned in complementary unison and bolstered optimal expressive functioning. For example, the K/S level integrated sensory awareness through movement. A balance of emotion within the formal elements of artistic creation exemplified the P/A level and the C/Sy level's spontaneous self-discovery harmonized with metaphorical exploration. Creative processing encouraged self-understanding in conjunction with functioning (Hinz, 2019).

Creative level understanding gleaned through the artistic process can be accomplished through work with multiple media or one type of media within a single level or component or across the hierarchy. Hinz (2019) explained that therapists do not need to change media to shift ETC levels. For example, clay work was initially a K/S level experience. The use of formal clay techniques included structure and containment linked with the P/A level. Clay formed into symbolic objects or used as a storytelling device is C/Sy level work. Clay also fostered Creative experiences, and this exemplified work across all levels with one media.

Singular arts experiences with multiple levels included client artistic work interpretation, which accessed the Kinesthetic, Sensory, and Affective levels through image exploration (Lusebrink, 2014). Duhovsk and Millere's (2020) study incorporated MT with the ETC through semi-structured group musical improvisation, and client response indicated a "magical and life-affirming" (p. 40) experience across all levels and components. The clients also

distinguished receptive MT with visualization as a multilevel experience and linked Sensory, Affective, and Symbolic components.

Many D/MT approaches boosted creativity, including yoga (Bollimbala et al., 2020), martial arts, and walking (Hinz, 2019). Presentation of the creative endeavor through theatrical performance (Brown, 2008; Wu et al., 2020) and tangible art products (Bat-Or & Garti, 2019; Perryman et al., 2019) offered moments of crystallization for clients who participated in workshops and expressive arts studies. Intermodal arts expression offered novel cognitive experiences (Carr et al., 2021), raised mood (Chiu et al., 2015), and enhanced understanding (Hinz, 2019). Lusebrink (1991) stressed, "the acknowledgment of the creative act is an important responsibility of the expressive therapist" (p. 402) for client understanding.

The Salience Network of the Large-Scale Brain Network and the Creative level are directly correlated. The Salience Network harmonized the functions of the Default Mode Network and the Central Executive Network. The brain's switchboard, the Salience Network, determined and directed internal and external stimuli, autonomic nervous system input, and emotional information. Neurologically, LH and RH brain activity collaborated in Creative level processing. Age and creativity correlated through life, most emphasized at each end of the life spectrum. The intentional inclusion of expressive arts interventions and intermodal transfers into the ETC buoyed cognitive and therapeutic processing across the lifespan (Hinz, 2019).

Discussion

The current western cultural perspective has divided therapeutic creative arts modalities. Yet, neurologically, physically, and imaginatively intertwined, the expressive arts offered the opportunity to reprocess, change internal narratives, discover new understandings (Chiu et al., 2015), and facilitated the expression of what cannot yet be described in words (Davis et al., 2018). Core elements of ExAT and the ETC individualized therapeutic work developmentally, emotionally, and creatively for each client and informed intermodal transfers. Evidence suggested intermodal transfer expands client understanding, processing, and authenticity (Chui

et al., 2015; Davis et al., 2018; Ram-Vlasov & Orkibi, 2021). Presently, there is no direct clinical guide for the facilitation of intermodal transfers. It is left to the therapists' discretion to determine each intermodal transfer's direction, modality, and timing. This practice necessitated using guesswork in the therapeutic process, which is not conducive for clinical consistency or ethical practice. Connecting expressive arts modalities with the ethically sound, hierarchical, developmentally focused, client-oriented ETC offered a reliable therapeutic framework for intermodal transfers.

The ETC's framework brought creative expression to therapeutic settings. Although geared toward visual art expression, the ETC's core principles and structure translated well into all the expressive arts modalities. Lusebrink (1991) highlighted this connection, "The concept of common levels of expression contributes to the understanding of the application of different expressive modalities of the arts therapies to a common goal for the benefit of the clients" (p. 402). The inclusion of MT, DT, D/MT, and ExAT across the continuum's hierarchical structure ethically guided intermodal transfers. The ETC's characteristic of shifting between all levels and components throughout the continuum correlated with intermodal transfers' versatility, adaptability, and individualized nature. Additionally, the ETC governed intermodal transfers to support clients' self-understanding journey.

Current expressive therapies research is primarily single-modality focused, with little multimodal research conducted (Carr et al., 2021) and even fewer intermodal transfers studies published (Davis et al., 2018; Ram-Vlasov & Orkibi, 2021). More research including multiple creative methods and intermodal transfers would expand the expressive arts therapies knowledge base and support future work. Further research is still needed to confirm the connection between the ETC, ExAT, and the facilitation of intermodal transfers. Data collected could eventually create an illustrated multimodal manual to illuminate ExAT's intermodal transfers union to the ETC and support future clinical work in the field of expressive therapies.

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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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