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Meta reflection: A personal exploration into reflective artmaking and its changes over time.

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This case study presents two samples of reflective art-making from two different points in my life as an emerging art therapist working in Melbourne, Australia. The first piece of reflective work was created during the final year of my art therapy master's program and clinical placement in an inpatient mental health unit for adults. The second collection of reflective work was created during my second year of work in a private mental health inpatient facility, running art therapy groups for adults.

These two works will be held up to the light and examined side by side to explore how the function of my reflective art-making evolved alongside my inner changes as I moved from student to practitioner. My analysis of these two periods was guided by the following questions, what role as reflective art-making served? how has this changed over the years? and what insights can I glean from these changes about my inner world as I navigated this change?

Several themes arose as I reflected on these two periods of artmaking. Firstly, I saw a shift in the way of working and function of artmaking, as a student my work was cognitive, and symbolic and served the function of developing and applying knowledge and communicating ideas. As an emerging professional, I noticed my way of working was more implicit and embodied and served the function of processing emotion and calibrating intuition.

The milieu in which the first sample of reflective artmaking was made was layered and feels important to discuss alongside the image. It was early to mid-2020 and the final year of my master's course had transitioned to online due to Melbourne's Covid-19 Lockdown measures, luckily, my clinical placement in a private inpatient mental health facility had been allowed to continue. My role as an art therapy trainee was to run an hour-long drop-in group as part of the wider therapy

program available to patients, the client base was diverse in age, experience, and diagnosis.

This work described below was created in an online group supervision session, the directive, inspired by the “Community of selves” (Konopka et al, 2017) invited me to create images or sculptures of the various parts of self, relevant to my emerging identity as an art therapist and relationships with clients, to give voice to these selves and make space for a dialogue between them. At the time of this supervision session, I was in my early experiences with facilitating groups and issues relating to my therapist identity, self and patterns of relating were at the forefront of my mind. Regarding the process, working online forced me to look closely for objects in my environment, my community of selves took the form of a collection of sculptures, formed loosely with found objects including, wire, paper scraps, human hair, foil, tissues, pegs, pens, and bottle caps. The process of gathering and engineering tangible materials felt natural, and the process flowed without resistance.

Five selves emerged to form my community of selves in the context of my emerging art therapist identity. As seen in figure 1.a, the “Authentic self”, is a self that values authentic interpersonal connection, this sculpture is formed from wire wrapped tightly around paper and plastic with a piece of hair protruding from the middle and represents my experience navigating the newness of the therapeutic relationship and the struggle in finding authenticity within it. The “Therapist self” as seen in Figure 1.b, is a manifestation of education and learning, it is firm, and the sculpture is encased in shiny metal that protects but also constricts. The ‘Therapist Self’ often thinks in absolutes and is punitive to other selves for mistakes and incongruence. In Figure 1.c, the “Avoidant self” is a collection of objects held within

thick plastic that represents the need to avoid “getting into trouble” and the shame that stems from this. The ‘Avoidant self’ objects to the boundaries, challenging and containing needed in the role of a therapist.

In figure 1.d, the “Pleasing self” represented the need for approval and validation from patients and peers and protects the vulnerability that lies behind this need. As seen in figure 1.d the “Pleasing Self” is represented by a clothes peg holding objects at both ends, in a manner that feels fragile and unsustainable and subverts the realistic function of a peg, this highlighted for me the incompatibility of my need for validation and need to please within this new therapeutic identity. The final self is labelled the “Retreating self” as seen in figure 1.e and represents the discomfort and nervous system dysregulation I felt being a new trainee running groups, this self advocates for safety, and their voice urged me to escape when things became overwhelming, and at times lead to me retreating internally and feeling detached and blunted in moments of high stress. The “Retreating self” as seen in Figure 1.e is made from pen lids, wrapped tightly in a tissue held firmly by a peg, embodying for me the feeling of nervous system regulation and safety.



Figure 1.a Authentic Self



Figure 1b The Therapist Self

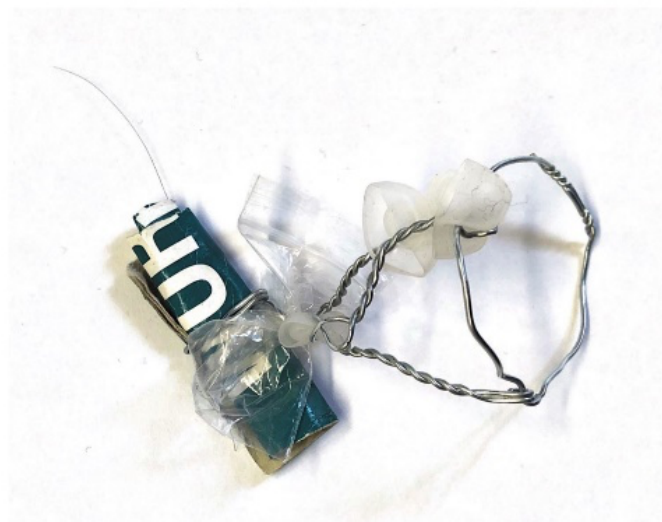


Figure 1.c The Avoidant Self



Figure 1.d The Pleasing Self



Figure 1.e The Retreating Self

Overall, the community of selves inhabited childlike voices objecting to the changes in my inner status quo that were needed to work within the therapeutic environment. This process gave voice to the inner disruption I felt as I explored what it meant to be an authentic integrated art therapist. This image captures my approach to reflective art-making at the time. My way of working was often measured and contained; the images made at this time were often cognitive and diagrammatic in the sense that their function was to consolidate information and communicate thoughts and ideas to myself and others. This style of reflective practice gives some insight into my mind at the time as a student, which was highly self-monitored and swimming with information that needed to be organised and expressed in an integrated way.

Now to move through time to 2023, I have completed my third year working within a different hospital in an inpatient mental health unit, working as an art therapist and general group facilitator with a diverse range of adults. As my experience grew my foundational training and knowledge became implicit and my art-making evolved toward a more intuitive and embodied place. The way of working was often laden with emotion and expression and the function of the art process became the processing of emotions and developing the intuition of an art therapist.

During the years since graduation, I have taken on professional supervision and Personal Jungian analysis as support in my development as an art therapist. A focus of this work became the processing of raw emotions and intuitive reactions that arose from my work in groups with clients. This processing work aimed to separate my responses from the emotions and moods of the clients and to identify transference and countertransference within those emotions. Most importantly, the work involved differentiating useful intuition and outdated assumptions and patterns

of relating, with the aim of calibrating and eventually trusting my instincts as a therapist. In Parallel my reflective art practice becomes embodied, primarily dynamic kinaesthetic work such as heavy-handed scribble drawings, intuitive collage and clay work. The function of this artmaking was the expression of emotion for later processing. The process of clay, beginning with raw natural material, moulded by hand, fired, glazed and fired again, is mirrored by the inner processing of unconscious raw material into refined and polished pieces of understanding for conscious awareness. An example of a ceramic piece can be seen in Figure 2, and a scribble drawing can be seen in Figure 3.



Figure 2 Ceramic pot



Figure 3 Scribble- Drawing and collage

The intention with this reflection has been to share my relationship with reflective art making told through the lens of a personal case study of a meaningful and period of change.

References

Konopka, A., Neimeyer, R. A., & Jacobs-Lentz, J. (2017). Composing the Self: Toward the Dialogical Reconstruction of Self-Identity. *Journal of Constructivist Psychology, 31*(3), 308–320. <https://doi.org/10.1080/10720537.2017.1350609>

Contact Details and Bio

Miles Hakim Temple is an Art Therapist based in Naarm (Melbourne), who received a Bachelor of Psychology and a Master of Art Therapy. His practice is in adult mental health, facilitating structured and semi-structured group Art Therapy, in an inpatient mental health facility. Miles's reflective art practice evolves alongside his professional development, his work in clay, collage and mixed media responds to the evolving matters of identity, emotion, reflection, and countertransference that arise as natural byproducts of client work.

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