

Significance of clay art therapy for psychiatric patients admitted in a day hospital

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Objective. To understand the significance of clay art therapy for psychiatric patients admitted in a day hospital. **Methodology.** Qualitative, descriptive and exploratory research, undertaken with 16 patients in a day hospital in Londrina, in the state of Parana, Brazil, who participated in seven clay therapy sessions. Data collection took place from January to July 2012 through interviews guided by a semi structured questionnaire and the data were submitted to content analysis. **Results.** Three themes emerged: Becoming familiar with clay art therapy; Feeling clay therapy; and Realizing the effect of clay therapy. **Conclusion.** The use of clay as a therapeutic method by psychiatric patients promoted creativity, self-consciousness, and benefited those who sought anxiety relief.

Key words: mental health; art therapy; clay; nursing; psychiatric hospitals.

Significado de la arteterapia con arcilla para los pacientes psiquiátricos en un hospital de día

Objetivo. Comprender el significado de la arteterapia con arcilla para pacientes psiquiátricos en un hospital de día. **Metodología.** Estudio descriptivo y exploratorio, cualitativo, realizado con 16 pacientes en un hospital de día en Londrina – PR, Brasil, quienes asistieron a 7 sesiones de arteterapia con arcilla. Los datos fueron recolectados de enero a julio de 2012 mediante entrevistas guiadas por cuestionario semiestructurado cuyos datos fueron sometidos a análisis de contenido. **Resultados.** Emergieron tres temas: *acercarse a la arte-terapia con arcilla, sintiendo la terapia con arcilla y percibir el efecto del tratamiento con arcilla.* **Conclusión.** El uso de la arcilla como medio terapéutico en estos pacientes psiquiátricos promovió la creatividad y la conciencia de sí mismo; también brindó beneficios a aquellos que buscaban alivio de la ansiedad.

Palabras clave: salud mental; terapia con arte; arcilla; enfermería; hospitales psiquiátricos.

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Article linked to research: Assessment of the effect of clay art therapy for psychiatric patients in day hospitals.

Conflict of interests: none.

Receipt date: May 16, 2013.

Approval date: August 20, 2013.

How to cite this article. Morais AH, Roecker S, Salvagioni DAJ, GJ Eler GJ. Significance of clay art therapy for psychiatric patients admitted in a day hospital. Invest Educ Enferm. 2014;32(1): 128-138.

Significado da arteterapia com argila para os pacientes psiquiátricos num hospital de dia

Objetivo. Compreender o significado da arteterapia com argila para pacientes psiquiátricos num hospital de dia. **Metodologia.** Estudo descritivo e exploratório, qualitativo, realizado com 16 pacientes num hospital de dia em Londrina – PR, Brasil, que assistiram a 7 sessões de arteterapia com argila. Os dados foram coletados de janeiro a julho de 2012 através de entrevistas guiadas por questionário semiestruturado e os dados foram submetidos a análises de conteúdo. **Resultados.** Emergiram três temas: acercar-se à arte-terapia com argila, sentindo a terapia com argila, e perceber o efeito do tratamento com argila. **Conclusão.** O uso da argila como meio terapêutico nestes pacientes psiquiátricos promoveu a criatividade, a consciência de si mesmo e teve benefício naqueles que procuravam alívio da ansiedade.

Palavras chave: saúde mental; terapia pela arte; argila; enfermagem; hospitais psiquiátricos.

Introduction

Mental health is defined as the capacity to live life within its tribulations, establishing a balance in the development and strengthening of a resilient response, in which the person is able to deal with problems, overcome hurdles or resist the pressure of adverse circumstances without having a psychological outbreak. It can be influenced and changed, being that the main mental changes are caused by environmental, physical, biological and hereditary, pre and post natal, organic, neuroendocrine, climatic, environmental adaptation, social, cultural and economic factors.^{1,2} The occurrence of these alterations is called mental disorder and can affect clarity, humor, emotion, affection, psychomotor development, speech, memory, observation and sleep.

In order to treat mental disorders, several alternative and expressive therapies have been used, such as occupational therapy, sports, psychodrama, use of animals, games, stories and art therapies and, amongst these, theater, dance, music, drawing with painting and modeling. The Brazilian Association of Art Therapy defines it as a therapeutic process that uses expression resources in order to connect the internal and external worlds of a person, through its symbolism, that is, it is a way of working using artistic language as the basis of patient-professional communication.

Its essence would be the aesthetic creation and the artistic elaboration in favor of health.³

As a specific field of knowledge, art therapy was established in the United States of America in 1940 through Margareth Nauberg's work, the pioneer of art therapy for having established the theoretical basis for its development, besides having established it as an area of knowledge.⁴ Art therapy was influenced by areas of knowledge such as Freudian Psychoanalysis that, in the beginning of the twentieth century, became interested in the art as a way to express the subconscious through images. Sigmund Freud observed that artists are able to concretely symbolize the subconscious in their work, portraying psyche contents. In this regard, his researches undertaken about the work of famous authors such as Michelangelo can be mentioned.⁵ Art therapy has become more predominant in the health area, mainly in the field of mental health. It is essential for the promotion of the well-being of people with psychic disorder, since art therapy provides changes in the affective, interpersonal and relational areas, improving the emotional balance at the end of each session.³

Within the field of art therapy, the clay therapy can be highlighted, which is defined as the use of clay in the psychotherapeutic process in order to promote the release of emotions, and may lead

the patients to feel pleasure in the act itself, as well as have control over their feelings through their hands. The deep essence then emerges and allows the communication with conscious or subconscious contents, expressing feelings and sensations. Therefore, this activity can provide the release of tension, pleasure and relaxation, since the person builds something for their satisfaction, expressing their truth.⁶⁻⁸

Several studies show the positive effect of the use of clay in patients with mental disorder. A study undertaken with patients in a Psychosocial Care Center located in Fortaleza in partnership with the Federal University of Ceara used various types of arts, including clay, as a result of the project *Art and Health*. It could be noted that the artistic techniques allowed users to experience their difficulties, conflicts, fears and anxieties in a less painful way. It was shown to be an effective way of channeling the variable of mental illness itself in a positive way, as well the personal and family conflicts. It can be noted that there is a minimization of the negative factors of affective and emotional nature which naturally come with the disorder, such as: anguish, fear, aggression, social withdrawal, apathy, among others.³ Accordingly, the professional nursing activity has been taking an interest in these new concepts of alternative treatments, especially when addressing the issue of integral care. The knowledge about non-allopathic practices, acquired by nurses, might indicate a higher ability of humanization, besides allowing a broad view about the care possibilities in relation to mental health.⁹

Nursing professionals' interaction and implementation of art therapy in the care of psychiatric patients mean a new way of caring. The way that refers to a humanized, integral and innovative care that values the psychiatric patient and inserts them again in the social environment, opening doors to unlock the creative potential of each person and consequently improving their health conditions. The non-allopathic therapeutic practices, while focusing in the person as an integral human being, not only value their physical aspects but also their emotions and spirituality,

providing a more tenuous and less rational care that is the result of an affective and solidary bond between caregiver-patient and participant-participant.¹⁰ Given this context, the present study is aimed at understanding the significance of clay therapy for psychiatric patients admitted in a day hospital through the expression of their statements and feelings.

Methodology

This is a qualitative, descriptive and exploratory research. The qualitative research is used with delimited groups and areas and seeks to understand the existing social relations, taking into account the subjective and symbolic disseminated in a social environment. In this type of research, the objectification is particularly important to help the researcher to have a critical view of their work, besides providing a more efficient way to achieve the aim of their work.¹¹

It was carried out in a day hospital which offers a hospital service of mental health care, which represents an intermediate resource between hospitalization and outpatient care. Since 1994, it has been a unit that intends to provide a service of excellence in mental healthcare to serve the community in the town of Londrina, in the state of Parana, and region through programs of care by a multidisciplinary team with the purpose of replacing full hospitalization, enabling people to have family and social life. It provides assistance to people aged 18 to 65 who need treatment due to mental disorders characterized by severe neurosis and psychosis, targeting psychic reorganization and return to social life. After the authorization of the institution, the selection of participants was carried out according to the following inclusion criteria: to regularly attend the institution, to have participated in at least seven clay therapy sessions, to have an appropriate diagnosis for the practice of this therapy such as schizophrenia, bipolar disorder, as well as anxiety and psychosis disorder, to voluntarily accept to participate in this activity and not to present speech problems or to

be under the effect of drugs that could interfere with their understanding of the issues addressed in the interview.

The sessions were held at two large tables placed on the veranda of the hospital and the activities were performed in free groups, being two groups for each session which alternated in the daily activities of the place where they spent their days, such as cleaning, organizing, preparing meals, marketing the hand made products they had made, among other activities. At the end of the sessions, the materials were put away in a closet on the veranda and they took care of the work during the week by dampening them on the warmer days and avoiding them to break or damage. Data collection took place in the institution from January to July 2012, through interviews guided by a semi structured questionnaire with open questions about before, during and after the clay therapy sessions, as described below. Prior to starting the therapy, the participants were asked: Have you performed any activity involving paint, clay, colored pencils, crayons, collages or others? Which one have you done? Do you know how to work with clay and have any idea of what clay therapy is?

During the clay sessions, it was asked: What is your opinion in participating in the clay therapy session? What memories and feelings do you have while working with clay? In the last session, it was asked: What is your opinion in participating in the whole clay therapy workshop? Has anything changed in your life outside the institution? The interviews took place after the application and signature of the Informed Consent Form (ICF) and were fully recorded and transcribed for later analysis. After collection and transcription of the data, some steps to organize the statements were used: data ordering, data classification and final analysis, in which the two previous stages make an inflection on the empirical material. From the design of the content analysis, the statements were categorized on the basis of theoretical relevance in order to be compared with scientific literature.¹²

The study was started after the approval by the Research Ethics Committee of the PUC/PR in 16 November 2011, under registration number 6325 and opinion 5517/11. The criteria of the Resolution 196/96 of the National Health Council were complied with. In order to maintain anonymity, the extracts of statements were identified with the letter P for patient, following by Arabic numbers which indicate the order in which the interviews took place.

Results

Knowing the participants of the study

Tables 1 and 2 present some information about the patients studied, such as socio-demographic data, history of the disorder and therapy. It is observed that 62.5% of the patients are over 46 years of age, with the minimum age being 34 and the maximum 65, most of them are male (62.5%), single (75.0%), live in their own home with the family, being nine of them (56.2%) brown or black skin.

Concerning the health conditions, 43.8% had as main diagnosis schizophrenic disorders, the first signs and symptoms having appeared more than 20 years before, and deny a history of psychiatric disorders in the family. Three thematic categories resulted from the process of contents analysis of the statements, which outline the expression of speeches and feelings of the psychiatric patients: Becoming familiar with clay art therapy; Feeling clay therapy; and Realizing the effect of clay therapy.

Becoming familiar with clay art therapy

When asked whether they had known clay therapy before the beginning of the activities, different answers were given, some of them which showed knowledge about clay therapy and others which did not. Among the participants who were aware of clay therapy, some defined it as follows: *It is to squeeze the dough and play with water. To learn a lot of things, it is good for people (P2). It is to stir and organize our minds better (P3). [...] it is*

a healthy therapy, an old thing from years ago. As you play and create, it will be good (P13).

It can be noted that the participants, when showing awareness about clay therapy, define such activity as something good that will help them to improve their mental processes, which leads to the conclusion that they are aware about their health condition and their current health treatment. And those who were not aware of clay

therapy still showed to be open and optimistic in relation to the new activity: *I do not know. It is good because I will learn things (P6). I do not know how to explain what it is but it is good for the mind (P12). It must be a therapy to relax (P16).* It can be empirically noted that, either by way of modeling the clay or of different artistic techniques, is an important tool to help groups of people with mental disorders, showing satisfactory short-term results.

Table 1. Socio demographic characteristics of psychiatric patients undergoing clay therapy in a day hospital. Londrina, 2012.

Variables (n=16)	n (%)
Age	
26 to 35 years old	3 (18.8)
36 to 45 years old	3 (18.8)
46 to 55 years old	6 (37.5)
56 to 65 years old	4 (25.0)
Gender	
Female	6 (37.5)
Male	10 (62.5)
Marital status	
Single	12 (75.0)
Married	3 (18.8)
Widowed	1 (6.2)
Housing status	
Own	13 (81.3)
Renting	1 (6.2)
Ignored	2 (12.5)
Who do they live with?	
Parents	4 (25.0)
Alone	3 (18.8)
Spouse	3 (18.8)
Siblings	5 (31.3)
Others	1 (6.2)
Race	
Caucasian	3 (18.8)
Asian	4 (25.0)
Mulatto	8 (50.0)
Black	1 (6.2)

Table 2. Information concerning the health of psychiatric patients undergoing clay therapy in a day hospital. Londrina, 2012

Variables (n= 16)	n (%)
Main diagnosis (CID-10)	
Affective bipolar disorder - F31.6 (P1, P2, P11)	3 (18.8)
Severe mental retardation – F72.0 (P7, P14)	2 (12.5)
Mixed schizo-affective disorder - F25 (P4, P8, P12, P13)	4 (25.0)
Schizophrenia - F20 (P9, P10, P15)	3 (18.8)
Other specified mental disorders due to a brain damage and dysfunction and a physical disease - F06.8 (P3, P6)	2 (12.5)
Depression - F32 (P5)	1 (6.2)
Severe and temporary psychotic disorders - F23 (P16)	1 (6.2)
Time of appearance of the first signs and symptoms	
Less than 5 years	1 (6.2)
5 to 10 years	2 (12.5)
11 to 15 years	3 (18.8)
16 to 20 years	1 (6.2)
Over 20 years	7 (43.8)
Ignored	2 (12.5)
Time of treatment in the institution	
Less than a year	4 (25.0)
1 to 2 years	4 (25.0)
3 to 5 years	4 (25.0)
Over 5 years	4 (25.0)
Psychiatric family history	
Yes	5 (31.3)
No	11 (68.7)

Feeling clay therapy

During the sessions, interviews were conducted with the participants, seeking to understand the feelings, opinions, memories, and sensations that the therapy provided them with. Based on the answers, it could be noted that some reminded the past: *I remember when I used to go fishing, pulled the worms. I miss this, I cannot do this nowadays. My motor condition, I cannot do it, I cannot run, everything has to be slow. I had to learn everything like a newborn baby (P3). Ah! I always feel good playing with mud. I felt a positive energy. It reminded me of my father, of when he was alive and he used to hunt birds*

with mud balls (P5). Now I learned that I can create the object and finish it. I felt affection and love for the object [...]. Ah! I was concentrated. One person helping another, I realized that I am able to do it, I can do it. I helped my father to look after the garden, I like clay (P13). I did something that reminded me of my past, a man with a shot gun. I liked to play with clay, a good therapy, it stirs the mind, very good, while there is some I will do it (P16).

To others, it served to soothe, relax and release the negative energy: *I released it on clay. It resulted in something abstract. I was stressed and the stress ended (P1). It relaxes your mind.*

I felt better today (P2). I felt I was putting all the emotion out. To hold and squeeze the clay caused a feeling of control over the emotions. [...] an expectation to be cured. The clay makes me busy, using my imagination, my creation (P4). I felt good. It is something that really changes your mind. Instead of sitting down on my corner, we move, feel freer, more relieved. We focus there, working with the fingers (P16).

It can be noted that art therapy enables users to experience their difficulties, conflicts, fears and anxieties in a less painful way. It is an effective way of channeling the variables of mental disorders themselves positively, as well as the personal and family conflicts. In some of the statements, it was possible to note that the anxiety persisted, even though they felt good about the activity: *I felt good. My body and the nervous system were relaxed. But I always rush, I cannot do it. I finish it very quickly. I do it quickly, there is no way, it is a habit, a vice, there is no way (P9). I feel very strong when I put my hands on it. I am learning, I really wanted to do it slowly, but I can't (P14).*

Working with clay causes deep feelings and emotions on people and, for being a primitive material, it remits to the subconscious, bringing up hidden contents that need to be worked on. Some people remembered their homes, their lives and routines outside the hospital, like watching movies, cooking, smoking, praying: *I always liked it. It takes out negative energy, bad energy. It seems like a magnet (emphasized with the hand). But today I felt my shoulders tired. I watched the dragonfly movie, then I made a dragonfly, there is a girl on the waterfall in the end and the dragonfly, and this was dark [...] (P1). I felt good, cheerful, happy. I smoke and was making an ashtray for me, I had fun. I took my mind out of things (P3). I made a goblet, tank, like a cup of water. I think about the goblet I have at home and then I make it. I think about the tank I have at home. I felt like using my brain, taking my mind out of things and learning different things (P7). I felt good. Because I like cooking, I made a small saucepan. I make pasta, lasagna, small chicken pieces, steak with onions. Clay is good,*

work the hands, the mind, what I am going to make, to create. I am already thinking about the next one (P8). I was able to make my saint, I talked to my saint. We have a party in Japan on the day of Buddha's birthday. I feel better with the saint, we go and ask him and get better (P12).

The purpose of art therapy is to encourage long-term changes that contribute to the improvement of people's well-being, as well as to emphasize the non-verbal communication and the creative processes. However, the expression of patients' interior contents reflected in their creation, in their objects, becomes one of the core elements of art therapy. For some, clay caused them to have bad thoughts and this is probably related to the pathology, such as schizophrenia: *I consider it dirty. I don't know how to answer this. I used to like it, I don't like it anymore, I don't know how to do anything. I did it today, but I don't like playing with mud [...]. I don't like it because my hands get dirty and I hear a voice telling me to spread it over my face, it told me to eat it because it was sweet, chocolate. I felt like as if I were retarded, mental disabled. Because the voice says that it is ugly, that I need to die, that I am not worth it, that a criminal person needs to get me and cook me in the barbecue (P10); I feel strange, I was already strange before and after playing with it, I am still strange (P15).*

The feeling of being in contact with the mud can be rewarding or not for patients. Handling the clay may cause rejections and may bring up bad feelings and traumas, causing them to relive unwanted moments. But it can, on the contrary, cause deep relief and pleasing moments due to the chance of putting out feelings.

Realizing the effects of clay treatment

In the last session, the participants were asked whether the clay treatment had changed anything in their lives. It can be noted that, for most patients, the therapy was of great value, helping them to be calmer, have hope, happiness, as well as providing positive energies, better relationship

and interaction, besides relieving the symptoms of the illness. *It was good, it improved my mind a little more. Clay has a good essence, brings a nice energy (P5). I like to play with mud. It was something different that I have done. Another type of work (P7). Peace and quiet. In the first times, I felt like squeezing it like a child playing with mud. [...] it is a period when we feel good, stay together with others, I like this close contact (P11). That feeling of being always ill seems to decrease (P13).*

And it was possible to observe in some statements that the participants started to be more patient and believe in themselves and in the future, reporting their desire to leave that place and restart their daily activities normally. *It was very good, now I am more patient, before I didn't like to talk very much, now I am more playful. I had a nice feeling and started hoping to go back to doing some activity to have my freedom back (P3). It was productive, it was a therapy, it made me calmer, each session made me calmer. I started to seek perfection in the objects. I felt in peace. We can forget the bad thoughts, being inactive. I thought about going back to work one day, like I used to do, I had my things (P4).*

Through clay therapy workshops, it could be noted that the participants develop a healthier social life, improved their verbal and non-verbal communication, increasing their freedom, self-esteem and control of internal impulses. Among all the participants, one of them reported that the therapy did not contribute to their life. *It hasn't changed anything (P10).* Based on these data, it is possible to infer that there it might be necessary to perform more clay therapy sessions in order to improve the health conditions of patients with mental disorder and, on the other hand, it may be possible that in some patients clay therapy can stir internal feelings that the patient is not prepared to deal with and may aggravate their health condition in the beginning of the treatment due to the fact that they are not able to deal with conscious situations.

Discussion

In art therapy, the experiences, constructions, destructions, reconstructions and transformations that the expressive material provides, as a result of the creation and self-awareness process, are shared. The use of art as therapy implies recognition of the importance of the creative process as a way to reconcile emotional conflicts, as well as to support self-esteem and personal development.¹³ Thus, it can be noted that the use of clay therapy as a therapeutic resource in psychiatric patients provides significant harmony between them and their internal contents in a symbolic way. In this respect, the care can be improved and complemented by visual images and their own creative processes of artistic activities in order to mobilize people, their emotion and intentions to support and maintain the physical, mental and spiritual well-being.¹⁴

The characteristics of expressive materials, such as clay therapy, cover several possibilities, since they seek to suit the uniqueness of the person who creates it, working as instruments to stimulate creativity, resolve emotional conflicts, stimulate self-awareness, reduce anxiety and bring up hidden information. These pieces of information represent the dark and unknown or repressed sides of human psyche which, when translated to conscience through the therapeutic process contribute to the expansion of the entire mental structure.^{13,14}

One of the aspects of access to the subconscious through artistic activity is the memory of childhood or past events. Therefore, art can be used to represent a conscious form of past events while working with materials such as clay.¹⁵ Sometimes, a person may remember unpleasant events that have been repressed for years and, in this case, making contact with this reality can be difficult and confronting. Although the event itself cannot be changed or deleted, this can be more safely resolved when expressed through an object or image so that people can view what is in their memory from another perspective and have some control over their lives and, in this case, the control over the object specifically created.¹⁵

It can be noted through art therapy that there is minimization of negative factors of affective and emotional nature which naturally emerge with the illness, such as: anxiety, stress, nervousness, fear, aggression, social withdrawal, apathy and others.³ Studies show that clay work help release repressed emotions, such as the feelings of abandonment or depression, contributing to the physical and mental well-being, and guide to reality.^{8,14,16} Thus, depressed, anxious and apathetic people strengthen their self-esteem by creating a clay object.^{14,17}

Clay is a living material and has a calming effect and, when properly used, it promotes significant internal growth, supporting the release of tension and emotional conflicts, as well as stimulating the patient to build other ways of life.¹³ Clay work is a subject that needs to be carefully proposed. Therapists need to be sure about their conduct and support the patients when they get in contact with their feelings. It is an experience that provides a sense of shape, volume, emptiness, internal and external space and plenitude. It can generate contradicting feelings in relation to the final work.¹³ Other studies show that clay work can help patients get into regressive states and as a consequence they can progress their mental condition, but this material is hard to use and may frustrate patients due to patients not being able to deal with their feelings that were brought up, such as anxiety, and thus not being able to overcome their difficulties.¹⁸⁻²⁰

Clay therapy is used to provide activities that allow creative development and psychic power to meet these needs, the daily life will seem less empty and stressing, having the potential to be an effective practice to intervene in rehabilitation programs.¹⁵ Clay causes contact, the meeting between people and their innermost being, their entirety. The effect of clay modeling acts in the physical and visceral feelings; when worked, clay requires that people use almost their entire body with strong movements of the hands and arms to mold it, appropriate position postures, attention, body stability, balance of the limbs, providing feelings of internal structuring, as well as cognitive

and emotional effects. The technique requires the channeling of appropriate energies for being a material that requires spontaneous creation.^{13,14}

There are many people who hate mess and reject clay, but the contrary can also take place and cause a deep relief state and pleasure due to the possibility of expressing feelings and for allowing the handling of a material so close to our symbolic roots.^{13,21} Clay works as changing from a state of divergence to a state of balance. For being moldable, it integrates the person with the outside world, showing that they can adapt to situations, restructure their actions and emotions. It is a living material and has a calming effect and, when properly used, it promotes significant internal growth, supporting the release of tension and emotional conflicts.¹³ What is created through clay work in the end is an image, a symbol according to the artist's imagination. While working with clay, the images started to form and there is a relationship between the image and who created it. When the person sees and handles clay, they are also handling their ghosts, overcoming the unknown, the fear, the tension concerning the new, accessing the subconscious. Touching clay promotes the development of positive elements, leading to behavior adaptation and resilience.^{8,15,22}

When the person touches clay, they are invited to establish a completely new contact with them. Their sensitivity becomes an integral part of their action, and the clay also guides each movement led by the psyche in its cognitive and affective dimensions. And this action promotes confidence and self-assurance.²³ So, it is believed that through artistic work and group interaction, it is possible to internally work the feelings of each patient expressed in their objects, in order to reinforce the ego functions, develop self-awareness and identity.

For many patients, the definition of clay therapy allowed them to be part of a group in a new way, to perform their personal skills and improve their self-image and empowerment.¹⁵ A study shows the relevance of art therapy groups in a day

hospital, with an activity that provides patients and therapists with a forum to explore the personal dimensions, new behaviors, and the experience of team work.¹⁵

Clay provides a live and potent experience with the creation of anything that is significant to the person who creates it, while they realize they are alive and are capable of carrying out their life story, being able to resolve and take their final decisions. Clay makes the personal achievement satisfactorily possible based on the principle that the clay is in the hands of the person who has complete power to do whatever they want with it, being able to decide with total freedom and this becomes an invitation to a complete freedom of expression. Clay offers a symbolical universe and the malleability of the material is related to the importance of flexibility in life.²⁴

There is an example of a research undertaken which described live and interesting reports of how women with schizophrenia, bipolar disorder and depression feel after handling clay. The reports range from the astonishment in finding out how to make the object to the extinction of shoulder pain, feelings of "turning off" from the problems or issues which, at that moment, would be causing suffering and also association to dreams and childhood experience, causing well-being and quality of personal health.²⁵ It was observed that images, *insights*, affective memories, kinesthetic feelings and body changes occurred. The statements collected reinforce that, when people came out of this experience, they felt more complete and in harmony. The harmony with the inner self and the creation of the work allowed the emotions and uncomfortable feelings that were inside to come out and be shown. While gaining form outside, they allowed an internal space of well-being.²⁵

The handling of clay leads people to adopt different attitudes, since the deepest rejection, given the regressive issues the material brings up, related to the internal aspects like traumas, unresolved situations, acquired both by cultural dimensions and those resulting from personal experiences

considered unacceptable, not appropriate, despicable, intolerable and hideous.²¹ For patients to work with art therapy, efforts and work that require continuous learning are necessary.¹⁵

In conclusion, it is believed that the results lead to the conclusion that the patients who attend a day hospital leave their families and their homes in order to find the treatment for their symptoms, since they wish to have emotional control and to live again a normal life within the society. Through this study, it could be noted that clay therapy has allowed users to experience their difficulties, conflicts, fears and anxieties in a less painful way. It was shown to be an effective way of channeling the variable of mental illness itself in a positive way, as well as the personal and family conflicts. It can be noted that there is a minimization of the negative factors of affective and emotional nature which naturally come with the mental disorder, such as: depressive feelings and anxiety, anguish, stress, fear, aggression, social withdrawal, apathy and others.

The study with clay proved to be an important art therapy resource to be used in day hospitals by the multi professional team, in particular the nursing team, for working with people in need of trying new ways of living within the world around them and with themselves. Therefore, the use of clay was shown to be effective, being able to promote self-awareness and providing several benefits for those seeking to relieve their anxieties and conflicts. Thus, it can be concluded that the stimulation of the creativity is an essential resource for a person to envision new possibilities towards health and quality of life, and this is the reason why art therapy should be implemented continuously by healthcare professionals in the care of psychiatric patients.

It seems plausible to define our experience with the art therapy group in the above mentioned day hospital as beneficial, in so far as the results were observed. Hence, the need to broaden the work through the creation of new therapeutic groups that view art as an important tool in the search for the well-being of people with mental

disorder can be noted, as well as the promotion of health in general. Therefore, it is crucial that the work with therapeutic groups is expanded in the services and institutions of the healthcare network, given that it shows positive results in the treatment of mental illnesses and disorders. Based on this context and on the considerations made, the expectation is to raise awareness and encourage other professionals working in the mental healthcare field and artists in general to experience these rewarding experiences with psychiatric patients in treatment.

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