

Commentary on „Creative-expressive artwork as a phenomenological exploration of experience“ by Maria Isabel Gaete

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Comment

Dr. Gaete's article above attempts the complex mapping of the phenomenological study of experience onto arts-based psychotherapeutic processes. In doing so she notes that pre-reflective, embodied states are critically important for both psychotherapy and phenomenology, and seeks to explain how both disciplines can be enriched by studying pre-reflective experience. In the process of this mapping project she makes several key points, which will be discussed in this commentary.

First, Dr. Gaete advocates for an emphasis on the structure of experience more than the content of it as facilitative of both therapeutic change and effective phenomenological research. Second, she stresses the need to linger in and savor our non-verbal, embodied experiences and postpone verbalizing about the experience in order to bring about effective results in both disciplines. Third, she explicates the dynamic and oscillatory structure of experience, which reveals the 'experiential unit' of subject and object (author and artwork). Lastly, she champions arts-based psychotherapies as a highly effective means of accessing and studying pre-reflective experiences in which this experiential unit is revealed and leveraged for both therapeutic change and phenomenological research. In my commentary, I will appreciate this mapping project, flesh out a few of its implications and applications, and offer a few suggestions.

Dr. Gaete's article breaks some important ground, in that it posits a framework for how arts therapies actually work, a framework that resides in the direct experiences of our bodies. While phenomenology has traveled this embodied ground more extensively, it has struggled to articulate detailed research practices that can be effective in getting at lived experience. In a sense, Gaete's mapping project structurally recapitulates what she is describing when she asserts that experience is dynamic, double structured (pre-reflective and reflective), and unifying of subject and object. The article creates continuums that we can move along rather than polarities that force us to take sides. It steadfastly values something different than what we are doing now – using words – as a worthy tool of inquiry. It

takes the harder pathway (as Gaete noted, words are easier) so that there can be a 'smaller relative distance' from embodied experience to our verbal representations of those experiences.

Of particular importance is her postulation that observing an experience changes it (a fact well known to physicists), so we might as well relax and engage in forms of inquiry that celebrate and accommodate this fluidity. Gaete seeks to deliberately use this idea as the focal point of therapeutic change. Patients change as a result of engaging in pre-reflective creative processes and alternating them with reflective observation. Reflection becomes something different than generating an explanatory story about an experience, an action fraught with peril. Much like the children's game of Telephone, where the first child whispers a sentence into the next child's ear, and that child whispers what they thought they heard to the next, and on down the line until at the end when the sentence is spoken out loud, it carries very little of the original content. It's a fun form of word play, yet in adult experience each degree of distance from our wordless source experience can generate confusion, misunderstanding, and suffering.

However in the area of examining reflection it gets easy to get tied up in knots. Gaete states that we are in pre-reflection until something interrupts it and forces us to be reflective, which sounds a lot like being conscious of an experience we are having. She also states that art-making can be seen as an alternation between pre-reflective immersion and reflective perspective taking, which seems to imply that reflecting carries some important weight in the therapeutic change process – perhaps making the unconscious conscious, and back again? She writes that this immersion can lead to an altered reflective stance, one less detached from pre-reflective experience. Yet she also asserts that reflection can lead to disembodied verbalizations that are detached from experience (because they have been Telephoned too far from the pre-reflective experience, or distorted by internalized and biased pre-conceptions).

She seems to try to reconcile this complexity by bringing in the word *observation*, yet observation tends to assume

an observer and that which is observed, which begins to negate the ‘experiential unit’ of subject and object she has posited. Yet the ‘amplifying focus’ in reflection involves losing connection with embodied experience, she states, moving us up to a higher level of abstraction. Perhaps we can invoke Elizabeth Behnke’s notion of ‘inhabiting an experience from within’ at this point [1], or bring in another word – awareness. Yet we likely would have to dig into the words *inhabiting* and *awareness* with equal intensity. Perhaps we simply don’t have words for the intermediate area between pre-reflexivity and processes down the line such as reflection, contemplation, and communication.

This brings to mind Freud’s notion of *free association*, a technique he pioneered that used a patient’s ongoing verbal narrations as a way to relax defenses and access repressed material [2]. Here we also see a de-emphasis on the content of what is said, in favor of creating a structured process that gets closer to the sensorimotor source of experience. In my article in this issue [3] I advocate for *physical free association* as a more efficacious means of working with pre-reflective material, because of its embodied nature. Perhaps the moving body occupies this intermediate area – a kind of body languaging ahead of verbal languaging.

Another term that may be useful to invoke here is appraisal. Neuroscience locates the appraisal process within different areas of the brain that categorize incoming sensations by comparing them to memories, emotions, and our current state [4]. All this is pre-conscious and may never arise to consciousness, yet we often act on our appraisals on the misguided assumption that we are responding to the present situation rather than an internalized system of pre-conceived ideas and emotions. Cognitive and emotional biases are seen as a result of faulty appraisal systems that we have internalized. It is possible that appraisal also lies in the intermediate area between pre-reflexive experience and reflective experience. Certainly appraisal colors our reflexivity in somewhat mysterious ways.

To invoke another neuroscience term, it may also be useful to examine the left and right hemispheres of the brain. In general, the left hemisphere is literal, logical, and relies on words and a linear sense of time. The right hemisphere in general processes emotions and bodily states, has no sense of time (everything is experienced as occurring in the present moment), and holds very few words. Ideally, a cooperative balance of left and right hemisphere processing generates coherencies in our daily life. Mental and emotional illness tends to occur when one hemisphere dominates and excludes the input of the other. This cooperative balancing act may bring to mind Gaete’s idea of alternating between pre-reflective and reflective observation. Some researchers have stated that the left hemisphere can ‘bully’ the right, causing distress and suffering, such that psychotherapy should make sure to give right hemisphere processing a center seat [5]. This may be correlated to Gaete’s idea of (left hemisphere) verbal reflection as a potentially dissociative

process, and give credence to the notion of pre-reflective artwork as an important therapeutic activity that re-centralizes the right hemisphere.

Neuroscience has also extensively weighed in on the subject of trauma. Gaete speaks of trauma as detached forms of verbal expression that can be dissociative. This definition does not include the whole picture. Trauma also affects several types of memory centers, as well as emotional processing structures. It is even thought that trauma can make it’s way into the brain stem, altering patterns of breathing, blinking, and other metabolic processes, all of which could be said to be pre-reflective [6]. Clearly, trauma affects us in both pre-reflective states as well as reflective ones. In fact, one of the most commonly used definitions of trauma is when a patient cannot escape pre-reflective states, where an inability to regulate breathing, heart rate, muscle tension and other body processes can generate shock, immobility, or panic [6]. This does not negate Gaete’s ideas however, and it actually strengthens her argument for treatment that includes pre-reflective, embodied states.

Another area that can tie us up in knots, especially in arts-based therapies, is the notion of representation. Gaete seems to assert that drawing figures or moulding them in art making can be defensive; that patients can get defensively stuck at the representational level. She notes that there are two levels of reflection – the observational/non-verbal and the representational/verbal. This seems to negate the idea that a figure could be drawn/moulded in the midst of a pre-reflective process, where it just emerges with no words or explanations. And if representational art is, as she states, at the second level of reflection (the verbal level) why is it necessarily defensive? This also seems to negate the notion that the patient can benefit from oscillating between pre-reflective and reflective states. If reflection is paired with representation, and representation is defensive, these ideas get sticky.

This also brings up the issue that there are different styles of arts-based therapies, some of which delight in assigning meaning to all aspects of art making; the color red means this, the tall building means that, the specific gesture means something knowable by the therapist. Gaete rightly advocates for postponing meaning-making in the pre-reflective moments of art making (hopefully this includes the therapist as well as the patient), but does this involve discouraging figurative representation? Gaete seems to think so when she argues that the patient needs to postpone representing until their immersion in embodied experience is complete. Hopefully the therapist does not abuse their power by reflectively assuming they know what something means.

Dr. Gaete has journeyed into terrain that is largely unexplored, and should be commended for this. In particular, her ideas that therapeutic change involves an immersion in pre-reflective states, that meaning making can be revitalized and repositioned after embodied immersion is complete, and that savoring embodied experience until reflective states arise naturally, carry the potential of

significant contributions to both arts therapies and phenomenological inquiry. As she so aptly notes, the body is the owner of the artwork, and this artwork is a subject/object convergence zone.

Notes

Competing interests

The author declares that she has no competing interests.

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