Purposeful Client Work: the Justification of Creative Arts Therapy in Eating Disorder Recovery

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The purpose of this Bachelor's Thesis was to find justifications for creative arts therapy use in eating disorder recovery. The aim was to produce information on the topic as well as offer some theory that could be utilized in the social services field.

The customer-centered approach, diagnostics and classification of eating disorder pathology, and creative arts therapy research were chosen as the theoretical framework of this Bachelor's Thesis. The thesis was conducted by carrying out a qualitative literature review on five (5) recent academic articles and the findings were analyzed using the content analysis method. The findings were categorized and cross-referenced in order to answer the main research question and to produce new information.

Research results showed that creative arts therapies can be used in treating eating disorders because the methods can increase well-being in the affected areas, such as emotional regulation, memory bias and trauma. Professionals in the social service field may use these findings as theoretical justification for using creative arts therapy methods in eating disorder recovery work.

Research on this topic is scarce, so suggestions for the future include long-term clinical studies with large sample groups and appropriate education for professionals in the field.

Anna Karttunen

Tarkoituksellinen asiakastyö: luovien toimintojen terapeuttisen käytön perusteltavuus syömishäiriökuntoutuksessa

Opinnäytetyön tarkoitus oli löytää perusteita luovien toimintojen terapeuttiseen käyttöön syömishäiriökuntoutuksessa. Tavoitteena oli tuottaa aiheesta tietoa ja tarjota sosiaalialalla hyödynnettävää teoriaa.

Asiakaslähtöinen työote, syömishäiriöiden diagnostiikka ja taudinluokittelut, sekä terapeuttisten luovien toimitojen tutkimus muodostivat opinnäytetyön tiedollisen viitekehyksen. Työ suoritettiin tekemällä kirjallisuuskatsaus, ja tulokset analysoitiin sisältöanalyysiä käyttäen. Löydökset luokiteltiin ja luokkia ristiviitatiin tutkimuskysymyksen vastaamiseksi.

Tutkimuslöydökset osoittivat, että luovia toimintoja voidaan käyttää terapeuttisesti siksi, että toiminnot lisäävät hyvinvointia alueilla, joihin syömishäiriöt vaikuttavat kielteisesti. Näitä alueita ovat esimerkiksi tunteiden säätely, muistamisvinouma ja traumat. Sosiaalialan ammattilaiset voivat perustella luovien toimintojen terapeuttista käyttöä syömishäiriökuntoutuksessa löydöksiin tukeutuen.

Tutkimustietoa on aiheesta vähän, joten kehittämisehdotuksena on tehdä pitkäaikaisia kliinisiä tutkimuksia suurempien koeryhmien kanssa ja tarjota asianmukaista koulutusta alalla työskenteleville.

ABBREVIATIONS

ED	Eating disorder
CAT	Creative arts therapy

Table of content

1   Introduction

Eating disorders are the deadliest mental health disorder today and their prevalence is on the rise (Polivy & Herman 2002). Young people in particular are affected by disordered eating (Allen et al. 2013). Social service workers are thus likely to encounter clients with eating disorders, and need to understand what treatments are available.

According to clinical studies eating disorder clients' long-term recovery expectations vary from moderate to poor (Käypä hoito 2014). Therefore, there is a demand for alternative recovery treatments. Some studies, although few and far between, suggest that creative arts therapies might provide useful treatment options (Heiderscheit 2016, 21).

Social service workers are not licensed creative arts therapists but may use the methods therapeutically in their work. In order to do so, there needs to be a theoretical justification as to why the methods work. The purposeful application of theory is an essential part of the client-oriented approach, which in turn is a prerequisite for ethically sound client work in the social services field (Talentia 2017).

There is very little research on the use of creative arts therapies in eating disorder recovery. The existing research establishes that creative arts therapies work, not why they work. Consequently, the purpose of this thesis is to produce information and hypotheses as to why creative arts therapies can be used in eating disorder recovery, and to offer a single point of reference for social service workers. There is a dire need for long-term empirical studies (Polivy & Herman 2002), and the scarcity of information and research of the respective topic is why this thesis will only aim to showcase correlations instead of offering definitive answers.

The research part of this thesis was conducted through a qualitative literature review of five (5) academic articles. The articles were analysed using the content analysis method.

2   Theoretical framework

The theoretical framework of this thesis is built upon three key concepts: the client-centered approach, eating disorders and creative arts therapies. This chapter introduces them and aims to provide an overview of the concepts to the reader. The key concepts discussed in this chapter are demonstrated in Figure 1.
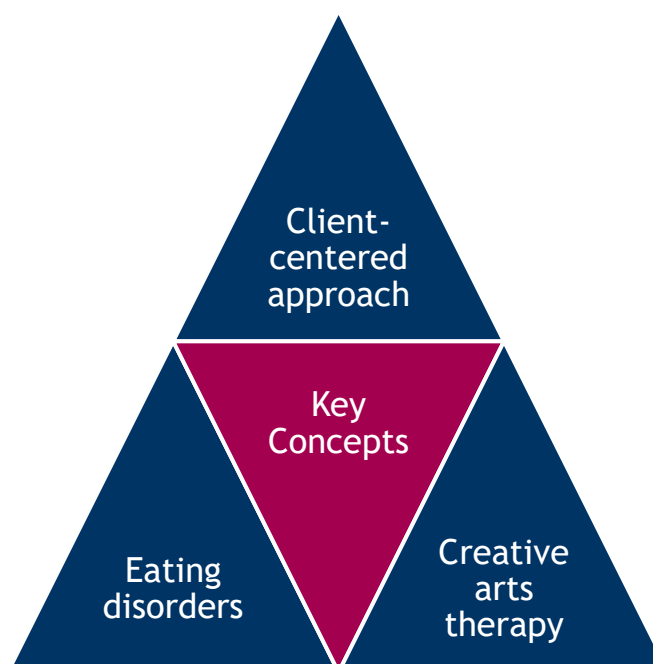
Figure 1: Key concepts.

2.1   Client-centered approach

The ethical guidelines of Talentia (2017) state that the professional ethics of social service work are based on the United Nations' Universal Declaration of Human Rights as well as the Finnish constitution. The two documents secure all individuals the right to liberty, safety, integrity and self-determination. Although social service work aims to increase clients' general well-being, self-determination and questions related to it are at the forefront of the client-worker -relationship. The goal of social service work is to facilitate clients' empowerment and participation in society, and the goal can truly be reached when clients are able to determine the best course of action regarding their own lives in accordance with the information and options provided by social service professionals. Workers, in turn, can offer all the relevant information and options only after having listened to the clients. This working method, in which the professionals work always keeping the clients' viewpoint and raised concerns in mind, and in which the clients get to self-determine how their cases are handled, is called the client-centered approach. (Talentia 2017.)

Another term for the client-centered approach is the person-centered approach, in which the personhood of the client is brought out more clearly. Often times the worker's relationship with the client is an authoritative one that leaves little room for the client's humanity. When the client is viewed as a whole person with agency, the ability to collaborate, share and be involved, it is easier to introduce a humane working relationship that is built upon the client's

personhood and experiences. Each social- and healthcare professional can affect the experience the client has during care, treatment or meetings, and so the responsibility to offer the best experience possible falls also unto the worker. The experience of the client is at the core of the theoretical framework of this thesis. As a provider of social services, a worker is responsible for providing a humane and meaningful encounter for the client, and that can only be truly provided through ethical practices. Ethical practices in turn rely on theory, which acts as a justification for all practices, activities and working methods used in social service work. Therefore, the client-centered approach necessitates theoretical justification. Not only does the approach suit the ethical guidelines of the social care sector, it is proven to being cost effective and leading to better care outcomes. (Zimmerman & Osborn-Harrison 2017.)

2.2   Eating disorders

There are different practices to diagnose and classify disordered eating. The healthcare system in Finland utilizes the 10th edition of the International Statistical Classification of Diseases and Related Health Problems (ICD-10), which recognizes anorexia nervosa (AN), bulimia nervosa (BN), binge-eating disorder (BED), as well as their atypical types (Käypä hoito 2014).

The American Psychiatric Association's 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) introduces a few additional eating disorders: pica, the rumination disorder, avoidant/restrictive food intake disorder (ARFID), other specified feeding or eating disorder (OSFED), and unspecified feeding or eating disorder (UFED). Some sources mention orthorexia, which is the obsessive need to exercise and eat in a healthy manner, but it has not been added to either diagnostic manual. This thesis discusses eating disorders mentioned in these two most commonly used diagnostic manuals. (Eating Disorders Victoria. Bratman & Dunn 2016.)

A person with anorexia nervosa aims for thinness and regards herself/himself as too fat, and is afraid of weight gain due to a disturbed body image. She or he restricts daily caloric intake, which leads to a low body weight. A low body weight is considered to be at least 15% under the recommended and appropriate BMI (Body Mass Index). In women, the absence of menstruation occurs. In both men and women there is an observable loss of libido. (Käypä hoito 2014. Eating Disorders Victoria.)

Bulimia nervosa patients also aim for thinness, regard themselves as too fat and are afraid of weight gain due to a disturbed body image. However, they demonstrate recurring episodes of binge-eating in a short period of time and purging the food. According to the diagnosis this happens at least twice a week for three months. Methods of purging include the inappropriate

use of laxatives and self-induced vomiting. Patients also feel a lack of control during binging and purging episodes. (Käypä hoito 2014. Eating Disorders Victoria.)

A binge-eating disorder is characterized by recurrent episodes of binge-eating. Again, according to the diagnostic manuals, this happens at least twice a week over the course of three months. Like bulimia nervosa patients, people with a binge-eating disorder feel a lack of control during episodes. They also exhibit severe anxiety and have at least three of the following characteristics: eating unusually quickly, eating until feeling uncomfortably full, eating large quantities of food without feeling hungry, eating in secret due to feelings of shame, or eating episodes are followed by feelings of guilt, depression and self-loathing. (Käypä hoito 2014. Eating Disorders Victoria.)

Pica is the disorder in which the patient eats substances that are non-nutritive, such as chalk, hair, baking powder and so forth. According to the DSM-5, the eating the substances has lasted at least one month. In addition, the eating of the substances is inappropriate to the individual's developmental stage and inappropriate culturally as well as socially. (Eating Disorders Victoria.)

Rumination disorder is a disorder in which food is recurrently regurgitated: the food is brought back up, re-chewed and most commonly re-swallowed. In some instances the re-chewed food is spit out. Following the DSM-5 diagnostics, the regurgitation is not induced by another medical condition and has lasted at least one month. Regurgitation must occur on its own and must not occur in relation to other ED episodes. (Eating Disorders Victoria.)

Avoidant/restrictive food intake disorder is characterized in the DSM-5 by a recurring failure to meet caloric and/or nutritional requirements, which is made visible by at least one of the following characteristics: significant weight loss, substantial nutritional deficiency, dependency on food supplements or external feeding devices such as a feeding tube, or significant interference in the ability to function socially, physically and mentally. These eating habits are not caused by cultural norms or a lack of food, and the disorder must occur on its own and does not occur in relation to other eating disorder episodes or medical conditions. (Eating Disorders Victoria.)

Other specified eating or feeding disorders are disorders that cause substantial mental distress and impairment in psychosocial functioning but do not meet all the characteristics of other eating disorders. Clinicians may specifically diagnose a client. An example on an other specified eating or feeding disorder is atypical anorexia, in which all diagnostic boxes are checked, but the patient is within a normal BMI. (Eating Disorders Victoria.)

Other unspecified feeding or eating or feeding disorders are disorders that are like OSFED, but cannot be specifically diagnosed due to inadequate information or the symptoms being too diverse. (Eating Disorders Victoria.)

The most commonly used method of identifying these eating disorders is through raised concerns by loved ones, teachers, coaches or healthcare professionals, and by answering questionnaires during healthcare check-ups (Käypä hoito 2014).

2.3   Creative arts therapy

Creative arts therapy is built upon the notion that every single person is capable of creative expression. In creative arts therapy the aesthetic of the end result is not important, and therefore clients of all ability levels can partake in it. The focus is on the therapeutic and creative process of making art, which provides a non-verbal language that enables the expression of difficult or only subconsciously known topics. While creative arts therapies can be used well in regards to addressing a specific issue and making it visible or tangible, the true potential of creative methods is the transformative nature of art. (Dokter 2000, 3. Malchiodi 2010, 14.)

Recent neuroscientific studies suggest that the brain reacts to mental images in the exact same manner as it does to real life occurrences. In other words, the mind does not differentiate between the imaginary and the real. Hence, it is possible to envision change through creativity and have the body believe the imagined outcomes. Therapeutic change is the process of intentional transformation concerning a particular situation or theme, and so a social services professional can guide clients in specific directions in order to cause positive change using creative methods. (Malchiodi 2010, 32-33, 37. Balbi & Nardone 2015, 21.)

Creative arts therapies can include any type of creative techniques, but the most commonly used methods visual art therapy, music therapy, dance movement therapy, drama therapy and psychodrama, and poetry and creative writing therapy (Dokter 2000, 3-4. Payne, 1992, 1).

All forms of art can be used to reach a variety of goals, but there are some specific traits and strengths that Dokter (2000) and Payne (1992) mention in their works. Visual art therapy is a process involving a transaction between the artist, the artefact and the professional. The artist in this case means the client and the artefact means the art medium, such as a painting or sculpture. Music therapy is a form of therapy that allows the expression of emotions through improvisation and the establishment of non-verbal dialogue between players. Dance movement therapy in turn is the use of motion and emotion in relation to personal growth.

While all art can achieve this goal, movement therapy brings experiences related to person-hood especially close to the self. Drama therapy and psychodrama explore problematic topics through role-play, storytelling, various voice work and movement. They use ritual, myth and the re-enactment of specific situations to make these topics visible. Lastly, poetry and creative writing therapy make use of integration and exploration of feelings and reactions in relation to a selected piece of literature. Creative arts therapies are illustrated in Table 1. (Dokter 2000, 3-4. Payne, 1992, 1.)

Creative arts therapies

Visual art therapy	Music therapy	Dance movement therapy	Drama therapy and psychodrama	Poetry and creative writing therapy
• A process involving a transaction between the artist, the artefact and the professional	• Allows the expression of emotions through improvisation and the establishment of non-verbal dialogue between players	• The use of motion and emotion in relation to personal growth	• Exploring problematic topics through story-telling, role-playing and re-enactment	• The integration and exploration of feelings and reactions to a selected piece of literature

Table 1: Creative arts therapies. (Dokter 2000, 3-4. Payne, 1992, 1.)

3   Research methods

The research of this thesis was conducted through a qualitative literature review using academic articles. A literature review is an academic research method, in which prior research and information is gathered and analyzed for the purpose of finding answers to the research questions. A qualitative approach was chosen instead of a quantitative one, as it describes rather than measures. (Oliver 2012, 2. Kirk & Miller 1986.) A descriptive answer to the research question was paramount, since the question itself was descriptively formulated; the question was "why" rather than "how many" or "how much".

The method was chosen because it allows the author to spend more time on the research as there is no empirical inquiry or functional implementation conducted (Malcolm 2012). The data was analyzed using content analysis, as it allows clear cross-referencing of themes and

core ideas of the findings. Content analysis is the most commonly used method of analyzing social science literature, so it is suitable for the purpose of this thesis as well. The ability to cross-reference was the most important requirement in choosing the analysis technique, which is made evident later on. For this reason, research synthesis was chosen as the specific content analysis technique. Research synthesis is the integration of existing data in aims to produce new information. In other words, various existing data is merged together resulting in new data. The technique was used in the cross-referencing portion, which will be discussed further in Chapter 4. (Oliver 2012, 39. Wyborn et al. 2018.)

The data was gathered following usual literature review guidelines. There are roughly three stages in conducting a literature review, which are the planning phase, the search phase, and the analysis phase (Oliver 2012, 39). Table 2 illustrates the three main phases of the research process as well as the tasks that are included in the phases.

1. The planning phase	2. The search phase	3. The analysis phase
• Choosing which literature types to include • Choosing key terms • Choosing inclusion and exclusion criteria	• Searching databases • Reading abstracts and discarding irrelevant material • Further including and excluding material after reading data more thoroughly • Narrowing the material down to the most relevant data	• Carrying out a content analysis of the data by categorizing common themes • Cross-referencing findings

Table 2: Phases of a literature review (Oliver 2012, 39).

The use of qualitative content analysis enables the formulation of a condensed point of reference for social service workers, which was one of the aims of this thesis. The analysis itself was carried out by first using comparative analysis in order to look for commonalities and similarities within two different data groups. After categorizing these commonalities inside the groups, the groups were further compared and subjected to an analytical research synthesis, in which common themes were established and the different types of data were synthetized into new categories and consequently new information. (Wyborn et al. 2018.)

3.1   Research questions and data analysis process

Initially the author conducted an article search for "eating disorders and creative arts therapies", but that search did not produce any usable findings regarding the goal of this thesis, which will be demonstrated in the chapter below. The author decided to try another approach and look for different search words. Consequently, the author needed to break the topic into smaller parts and consider the different aspects of which the topic actually consists of.

The actual research question of this thesis is:
1. Why can creative arts therapies be used in eating disorder recovery?

In reflecting on the thesis question the author realized that the question was two-fold. In order to answer the actual thesis question, there first needed to be data about what exactly is being treated when treating eating disorders, and what exactly is being addressed when using creative arts therapies. There needed to be data about the possible risk factors that lead to developing an eating disorder. Additionally, there needed to be information about the effects of creative arts therapies. The two types of findings could then be put into thematic categories respectively, the categories could be cross-referenced and the cross-referencing would produce corresponding synthetized thematic groups. The answer to the thesis problem could consequently be extrapolated from those thematic categories. In other words, there needed to be research questions that were presented during the data gathering phase concerning eating disorders (EDs) and creative arts therapies (CAT), and those questions would act as prerequisites for the main research question. The data gathering questions were the following:
1. What specific risk factors are commonly found in people with eating disorders?
2. What exactly can be treated in creative arts therapies?

This process is demonstrated in Figure 2. Although the process will be discussed in depth in Chapter 4, it is also introduced in this portion of the thesis, as it elaborates the research question forming process as well as the data analysis process and overall progression of the thesis.

INITIAL QUESTIONS
- What risk factors are found in ED?
- What can we accomplish in CAT?

THEMED GROUPS
- ED risk factors put into categories
- CAT effects put into categories

CROSS-REFERENCING
- Comparing categories and looking for corresponding themes

FINDINGS
- Corresponding themes synthetized into new categories
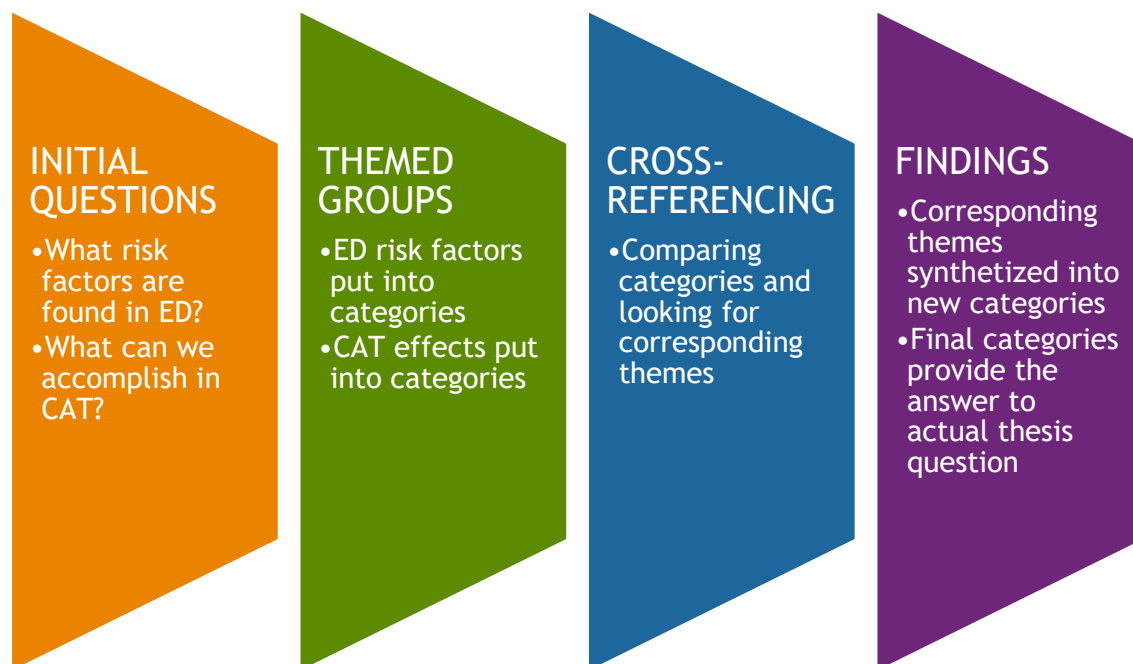- Final categories provide the answer to actual thesis question

Figure 2: Data analysis process.

The hypothesis before conducting the content analysis of the two questions presented above was, that some common themes would be found in the categories and that creative method use in eating disorder recovery could be justified and therefore purposeful in social service work. Had the hypothesis turned out to be incorrect, the research would have concluded and the finding of this thesis would have been that there are no common themes to be found. Literature review demands that conclusions cannot be the driving factor of research, and so according to good ethical conduct the first part of the content analysis had to be carried out independently without the consideration of the main thesis question. (Oliver 2012.)

3.2 Data gathering

The identification of relevant key words for the basis of the search is essential during the data gathering portion of a literature review. It is important in the light of finding exact answers to the research questions. (Oliver 2012, 41.)

For the purposes of this thesis, it was important that the source material was recent, academic, qualitative in nature, and answered the research questions in a comprehensive manner. Finnish and English were chosen as criteria, because the author did not have sufficient skills in other languages. Academic articles from 2010 – 2018 were chosen, as the author

wanted to find empirical and contemporary studies regarding the topic. The specificity of the topic and the lack of empirical data about it were the justifications for searching material reaching as far back as 2010. The author deemed that older data could not be considered contemporary anymore and thus did not include search results that were dated before 2010. The specificity of the research questions and the topic was also the reason why qualitative studies were chosen over quantitative ones, as the questions required descriptive answers rather than numerical data.

Lastly, it was important that the studies were universal and comprehensive in nature in terms of creative arts therapies, and that they did not apply to only one specific client group. The research questions were formulated in a way that did not specify any group because the author felt that the cross-referencing portion of the review could only be considered scientific and ethical if the data was neutral, universally applicable and general. This was to ensure as much objectivity as possible. Furthermore, research synthesis aims to increase the level of generality and applicability of the research topic in question, and so universality of the research questions was required from the viewpoint of the chosen method as well (Wyborn et al. 2018). The inclusion and exclusion criteria are illustrated in Table 3 below.

Inclusion criteria	Exclusion criteria
Finnish or English	Other languages
Academic articles	Other publications
Published between 2010-2018	Published earlier
Qualitative data	Quantitative data
Comprehensive and universally applicable data in regards to the research questions	Data not comprehensive and universally applicable in regards to the research questions

Table 3: Inclusion and exclusion criteria for data gathering.

The databases used were Helka and Laurea Finna. These databases were chosen because they grant access to a vast variety of scientific publications in the field of psychology, psychiatry, social work and healthcare, and include results from other databases within their respective searches. Initially the author tried to search the databases with the key words "eating disorders and creative arts therapies", but that search did not provide usable results. The overall

number of articles was limited and did not fulfil the criteria. While a few of the articles described studies about creative arts therapy use in eating disorder patients, the findings established that creative methods work, but failed to adequately describe the reasons why they work. The initial search is illustrated in Table 4 below.

DATABASE	SEARCH WORDS	SEARCH RESULTS	ACCEPTED BASED ON TITLE AND ABSTRACT	ACCEPTED BASED ON FULL TEXT
HELKA	"Eating disorders" AND "Creative arts therapies"	274	0	0
LAUREA FINNA	"Eating disorders" AND "Creative arts therapies"	2	0	0
				TOTAL (n=0)

Table 4: Article search regarding eating disorders and creative arts therapies.

The author then proceeded to carry out two separate searches based on the preliminary questions introduced in 3.1. One search was conducted concerning risk factors, common causes or reasons behind eating disorders, and the other concerning creative arts therapy research, reviews or studies. A total of five articles were chosen, of which two discussed eating disorders and three discussed creative arts therapies. Based on the inclusion and exclusion criteria presented in Table 3, the data was gathered as presented in Table 5 and Table 6.

DATABASE	SEARCH WORDS	SEARCH RESULTS	ACCEPTED BASED ON TITLE AND AB-STRACT	ACCEPTED BASED ON FULL TEXT
HELKA	"Eating disorders" AND "common" AND "causes" OR "reasons" OR "factors"	2241	4	1
LAUREA FINNA	"Eating disorders" AND "common" AND "causes" OR "reasons" OR "factors"	1302	6	1
				TOTAL (n=2)

Table 5: Article search regarding eating disorders.

DATABASE	SEARCH WORDS	SEARCH RESULTS	ACCEPTED BASED ON TITLE AND ABSTRACT	ACCEPTED BASED ON FULL TEXT
HELKA	"Creative arts therapy" OR "Art therapy" AND "research" OR "review" OR "study"	220	2	1
LAUREA FINNA	"Creative arts therapy" OR "Art therapy" AND "research" OR "review" OR "study"	1511	2	2
				TOTAL (n=3)

Table 6: Article search regarding creative arts therapy.

3.3 The chosen articles

The first eating disorder related article that was chosen was Janet Treasure's (2016) *Eating disorders*, which investigates the risk factors that predispose people into developing an eating disorder and the ways in which healthcare professionals can facilitate recovery. She lists a myriad of factors that are commonly found in people battling eating disorders. She also describes diagnostics and treatment options comprehensively. (Treasure 2016.)

The second eating disorder article was *Emotion regulation in broadly defined anorexia nervosa: Association with negative affective memory bias* by Amy Manuel and Tracey D. Wade (2013). In the article they describe their study findings about memory bias in people with eating disorders. The study was carried out having one group of eating disorder patients and one control group. They focused on variables such as depression, negative memory bias, emotion regulation and memory accuracy and found, that the group with eating disorder patients was negatively affected in almost all of the variables. An interesting find in their study was, that eating disorder patients inversely affected by the anger-threat bias. This finding contradicts prior studies and is therefore noteworthy. They conclude their study discussing the implications of their findings in relation to recovery and the prevalence of relapses. (Manuel & Wade 2013.)

The first creative arts therapies related article was *The Effect of Active Creation on Psychological Health: A Feasibility Study on (Therapeutic) Mechanisms* by Gudrun Lange, Rainer Leonhart , Harald Gruber and Sabine C. Koch (2018). They conducted a study of 44 participants aiming to find out about the effects of creating art using music, dance, drama and visual art as media. Their results indicated that empowerment and well-being increased within the participant group. (Lange et al. 2018.)

The second article concerning creative methods was from the authors Carol Ann Blank, Nancy Gerber, Karolina Bryl and Noah Potvin (2018), titled *Arts-Based Research Approaches to Studying Mechanisms of Change in the Creative Arts Therapies*. In their qualitative study carried out with doctoral students, they investigated the notion of change in the context of creative arts therapies and found, that not only did change take place, it did so in various manners and processes of creative transformation. (Blank et al. 2018.)

The last article chosen was *Emotion regulation strategies and effects in art-making: A narrative synthesis* by Harald Gruber and Renate Oepen (2018). They describe their literature findings about emotional regulation promotion in creative arts therapies. In their review they analyzed 10 studies and found that the creation of art has a positive effect on short-term mood regulation. They also found that as established in prior research, the distraction method works better than the strategy of concentrating on the current emotion. In other words, it is better to distract the client with a good emotion than to make him or her address a negative one. (Gruber & Oepen 2018.)

3.4   Ethical considerations

The Finnish Advisory Board on Research Integrity (Tenk 2012) introduces the responsible conduct for research. Ethically sound research is conducted meticulously, accurately, responsi-

bly, and with integrity. The researcher complies with the standards set for scientific knowledge and cites other researchers appropriately and with respect. Researchers must refrain from decision-making when there is a possibility for conflict of interest, and must absolutely not take part in fabricating, misrepresenting, plagiarizing, misappropriating or neglecting data. (Tenk 2012.)

The author strived to conduct her research in accordance to the ethical guidelines presented above. The data was found using universal and repeatable criteria and the findings were presented in good conscience.

During the thesis writing process the author took into consideration, that in the social services field in particular, research data has ethical implications (Carey 2012, 97). Social service workers are in direct contact with clients and apply theory to clients' lives in a straightforward manner, and so the author maintained the principle of the client-centered approach throughout the process.

The low number of articles raises the question of objectivity. Outside of theory, perfect objectivity is impossible to reach, but the more there is cumulative knowledge available, the closer we get to a satisfactory level of objectivity (Kirk & Miller 1986). Five small scale articles cannot be considered cumulative enough, which results into the thesis lacking in satisfactory objectivity. Therefore, the claims made in this literature review are cautious in nature. However, the methodology on the thesis provides some strides towards objectivity since the method of analytical synthesis by default promotes generality and universality (Wyborn et al. 2018).

The author would have hoped for more suitable articles for this literature review in order to have a larger pool of information from which to draw conclusions. The research question of this thesis would have been more reliably answered had there been more data available. While there cannot be any definitive claims made based on the findings in this thesis, the findings do provide a context for further studies and some inclination as per the research question.

4   Findings

The initial hypothesis of the data search was that common themes could be found and categorized. This portion of the thesis demonstrates why the hypothesis was true. The studies were divided into two types of data: eating disorder data and creative method data. The two types of data were kept separate from each other until the main category comparison phase.

The analysis was carried out by first extrapolating key concepts from the studies and clustering them into thematic data groups. The groups were then compared and combined in a way that resulted in main categories and explanatory subcategories within both data types respectively. The main categories were then compared and common themes were picked out and chosen for the synthesis phase. The chosen categories were synthetized into new main categories and explanatory subcategories, thus providing the answer to the research question. In other words, the studies were abstracted in the context of the preliminary questions, the abstractions reduced, compared and combined until final key themes emerged from the findings that could not be reduced further. Figure 3 illustrates the data synthesis process. The following portions discuss the findings of each phase of the analysis process in detail.
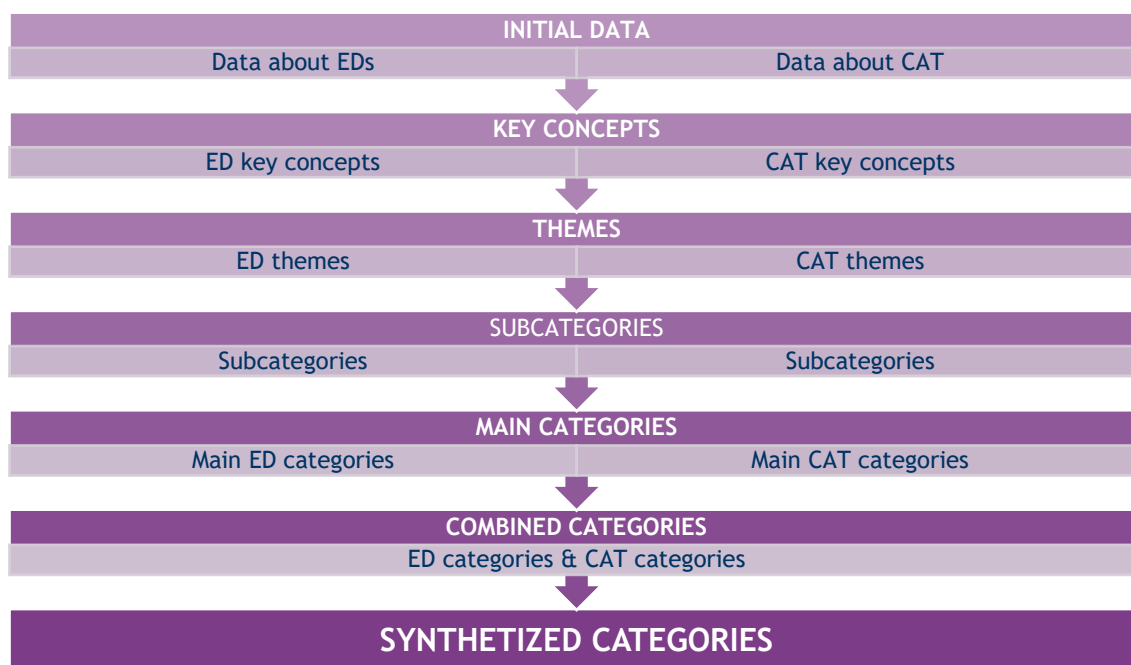
INITIAL DATA

| Data about EDs | Data about CAT |

KEY CONCEPTS

| ED key concepts | CAT key concepts |

THEMES

| ED themes | CAT themes |

SUBCATEGORIES

| Subcategories | Subcategories |

MAIN CATEGORIES

| Main ED categories | Main CAT categories |

COMBINED CATEGORIES

| ED categories & CAT categories |

SYNTHETIZED CATEGORIES

Figure 3: Synthetizing process.

4.1   Eating disorder article findings

The causes leading to developing eating disorders are largely unknown (Käypä hoito 2014), but there seem to be some risk factors that are found in people with disordered eating. Treasure (2016) states that

"Family, biological, social and cultural factors can play a role in either the development or the maintenance of eating disorders."

According to her research, sexual abuse, poor emotional regulation, genetic disposition, cultural aspects and other mental health disorders significantly increase the development of disordered eating patterns. Emotional regulation is specifically affected in people with eating disorders and traits such as perfectionism, impulsivity and rigidity are often showcased. (Treasure 2016.)

Manuel & Wade (2013) found, that people suffering from disordered eating share a commonality in negative memory bias. Their study found, that

"Depression and negative affective memory bias were significantly higher for individuals with a diagnosis of [anorexia nervosa] than healthy controls…"

They also found, that people with ED diagnoses had the tendency to better recall and pay more attention to negative memories. This would suggest that the experience of oneself and one's relationships is shown in an unrealistically negative light. (Manuel & Wade 2013.)

It is impossible to say whether these findings implicate causality or correlation, but in light of social service work it may be enough to be able to treat the symptoms as that too will increase clients' well-being.

The analysis started from extrapolating every single risk factor mentioned in the articles. After gathering all the factors, they were grouped according to their themes. Those themes became the main categories, and the factors remained as the subcategories that explained the main ones.

Six main risk factor categories could be found during the analysis process of the eating disorder studies: genetics, comorbidity, cultural aspects, emotional dysregulation, trauma and memory bias. The genetics category entails factors such as gender and family history, which means that women and people whose family members have eating disorders are at a higher risk of developing disordered eating patterns as well. Comorbidity means that additional, already existing diagnoses predispose to the development of eating disorders. These diagnoses may include clinical depression, anxiety disorders a form of autism or obsessive-compulsive disorder, among others. Social media influence and living in a culture that promotes or even fetishizes thinness result in a cultural environment that makes young girls in particular susceptible to developing eating disorders. The emotional dysregulation category was derived from different challenges associated with emotional control and personality traits, such as perfectionism and low impulse control. As a vast number eating disorder patients have a history with sexual abuse and other forms of trauma, traumatizing experiences became their own category as well. Lastly, the observed memory bias that eating disorder patients have according to Manuel & Wade (2013), became its own category. The main categories were derived from the subcategories, and the main categories answer the first prelimi-

nary question of the thesis. In summation, there were six risk factors that were found in people with eating disorders, which is illustrated in Figure 4. (Treasure 2016. Manuel & Wade 2013.)
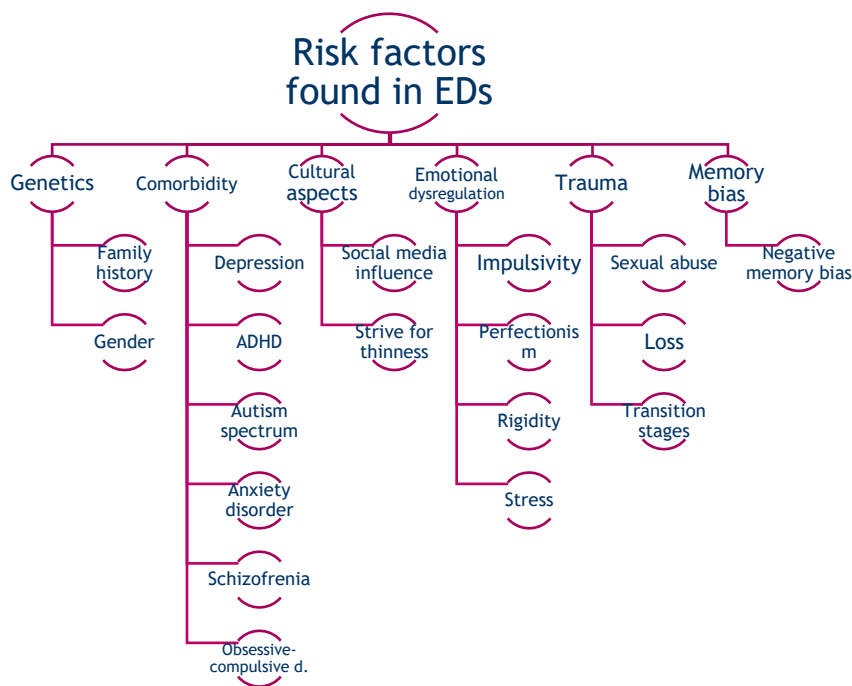

Figure 4: Risk factors found in people with eating disorders. (Treasure 2016. Manuel & Wade 2013.)

4.2 Creative arts therapy article findings

Lange et al. (2018) discuss the effect of active art creation. According to their findings, "psychological outcomes of well-being and self-efficacy" are increased through the experiences of aesthetic transformation. Experiences such as empowerment and freedom in art facilitate change and enable clients to encounter themselves.

Blank et al. (2018) further discuss the idea of transformation in creative arts therapy. Their study suggests that creative processes are transformative phenomena that have the ability to significantly reconfigure one's perceptions and thoughts. They call these mechanisms of change *ruptures*. These ruptures can arouse memories, re-activate emotions, relinquish control and make way to learning experiences about the self.

The aforementioned studies both mention the transformative and insightful powers of creative arts therapies. Gruber & Oepen (2018) also mention different types of change in their

study. They discuss change in the context of emotional regulation. Their research takes a look at different emotional regulation strategies through various creative interventions. They found that distraction from negative emotions via the creation of positive art resulted into significant short-term mood elevation.

In accordance with the previously described analysis process, there were four main categories found that answer the second preliminary question of the thesis. These categories were change, emotional regulation, physical regulation and the arousal of memories. The first category was formed from findings that denoted intrapersonal change, such as the relinquishment of control and the configuration of thought in regards to experiences of the self. As the need for control and perfectionism is commonly found in people with eating disorders, relinquishing control would seem to be a justification in using creative methods. The second category, emotional regulation, was derived from the themes of mood repair and the re-activation of and re-accessing certain emotions. The third effect category of creative methods was physical regulation, as studies found that listening relaxing music could lessen the experience of pain. The fourth and final category was the arousal of memories, which was derived from the subcategories of accessing and reviving memories. This would suggest, that using creative methods it is possible to revive positive memories and emotions in particular, which seems to be a challenge for people with eating disorders. Figure 5 demonstrates the grouping and categorization of the findings on creative method benefits. The question as to what can be achieved in creative methods is answered by the categories of change, emotional regulation, physical regulation and arousal of memories. (Blank et al. 2018. Gruber & Oepen 2018. Lange et al. 2018)
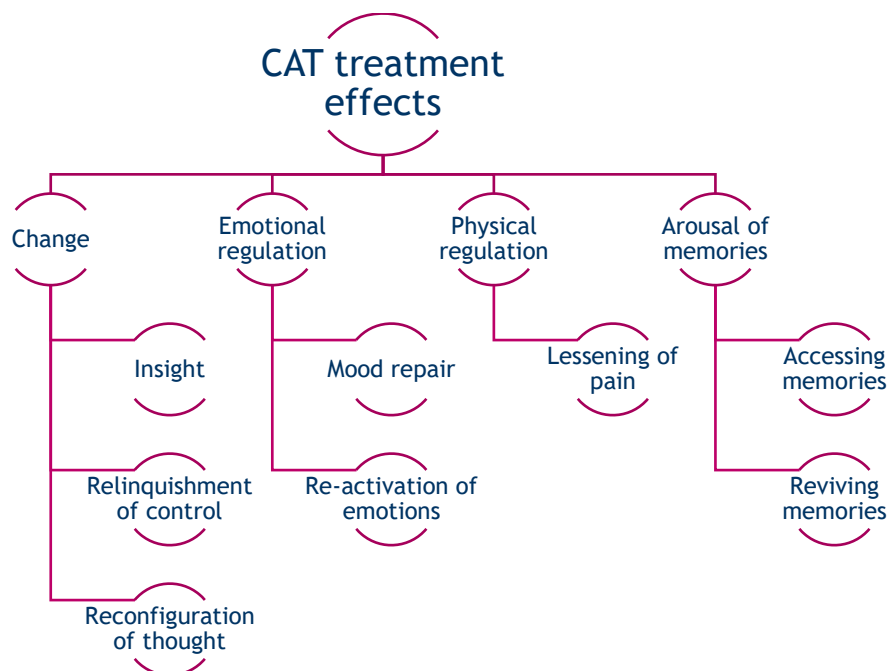
Figure 5: Specific results found in creative arts therapy treatment. (Blank et al. 2018. Gruber & Oepen 2018. Lange et al. 2018)

4.3   Cross-referencing and synthetizing the preliminary findings

The cross-referencing portion of the analysis was conducted by comparing the main categories of the findings from the two preliminary questions. Three main categories from both data types were found to be thematically similar. Three categories from eating disorder risk factors and one from creative arts therapy effects were discarded as irrelevant to the research question. The discarded categories were genetic factors, comorbidity, cultural aspects and physical regulation. While creative methods could be used in addressing these themes as well, no answers could be derived from them in regards to the research question.

The remaining categories consisted of six similarly themed and corresponding categories. Emotional dysregulation, trauma and memory bias from the eating disorder data could be thematically grouped with emotional regulation, change and arousal of memories from the creative method categories, respectively. These themes were then synthetized, or merged, into the three final main categories. These three categories were the main finding of this thesis and provide the answer to the actual thesis question. The main finding of the thesis is further illustrated in Figure 6.

The hypothesis of the preliminary data gathering was that common themes could be found and cross-references could be made. Cross-referencing the two types of data resulted into synthetizing the common themes to the following three categories: treating memories, regu-

lating emotions and transforming experiences. Using these categories the main research question of this thesis can be answered.

The reason why creative arts therapies can be used in eating disorder recovery is that creative methods can treat specific symptoms found in eating disorder pathology. To reiterate; creative arts therapies can be used in eating disorder recovery because they treat memories, regulate emotions and transform experiences. By arousing positive memories in creative arts therapy, negative memory bias can be combatted. By increasing emotional regulation using creative methods emotional dysregulation can be overturned. Lastly, by incorporating change into one's intrapersonal experiences and views, can the experiences of trauma be alleviated.

While the studies presented in this thesis are not conclusive, they shed light on some of the justifications and reasons why social service workers can use these methods in their field. These findings seem to reinforce the notion presented in part 2.3 of this thesis, according which artistic processes provide a therapeutic and transformational working tool.
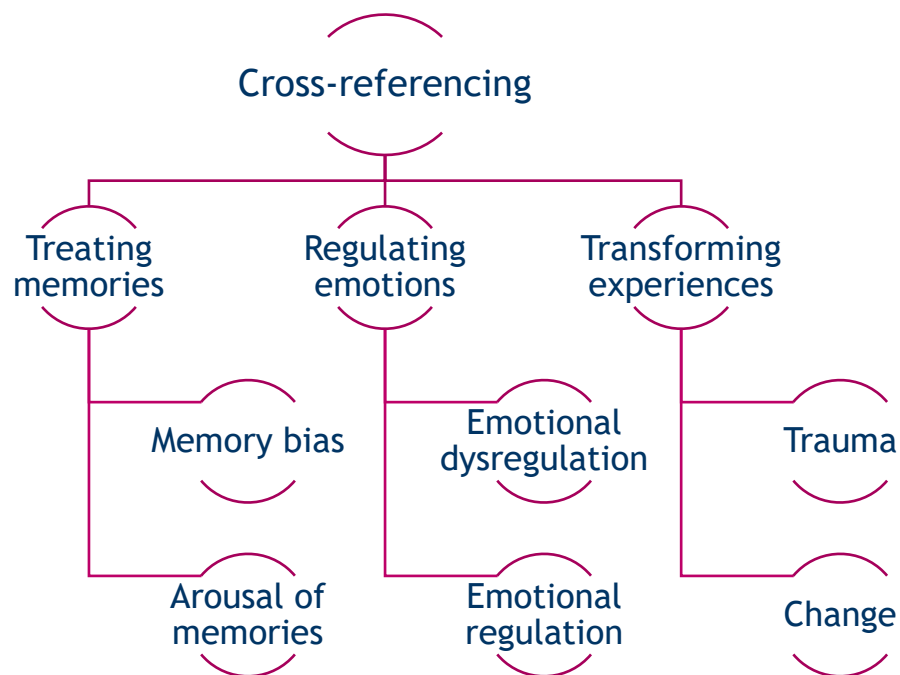

Figure 6: Cross-reference of preliminary question findings.

5   Discussion

The purpose of this thesis was to provide some answers as to why creative arts therapies can be used in eating disorder recovery. Another goal was to create some new information con-

cerning the justification of creative method use in eating disorder recovery in social service work. The questions presented in the thesis were:

1. What specific risk factors are commonly found in people with eating disorders?
2. What specifically can be treated in creative arts therapies?
3. Why can creative arts therapies be used in eating disorder recovery?

These three questions formed, guided and maintained the progress and application of this literature review. While the aims of the thesis have been reached, some limitations of the discussed studies should be discussed.

The creative arts therapy studies included in this literature review consisted of small sample groups. There was also an imbalance of women and men in all the creative method studies. (Blank et al. 2018. Gruber & Oepen 2018. Lange et al. 2018) As mentioned in the introduction portion of this thesis, further research is needed for more definitive answers. These findings do, however, provide some understanding on the topic.

A professional consideration should be mentioned concerning theme-centered creative methods. Workers in the social services field should take into consideration, that some clients may not be ready for some particular thematical creative work. The resulting feelings can be too strong and overwhelming. (Gruber & Oepen 2018.)

Situational caution is a part of the client-centered approach, and the consideration of individual needs of a client is always justifiable.

The author had hoped to gain knowledge on the topic of creative method use justifiability in eating disorder recovery work and she reached her goal during the thesis process. However, the main professional lesson for her was that the pathology of eating disorders is far more complex than she has previously learned, and the way in which it affects clients affects the way in which client work is to be conducted. There is a need for a far more sensitive approach concerning memory biases, language affiliated to trauma experiences and an overall consideration to additional diagnoses that increase or change the needs of the client. Considering the emotional regulation challenges that eating disorder clients have, the need for an absolutely thorough planning of creative arts therapy activities becomes even clearer. Not only can unsuccessful activities trigger disordered eating, they can trigger anger, negative self-experiences and increase rigidity. This is not to say that clients with eating disorders cannot be made to address difficult subjects, but the mindfulness and awareness for individual clients is made that much more important with the client group in question.

The author also wishes to continue finding justifications for different working methods, as the justifications of this thesis provided an actual theoretical framework and context in which she could operate professionally. Ethical work requires a theoretical background, but the level of

that background depends on the worker. The author realized that she herself is the only one responsible of her professionalism, as it can only be deepened. The education she has gained is only a starting point for her professionalism, and while working experience is vital in the social services field, it cannot alone maintain ethical practices. For those, theoretical justifications are required.

5.1 Validity and reliability

As already discussed in Chapter 3.4, the author strived to act in accordance to the general guidelines of ethical research conduct. Validity and reliability, however, have not yet been discussed at length in this thesis. According to Kirk & Miller (1986), validity and reliability are what objectivity consists of. Objectivity, in turn, is what all scientific research aims to be no matter the discipline. Reliability represents the level of repeatability of any given research. In other words, reliable research can be reconstructed by anyone and will provide the same answers. Given the large number of search results during the data gathering phase of the review, the risk of overlooking relevant studies to the research question cannot be minimized. The data gathering criteria were formulated in such a specific way, that they would produce relevant information and exclude irrelevant information effectively. However, human error must be taken into consideration and it must be noted that a thorough reading of all the search results would require more resources than available in this thesis.

Validity denotes the correctness or accuracy of the findings in question (Kirk & Miller 1986). The criteria of the studies included in the thesis were academically sound. All articles were chosen from an academic context, and the studies were conducted according to ethical research conduct. Keeping that in mind, the studies were all small in sample size and had a clear gender bias. Future studies could therefore easily conclude differently depending on different variables such as sample group sized, gender distribution, used activities and so forth. Moreover, future studies could affect reliability as well, since the hope is that there will be more research done regarding this topic. If the available body of data increases, the findings will undoubtedly change. During the data retrieval phase there were other key words used, but they provided even less information. The scale of this study is unquestionably small, but at this time a larger scale study would again require resources unavailable for the author. It must be emphasized yet again, that this thesis can only provide initial findings given that there is so little information on the specific topic of justifiability of creative methods in eating disorder recovery.

5.2 Conclusion

Prior research has demonstrated, that creative arts therapies can offer a viable treatment option in eating disorder recovery alongside clinical interventions. Previous studies have not, however, expanded on why creative methods can be utilized. This thesis shed some light on the matter and can be used in the context of social services as a theoretical frame of reference.

While the causes that lead into eating disorder manifestation and pathology are not well understood, some commonly encountered risk factors can be observed. Tackling those factors with appropriate creative arts therapy methods, recovery may be facilitated. Therefore, creative arts therapies are a purposeful and justifiable working tool for social service professionals working with people in eating disorder recovery.

5.3 Recommendations

In regards to this particular thesis, the data available on the topic is very limited and therefore further studies are needed for more definitive findings and results. Future studies should include long-term clinical studies with much larger sample groups and appropriate follow-up schedules. Eating disorder recovery treatments do not seem to be as effective as one would hope (Woolf 2017, 133), and while creative arts therapy application offers a potential facilitating treatment alongside established clinical interventions, more treatment options should be researched still. Future studies should include a larger variety of age groups, gender distribution, creative activities and focus on the reason why creative arts therapies may work rather than observing that they work. The focus so far has been on conducting case studies among specific client groups, like refugees or the elderly, but the author's recommendation is that general and universal studies be carried out. Generality and universality will strengthen the theoretical framework in which creative methods can be professionally utilized, which in turn will strengthen the multidisciplinary professionalism of the social- and healthcare sector.

Creative arts therapy method education should be sufficiently offered for professionals working in fields in which eating disorders are encountered. As social service workers are not creative art clinicians, it is especially important that the workers are provided with enough information so that professionalism and professional ethics can be upheld.

The author hopes, that this contribution of information about the topic will increase awareness and pressure to conduct further studies.

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Appendices

Appendix 1: Data Matrix

NAME OF THE ARTICLE	AUTHOR, YEAR, COUNTRY	OBJECTIVE	METHODOLOGY	RESULTS
Eating disorders	Janet Treasure, 2016, United Kingdom	Producing information about the causes and characteristics of eating disorders	Researching existing literature	There are known risk factors leading into eating disorder manifestation. Raising awareness and skills in recognizing treating eating disorders improves patient's well-being and prognosis.
Emotion regulation in broadly defined anorexia nervosa: Association with negative affective memory bias	Manuel Amy, Wade Tracey D., 2013, Australia	Developing a better understanding of the factors that hinder emotion regulation in eating disorder patients	Two group studies, first group consisted of 24 women between ages 16-60 diagnosed with anorexia nervosa. Second group was a healthy control group and consisted of 24 undergraduate women.	Emotional regulation significantly affected within group with anorexia nervosa compared to control group.
The Effect of Active Creation on Psy-	Lange Gudrun, Leonhart	Investigation of the effects of active crea-	Group study of 44 participants	Active creation of art significally increased well-

chological Health: A Feasibility Study on (Therapeutic) Mechanisms	Rainer, Gruber Harald, Koch Sabine C., 2018, Germany	tion on health-related psychological outcomes.		being and self-efficacy
Arts-Based Research Approaches to Studying Mechanisms of Change in the Creative Arts Therapies	Blank Carol Ann, Gerber Nancy, Bryl Karolina, Potvin Noah, 2018, United States	Exploration of the role and function of multiple dynamic aesthetic and inter-subjective phenomena.	Data generation and analysis, eight study records	Identification of three primary thematic transformative phenomena of change: 1. ruptures, resolution, and transformation, 2. relationship and intersubjectivity, and 3. arts-based expression.
Emotion regulation strategies and effects in art-making: A narrative synthesis	Gruber Harald, Oepen Renate, 2018, Germany	Identifying and analyzing studies that investigate art-making to regulate emotions.	Literature review of 10 studies	Significant short-term mood repair by distraction.