
A communication tool for cancer patients with pain: The art therapy technique of the Body Outline

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ABSTRACT

Objective: The multidimensional aspect of pain suggests the use of multimodal interventions. The Memorial Sloan-Kettering Cancer Center has recently utilized the art therapy modality to help patients communicate the painful side of their illness in such a way that they can feel understood and respected. In this paper we describe a simple innovative art therapy intervention that we have developed within the Art Therapy Service in the Psychiatric Department of Memorial Sloan-Kettering Cancer Center.

Method: The patients work with a Body Outline as a starting template, together with the art therapist, in sessions lasting approximately 45 minutes. They are encouraged to fill the space inside and outside the Body Outline. They can use colored pastels, markers, or watercolor or cut out images for a collage.

Results: Seventy hospitalized adult cancer patients, 60 women and 10 men, used this intervention between January 1999 and May 2000. We have analyzed the variety of responses from the 70 patients, and three main groups have emerged, which have focused on the following issues: (1) visualization of physical pain, (2) communication of emotions, and (3) search for meaning/spirituality.

Significance of results: The results suggest that because of its abstract symbolic feature, the Body Outline is a very flexible therapeutic intervention. It must be offered within the relationship with the art therapist, and it may fulfill quite a variety of expressive needs, from the description of physical pain to the elaboration of spiritual longings.

KEYWORDS: Art therapy, Communication, Cancer, Pain

INTRODUCTION: MEDICAL ART THERAPY

Pain is central to the experience of cancer, whether it is acute or chronic pain, stress, fatigue, or fear of pain. Physical pain and psychological distress affect each other in a complex way, as pain cannot be easily communicated and gets often connected to feelings of isolation, guilt and rejection.

At present, the basic tools used for assessment of pain and distress in adult cancer patients are quantitative (the scale 1 to 10), and verbal (based on a

verbal or written questionnaire or description of pain and distress). The quality and psychological implications of the painful experience, which often lead to depression and suicidal ideation, are still somehow unreachable. The pain/distress problem must be placed into the perspective of an interaction between mind and body, focusing on a multi-dimensional orientation to care.

In all cultures, the body is seen as a container, from a broad point of view: life, change, loss, grief, and death begin and end in the body (Pizer, 1998). Cancer patients often feel as though there is something alien or evil going on inside of them, and view their bodies very differently from before and with skepticism and fear (Fisher, 1986). Recently, at-

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tempts to integrate spiritual approaches into the clinical practice are being made, to reintegrate that which had been ostracized (Koepfer, 2000).

Within this approach the inclusion of art therapy becomes relevant. The term *medical art therapy* has been applied to the specialized use of art expression and imagery with individuals who are physically ill, experiencing trauma to the body, or who are undergoing aggressive medical treatment such as surgery or chemotherapy (Malchiodi, 1999a, p. 13).

Since so much emotion and psychological material is carried in the body and the unconscious, especially in an illness like cancer, nonverbal symbolic forms of expression seem to be particularly appropriate (Serlin et al., 2000). Art therapy can help patients to feel *confirmed* and *not abandoned*, by being offered art materials and by the mirroring presence of an art therapist. For this to happen, it is important to recognize that art therapy implies the presence of three elements: the patient, the image making, and the therapist: When the three elements are not all present, it is not art therapy (Luzzatto, 1989).

The art therapy experience provides positive feelings of energy and creativity that can help as a support system in compensating for losses and recurring stresses (Minar, 1999). Zollman and Vickers (1999) suggest that art therapy, alone or in combination with other creative therapies, can help patients to elaborate a meaningful narrative of disease.

Art Therapy at Memorial Sloan-Kettering Cancer Center

An art therapy intervention called The Creative Journey, which was devised at Memorial Sloan-Kettering Cancer Center to strengthen the self-esteem of cancer survivors (Luzzatto & Gabriel, 2000), is now offered also to individual patients in isolation for bone marrow transplant: The first results suggest that patients in isolation wish to express their emotional and spiritual pain, even more than their physical discomfort (Gabriel et al., 2001).

These results are in agreement with a number of clinical reports about the use of art therapy with medically ill and palliative care patients. The reports were collected by Malchiodi (1999a, 1999b) in the United States; and by Pratt and Wood (1998) in the United Kingdom, and they suggest that the benefits may be summarized as follows:

1. Expression: The physical and the nonverbal quality of the use of art materials allows the patients to be in touch with their bodies and to

express both physical and mental pain freely, without guilt and shame.

2. Understanding: The use of free association and reflections on the imagery connects the patients to their affects and life experiences, and the pain may become more meaningful and bearable.
3. Transformation: The space for image making creates a distance between the patient and the visualized pain, and offers the possibility of creative explorations and feelings of integration.

In this article we describe a simple art therapy intervention developed at Memorial Sloan-Kettering Cancer Center. The aim of this intervention, which we have called the Body Outline, is to offer a new form of expression, understanding, and transformation to adult cancer patients who are experiencing physical pain or emotional distress.

Development of the Body Outline Intervention

The drawing of the body has been used for a long time in the field of clinical psychology as a projective test (Machover, 1949; Meyer et al., 1955). The literature on the use of the body outline in art therapy as a therapeutic intervention is scarce, and it is mainly related to the life-size outline of the body.

Diane Waller (1993) describes the life-size body image workshops, where the participants draw each other's body outline on a large sheet of paper fixed on the wall or placed on the floor, and then each person draws or paints the inside of his/her body. She points out that both the drawing of the outline and the painting inside become easily laden with powerful projective material; therefore these workshops are most suitable to be used with trainee art therapists, or other professionals, or with well-functioning outpatients. A number of art therapists both in the United States and in the United Kingdom are using the life-size body outline with patients recovering from substance abuse and misuse (alcohol, drugs, eating disorders). Cathy Malchiodi (2003) has included one session on the life-size body outline in her support group with women with cancer.

Jennifer Barton (1999) used a small-size body outline in a pain study with children who had arthritis. She asked the children to show the perceptions of their pain within the body, and observed their use of colors, size, and locations. She concluded that the children were able to communicate their pain more effectively visually than verbally,

which was helpful to both parents and medical staff. A small-size body outline was included in a series of support groups for dermatology patients in London, United Kingdom, as a technique to facilitate self-expression. The groups combined relaxation techniques and image making. The patients were encouraged to use inside-of-the-body outline to express visually how they felt in their body during the acute phases of their dermatological illness. The intervention helped the patients to release powerful feelings about their medical condition that they were unable to share with the medical staff (Beaman & Luzzatto, 1988).

METHODS

The intervention described in this article was developed specifically for cancer patients within the Art Therapy Service at Memorial Sloan-Kettering Cancer Center (MSK) with the help of two graduate art therapy students who were doing their internship at MSK: Roy Capps in 1998–1999 and Valerie Sereno in 1999–2000.

Roy was working with some patients with prostate cancer and with other cancer patients referred by the Pain and Palliative service. Roy experienced that some patients were physically too ill to enjoy the use of art material, and others, especially the male patients, appeared to be intimidated by the white page: They kept complaining about their lack of imagination. We had to find an intervention that would not be physically demanding or emotionally threatening. We developed the idea of the Body Outline. We decided to draw with a black pencil a body outline on a standard 8.5 × 11-in. white page. The outline was sufficiently neutral to be used by both men and women. It was placed in the center of the page and it had some empty space both inside and around the outline (Fig. 1). We decided to offer the Body Outline as a starting template, to be filled by the patients with colors and shapes, according to “how they were feeling” in that specific moment, physically and/or emotionally. This intervention was offered especially to the patients who were fatigued and had no confidence in their imagination. The patients could use a variety of art materials to fill the Body Outline: markers, oil pastels, watercolors, and pictures from magazines.

Roy went back to see some patients who had refused the white page and presented this new project: Some of them responded without hesitation to the white space contained inside the body outline. The pictures made by the patients were never judged or interpreted. Instead, to facilitate the art therapy process, the pictures were looked at in silence by the art therapist, with interest and re-

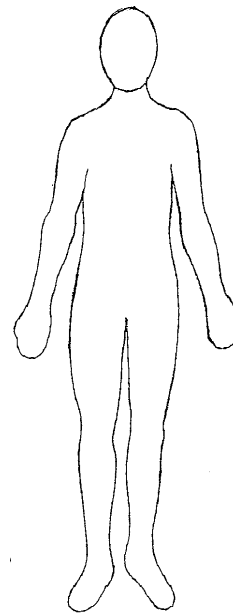


Fig. 1. A sample of the Body Outline template.

spect, and only simple questions were asked, like “What do you see in your picture, now that you have done it?” or “What does your picture say to you now?” (Betensky, 1995).

In the following year, Valerie started to offer the Body Outline on the 10th Floor, with breast and gynecology patients, and she realized immediately that this was a successful way of engaging the patients. It often worked as a first session that quickly evolved into a meaningful verbal communication and, at times, into a therapeutic process. Valerie realized that some of her patients liked to draw a frame around the body outline. We then decided to frame some of the body outlines within a circle or a triangle or a star shape, and to let the patient choose which image to select (Fig. 2). The patients seemed to like the possibility to choose, and this enriched the intervention. Some patients also started to add their reflections, and sometime a poem, to their drawing. Then we decided to collect all the Body Outlines in a book that had plastic inserts. The *Body Outlines* were placed on one side, and words, reflections, and poems which the patients had expressed about their work were typed and placed on the other side of the page. We called it the *Expressive Body Book*, and we decided the book could then be shown and shared with other patients on the floor. It was often left in a patient’s room, and it went around from room to room. It became a source of reflections and inspiration for many patients in the isolation of their hospital room. It also helped the patients to understand the nature of art therapy, and it developed interest in

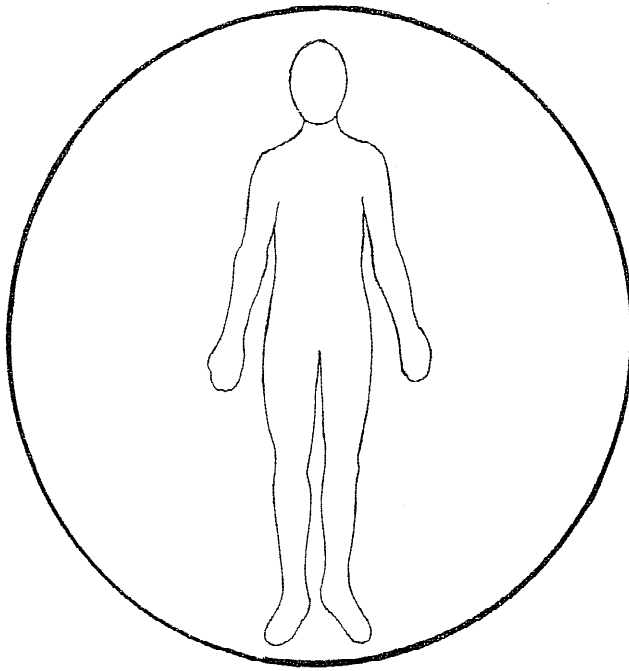


Fig. 2. The Body Outline framed inside a circle.

other art therapy interventions that were offered in the hospital: the drop-in open studio, weekly workshops, and individual art therapy sessions. All these art therapy interventions are based on symbolic expression of the patients' feelings and thoughts, followed by elaboration of personal meanings.

RESULTS

We soon realized that the filling of the Body Outline, instead of being a simple description of physical pain, most of the time developed into a quite complex form of communication. We have analyzed the variety of responses from the 70 patients, and three main groups have emerged, which have focused on the following issues:

1. Visualization of physical pain (6 patients),
2. Communication of feelings and thoughts (29 patients),
3. Search for meaning/spirituality (35 patients).

Visualization of Physical Pain (Figs. 3 and 4)

Some patients used the Body Outline to describe the location and the type of physical pain in different parts of their body in great detail, in a way that would not have been possible verbally, and that had



Fig. 3. “Stuck up—to no avail.” Improving communication with the medical staff. This 50 yr old patient was facing amputation of her right leg and she appeared to the staff inappropriately cheerful. After drawing her physical pain with the art therapist (V.S.), she added the tears, started to share her deep sadness, and became better able to participate realistically in her medical care.

not been shared with the staff previously. One patient described the sensation he experienced in his leg as similar to “pins and needles” and drew a series of pulsing vertical lines. Another male patient moved through the whole body, selecting the color red for the arms, blue and black for the throat, blue and red for the eyes, and drawing the “peg” in his stomach “for feeding.” A woman patient went into a lot of details in describing—through the use of different colors and shapes—different sensations inside her womb. Some patients wanted the picture to be shown to their family “so that they will understand the kind of pain I feel.” Some patients who started to draw the physical pain in their Body Outline then used the same picture to illustrate also their emotional state of mind, which then became more important. The comfort the patients received by visualizing the physical pain came for two reasons: because they could look at it from a distance afterwards and because they could show it to their relatives and feel better understood.

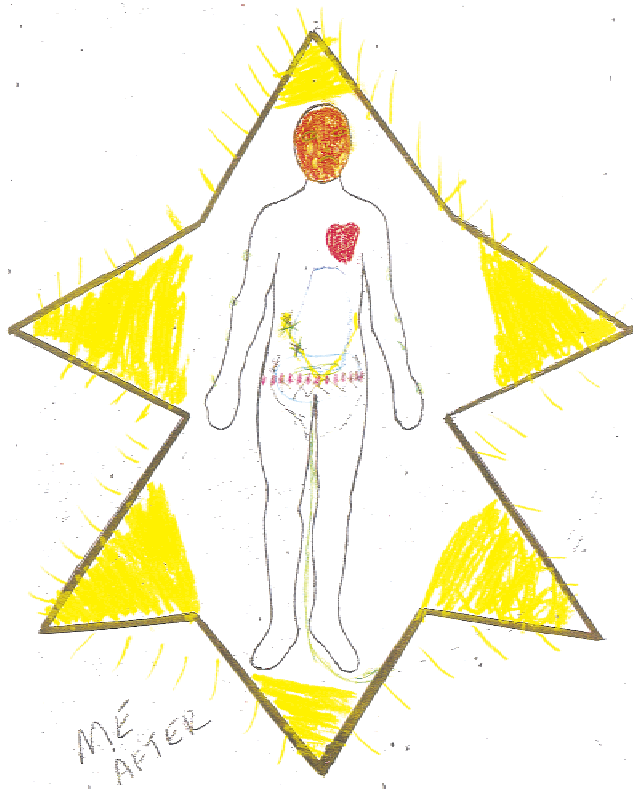


Fig. 4. “Me—After.” Helping communication within the family. This 34 yr old patient wanted to show what she described as “all the cutting and stapling” done on her body and asked to have her picture hung above her bed so that “her family could see it when they visited.”

Communication of Feelings and Thoughts (Figs. 5 and 6)

Many patients chose to express not physical pain, but feelings and thoughts. Some of them related to anxiety, isolation, frustration, anger, and despair. Some patients expressed positive feelings, like feeling supported by the family or feeling more hopeful after surgery or feeling happy to go home. The choice of colors was very personal: In general, we have not found any color to express the same emotion in the whole group. Nevertheless, red was often connected to a state of anxiety and anger, and light blue was often connected with a feeling of peace. Yellow, orange, and green were used to express very diverse states of mind, sometimes positive and sometimes negative, according to different patients. The visual expression often led the patients who were very silent and withdrawn before this exercise to communicate verbally with the therapist afterward on many aspects of their lives. Most patients said that the engagement in the visual expression of a negative state of mind led naturally to a feeling of relief. In general, the Body

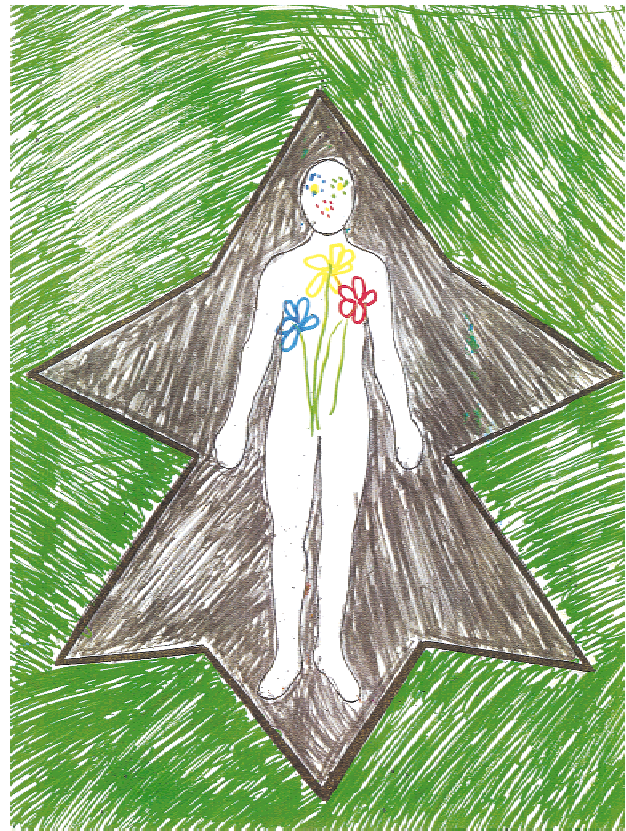


Fig. 5. “Untitled.” A change from a negative to a positive feeling. This patient surrounded her body outline with the grey and drew flowers over her body, as if the body were inside a coffin. She said she felt “very depressed.” At this point she noticed the space outside the frame and she started to fill it very slowly with green. At the end she said the session had “lifted her spirit.”

Outline seemed equally useful in allowing patients to express a positive or a negative state of mind or a mixture of positive and negative feelings.

Several times it happened that a patient and a family member (a spouse or a child) were present and filled their own Body Outlines, and the sharing of their pictures helped their communication a great deal, even if it was (as it often was) a silent sharing.

Search for Meaning/Spirituality (Figs. 7, 8, and 9)

Some patients used the session to elaborate their cancer experience from a broader perspective, to reach a personal meaning. Through the visual work, especially when they were able to concentrate, and to work slowly, some patients focused on combined present and past, and in this way they were able to integrate positive and negative experiences in their lives, and get a perspective on what was most im-

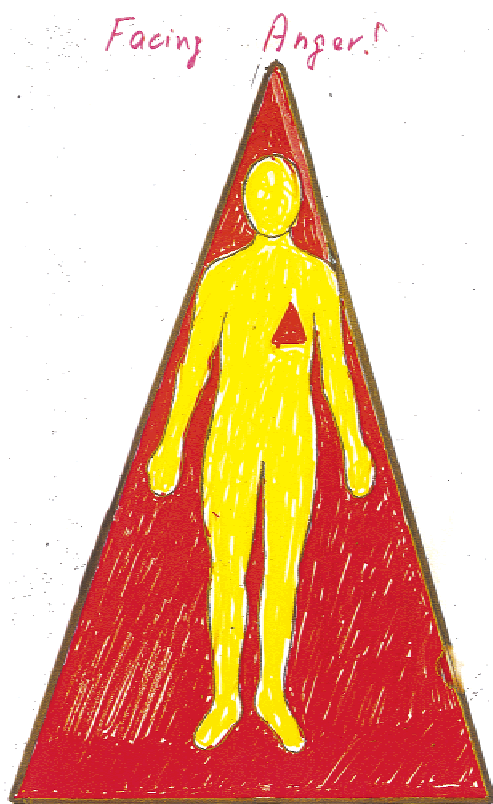


Fig. 6. "Facing anger." An example of a cathartic session. This 68 yr old patient was able to express symbolically her turmoil in having to deal with "life's blows," using two red triangles: one outside the Body Outline and one at the inner core of her heart. The genuine and powerful image gave her some relief.

portant to them. Some patients needed to express despair and hope at the same time: This was possible within the space of the picture, more than through words. In this way, the patients reached a sense of wholeness and rose above their negativity.

Other patients filled the inside or the outside of the Body Outline with feelings they wanted to develop in themselves (like peace and hope). Kandinsky (1977) wrote that the effect of color is so powerful that it could influence the soul. According to him, color harmony may rest on a corresponding vibration in the human soul.

Other times the patients used the Body Outline to visualize a connection between their bodies and an external spiritual force. This force was, they hoped, going to heal them from the illness: It was sometimes impersonal, like "pure energy," or personal (like an angel, Christ, or a Divinity).

Some terminal patients were so fatigued that they could not hold the pencil in their hands, and they could not draw inside the Body Outline. Nevertheless, they were so interested in using it for self-expression that they still did it, using the

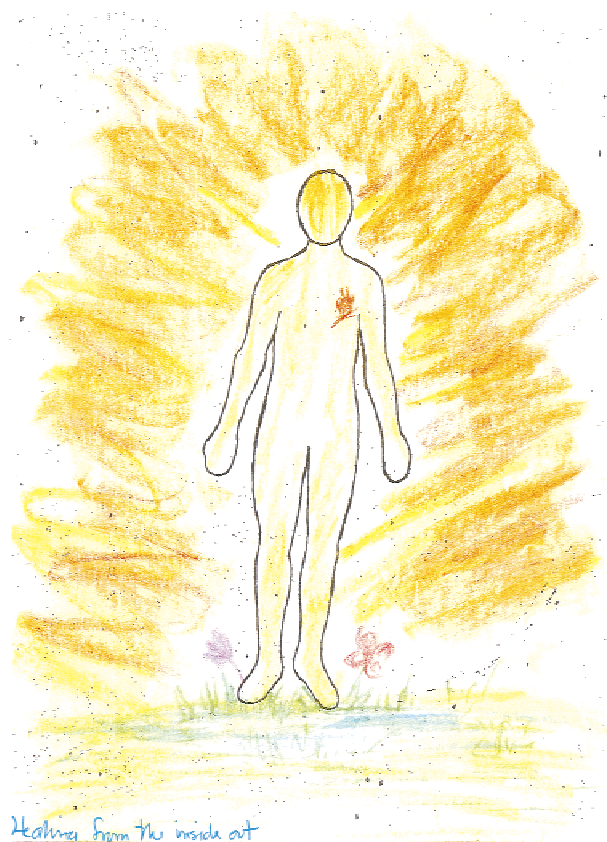


Fig. 7. "Healing from the inside out." An image of inner source of strength. This young mother represented herself helped by her love for her children as an inner source of strength, and added: "It all starts inside and goes out from there." She drew her two children as two flowers at her feet and surrounded her body outline with vibrant yellow and orange.

art therapist as an intermediary: They told the art therapist what colors and what shapes to draw on that page and what title to give to the final drawing, and they derived great pleasure from this exercise.

DISCUSSION

The Body Outline is a simple psychosocial intervention, based on the art therapy modality of symbolic communication. It has been used with 70 hospitalized cancer patient as an innovative tool to help them to better cope with physical and emotional pain. It is based on one session, which may last between half an hour and one hour. The results lead us to make the following reflections:

1. The image of the body as a physical body seems to be very suitable to express and visualize physical sensations (and the art therapist mentions this possibility to the patient).



Fig. 8. "Healing rays." An image of external source of healing. This elderly patient spent many hours drawing the different parts of her body "touched by the healing power of God," and afterward she wrote a religious poem about it.

Nevertheless, it seems that most patients become more interested in using the Body Outline to express their emotional state (whether negative or positive). Sometimes there is a movement during the session, starting from the attention to physical pain, and moving to the expression of the emotional state of mind.

2. A second significant result concerns the combined use of the inside and of the outside of the Body Outline to reach a more integrated state of mind and a more mature perspective. When the patients use the space inside the Body Outline to express a negative emotion like anger, confusion, or sadness, the space outside the body is often used as a positive container, to modify the negativity. At times, this integration may be reached using different parts of the space inside the Body Outline.
3. Many patients use the Body Outline to express the positive state of mind that they want to reach, like hope, strength, and spiritual connections. Making the actual image seems to help the patients to make it more real to

them. The spiritual images were often very personal: They were connected with the hope for recovery through the intervention of some spiritual being, and it was something the patients did not want to talk about with their family.

The Body Outline is a simple art therapy intervention that seems to be useful with patients in physical and emotional pain, both as a qualitative assessment and as a brief therapeutic intervention. The image can reflect the complexity of the patients' positive and negative states of mind, and it may help them reach some kind of emotional balance. It may lead to verbal communication, but it may also be an end to itself, as a nonverbal expression of a very personal and private feeling or thought. In view of these observations, the Body Outline should be carried out with attention to confidentiality and by a trained art therapist. It may be useful to include art therapy within the multidisciplinary team of a Pain and Palliative Care Service, as the art therapy experience may be the starting point for genuine communication with some patients who seem to be verbally unreachable.



Fig. 9. "The Savior for All—The Spirit Inside Me." A collaborative effort between patient and therapist. This 60 yr old frail patient was close to dying. She directed the art therapist (R.C.) in the choice of art material, colors, and shapes. She asked him to leave her body white and place it in a field of flowers with a vivid blue sky in the background and to frame it twice. He followed her instruction. She chose this title to acknowledge both God and her Soul.

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