

SYSTEMATIC REVIEW

Art Therapy in Sexual Health: A Systematic Literature Review

Rosliza Yahaya^{1,2,4}, Abdul Razak Abd Manaf², Azizah Abdullah³¹ Faculty of Medicine, Universiti Sultan Zainal Abidin, 20400 Kuala Terengganu, Terengganu, Malaysia² School of Applied Psychology, Social Work and Policy, Universiti Utara Malaysia, 06010 Sintok, Kedah, Malaysia³ School of Education, College of Arts & Sciences, Universiti Utara Malaysia, 06010 Sintok, Kedah⁴ Hospital Sultan Zainal Abidin, Universiti Sultan Zainal Abidin, 21300 Kuala Nerus, Terengganu, Malaysia

ABSTRACT

Art therapy has emerged as a valuable intervention for addressing various aspects of sexual health, including trauma recovery, identity exploration, and emotional well-being. This systematic literature review synthesises current research, focusing on its applications among survivors of sexual abuse, sexual and gender-diverse individuals, and within integrative therapeutic frameworks. A comprehensive search of peer-reviewed articles from Scopus and Web of Science followed PRISMA guidelines. Findings reveal that art therapy effectively alleviates PTSD symptoms, emotional dysregulation, and dissociation in survivors of sexual trauma while fostering empowerment and identity development in sexually and gender-diverse populations. Innovative approaches, such as integrating art therapy with somatic techniques and trauma-informed models, enhance emotional regulation and personal transformation. Despite these promising results, limitations such as small sample sizes and cultural variability persist. Future research should aim to standardise protocols and expand evidence for broader clinical applicability in sexual health interventions. *Malaysian Journal of Medicine and Health Sciences* (2026) 22(SUPP4):100-111. doi:10.47836/mjmhs.22.s4.13

Keywords: Art therapy, Expressive art, Sexual health, Sexual disorder, Abuse

Corresponding Author:

Abdul Razak Abd Manaf, PhD

Email: a.razak@uum.edu.my

Tel: +604-928 5755

INTRODUCTION

Art therapy, an expressive therapeutic approach utilising creative processes like drawing, painting, and sculpting, has garnered increasing attention in the area of sexual health. This field, which addresses the intricate relationship between emotional well-being, identity, and physicality, often involves profoundly personal and sensitive issues that may be difficult to express through verbal communication alone (1,2). Art therapy offers a non-verbal, alternative form of expression, making it a valuable tool for individuals struggling with topics such as sexual trauma, dysfunction, and body image. By providing a safe space for individuals to externalise complex emotions, art therapy helps clients navigate challenges related to intimacy, sexual identity, and self-esteem (3–5). For example, survivors of sexual trauma often experience shame, guilt, and fear that are difficult

to verbalise, but art therapy offers an opportunity for symbolic expression, fostering empowerment and healing.

Additionally, individuals dealing with sexual dysfunction may benefit from exploring body image and relationship dynamics through creative means, which can improve self-perception and overall sexual satisfaction. As interest in holistic, integrative approaches to health care grows, art therapy's potential in sexual health interventions becomes even more relevant, addressing both mental and emotional aspects of well-being. Despite the emerging interest in this field, research on art therapy's application in sexual health remains in its early stages. Several studies have demonstrated positive outcomes, particularly for survivors of sexual trauma, individuals with sexual dysfunction, and those exploring sexual identity.

Art therapy has been widely recognised for its effectiveness in alleviating symptoms of post-traumatic stress disorder, anxiety, and depression among trauma survivors. Additionally, it plays a crucial role in enhancing

body image and boosting self-esteem in individuals facing sexual dysfunction (6,7). In couples' therapy, art therapy has been used to improve communication, foster emotional intimacy, and enhance sexual satisfaction, creating a collaborative space for partners to express desires and conflicts through joint creative projects. However, significant gaps exist in the literature. Most existing studies are qualitative or based on small sample sizes, limiting the generalizability of findings. Furthermore, much of the research focuses on specific populations, such as trauma survivors or individuals with sexual dysfunction, leaving broader applications, such as those related to sexual identity crises or relational conflicts, underexplored (8–10). Another critical issue is the lack of large-scale, quantitative studies that assess the long-term efficacy of art therapy in addressing sexual health outcomes (11).

Furthermore, despite potential benefits, integrating art therapy with other therapeutic modalities, such as cognitive-behavioural or mindfulness-based approaches, remains underexplored. Finally, there is ongoing debate around the standardisation of art therapy practices, as methods and strategies can vary significantly depending on the therapist and the client's needs (12–14). This review aims to address these gaps by synthesising the current literature on art therapy's role in sexual health, identifying unresolved issues, and offering recommendations for future research. This article aims to provide a comprehensive synthesis of existing studies to advance the understanding of art therapy's role in enhancing sexual health outcomes, promoting emotional well-being, and supporting diverse populations. By reviewing the current literature, we seek to underscore the potential of art therapy as an effective intervention in sexual health while highlighting the need for more robust and inclusive research to establish standardised practices and evaluate its long-term efficacy.

BACKGROUND REVIEW

Art therapy has become a significant therapeutic intervention in the realm of sexual health, offering creative outlets for individuals to (i) process trauma, (ii) enhance body image, and (iii) explore sexual identity. Its use has expanded across diverse populations, including survivors of sexual violence, individuals with chronic illnesses, and marginalised groups. This review explores research trends, assesses the strengths and limitations of current studies, identifies existing knowledge gaps, and proposes directions for future research.

Art therapy serves as a vital therapeutic approach in facilitating trauma recovery for survivors of sexual abuse and exploitation. Devlin et al. (2019) documented a reduction in post-traumatic stress disorder (PTSD) symptoms among adolescents who had experienced sexual abuse following their participation in expressive

art therapy (15). Goodarzi et al. (2020) combined mindfulness with art-making, resulting in decreased depression and anxiety in female sexual assault survivors (16). Volgin et al. (2019) found that art therapy promoted posttraumatic growth (PTG) among survivors of commercial sexual exploitation in Nepal highlighting its role in fostering self-reflection and emotional expression (17,18). Hudcovsk6 and Schwanhaeuser (2020) investigated the impact of art therapy on the emotional resilience of adolescents disengaged from armed groups, revealing that it facilitated the externalisation of traumatic memories (18). Wiswell et al. (2019) documented improved emotional adjustment in gynecologic cancer patients undergoing chemotherapy, illustrating art therapy's role in coping with trauma-related illness (19). Fisher and Freeman (2022) highlighted similar benefits in military populations using dance/movement therapy (DMT) for trauma recovery (20). These studies underline the versatility of art therapy in fostering emotional recovery across varied traumatic experiences.

Art therapy has also been applied to address body image and sexuality, especially in populations experiencing changes in physical appearance due to illness. Grant (2019) explored art therapy workshops for stoma care patients, emphasising its role in managing grief, body image, and intimacy issues (21). Valpey et al. (2019) and Hertrampf and Wdrja (2017) highlighted the potential of art therapy in addressing sexual dysfunction in female cancer survivors, noting its ability to support self-image and sexual identity (22,23). Together, these studies illustrate art therapy's effectiveness in helping individuals rebuild a positive self-image and explore intimate aspects of their identities.

Art therapy has shown promise for marginalised populations, providing a safe space for those facing trauma and discrimination. Rivera and Morris (2020) examined trauma-informed art therapy for gender diverse youth, emphasising the importance of culturally sensitive therapeutics approaches. Mukherjee (2020) described the ARPAN program's use of art therapy in India to aid rehabilitation for adolescent survivors of commercial sexual exploitation (24,25). The research by Jani et al. (2016) showed that art therapy significantly benefits vulnerable Ethiopian adolescents by enhancing their mental health and knowledge of HIV prevention (26). Similarly, Lopez-Martinez (2016) applied art-based interventions in Ecuador to combat child exploitation and improve sexual health (27). Furthermore, Skop et al. (2020) underscored the effectiveness of art therapy in boosting sexual self-esteem among survivors of intimate partner violence (4). These studies highlight the flexibility of art therapy in meeting the distinct needs of diverse populations, underscoring its significance in promoting resilience and self-expression.

Many studies provide rich qualitative insights into the therapeutic processes of art therapy. For example, Devlin

et al. (2019) and Goodarzi et al. (2020) offer detailed case studies of trauma survivors. However, small sample sizes often limit their generalizability (15,16). Maddox et al. (2024) emphasised this in their meta-analysis, calling for more randomised controlled trials (RCTs) to validate findings (2). As Hertrampf and Wārja (2017) noted, the methodologies' variability further complicates efforts to draw consistent conclusions, highlighting the need for standardised research designs (23). Most research reports immediate improvements in emotional well-being, such as reduced anxiety and enhanced self-esteem. Wiswell et al. (2019) and Volgin et al. (2019) observed short-term gains in emotional adjustment among cancer patients and survivors of sexual exploitation, respectively (17,19). However, the sustainability of these outcomes remains unclear. Grant (2019) noted a lack of follow-up assessments, making it difficult to assess whether the benefits of art therapy persist over time (21).

Despite its potential, research on art therapy's direct impact on specific aspects of sexual health, such as sexual function and desire, is limited. Valpey et al. (2019) emphasised the need for more studies focusing on how art therapy can address sexual dysfunction and intimacy issues, especially in survivors of trauma and chronic illness (22). Expanding this research could help harness art therapy's full potential in promoting holistic sexual well-being. The current literature tends to focus on women in Western contexts, with few studies involving male survivors of sexual trauma. While Mukherjee (2020) and Jani et al. (2016) provide insights into non-Western populations, a broader range of cultural perspectives is needed (25,26). This lack of diversity restricts the generalizability of findings and overlooks the experiences of other groups. Expanding research to include a broader range of demographics could enrich the understanding of art therapy's impact. Maddox et al. (2024) and Hertrampf and Wārja (2017) call for standardised protocols in art therapy research to facilitate better comparison across studies (2,23). Future research should incorporate validated outcome measures, such as the Impact of Event Scale (28), to provide consistency and reliability in evaluating art therapy's effects. Virtual art therapy could increase access to care, especially for those in remote areas or facing barriers to in-person sessions. Investigating the efficacy of digital art therapy could enhance its accessibility and facilitate the adaptation of interventions to the evolving landscape of mental health care. Future studies should prioritise longitudinal research to evaluate the long-term sustainability of art therapy's benefits. Wiswell et al. (2019) and Grant (2019) highlighted short-term improvements, but extended follow-up is needed to determine whether these gains persist (19,21). Longitudinal studies could provide valuable insights into the lasting impact of art therapy on sexual health, informing best practices for therapeutic care.

Art therapy has shown significant potential in

addressing trauma recovery, improving body image, and exploring sexual identity while supporting marginalised populations. However, gaps remain, particularly in standardised methodologies, research on specific aspects of sexual health, and long-term outcomes. Future research should focus on developing consistent protocols, exploring digital modalities, and conducting longitudinal studies to validate art therapy's role in comprehensive care. Addressing these gaps will enhance the understanding and integration of art therapy in holistic sexual health care.

METHODS

This manuscript follows the Preferred Reporting Items for Systematic Review and Meta-Analyses (PRISMA) guidelines to structure the reporting of a Systematic Literature Review (SLR) (29). While PRISMA was originally developed for systematic reviews and meta-analyses, its emphasis on transparency, methodological rigour, and reproducibility makes it an appropriate framework for this study. An SLR differs from a systematic review by emphasising the synthesis of broader evidence patterns, conceptual frameworks, and theoretical developments rather than strictly evaluating quantifiable outcomes. Despite these differences, the principles of comprehensive reporting outlined in PRISMA are highly relevant for documenting the search strategy, screening processes, and inclusion/exclusion criteria in this SLR. The adoption of PRISMA also provides readers with a clear visual representation of the study selection process through the flow diagram, supporting the review's credibility and methodological rigour. Without specific guidelines for SLRs, PRISMA serves as a widely recognised and adaptable standard that aligns with the review's objectives. Its application ensures the study adheres to high-quality reporting practices, meeting the expectations of academic and scientific communities while enhancing the transparency and reproducibility of the review.

Identification

This study employed essential procedures from the systematic review approach to gather a substantial collection of relevant literature. After selecting keywords, related terms were identified through an extensive review of dictionaries, thesauri, encyclopaedias, and previous research. Once relevant terms were compiled, search strings were constructed for the Web of Science and Scopus databases to ensure a comprehensive literature search (see Table I). Both databases are pivotal resources in conducting a systematic literature review due to their extensive and robust coverage of scholarly content (30–32). With its broad multidisciplinary scope, Scopus provides access to many journals, conference proceedings, and patents, making it an invaluable tool for identifying and analysing research across diverse fields. Its advanced citation tracking and analysis features allow researchers to effectively gauge scholarly

work’s impact and interconnections. Similarly, Web of Science is renowned for its rigorous indexing and comprehensive citation data, ensuring researchers can access high-quality, peer-reviewed literature. Its citation tracking capabilities enable in-depth exploration of citation networks and the identification of seminal works in various disciplines. These databases offer a powerful combination of extensive coverage, citation analysis, and research impact metrics, making them essential for ensuring a thorough and rigorous literature review.

Table I The search string.

Scopus	TITLE-ABS-KEY ((“art therapy” OR “expressive art therapy” OR “creative art therapy” OR “creative expressive art therapy”) AND sexual*) AND (LIMIT-TO (DOC-TYPE , “ar”)) AND (LIMIT-TO (LANGUAGE , “English”)) AND (LIMIT-TO (PUBYEAR , 2020) OR LIMIT-TO (PUBYEAR , 2021) OR LIMIT-TO (PUBYEAR , 2022) OR LIMIT-TO (PUBYEAR , 2023) OR LIMIT-TO (PUBYEAR , 2024))
	Date of Access: September 2024
Wos	(“art therapy” or “expressive art therapy” or “creative art therapy” or “creative expressive art therapy”) AND sexual* (Topic) and Article (Document Types) and English (Languages) and 2024 or 2023 or 2022 or 2021 or 2020 (Publication Years)
	Date of Access: September 2024

Although the Cochrane Library is widely regarded as a gold-standard repository for systematic reviews, its methodological framework is primarily geared towards clinical trials and evidence-based healthcare interventions. In contrast, this study employed a Systematic Literature Review (SLR) approach with Scopus and Web of Science, both of which are comprehensive and multidisciplinary databases known for their robust coverage of peer-reviewed publications across diverse research paradigms, including qualitative and mixed-methods studies. The decision to exclude Cochrane was also influenced by practical constraints; conducting a Cochrane review requires protocol registration, committee approval, and a longer preparatory phase, which was not feasible within the timeframe of this project. As such, the selected databases were appropriate for the conceptual and thematic scope of this review. In the initial phase of the systematic review, a total of 327 papers relevant to the research topic were identified from the two databases.

Screening

Potential research items were evaluated during the screening phase to ensure alignment with the predefined research question (s). This process involved selecting studies related to art therapy in sexual health while eliminating duplicates. Initially, 231 publications were excluded, resulting in a final selection of 96 papers for further assessment based on specific inclusion and exclusion criteria (see Table II). The primary selection criterion emphasises literature that offers practical recommendations and includes reviews, meta-synthesis,

meta-analyses, books, book series, chapters, and conference proceedings not covered in recent studies. The review is limited to English-language publications from 2020 to 2024. The selection of studies published within five years was intentional, aiming to capture the most recent developments in art therapy and sexual health. This period encompasses significant shifts in therapeutic practices, including the integration of digital modalities, trauma-informed approaches, and a renewed focus on sexuality within mental health discourse. By concentrating on this timeframe, the review ensures relevance to contemporary clinical settings and addresses the latest research trends (33,34). In the final screening, 29 publications were excluded due to duplication.

Table II The selection criterion for searching

Criterion	Inclusion	Exclusion
Language	English	Non-English
Time line	2020 – 2024	< 2019
Literature type	Journal (Article)	Conference, Book, Review

Eligibility

In the third step, the eligibility phase, 67 papers were selected for detailed evaluation (Fig. 1). During this stage, the titles and key content of all papers were thoroughly reviewed to ensure they met the inclusion criteria and aligned with the objectives of the present study. Consequently, 45 papers were excluded for being outside the research scope, lacking a relevant title, having abstracts unrelated to the study’s purpose, or not providing full-text access based on empirical evidence. This review applied the Critical Appraisal Skills Programme (CASP) tool, comprising eight criteria, as outlined in Table III. The quality assessment was conducted by experienced professionals in the fields of art therapy, psychology, and psychiatry. The CASP framework served as a reference point for systematically evaluating the credibility and rigour of diverse study designs. Each study was rated as excellent, good, or moderate, based on several core elements: clarity of research objectives, appropriateness of methodology and design, suitability of participant recruitment, procedures for data collection and analysis, transparency of results, and the overall contribution of the study to the field (35). As a result, 22 articles were retained for further assessment.

Data Abstraction and Analysis

An integrative analysis was employed as a key assessment strategy in this study, to examine and synthesise various research designs, primarily quantitative method, with the aim of identifying relevant topics and subtopics. The data collection phase served as the initial step in developing thematic categories. As illustrated in Figure

Table III : The quality appraisal

	Yes					No					Total Agree- ment	Comments
	Expert					Expert						
	1	2	3	4	5	1	2	3	4	5		
Section A: Are the results valid?												
Was there a clear statement of the aims of the research?	/	/	/	/	/						100	Excellent
Is a research method approach appropriate?	/	/	/	/	/						100	Excellent
Was the research design appropriate to address the aims of the research?	/	/	/	/	/						100	Excellent
Was the recruitment strategy appropriate to the aims of the research?	/	/	/	/	/						100	Excellent
Was the data collection in a way that addressed the research issues?	/	/	/	/	/						100	Excellent
Section B: What are the results?												
Was the data analysis sufficiently rigorous?	/	/	/	/	/						100	Excellent
Is there a clear statement of findings?	/	/	/	/	/						100	Excellent
Section C: How valuable is the research?												
How valuable is the research?	/	/	/	/	/						100	Excellent

1, the authors meticulously analyse a compilation of 22 publications, extracting assertions and materials pertinent to the study’s focus. Subsequently, significant studies related to art therapy in sexual health were critically evaluated with particular attention to research methodologies and findings. The authors collaborated closely with the co-authors to develop themes based on the evidence within the study’s context. A detailed log was maintain throughout the data analysis process

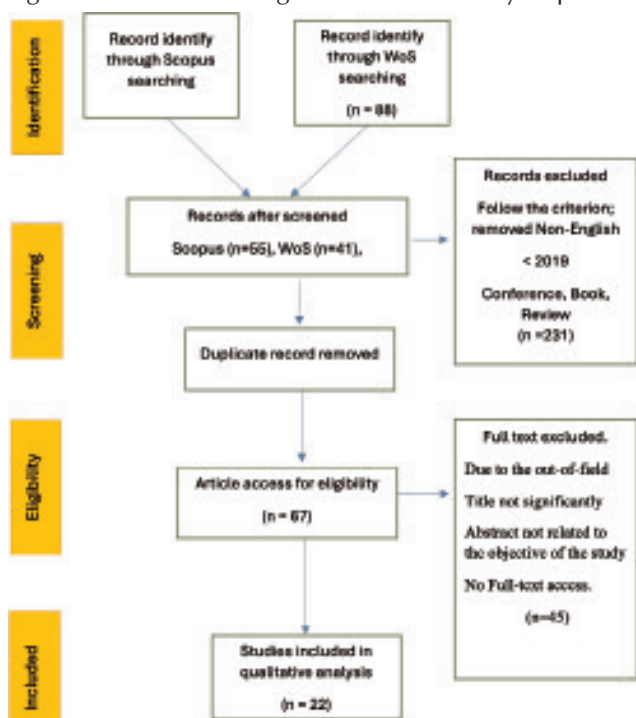


Fig. 1 A proposed search study flow diagram was adapted from the PRISMA flowchart (29)

to document observations, interpretations and analytic insights relevant to data interpretation. Finally, the results were compared to identify potential inconsistencies in the theme development process. Any conceptual disagreements were resolved through discussion among the authors to ensure consensus and coherence in thematic interpretations.

The authors also compared the findings to identify and resolve any discrepancies in the theme development process. Any inconsistencies that emerged were discussed among the authors to reach a consensus. Finally, the themes were refined to ensure coherence and consistency. To validate the thematic framework, three experts conducted an independent evaluation – two specialising in art therapy and one in sexual health. This expert review phase was instrumental in ensuring the clarity, relevance and adequacy of each subtheme by establishing domain validity. Adjustment were made based on the author’s discretion, incorporating expert feedbacks and comments. The key questions guiding this process are as follows:

1. How does art therapy differ from conventional trauma-focused therapies in alleviating PTSD symptoms and enhancing emotional well-being in individuals who have experience sexual abuse and trauma?
2. What is the effect of art therapy compared to talk-based therapies on self-acceptance and resilience among sexual and gender minority clients facing cis-heterosexism and gender-related trauma?
3. How do integrative approaches in art therapy (e.g., cognitive behaviour therapy (CBT), eye movement desensitisation and reprocessing (EMDR) therapy) impact

trauma integration and emotional regulation compared to conventional art therapy in individuals with complex trauma or dissociation?

RESULT AND FINDING

Art therapy has become a crucial therapeutic approach for managing complex psychological challenges associated with trauma, sexual health and identity. This review categorises recent studies into three key themes: (1) Art Therapy for Survivors of Sexual Abuse and Trauma, examines the application of art therapy in supporting individuals who have experienced childhood sexual abuse, military sexual trauma, and sexual violence in conflict setting; (2) Art Therapy with Sexual and Gender Diverse Clients, which highlights therapeutic interventions that address the unique needs of LGBTQIA+ individuals, focusing on trauma, cis-heterosexism, and gender identity; and (3) Integrative and Innovative Approaches in Art Therapy, which examines cutting-edge practices that integrate art therapy with other modalities such as cognitive-behavioural therapy (CBT), EMDR, and sex therapy to address multifaceted trauma and dissociation. Through thematic analyses, this review seeks to offer a comprehensive understanding of the varied applications of art therapy in sexual health and trauma treatment, highlighting innovative approaches and identifying gaps for future research.

THEME 1: Art Therapy for Survivors of Sexual Abuse and Trauma

Art therapy has shown promise in supporting trauma recovery among individuals with experiences of sexual abuse and its associated psychological effects. Malhi and Bharti (2023) emphasised its role in managing PTSD symptoms among child sexual assault survivors, particularly those experiencing family dysfunction, emotional neglect, and socioeconomic disadvantage (36). Laird and Mulvihill (2022) similarly highlighted its impact on alleviating anxiety, dissociation, and emotional dysregulation, offering non-verbal pathways for expression when verbal communication is hindered (37). Raslan et al. (2024) explored trauma narratives, revealing how art therapy, combined with dance and psychotherapy, helps survivors reconnect with repressed memories and regain a sense of identity, fostering recovery (38).

For adult survivors, various modalities of art therapy have been particularly valuable in addressing complex trauma. Chesnot and Kachaamy (2023) demonstrated the success of clay art therapy among Yazidi women who experienced terrorism-related sexual violence, leading to improved PTSD symptoms, emotional regulation, and self-esteem (39). Carter et al. (2024) integrated Cognitive Behavioural Therapy (CBT) with art psychotherapy in group settings for survivors of childhood sexual abuse, leading to notable reductions in depression and distress, along with enhanced self-esteem (40). Integrating

structured cognitive interventions with creative expression provided a practical dual approach to emotional healing. Goldner and Herzig Reingold (2024) applied the Bird's Nest Drawing assessment to survivors of maternal-perpetrated sexual abuse, uncovering themes of abandonment and ambivalent attachment, showcasing art therapy's utility as both a diagnostic and therapeutic tool (41).

The adaptability of art therapy across cultural contexts has further emphasised its value. Luzzatto et al. (2022) implemented a short-term trauma treatment protocol in Tanzania, addressing emotion regulation, self-identity, and trauma integration through structured workshops (42). Improvements in trauma symptoms underscored its effectiveness, particularly in low-resource settings. Art therapy has shown promise in military sexual trauma (MST) recovery, as discussed by Matt et al. (2020), who highlighted its integration with evidence-based approaches such as dialectical behaviour therapy and mindfulness. Art therapy enhances emotional regulation and interpersonal relationships by offering non-verbal avenues for survivors to express difficult emotions. This holistic approach complemented pharmacological treatments and other therapies, underscoring its value in multifaceted MST recovery processes (43).

Art therapy's ability to facilitate non-verbal expression and address deep emotional issues has proven instrumental across diverse survivor groups. Research by Malhi and Bharti (2023), Laird and Mulvihill (2022), Chesnot and Kachaamy (2023), Carter et al. (2024), Raslan et al. (2024), Luzzatto et al. (2022), Matt et al. (2020), and Goldner and Herzig Reingold (2024) highlight its role in reducing PTSD symptoms, enhancing self-esteem, and promoting trauma recovery. Additional research is required to confirm these findings through larger, standardise studies, ensuring greater clinical applicability and generalisability.

THEME 2: Art Therapy with Sexual and Gender Diverse Clients

Art therapy for sexual and gender diverse (SGD) individuals has been explored as a potentially supportive approach for processing trauma, navigating identity-related experiences, and addressing the psychological impact of systemic discrimination, with emerging evidence suggesting benefits in promoting empowerment and resilience. Various innovative, inclusive, and culturally responsive approaches have been developed to cater to the specific need of this population.

Van Den Berg and Anderson (2023) introduced the concepts of Queer Worldmaking (QWM), a sex-positive art therapy framework prioritising inclusive, safe spaces. By affirming sexual and gender diversity as valuable ways of knowing, QWM facilitates individual healing while supporting broader social transformation (44). Van Den Berg (2024) further expand through

the Ar(t)chive method, which engages SGD clients in revisiting queer historical forms to connect with shared experiences, fostering community bonds and resilience. By challenging societal misinformation, this retro-activist process strengthens the understanding of identities across differences (45). Similarly, Van Den Berg (2024) emphasised the role of art therapy in addressing cis-heterosexist violence, advocating for culturally responsive strategies such as externalising experiences, fostering positive identity development, and facilitating community connections. This work highlights the need for subjective approaches, such as self-reflection and creative expression, and objective strategies, including affirming studio practices and advocacy (46).

Somatic approaches in art therapy have also been instrumental for SGD clients. Hetherington (2024) introduced the Somatic Small Body Map Protocol, combining psychodynamic art therapy with somatic experiencing to address trauma caused by societal microaggressions (47). This method lets clients visually map bodily sensations, fostering emotional regulation and reducing anxiety. Hetherington, Della Cagnoletta, and Minghini (2021) explored body tracing as an empowering tool during gender transitioning, providing a space to reclaim bodily autonomy and strengthen agency (48). This process integrates self-awareness, allowing clients to modify their body representations, which enhances their sense of control over their transitioning experience.

Culturally sensitive interventions remain critical for addressing sexual identity challenges in restrictive settings. Mazdeyasna (2023) highlighted a case study of an Iranian woman who explored her sexuality through art therapy (5). This approach provided a safe, empowering environment to reconcile personal identity with societal expectations, offering relief from sexual repression. Kirby (2023) also supported incorporating sex-positive approaches into art therapy, highlighting the need to challenge sex-negative cultural norms (49). By encouraging healthy, affirming discussions of sexuality, art therapy supports sexual well-being and validates diverse sexual identities.

These studies collectively demonstrate the transformative role of art therapy for sexually and gender-diverse clients. Methods such as Ar(t)chive, Queer Worldmaking, somatic mapping, and body tracing foster identity exploration, trauma recovery, and emotional resilience. Research by Hetherington et al. (2021), Kirby (2023), Van Den Berg and Anderson (2023), Mazdeyasna (2023), Hetherington (2024), and Van Den Berg (2024) underscores the value of sex-positive, trauma-sensitive, and culturally responsive practices. These approaches facilitate individual healing and challenge systemic marginalisation, contributing to broader social justice efforts that affirm and empower diverse identities.

THEME 3: Integrative and Innovative Approaches in Art Therapy

Integrative and innovative approaches in art therapy have been increasingly applied to support individuals dealing with trauma, intimacy-related difficulties, self-image concerns, and sexual identity exploration, using creative processes informed by therapeutic frameworks. Combining traditional therapeutic methods with artistic expression fosters emotional healing, self-reconciliation, relational improvement, and personal empowerment. The integration of art therapy with trauma-focused techniques has been particularly effective in supporting survivors of complex PTSD and other trauma-related challenges. Sigal (2021) illustrated how integrating Eye Movement Desensitisation and Reprocessing (EMDR) with art therapy facilitated the processing of embodied trauma in survivors of childhood sexual abuse (50). Interoceptive techniques and trauma-informed practices were pivotal in managing emotional distress and enhancing self-regulation. Likewise, Kehr and Haeyen (2024) utilised imagery rehearsal-based art therapy (IR-AT) to address post-traumatic nightmares in individuals with borderline personality disorder (BPD) (51). The creative, non-verbal approach reduced nightmares, increased self-efficacy, and helped clients confront traumatic memories without emotional overwhelm. These studies highlight the value of integrating art therapy into trauma recovery frameworks to foster stabilisation and healing.

Art therapy has also proven instrumental in addressing complex self-perceptions and fostering reconciliation. Malhotra and Gussak (2023) explored metaphorical artmaking to externalise internalised “demonic” self-images among individuals labelled as sex offenders, facilitating emotional release, self-awareness, and societal reintegration (52). Galinsky (2023) introduced diorama-making as a therapeutic tool to address sexual identity, body acceptance, and empowerment, offering clients a safe, contained space for self-reflection and affirmation (53). Together, these studies emphasise the therapeutic power of symbolic and metaphorical expression for confronting emotional and identity-related challenges.

Strength-based and culturally sensitive interventions underscore the adaptability of art therapy across diverse contexts. Malhotra and Gussak (2021) presented The Journey, a strength-based art therapy model that offers non-confrontational strategies to reflect on past actions, express remorse, and foster belonging (54). Varshney et al. (2024) integrated mindfulness, Pranayama, and art therapy to address self-silencing and dissociation in adolescent trauma survivors (55). The culturally tailored approach strengthened coping mechanisms and promoted emotional resilience, illustrating art therapy's potential to support healing in diverse populations.

Art therapy's integration with relationship-focused frameworks has shown great promise in addressing intimacy and relational challenges. Metzl (2020) highlighted the effectiveness of integrating Emotionally Focused Therapy (EFT) and art therapy in couple's treatment. This approach addresses sexual histories, attachment injuries, and reconciliation to strengthen relational bonds. Creative tools are used to assess needs, manage sensitivities, and foster deeper emotional understanding. Metzl also emphasised the importance of specialised training for art therapists to effectively address complex relational issues, further enhancing the scope of art therapy in relational contexts (56).

Innovative techniques continue to expand art therapy's therapeutic landscape. Sigal and Rob (2021) emphasised the importance of trauma-informed, embodied practices, while Kehr and Haeyen (2024) highlighted the benefits of creative, indirect approaches for trauma symptom management. Galinsky (2023) and Malhotra and Gussak (2023) further demonstrated the value of symbolic tools such as dioramas and metaphorical imagery in promoting self-awareness and transformation. These findings collectively emphasise the versatility of art therapy in addressing trauma, relational issues, and self-identity challenges through creative expression.

In conclusion, art therapy's integration with trauma-focused, relationship-centred, and culturally sensitive frameworks underscores its adaptability and transformative potential. Studies by Metzl (2020), Sigal and Rob (2021), Kehr and Haeyen (2024), Malhotra and Gussak (2021, 2023), Varshney et al. (2024), and Galinsky (2023) highlight the effectiveness of these approaches in fostering healing, empowerment, and resilience. Future research should aim to standardise these practices and expand their clinical applications to maximise their impact on diverse populations.

DISCUSSION

Art therapy has been identified as a flexible modality with growing application in three key areas: supporting trauma recovery among survivors of sexual abuse, responding to the distinct needs of sexually and gender-diverse individuals, and fostering healing through integrative and creative therapeutic approaches. Each thematic area highlights art therapy's unique ability to promote emotional resilience, self-reconciliation, and identity exploration through creative and evidence-based methodologies.

For individuals with histories of sexual abuse and trauma, art therapy has been reported to support the management of PTSD symptoms, dissociative experiences, and emotional regulation difficulties. Studies have emphasised its ability to offer non-verbal pathways for emotional expression, particularly in cases where the impact of trauma hinders verbal

communication (57). This has proven valuable for both children and adults experiencing psychological consequences such as anxiety, self-blame, and low self-esteem (58,59,60). Culturally sensitive interventions have further highlighted art therapy's adaptability across diverse settings, showing its ability to address trauma in resource-limited environments. Integration with established therapies such as Cognitive Behavioural Therapy (CBT) has produced promising results, particularly when addressing complex and long-term trauma symptoms (61).

Within the domain of work with sexually and gender-diverse clients, art therapy has been explored as a supportive approach for facilitating identity development, addressing experiences of systemic discrimination, and encouraging a sense of empowerment (62). Innovative art therapy approaches have created safe, inclusive spaces for clients to explore their identities while challenging societal norms (63,64). Somatic-based techniques, including body mapping and body tracing, have facilitated emotional regulation and autonomy during processes like gender transitioning (65). Additionally, culturally sensitive interventions have enabled clients to reconcile personal identities with restrictive social and cultural expectations (66). Art therapy's focus on fostering self-awareness and externalising lived experiences has strengthened its role as a supportive intervention for SGD populations (67).

Integrative and innovative art therapy approaches have expanded their therapeutic utility by combining creative practices with trauma-focused frameworks and culturally responsive models. These methods have addressed challenges such as post-traumatic nightmares, internalised negative self-perceptions, and dissociative symptoms. Integrating art therapy with Eye Movement Desensitization and Reprocessing (EMDR), mindfulness, and imagery rehearsal therapy (68, 69, 70) has proven effective in managing emotional overwhelm and enhancing trauma processing. Techniques such as diorama-making and metaphorical art have been particularly beneficial in addressing self-identity, sexual empowerment, and reconciliation of destructive self-images (71). Strength-based frameworks have also shown value in non-confrontational interventions, helping clients reflect on past actions, express remorse, and foster belonging within a secure therapeutic alliance.

In summary, art therapy has been increasingly recognised as a supportive approach to trauma recovery, identity exploration, and emotional expression. Its integration of creative modalities with therapeutic frameworks suggests potential adaptability across different populations and mental health contexts. The reviewed studies underscore art therapy's transformative role in managing trauma symptoms, fostering identity development, and promoting resilience through culturally responsive and innovative techniques. Further research remains essential to standardise best practices and expand its

clinical applications, ensuring broader accessibility and long-term impact.

CONCLUSION

Art therapy has been increasingly explored as a supportive intervention in trauma recovery, identity development, and the psychological care of sexually and gender-diverse individuals. Through the integration of creative expression and psychotherapeutic frameworks, it may offer a meaningful avenue for addressing complex emotional issues such as post-traumatic stress, dissociation, and emotion regulation difficulties. Its flexibility across different cultural and clinical contexts highlights its potential utility, particularly among marginalised populations and in settings with limited resources. Emerging techniques such as Queer Worldmaking, Ar(t)chive, diorama-based storytelling, and somatic-informed practices — alongside adaptations of established modalities like CBT, EMDR, and mindfulness — reflect the growing diversity in art therapy practice. These approaches have shown promise in enhancing empowerment, fostering self-reflection, and supporting resilience, particularly in navigating identity-related and systemic challenges. Nonetheless, the current body of evidence is largely composed of small-scale, qualitative, or exploratory studies. Further empirical research — including larger, methodologically rigorous investigations — is essential to strengthen the evidence base, standardise practices, and evaluate outcomes across broader populations. Advancing access and refining therapeutic models will be key to maximising art therapy's relevance and contribution to mental health care.

REFERENCE

1. Abu-Odah H, Sheffield D, Hogan S, Yorke J, Molassiotis A. Effectiveness of creative arts therapy for adult patients with cancer: a systematic review and meta-analysis. *Supportive Care in Cancer*. 2024;32(7). doi:10.1007/s00520-024-08582-4
2. Maddox G, Bodner G, Christian M, Williamson P. On the Effectiveness of Visual Arts Therapy for Traumatic Experiences: A Systematic Review and Meta-Analysis. *Clin Psychol Psychother*. 2024;31(4). doi:10.1002/cpp.3041
3. Waller D. A safe space, standards, and “gut feelings”: Ethics and cultural diversity in art therapy training groups. 1st ed. Di Maria Audrey, editor. *Exploring Ethical Dilemmas in Art Therapy: 50 Clinicians From 20 Countries Share Their Stories*. Routledge; 2019. 253–258 p. doi:10.4324/9781315545493_34
4. Skop M, Darewych OH, Root J, Mason J. Exploring intimate partner violence survivors' experiences with group art therapy. *International Journal of Art Therapy: Inscape*. 2022;27(4):159–68. doi:10.1080/17454832.2022.2124298
5. Mazdeyasna S. An Iranian Woman's Exploration of Her Sexuality Through Art Therapy. *Art Therapy*. 2023;40(4):205–14. doi:10.1080/07421656.2023.2197639
6. Liang CX, Bryant T. The Use of Dance and Movement for the Embodied Healing of Interpersonal Trauma in Women and Girls: A Systematic Review. *Trauma Violence Abuse*. 2024;25(4):3241–53. doi:10.1177/15248380241243399
7. Bafghi ZR, Ahmadi A, Mirzaee F, Ghazanfarpour M. The effect of mindfulness-based art therapy (MBAT) on the body image of women with polycystic ovary syndrome (PCOS): a randomized controlled trial. *BMC Psychiatry*. 2024;24(1). 10.1186/s12888-024-06057-8
8. Barker M, Langdridge D. Silencing accounts of silenced sexualities. In: Ryan-Flood R, Gill R, editors. *Secrecy and Silence in the Research Process*. 1st ed. New York: Routledge; 2010.
9. Byczkowska D. Social aspects of embodiment: Methodological challenges and limitations. In: Thao Lk, Quynh Lk, editors. *Conducting Research in a Changing and Challenging World*. Tasmania, Australia: Nova; 2013. p. 145–58.
10. Corbett M, Kember D. Reflections on methodological issues. In: Kember D, Corbett M, editors. *Structuring the Thesis: Matching Method, Paradigm, Theories and Findings*. Singapore: Springer; 2018. p. 389–407.
11. O'Doherty L, Whelan M, Carter GJ, Brown K, Tarzia L, Hegarty K, et al. Psychosocial interventions for survivors of rape and sexual assault experienced during adulthood. *Cochrane Database of Systematic Reviews*. 2023;10(10). doi:10.1002/14651858.CD013456.pub2
12. Potash JS, Bardot H, Ho RTH. Conceptualizing international art therapy education standards. *Arts in Psychotherapy*. 2012 Apr;39(2):143–50. doi:10.1016/j.aip.2012.03.003
13. Chiang M, Reid-Varley WB, Fan X. Creative art therapy for mental illness. *Psychiatry Res*. 2019;275:129–36. doi:10.1016/j.psychres.2019.03.025
14. Bowen-Salter H, Whitehorn A, Pritchard R, Kernot J, Baker A, Posselt M, et al. Towards a description of the elements of art therapy practice for trauma: a systematic review. *International Journal of Art Therapy: Inscape*. 2022;27(1):3–16. doi:10.1080/17454832.2021.1957959
15. Devlin JM, Hill L, Berry J, Felder K, Wilson C. Therapeutic Practices for Sexually Abused Children and Adolescents: Resources for Marriage, Family, and Couples' Counselors. *Family Journal*. 2019;27(4):359–65. doi:10.1177/1066480719844017
16. Goodarzi G, Sadeghi K, Foroughi A. The effectiveness of combining mindfulness and art-making on depression, anxiety and shame in sexual assault victims: A pilot study. *Arts in Psychotherapy*.

- 2020 Nov 1;71. doi:10.1016/j.aip.2020.101705
17. Volgin RN, Shakespeare-Finch J, Shochet IM. Posttraumatic distress, hope, and growth in survivors of commercial sexual exploitation in Nepal. *Traumatology (Tallahass Fla)*. 2019;25(3):181–8. doi:10.1037/trm0000174
 18. Hudcovsk6 J, Schwanhaeuser K. Psychosocial Impacts among Adolescents Disengaged from Colombian Illegal Armed Groups and Challenges to Their Attention. *Cent Eur J Public Health*. 2020;28(1):79–81. doi:10.21101/cejph.a6053
 19. Wiswell S, Bell JG, McHale J, Elliott JO, Rath K, Clements A. The effect of art therapy on the quality of life in patients with a gynecologic cancer receiving chemotherapy. *Gynecol Oncol*. 2019;152(2):334–8. 10.1016/j.ygyno.2018.11.026
 20. Fisher AFW, Freeman EK. Dance/Movement Therapy with Active Duty and Veteran Military Populations. In: Dieterich-Hartwell R, Melsom AM, editors. *Dance/Movement Therapy for Trauma Survivors: Theoretical, Clinical, and Cultural Perspectives*. Taylor and Francis; 2022. p. 202–14. 10.4324/9781003111382-16
 21. Grant M. Creative arts therapy in stoma care: Workshops exploring grief, body image and sexual intimacy. *Gastrointestinal Nursing*. 2019;17(2):24–9. doi:10.12968/gasn.2019.17.2.24
 22. Valpey R, Kucherer S, Nguyen J. Sexual dysfunction in female cancer survivors: A narrative review. *Gen Hosp Psychiatry*. 2019;60:141–7. doi:10.1016/j.genhosppsych.2019.04.003
 23. Hertrampf RS, WΔrja M. The effect of creative arts therapy and arts medicine on psychological outcomes in women with breast or gynecological cancer: A systematic review of arts-based interventions. *Arts in Psychotherapy*. 2017 Nov 1;56:93–110. doi:10.1016/j.aip.2017.08.001
 24. Rivera AM, Morris C. Creative Interventions for Traumatized Transgender and Gender Nonconforming (TGNC) Youth. In: Whitman JS, Boyd CJ, editors. *Homework Assignments and Handouts for LGBTQ+ Clients: A Mental Health and Counseling Handbook*. Taylor and Francis; 2020. p. 348–53. doi:10.4324/9781003088639-44
 25. Mukherjee M. Featured Counter-Trafficking Program: ARPAN. *Child Abuse Negl*. 2020;100:1–4. doi:10.1016/j.chiabu.2019.104152
 26. Jani N, Vu L, Kay L, Habtamu K, Kalibala S. Reducing HIV-related risk and mental health problems through a client-centred psychosocial intervention for vulnerable adolescents in Addis Ababa, Ethiopia. *J Int AIDS Soc*. 2016;19(Supp 4). doi:10.7448/IAS.19.5.20832
 27. Lypez-Martinez, Dolores M. Art therapy for building peace territories in schools in Ecuador. In: Buchanan V, editor. *Art Therapy: Programs, Uses and Benefits*. Nova Science Pub Inc; 2016. p. 67–76.
 28. Weiss DS, Marmar CR. The Impact of Event Scale-Revised. In: *Assessing psychological trauma and PTSD*. New York: The Guilford Press; 1997. p. 399–411.
 29. Page MJ, Moher D, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. PRISMA 2020 explanation and elaboration: updated guidance and exemplars for reporting systematic reviews. 2021 [cited 2025 Jan 13];372. doi:10.1136/bmj.n160
 30. Alryalat SAS, Malkawi LW, Momani SM. Comparing bibliometric analysis using PubMed, Scopus, and Web of Science databases. *Journal of Visualized Experiments*. 2019;152. doi:10.3791/58494
 31. Falagas ME, Pitsouni EI, Malietzis GA, Pappas G. Comparison of PubMed, Scopus, Web of Science, and Google Scholar: strengths and weaknesses. *The FASEB Journal*. 2008;22(2):338–42. doi:10.1096/fj.07-94921sf
 32. Visser M, van Eck NJ, Waltman L. Large-scale comparison of bibliographic data sources: Scopus, web of science, dimensions, crossref, and microsoft academic. *Quantitative Science Studies*. 2021;2(1):20–41. doi:10.1162/qss_a_00112
 33. Aromataris E, Lockwood C, Porritt K, Pilla B, Jordan Z. *JBI Manual for Evidence Synthesis*. Aromataris E, Lockwood C, Porritt K, Pilla B, Jordan Z, editors. JBI; 2024. doi: 10.46658/JBIMES-24-01
 34. Xiao Y, Watson M. Guidance on Conducting a Systematic Literature Review. *J Plan Educ Res*. 2019 Mar 28;39(1):93–112. doi: 10.1177/0739456X17723971
 35. Long HA, French DP, Brooks JM. Optimising the value of the critical appraisal skills programme (CASP) tool for quality appraisal in qualitative evidence synthesis. *Research Methods in Medicine & Health Sciences*. 2020 Sep 6;1(1):31–42. doi:10.1177/2632084320947559
 36. Malhi P, Bharti B. Hues to Blow Away the Blues: Management of Posttraumatic Stress Disorder in Child Sexual Assault Victim. *Indian J Soc Psychiatry*. 2023;39(2):190–2. doi:10.4103/ijsp.ijsp_292_20a
 37. Laird L, Mulvihill N. Assessing the Extent to Which Art Therapy Can Be Used with Victims of Childhood Sexual Abuse: A Thematic Analysis of Published Studies. *J Child Sex Abus*. 2022 Jan 2;31(1):105–26. doi:10.1080/10538712.2021.1918308
 38. Raslan IES, Dweedard HB, Mohamed MF. Child Maltreatment and Survival in Jane Rowan’s *The River of Forgetting: A Memoir of Healing from Sexual Abuse*. *International Journal of Arabic-English Studies*. 2024;24(2):395–414. doi:10.33806/ijaes.v24i2.611
 39. Chesnot OH, Kachaamy E. Sexual violence related to terrorism: Psychological care for Yezidi women in Iraq. *Ann Med Psychol (Paris)*. 2023;181(8):735–41. doi:10.1016/j.amp.2023.05.005

40. Carter R, Wigington S, O-Mahony B, Coates R, Crisp S. Integrating Group Cognitive Behavioural, Art Psychotherapy for women following childhood sexual abuse. *International Journal of Art Therapy: Inscape*. 2024;29(1):4–18. doi:10.1080/17454832.2023.2226722
41. Goldner L, Herzig Reingold O. Attachment Representations of Female Child Sexual Abuse Survivors Reflected in the Bird's Nest Drawing Assessment. *Art Therapy*. 2024;41(2):65–73. doi:10.1080/07421656.2023.2211504
42. Luzzatto P, Ndagabwene A, Fugusa E, Kimathy G, Lema I, Likindikoki S. Trauma Treatment through Art Therapy (TT-AT): a 'women and trauma' group in Tanzania. *International Journal of Art Therapy: Inscape*. 2022;27(1):36–43. doi:10.1080/17454832.2021.1957958
43. Matt L, Thompson K, Lofgreen AM, Van Horn R. Treatment of posttraumatic stress disorder related to military sexual trauma. *Psychiatr Ann*. 2020;50(10):432–6. doi:10.3928/00485713-20200916-01
44. Van Den Berg ZD, Anderson M. Queer Worldmaking in Sex-Positive Art Therapy: Radical Strategies for Individual Healing and Social Transformation. *Art Therapy*. 2023;40(4):188–96. doi:10.1080/07421656.2023.2193660
45. Van Den Berg ZD. Proposing an Ar(t)chive of Queer Forms With Sexual, Gender, and Relationship Diverse Clients. *Art Therapy*. 2024;41(1):44–50. doi:10.1080/07421656.2023.2240677
46. Van Den Berg ZD. Addressing traumatic experiences of cis-heterosexism with LGBTQIA+ clients in art therapy. *International Journal of Art Therapy: Inscape*. 2024;29(1):57–66. doi:10.1080/17454832.2023.2261542
47. Hetherington R. Somatic small body map protocol: renegotiating trauma with LGBTQIA+ service users. *International Journal of Art Therapy: Inscape*. 2024;29(4):230–9. doi:10.1080/17454832.2024.2388086
48. Hetherington R, Della Cagnoletta M, Minghini F. Not female-to-male but shadow-to-human: an exploration of body tracing in terms of embodiment and identity definition during gender transitioning. *International Journal of Art Therapy: Inscape*. 2021;26(1–2):55–64. doi:10.1080/17454832.2021.1889626
49. Kirby M. Integrating a Sex-Positive Approach in Art Therapy. *Art Therapy*. 2023;40(4):171–8. doi:10.1080/07421656.2023.2193599
50. Sigal N. Dual perspectives on art therapy and EMDR for the treatment of complex childhood trauma. *International Journal of Art Therapy: Inscape*. 2021;26(1–2):37–46. doi:10.1080/17454832.2021.1906288
51. Kehr T, Haeyen S. Drawing your way out: Imagery rehearsal based art therapy (IR-AT) for post-traumatic nightmares in borderline personality disorder. *J Clin Psychol*. 2024;80(5):1015–30. doi:10.1002/jclp.23638
52. Malhotra B, Gussak DE. Reconciling Demonically-Monstrous Self-Images in Those Labeled as Sex Offenders. *Art Therapy*. 2023;40(1):15–21. doi:10.1080/07421656.2022.2110807
53. Galinsky TJ. Diorama as a Tool for Exploring the Sexual Self. *Art Therapy*. 2023;40(4):197–204. doi:10.1080/07421656.2023.2206355
54. Malhotra B, Gussak DE. Journey: A Strength-Based Art Therapy Approach With Those Who Have Sexually Offended. *Art Therapy*. 2021;38(4):173–80. doi:10.1080/07421656.2020.1823198
55. Varshney DKS, Agrawal M, Tripathi RK, Rasaily S. Pioneering approaches: Navigating mind wandering and self-silencing in dissociated adolescent female sexual trauma survivors - An interpretative phenomenological analysis. *European Journal of Trauma and Dissociation*. 2024;8(4). doi:10.1016/j.ejtd.2024.100445
56. Metzl E. Art therapy with couples: integrating art therapy practices with sex therapy and emotionally focused therapy. *International Journal of Art Therapy: Inscape*. 2020;25(3):143–9. doi:10.1080/17454832.2020.1774628
57. Alberta Shkempi, Elda Skenderi, Feride Imeraj, Numila Kuneshka, Genti Xhelili, Asja Durma. A case of sexual abuse and art therapy. *World Journal of Advanced Research and Reviews*. 2023 Apr 30;18(1):157–60. doi:10.30574/wjarr.2023.18.1.0566
58. Pretorius G, Pfeifer N. Group Art Therapy with Sexually Abused Girls. *South African Journal of Psychology*. 2010 Mar 1;40(1):63–73. doi:10.1177/008124631004000107
59. Martens JP, Ayaz S, Ayaz S, Dearn G. Meaning and blame: Meaning threats increase victim blaming, but profession and art can diminish it. *International Journal of Psychology*. 2023 Oct 15;58(5):415–23. doi:10.1002/ijop.12916
60. Nisa' HF, Pranungsari D. Implementation of Art and Supportive Therapy to Relieve Severe Depression in a Female Victim of Sexual Abuse [Penerapan Terapi Seni dan Suportif untuk Menurunkan Depresi Berat pada Perempuan Korban Kekerasan Seksual]. *INSAN Jurnal Psikologi dan Kesehatan Mental*. 2022 Sep 14;7(1):98–115. doi:10.20473/jpkm.v7i12022.98-115
61. Pifalo T. Art Therapy with Sexually Abused Children and Adolescents: Extended Research Study. *Art Therapy*. 2006 Jan 1;23(4):181–5. doi:10.1080/07421656.2006.10129337
62. Beaumont SL. Art Therapy for Gender-Variant Individuals: A Compassion-Oriented Approach. *Canadian Art Therapy Association Journal*. 2012 Sep 15;25(2):1–6. doi:10.1080/08322473.2012.11415565
63. Naran K. Using art therapy to address the protective false self when working with queer identity.

- South African Journal of Arts Therapies. 2023 Jul 13;1(1):89–110. doi:10.36615/sajat.v1i1.2576
64. Kelly BL, Wynn NC, Gates TG. Using the Arts to Facilitate Affirming, Inclusive, Strengths-Based, Groups with LGBTQ+ Youth. *Clin Soc Work J*. 2025 Mar 20;53(1):69–79. doi:10.1007/s10615-024-00950-1
65. Gaete MI, Castillo-Hermosilla M, Martínez C, Concha F, Paiva-Mack I, Tomicic A. Protocol of Application and Phenomenological Exploration of Body Mapping in Transgender Population: An Art-Based Research Method. *Int J Qual Methods*. 2023 Oct 17;22. doi:10.1177/16094069221150108
66. Malo MP. *Creating Multiple Stories* [Research Paper]. Concordia University; 2016.
67. MacWilliam B, Harris BT, Trottier DG, Long Kristin, editors. *Creative Arts Therapies and the LGBTQ Community: Theory and Practice*. London: Jessica Kingsley Publishers; 2019.
68. Tobin B. *Art Therapy Meets EMDR*. Canadian Art Therapy Association Journal. 2006 Sep 6;19(2):27–38. doi:10.1080/08322473.2006.11432286
69. Newland P, Bettencourt BA. Effectiveness of mindfulness-based art therapy for symptoms of anxiety, depression, and fatigue: A systematic review and meta-analysis. *Complement Ther Clin Pract*. 2020 Nov;41:101246. doi: 10.1016/j.ctcp.2020.101246
70. Krakow B, Kellner R, Neidhardt J, Pathak D, Lambert L. Imagery rehearsal treatment of chronic nightmares: With a thirty month follow-up. *J Behav Ther Exp Psychiatry*. 1993 Dec;24(4):325–30. doi: 10.1016/0005-7916(93)90057-4
71. Gray P, Rule AC, Gordon M. Black Fifth Graders Make Dioramas of Traditional African Cultures to Explore Racial Identity, Cultural Universals, and Spatial Thinking. *Urban Educ (Beverly Hills Calif)*. 2019 Feb 8;54(2):274–308. doi:10.1177/0042085915613552