■ Sun. Sep 28, 2025 9:00 AM - 10:30 AM JST | Sun. Sep 28, 2025 12:00 AM - 1:30 AM UTC **■** Session Room 4 (Large Hall B)

[Symposium 81] Poiesis in Psychiatry: Creativity, Meaning, and Recovery in Mental Health

Moderator: Itsuo Asai (Heart Clinic Medical Corporation)

[SY-81]

Poiesis and Psychiatric Recovery: Creative Practices in Everyday Life

Itsuo Asai¹, Shinichiro Tanaka², Rieko Shioji³, Segrio Covarrubias⁴, Federico Ossola⁵ (1. Heart Clinic Medical Corporation (Japan), 2. Tokyo University of the Arts (Japan), 3. Tokyo Metropolitan University (Japan), 4. Hospital Civil de Guadalajara (Mexico), 5. Groupe hospitalier Fondation Vallée (France))

[SY-81-01]

Salutogenic Turn in Poietic Process and Clinical Settings

*Shinichiro Tanaka¹ (1. Tokyo University of the Arts (Japan))

[SY-81-02]

Diary entries in Morita therapy and clients' resilience observed therein

*Rieko Shioji¹ (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan))

[SY-81-03]

MIGRATION AND PSYCHOSIS THROUGH ART: A CASE STUDY OF MARTIN RAMIREZ

*Sergio Armando Covarrubias-Castillo¹ (1. University of Guadalajara / Hospital Civil de Guadalajara "Fray Antonio Alcalde" (Mexico))

[SY-81-04]

Art and Psychiatry: An Institutional Experience as a Vector of Cultural Porosity

*Federico OSSOLA^{1,2} (1. Groupe Hospitalier Fondation Vallée - Paul Guiraud (France), 2. Association franco-argentine de psychiatrie et de santé mentale (France))

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Keywords: Mental Health Recovery、Art Therapy、Narrative Medecine、Psychiatry、Resilience

This symposium explores how creative practices contribute to psychiatric recovery through poiesis—the generative process of meaning-making, identity, and resilience in the face of psychological disruption.

Dr. Shinichiro Tanaka (Tokyo University of the Arts, Japan) analyzes the manga Blue Period, using Salutography to frame artistic creation as a process of self-discovery and psychological reorientation.

Dr. Rieko Shioji (Tokyo Metropolitan University, Japan) presents qualitative findings from outpatient Morita Therapy. Through daily diary writing, patients shift from symptom-focused narratives to renewed engagement with everyday life. These texts become quiet acts of self-composition—an art of the ordinary.

Dr. Sergio Covarrubias (Hospital Civil de Guadalajara, Mexico) explores the work of outsider artist Martín Ramírez. Created during psychiatric confinement, his drawings reflect the intersection of psychosis, migration, and the restorative power of structured, symbolic imagery.

Dr. Federico Ossola (Fondation Vallée – Paul Guiraud, France) discusses an institutional initiative integrating contemporary art into community psychiatry. Through public exhibitions, patients and artists collaborate to dissolve boundaries between clinic and culture.

Together, these presentations offer a humanistic perspective on psychiatry, where poiesis is not merely metaphorical, but enacted through creative expression. Healing is redefined as a process of reconstruction—through narrative, image, and attention to the everyday.

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[SY-81-01] Salutogenic Turn in Poietic Process and Clinical Settings

*Shinichiro Tanaka¹ (1. Tokyo University of the Arts (Japan))

Keywords: Poietic process、Salutography、Polyvagal theory、Saying-but resilience、Mental health services in Japan

Mental health services in Japan are currently changing 'from negative to positive' with some new aspects of shared decision making (SDM), *tojisha-kenkyu* (self-directed study), open dialogue (OD), and salutography.

This spring, I and my colleague Yayoi Imamura published a book, "Guidebook to Salutography", and proposed a positive way of seeing people with some mental health tasks from the viewpoint of salutogenesis.

In this book, we conducted Manga salutographies and described the new concept of "saying-but resilience" in the salutography of "Blue Period", a manga in which the protagonist Yatora Yaguchi wants to attend Tokyo University of the Arts (TUA), but is struggling with his rivals.

Preparing a case vignette of a female student, I will show the negative and positive meanings of her psychosomatic reactions by comparing the following two considerations: 1) from the medical standpoint and 2) from the salutogenic standpoint with the polyvagal theory and the "saying-but resilience" concept.

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[SY-81-02] Diary entries in Morita therapy and clients' resilience observed therein

*Rieko Shioji¹ (1. Faculty of Health Sciences, Tokyo Metropolitan University (Japan)) Keywords: Morita Therapy、Diary、resilience、psychotherapy、depression

In Morita therapy, a form of psychotherapy that originated and developed in Japan, one of the therapeutic goals is to restore the free flow of the mind (including the movement of attention) and life. This recovery process is understood as the manifestation of the client's resilience. In our qualitative study of the "diaries" of inpatient Morita therapy, examples of the manifestation of resilience can be found in the diary entries. For example, there are instances where clients gain a profound sense of the passage of time by observing the growth of plants they have cared for. These descriptions indicate a "subjective experience" of time" that differs from the experience of time being stuck, rushed, or left behind. In inpatient Morita therapy, occupational work becomes the center of treatment, while in outpatient therapy, the patient's daily life as described in interviews becomes the center of treatment. The client's experiences within these settings are described in detail during interviews with the therapist or in diary entries. In Morita therapy, interviews with the therapist and diary entries play complementary roles. Morita therapy emphasizes the importance of focusing on topics related to the client's daily life, but this also means shifting the focus away from excessive concentration on symptoms. The process of the client writing a diary, the therapist reading it and providing feedback, and the client rereading it and revisiting their own experiences, also provides opportunities for recovery. We consider the "Diary" of Morita therapy to be art in the sense that "art is found in concrete everyday life"

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[SY-81-03] MIGRATION AND PSYCHOSIS THROUGH ART: A CASE STUDY OF MARTIN RAMIREZ

*Sergio Armando Covarrubias-Castillo¹ (1. University of Guadalajara / Hospital Civil de Guadalajara "Fray Antonio Alcalde" (Mexico))

Keywords: psychosis, migration, art

Migration has been extensively studied as a complex sociocultural process that has become associated with a well-known risk factor for psychopathological conditions, such as psychotic disorders. Simultaneously, there have been relatively frequent observations of intriguing cases in which psychopathological symptoms coexist with marked traits of creativity and a tendency toward artistic expression. A fascinating case where these variables intervene is that of the Mexican painter Martin Ramirez. After migrating from Western Mexico to the United States of America, he began to develop typical symptoms of a primary psychotic disorder. It is estimated that he spent approximately 30 years at a mental health facility in California, reportedly in a catatonic state (apparently without uttering a single word), yet expressing himself through unique artistic paintings and drawings in materials found within the institution where he was confined. This case serves as a basis for addressing topics related to the psycho-socio-cultural interplay of migration and psychosis.

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[SY-81-04] Art and Psychiatry : An Institutional Experience as a Vector of Cultural Porosity

*Federico OSSOLA^{1,2} (1. Groupe Hospitalier Fondation Vallée - Paul Guiraud (France), 2. Association franco-argentine de psychiatrie et de santé mentale (France))
Keywords: Art、Porosity、Cultural、Institutional、Experience

We wish to present an institutional experience as a vector of cultural porosity between art and psychiatry. This intervention is an intervention in our outpatient consultation center south of Paris, with the participation of local artists. Exhibitions are regularly organized in the care center, where caregivers, patients, and people from outside the psychiatric field meet. Beyond the artistic enrichment that the artists bring to the space, clinical, institutional, and social effects can be highlighted:

A porosity between the city and the care center

A porosity between the space dedicated to patients and the universal space of culture A de-stigmatization of the psychiatric care space An opening to the prospect of change in the face of the chronic nature of certain illnesses

The proposal of artists from different backgrounds and their cultural resonance with the diversity of the public welcomed at the care center

The effects of the artist-led approach in the healthcare setting are not intended to be therapeutic, but the therapeutic benefits seem evident. The institutional effects on teamwork contribute to improving care. Relationships with partners outside of psychiatry, particularly the city hall, introduce a political dimension through culture. We wish to share this experience, which has been ongoing for eight years, with some thirty participating artists, and which is also easily reproducible in other healthcare settings