

Symposium | Art : [Symposium 4] Art and Trauma

📅 Thu. Sep 25, 2025 1:05 PM - 2:35 PM JST | Thu. Sep 25, 2025 4:05 AM - 5:35 AM UTC 🏛️ Session Room 5
(Conference Room A)

[Symposium 4] Art and Trauma

Moderator: Shinichiro Tanaka (Tokyo University of the Arts), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-4]

Art and Trauma

Kanako Shimizu⁴, Naoko Miyaji², Pablo Farias³, Jaswant Guzder¹ (1. University of British Columbia, Department of Psychiatry (Canada), 2. Graduate School of Social Sciences Hitotsubashi University (Japan), 3. Bats'i Lab, a community program focused on social movements and photography (Mexico), 4. Rokubancho Mental Clinic, Japan depression center (Japan))

[SY-4-01]

At the water's edge: Sand play co-therapy, Relieving compassion fatigue

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[SY-4-02]

Trauma Island in a Box: Art Co-Therapy for Trauma Processing

*Naoko Miyaji¹, Kanako Shimizu² (1. Hitotsubashi University (Japan), 2. Rokubancho Mental Clinic, Japanese Depression Center (Japan))

[SY-4-03]

Working with indigenous communities affected by violence and displacement: the role of visual narratives in building mental health resilience

*Pablo Farias¹ (1. Bats'i Lab (Mexico))

[SY-4-04]

Innovative Creative Arts Projects relevant to trauma and serious mental health disorders related to Cultural Genocides

*Jaswant Guzder¹ (1. University of British Columbia (Canada))

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Keywords : Art、Trauma、Art therapy、Culture、Grief

The use of art is increasingly relevant and emerging in global mental health. However, therapeutic significance and potential in healing for creative arts are shown in non-verbal communication, that fact presents us with the challenges in modern psychiatry. Every culture since ancient times has sought to express their emotions through art arousing a range of emotional states including joy, awe, grief and despair that are a universal offering of solace and connection. Trauma tears apart our heart. War and disaster tear apart our families and society. However, art has offered us a route to repair fragmented and broken hearts. The arts often reach into generational, mythic and folk bonds that offer a creative reclamation of longstanding cultural resonances including local monuments and songs. Art therapy has been an integral part of psychiatric care and assessment for traumatized children and youth, especially evident in therapeutic approaches in the post-World war, and children affected by historical genocides including post-slavery trauma, and indigenous cultural genocide. Moreover, mental health care professionals facing trauma may also soothe their emotional impact through creative arts. In this symposium, we will pursue a dialogue on the possibilities of art in relation to clinical mental health practice related to trauma and grief based on work across varied global contexts. The speakers will relate their experiences and therapeutic implications of how art and art therapy allow us to apply these methods to collective and individual trauma implicating cultural, historical, and spiritual issues and their emerging role relevant to the future of psychiatry in rapidly changing contemporary society.

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[SY-4-01] At the water's edge: Sand play co-therapy, Relieving compassion fatigue

*Kanao Shimizu^{1,2}, *Naoko Miyaji³ (1. Rokubancho Mental Clinic, Japan depression center (Japan), 2. Jichi Medical University, Department of Psychiatry (Japan), 3. Graduate School of Social Sciences Hitotsubashi University (Japan))

Keywords : compassion fatigue、burnout、sandplay、art therapy、trauma

This presentation explores the use of Sand Play Therapy (SPT) as a psychological intervention aimed at alleviating compassion fatigue and burnout among mental health professionals. The study involved a series of co-therapeutic SPT sessions conducted between two psychiatrists who shared a longstanding relationship characterized by trust and professional familiarity. The interactive and symbolic nature of the sand play facilitated psychodynamic movement within each participant, ultimately contributing to the release of emotional exhaustion. The methodology consisted of alternate sand tray constructions, with each participant engaging in 20–40 minute turns. The second participant would then modify the previous tray—by adding, removing, or repositioning figures—thus generating a continuous, evolving narrative. A total of seven sessions were conducted. These sessions took place approximately one week after the 2024 Noto Peninsula Earthquake (M7.6) in Japan, a catastrophic event that not only reactivated traumatic memories of the 2011 Great East Japan Earthquake but also intensified existing compassion fatigue experienced in daily clinical work. This temporal proximity provided a unique context in which the efficacy of SPT could be observed under acute stress conditions. The presentation will examine the dynamic intersubjective processes that unfolded during and after the sessions, highlighting the emergence of deeper layers of the psyche and shared symbolic meaning-making. The co-creative process allowed for mutual psychological support, the symbolic transformation of emotional burdens, and the ongoing evolution of personal and shared narratives beyond the sessions themselves. We conclude by discussing the therapeutic potential of sand play co-therapy as a reflective, non-verbal modality for mitigating compassion fatigue and enhancing emotional resilience among clinicians.

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Moderator: Shinichiro Tanaka (Tokyo University of the Arts), Itsuo Asai (Heart Clinic Medical Corporation)

[SY-4-02] Trauma Island in a Box: Art Co-Therapy for Trauma Processing

*Naoko Miyaji¹, Kanako Shimizu² (1. Hitotsubashi University (Japan), 2. Rokubancho Mental Clinic, Japanese Depression Center (Japan))

Keywords : trauma、 grief、 containment、 Trauma Island、 symbolic healing

Following the initial experiment with sand play co-therapy (presented in *Sand Play Co-therapy: Relieving Compassion Fatigue*), a second session was held a year later. What does it mean to place something in a box? And what might it signify to place "Trauma Island" (introduced in Symposium 104) into one?

Unlike the original co-therapy format, the two participants (NM and KS) worked individually but side by side, creating separate artwork. Using boxes and natural materials—clay, nuts, and branches gathered from a nearby forest on a university campus—each participant explored their own symbolic process.

For NM, placing objects into a box became an act of mourning. In Japan, the remains of the deceased are often placed in wooden boxes made of paulownia wood. During wartime, soldiers' remains were sent home in such boxes, which were frequently empty. Despite this, their symbolic weight provided profound meaning and closure for the bereaved.

KS created a small box containing a model of Trauma Island (Kanjōto), a ring-shaped landform encircling an inner sea. In that sea lie the submerged: the deceased and those so deeply traumatized they are unable to speak.

Placing objects in a box can symbolize containment, protection, secrecy, classification, closure, and more. It offers a secure space—one that allows for the option of sharing or withholding, while potentially initiating transformation. Classification and closure, in particular, can serve as catalysts for change.

To put Trauma Island into a box is to distance oneself from the magnetic pull of trauma. It reflects a decision to reassess, to step back from the full impact of a traumatic event—including secondary and tertiary trauma—and to create the space needed to protect oneself and move forward.

As a therapeutic modality, "putting it in a box" has the potential to foster resilience, aid in the processing of trauma and grief, and offer a tangible structure for symbolic healing.

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[SY-4-03] Working with indigenous communities affected by violence and displacement: the role of visual narratives in building mental health resilience

*Pablo Farias¹ (1. Bats'i Lab (Mexico))

Keywords : Community mental health、Trauma、Displacement、Resilience、Alternative mental health resources

Southern Mexico is representative of many regions of the world where cultural diversity, poverty and limited institutional health resources come together to demand innovative approaches to community mental health. This presentation explores an approach focused on assisting communities affected by violence and displacement to develop visual narratives using documentary photography. These visual narratives promote public dialogue; validate their lived experiences of trauma; generate support and solidarity; and build cross-generational dialogue that promotes social engagement. Community mental health is traditionally linked to health service institutions. In many low-income country settings, institutional health resources are absent, making traditional clinical approaches of little relevance. This is particularly the case in settings affected by violence and displacement, where mental health is challenged and resources are particularly scarce. Given these situations it is important to consider alternative approaches to mental health and wellbeing. In this presentation I explore the work of Bats'i Lab, a creative photography project in southern Mexico that has developed a set of experiences of collaboration with community-based organizations that train and support community health promoters; build social networks of support; promote human rights; and develop educational resources. This collaborative program is based on a reference collection of documentary photography that serves as a repository to generate visual narratives for communities affected by violence and displacement. By working with indigenous communities to organize public photography exhibits and dialogues, this program validates and shares their experiences and promotes solidarity. New models are needed to expand the relation of psychiatry with community-based organizations that can contribute to resiliency and mental wellbeing. Cultural psychiatry is key in advancing innovation in these contexts and promoting the development of mental health resources that respond to the needs and conditions of marginalized communities.

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[SY-4-04] Innovative Creative Arts Projects relevant to trauma and serious mental health disorders related to Cultural Genocides

*Jaswant Guzder¹ (1. University of British Columbia (Canada))

Keywords : creative arts projects for trauma、 cultural genocide and post slavery genocide interventions、 global health innovations with creative arts methods

The earlier psychotherapeutic explorations of creative arts projects modalities began with Winnicott (Playing and Reality), Milner, Jung, Prinzhorn, Charcot, Nise de Silveira and others, pointing to the possibility of engaging with serious mental illness, trauma or high risk populations. The presentation will review more recent projects which integrated art methodologies relevant to community engagement, therapy and research exploring the possibilities for marginalized and high risk patients impacted by the post slavery genocide and cultural genocide of indigenous peoples. The Jamaica Dream-A-World project addressed promotion of resilience in high risk school aged children presenting with severe emotional dysregulation and learning delays integrating creative methods as a significant ingredient for developmental gains. "Two eyed seeing" and integration of indigenous cultural elements have been applied in cohorts of Pacific Coast (Canadian and Alaskan American projects) peoples. Bapu Trust in Pune India led by Dr Bhargavi Davar and their training center have engaged with art methods and supported indigenous rituals in mental health for socially oppressed and marginalized communities. The Madness Hotel and ongoing use of theatre as a healing space was inspired by Dr Nise de Silveira in Rio de Janeiro for serious mental illness including indigenous and post slavery genocide populations.