ASOS JOURNAL
The Journal of Academic Social Science

Akademik Sosyal Araştırmalar Dergisi, Yıl: 11, Sayı: 143, Ağustos 2023, s. 140-154

ISSN: 2148-2489 Doi Number: http://dx.doi.org/10.29228/ASOS.70844

Yayın Geliş Tarihi / Article Arrival Date *30.06.2023*

Yayımlanma Tarihi / The Publication Date *29.08.2023*

Dr. Öğr. Üyesi Volkan DEMİR
İstanbul Gelişim Üniversitesi
vdemir@gelisim.edu.tr
ORCID: 0000-0002-8148-8647

Dr. Öğr. Üyesi Esra SAVAŞ
İstanbul Gelişim Üniversitesi, Psikoloji
dresrasavas@gmail.com
ORCID: 0000-0002-8178-6804

Dr. Öğr. Üyesi Bahar AKOĞLU
Nişantaşı Üniversitesi, Psikoloji
bahar.akoglu@nisantasi.edu.tr,
ORCID: 0000- 0002-1457-2531

EXAMINING THE EFFECT OF ART THERAPY ON REDUCING EMOTION REGULATION DIFFICULTIES: THERAPY OR EDUCATION?

Abstract

It can be said that the main goal of psychotherapy approaches is to change dysfunctional attitudes and behaviors. The therapeutic effectiveness of psychotherapy methods that lead to change, in other words, the establishment of a causal relationship between the change in the target behavior, symptom or disorder and the intervention is examined through effectiveness studies. Emotion regulation processes play an important role in the development of many psychopathologies. The aim of this study is to examine the effect of the art therapy program on reducing the emotion regulation difficulties of individuals and to compare it with the effect of the same practices on reducing the emotion regulation difficulties of individuals participating in art therapy training, which is carried out in an experiential way. In the study, art therapy program was applied to the first

experimental group and art therapy training was applied to the second experimental group. Psychology undergraduate and psychology graduate students participated in the study. Individuals who scored high on the Difficulties in Emotion Regulation Scale and volunteered were assigned to the first experimental group (11) and the second experimental group (11) by random sampling method. The program was applied to both experimental groups once a week for a total of ten sessions, each session lasting 180 minutes. The same program developed by the program coordinator was applied to both groups. Wilcoxon Signed Rank Test was used to compare the groups within each other. As a result, it was found that the emotion regulation difficulties of the individuals who participated in the art therapy program decreased, and the difference between the mean pre-test and post-test scores of the individuals who participated in the art therapy training program was not significant at the .05 level. From this point of view, treatment motivation is an important issue for art therapy as in other treatment methods. It can be stated that being ready for change and taking steps towards recovery is an important factor in emotion regulation.

Keywords: Art Therapy, Emotion Regulation, Psychotherapy, Education.

INTRODUCTION

Emotion dysregulation is defined as lack of conscious awareness of emotions, difficulty in understanding and accepting emotions, difficulty in impulse control and focusing on targeted goal-oriented actions during negative affect, and difficulty in accessing emotion regulation strategies (Gratz & Roemer, 2004). Emotions can lead to harmful as well as beneficial outcomes (John & Gross, 2004). An effective determinant here is the form of emotion regulation (Denollet, Nyklìček, & Vingerhoets, 2008). Gross and Munoz (1995) stated that emotion regulation is the basis of psychological well-being. Research has shown that emotional dysregulation can have negative effects on an individual's health and well-being. While emotional dysregulation, which negatively affects the mental health of individuals, is defined as a part of the clinical picture in anxiety and mood disorders (Campbell-Sills & Barlow, 2007; Gibb et al, 2001; Hankin, 2005; Maciejewski & Mazure, 2006) as well as generalized anxiety disorder (Mennin, Heimberg, Turk, & Fresco, 2002), posttraumatic stress disorder (Cloitre, 1998), substance abuse (Hayes, Wilson, Gifford, Follette, & Strosahl, 1996), dissociative symptoms (Briere, 2010), self-harming behavior (Gratz & Gunderson, 2006, Gratz & Chapman, 2007), eating disorders (Sim & Zeman 2006; Whiteside et al. , 2007) and borderline personality disorder (Gratz & Gunderson, 2006; Linehan, 1993).

When the literature is examined, it is seen that psychosocial intervention studies have been conducted to reduce emotion regulation difficulties. When these studies are evaluated, it is seen that psychoeducation, training or therapy programs are prepared in the form of psychoeducation, training or therapy programs in order to intervene in emotion regulation, emotion control and emotion regulation difficulties on different theoretical bases such as cognitive-behavioral therapy, dialectical behavioral therapy, mindfulness and meditation (Chiodelli et al, 2018; Demir & Gündoğan, 2018; Dingle & Fay, 2017; Erden-Çınar & Eminoğlu, 2020; Gençoğlu & Yılmaz, 2013; Gülgez & Gündüz, 2015; Menezes & Bizarro, 2015; Rizvi & Steffel, 2014; Vatan, 2020). Art therapy is a relatively new psychosocial intervention approach that is subject to effectiveness studies on emotion regulation (Karataş &

Yavuz-Güler, 2020; Nan, Hinz, & Lusebrink, 2021; Nazeri, Ghamarani, Darouei, & Ghasemi-Tabatabaei, 2020).

Art therapy, which is based on the theories of Freud and Jung and the techniques of psychoanalysis (Malchiodi, 2003; Rubin, 2010), is one of the preferred types of therapy in group therapies and psychoeducation programs. Art therapy is defined as the use of various art materials in providing diagnosis and treatment to cause positive development in individuals, resolve conflicts, reduce physical and mental problems, solve problems, and help cope with stress (Case & Dalley, 2006; Geue et al., 2010; Malchiodi, 2005). Art therapy combines the emotional properties of different art materials and classical psychotherapy approaches (Edwards, 2004). This approach includes all activities in the field of art practices such as painting, music, theater, cinema, movement and dance (Malchiodi, 2003).

Many psychotherapy methods aim to change the mechanisms that are related to their theoretical background and that they claim lead to the problem or problems. Different psychotherapy methods may change different mechanisms, but these changed mechanisms may have a similar effect on the symptom or problem (Arch & Craske, 2008; DeRubeis, Brotman & Gibbon, 2005). One of the ways frequently used in research to determine the mechanisms and mediators leading to therapeutic change is to compare different psychosocial interventions. However, when the studies in the literature are examined, it is seen that variables that may be related to psychotherapy motivation such as attitudes towards the therapy process and help-seeking behavior are addressed in a limited way.

Motivation has been recognized as extremely important in terms of the therapeutic process and has been seen as an important and integral part of the treatment process from the beginning to the end (Cahill, Adinoff, Hosig, Muller & Pulliam, 2003; Longshore & Teruya 2006). Clients' motivations regarding the therapy process have been evaluated especially in the context of process outcomes (Moore, Tambling & Anderson, 2013; McCarthy 2014; Ilagan, Vinson, Sharp, Ilagan & Oberman, 2015). It was found that the treatment outcomes of clients who were motivated to heal during the therapeutic process were significantly better than those of individuals who were not motivated during the therapy process (Melnick, De Leon, Thomas, Kressel & Wexler, 2001; Hiller, Knight, Leukefeld & Simpson, 2002; Longshore & Teruya 2006). Therefore, this study aimed to investigate the effectiveness of art therapy program on individuals' emotion regulation difficulties. The most important question of the research is whether the emotion regulation difficulties of the individuals who participated in the art therapy training, in which the same practices as the art therapy program were carried out in an experiential way, decreased or not. The following hypotheses were formed in line with this purpose:

1. The post-test mean scores of the individuals participating in the art therapy program on the Emotion Regulation Difficulties Scale are significantly lower than the pre-test mean scores.

2. The post-test mean scores of the individuals participating in the art therapy training program are not significantly different from the pre-test mean scores of the Emotion Regulation Difficulties Scale.

Method

Research Design

In this study, a quasi-experimental design without pretest-posttest control group was used. Two experimental groups were formed according to this design. In the study, the individuals in the experimental groups were given the Difficulties in Emotion Regulation Scale as a pre-test before the applications and as a post-test at the end of the applications. The program was applied to both experimental groups once a week for a total of ten sessions, each session lasting 180 minutes. The same program developed by the program coordinator was applied to both groups.

Participants

The sample of the study was selected among psychology undergraduates and psychology graduate students on the basis of the scores obtained from the scale used and voluntariness. The data obtained from the scales applied were analyzed, and the individuals who received the highest scores from the emotion regulation scale and who reported that they could participate in the time period of the study were determined. Participants were informed about the purpose of the study and the characteristics of the study, it was stated that participation was based on the principle of voluntariness and consent was obtained from the participants. Participants were informed that their personal information would not be shared. Both groups consisted of 11 students. The students were assigned to the groups by random sampling method. The art therapy group consisted of 6 female and 5 male students. In the art therapy training group, there were 5 female and 6 male students. Participants were between the ages of 22-25. The exclusion criteria used in the selection of students to participate in the group study were as follows. Students with chronic physical illness, psychiatric treatment (medication and/or therapy), history of substance abuse, suicide attempt or self-harm, and previous participation in any similar meditation-based therapy program were excluded.

It was evaluated whether the participants were different from each other in terms of the measurements evaluated in the study before the art therapy and art therapy training programs started. The arithmetic means and standard deviations of the pre-measurement scores of the Difficulties in Emotion Regulation Scale (DRES) of the experimental groups are given in Table 1.

Table 1. Kruskal-Wallis H test results related to the Emotion Regulation Difficulty Scale (DDGS) pre-measurement scores of individuals participating in Art Therapy and Art Therapy Training

	Group	n	Row avg.	Sd	p
DDGÖ	SanatlaTerapi	11	12,27		
Pre-Measurement	Art Therapy Training	11	10,73	1	,312

As seen in Table 1, it is seen that there is no significant difference between the pre-test scores of the Difficulties in Emotion Regulation Scale (DRES) between the two groups (p>. 05).

Accordingly, it can be said that the groups were equivalent to each other in terms of the dependent variable before the experimental application.

Data Collection Tools

In this study, Personal Information Form and Difficulties in Emotion Regulation Scale (DRES) were used. The psychometric properties of the scale are given below.

Personal Information Form

This form was prepared to determine the sociodemographic characteristics of the students who participated in the study and information about the participants' age, gender, education level, marital status, alcohol-substance use and other physical disorders were obtained.

Difficulty in Emotion Regulation Scale

The Emotion Regulation Difficulties Scale developed by Gratz and Roemer (2004) to determine emotion regulation difficulties was used to determine the students who would participate in the study. It consists of six subscales: Awareness, Clarity, Acceptance, Impulse Control, Purposeful Behavior, and Strategic. Each item is evaluated on a 5-point Likert-type scale (1 = never, 5 = always). There is no cut-off score for the scale, but higher scores indicate the presence of a more severe emotion dysregulation difficulty. The Cronbach Alpha internal reliability coefficient for the whole scale is .93, and for the subscales it ranges between .80 and .89. Test-retest reliability was calculated as .88 (n=21). The Turkish adaptation, validity and reliability studies of the scale were conducted by Rugancı and Gençöz (2010). The internal consistency coefficient of the scale was found to be Cronbach Alpha, α=0.94. It was reported that the internal consistency coefficients of the sub-dimensions of emotion regulation difficulty ranged between Cronbach α=0.90-0.75. The test-retest reliability of the Emotion Regulation Scale was found to be .83. Guttman halving reliability coefficient was found to be 0.95.

Formation of Research Groups

The Emotion Regulation Difficulty Scale developed by Gratz and Roemer (2004) to determine emotion regulation difficulties was used to determine the individuals who would participate in the study. The scale was administered by the researchers to a total of 62 students, 38 female and 24 male, who graduated from psychology undergraduate and psychology graduate programs in Istanbul. Twenty-nine students who scored high on the scale were invited for an interview. Among the invited students, 7 students did not participate in the pre-interview for some reasons. In the pre-interview, each student was given standard information about the program. Among the volunteer students, 11 students were included in the art therapy group and 11 students were included in the art therapy education group. The program was applied to both experimental groups once a week, each session lasting 180 minutes, for a total of ten sessions. After the programs were completed, the participants completed the Difficulties in Emotion Regulation Scale once again.

Sessions

The program consists of three steps. These are: 1) Creating artistic creative products with appropriate artistic materials and methods, 2) Emphasizing self-awareness through the artistic creations that emerge, 3) It consists of co-production, monitoring, and working on current or previous associations with the participants. The program was planned for eight weeks with each session lasting 180 minutes. The program was prepared by the researcher using many sources

(Allen, 2017; Demir, 2017; Jalambadani, Borji, & Bakaeian, 2020; Jang et al., 2018; Peterson & Rappaport, 2014).

Session I.

In order to ensure the visual creation of emotions, the participants were asked to pay attention to the emotions they felt and express the emotions they noticed using paint. The colors they used were discussed about how they made them feel and why.

Session II

The session started with a body awareness exercise. Participants were asked to determine a color for their current body sensations and to paint a landscape picture using the colors they determined. Emotions were shared through the color they used and the picture they made.

Session III

The session started with meditation. Participants were asked to write a poem describing their current feelings, thoughts and experiences. Emotions were shared through the poem.

Session IV

Participants were played a wordless instrumental piece. They were asked to write down the emotions that emerged with the music and to make a picture describing the emotions that emerged. Emotions were shared through the picture they made.

Session V

An instrumental piece of music was selected and the participants were asked to listen to the music and distinguish between different instruments. They were asked which instrument's sound they felt close to and they were asked to move and dance by letting themselves be influenced by the sound emanating from the instrument they had chosen and letting themselves go with the flow. Then, in order to establish a connection between body and mind, participants were asked to discuss which emotions they felt in which part of their body.

Session VI

Participants were asked to close their eyes and focus on their bodies. The question "Where in your body do you feel the most challenging emotions?" was discussed. Then they were asked to transform the challenging emotions they experienced in their bodies into a sculpture using clay. In the last step, the participants were asked to write a dialog in the form of "me and the sculpture" including their feelings and thoughts through the sculpture they made.

Session VII

Participants listened to a wordless instrumental piece. Participants were given a crayon and a blank paper. The participants were asked to scribble randomly on the paper with their eyes closed, letting themselves fall to the rhythm of the music. Then, the participants formed pictures by completing the lines that they resembled something in the scribbles with paints. In the last step, they were asked to write a story with the resulting images.

Session VIII

How is your body here and now? What does it feel? Where in your body do you feel the emotions you experience here and now? participants were asked to focus on their bodily

sensations. They were then asked to choose a color to describe each emotion they experienced in their bodies and to paint the empty body template with the colors they chose. Participants were then asked to write a dialog in the form of "my body and me" in order to establish a connection between body and mind. In the last step, participants were asked to make a picture using colors that describe their emotions.

Session IX

Participants were asked to create masks to create a visual representation of the support and compassion they showed to themselves. After completing the compassion masks, the participants were asked to create masks to create a visual representation of their critical attitudes towards themselves, their judgments despite their individual characteristics, and their emotions that were difficult to accept. Then, the participants were asked to create a mutual dialog in the form of "compassionate me" and "critical me" using both masks they created.

Session X.

The participants were read Mevlana Jalaluddin Rumi's poem titled 'Guest House'. What is the prominent emotion in this poem? What does this poem make you feel? The participants were encouraged to open themselves with the poem. Participants were asked to list the emotions revealed by the poem, and then they were asked to write a poem describing their feelings.

Data Analysis

SPSS 22.0 program was used in the statistical analysis of the data obtained. Firstly, it was examined whether the data met the basic assumptions of parametric tests. For this, it was checked whether the data showed normal distribution in each group, and the normality test (Shapiro-Wilk) results of the pre-measurement scores of the patients in the experimental groups were significant. Since the variances of the groups were not equal and the data were not normally distributed, nonparametric tests were used to analyze the data obtained. The data were analyzed with Kruskal-Wallis H test and Mann-Whitney U test for unrelated measures and Wilcoxon Signed Ranks test for related measures.

RESULTS

This section presents the findings obtained as a result of the statistical analysis conducted in order to test the hypotheses of the study.

Table 2. Individuals in the Art Therapy and Art Therapy Education Group pretest and posttest score averages of the Emotion Regulation Difficulty Scale (DDGS)

	Art Therapy Group			Art Therapy Education Group		
	n	Average	Ss	n	Average	Ss
DDGÖ						
Pre-Test	11	51,00	11,62	11	48,36	11,34
Post-Test	11	45,45	12,21	11	50,72	10,41

When Table 2 was examined, it was seen that the post-test mean scores ($\bar{x}$ = 45,45) of the Emotion Regulation Difficulties Scale of the Art Therapy Group were lower than the pre-test mean scores ($\bar{x}$ = 51,00). In the Art Therapy Training Group, the post-test mean scores ($\bar{x}$ = 50.72) were higher than the pre-test mean scores ($\bar{x}$ = 48.36). The Wilcoxon signed-rank test was used to analyze whether there was a significant difference between pretest and posttest mean scores, and the results are given in Table 3 and Table 4.

Table 3. Emotion Regulation Difficulty Scale of Individuals in the Art Therapy Group (DDGÖ) Pretest - Posttest Wilcoxon Signed Rows Test Results

	Rank Signs	n	Mean Rank	Sum of rank	Z	p
DDGÖ	Negative Rank	8	6.13	49.00	-2,196	.028
	Positive Rank	2	3.00	6.00		
	Tie	1				

Table 3 shows that there was a significant difference between the pretest and posttest scores of the participants (z=,-2,196 p<.05).

Table 4. Emotion Regulation Difficulty Scale (DDGS) Pretest of Individuals in Art Therapy Education Group - Posttest Wilcoxon Marked Rows Test Results

	Rank Signs	n	Mean ranks	Sum of ranks	Z	p
DDGÖ	Negative Place	3	6.50	19.50	-1,204	.229
	Positive Rank	8	5.81	46.50		
	Ties	0				

As seen in Table 4, the difference between the pretest and posttest scores of the Emotion Regulation Difficulties Scale of the art therapy training group was not statistically significant (z=,-1,204 p>.05).

Table 5. Mann-Whitney U test results of Art Therapy and Art Therapy Education group Emotion Regulation Difficulty Scale (DDGS) final measurement scores

	Group	n	Mean of ranks	Sum of ramks	U	p
DDGÖ	Art Therapy	11	9,95	109,50	43,50	,264
	Art Therapy Training	11	13.05	143.50		

According to Table 5, at the end of the experimental study, there was no significant difference between the scores of the Difficulties in Emotion Regulation Scale (DRES) of the students in the 1st experimental group participating in the art therapy program and the individuals in the 2nd experimental group participating in the art therapy training group (U=43.50 p>.05).

DISCUSSION

In this study, the effect of art therapy program on individuals' emotion regulation difficulties was tested. In addition, the study also examined whether the emotion regulation difficulties of individuals who participated in art therapy training, in which the same applications were made with the art therapy program, decreased or not. For this purpose, the scores obtained from the Difficulties in Regulation Scale applied to the art therapy and art therapy training group as pre-test and post-test were compared. As a result, it was seen that the art therapy program was effective in reducing the emotion regulation difficulties of individuals. On the other hand, there was no significant difference between the pre-test and post-test scores of the art therapy training group.

One of the findings of the research is that the art therapy program is effective in reducing the emotion regulation difficulties of individuals participating in the program. According to Greenberg and Goldman (2019), in order to make sense of emotions, emotional experience must first be symbolized with words. Individuals can convey their emotions not only through words but also through artistic forms such as line, sound, movement and dance. In this respect, art provides a suitable outlet for emotions that cannot be verbalized, suppressed, ignored or regulated (Killick, 1993). In addition to its healing properties, art is a very effective tool for expressing thoughts and emotions (Demir & Yıldırım, 2017). For example, for individuals who are emotionally blocked and cannot express their feelings towards a person or an environment, art therapy can help them express their feelings about this environment or person without creating too much guilt. The artistic product that emerges as a result of the creative process is a concrete form of emotions that cannot be expressed verbally. In this way, individuals find the opportunity to express and make sense of their emotions (Aydın, 2012; Killick, 1993).

Expressing emotions verbally or non-verbally is known to have positive effects on physical and mental health. Existing empirical evidence shows that art therapy is an effective psycho-social intervention method in emotion regulation processes. When the studies in the literature are examined, the positive effects of art therapy practices on individuals' emotion regulation processes are seen (Gruber & Oepen, 2017; Kang et al., 2014; Karataş & Güler, 2020; Sitzer & Stockwell, 2015). The findings obtained from our research are consistent with the results of these studies.

Another finding of the study is that the individuals participating in the art therapy training program were not effective in reducing emotion regulation difficulties. Although the same program developed by the program coordinator was applied to both groups in the study, there was no statistically significant change in the mean scores of the emotion regulation difficulties scale of the individuals participating in the art therapy training group.

The importance of motivation in the psychotherapy process is undeniable. This result obtained from the training group may be related to motivation. Even though the participants in the art therapy program were mental health professionals, they participated in the program to heal, while the individuals in the training group participated in the program to contribute to their professional development. In summary, it can be said that the aim of the participants in the art therapy program was to heal, while the aim of the participants in the art therapy training was to heal. Therefore, the motivation of both groups is different. It has long been observed by clinicians and researchers that clients' motivation for psychotherapy is an important factor predicting the outcome of therapy (Keithly, Samples, & Strupp, 1980).

One of the findings of the study was that there was no significant difference between the post-test scores of the group participating in the art therapy program and the group participating in the art therapy training program on the Difficulties in Emotion Regulation Scale (DRES). Some researchers have claimed that different psychotherapy practices yield similar results in terms of effectiveness and called this situation the "Dodo Bird". The "Dodo Bird Judgment", which was inspired by the Dodo bird's statement "Everyone wins and everyone should have a prize" at the end of Lewis Carrol's famous work "Alice in Wonderland", is used to express that the elements that are effective in psychotherapies can be explained by common factors (Rosenzweig 1936). According to this approach, all types of psychotherapy are effective, provide equal positive outcomes as a result of common factors, and it can be said that many methods yield similar results. This conclusion summarizes the interpretation of those who look at therapeutic change from the perspective of common factors (Luborsky, Singer & Luborsky, 1975). On the other hand, while some professionals think that the therapy methods applied during group practices are effective, some professionals think that group dynamics, interpersonal interaction, sharing and belonging are more effective (Jacobs, Masson, Harvill, & Schimmel, 2011). In this study, the fact that both groups were conducted in a relationship-oriented manner suggests that they may have yielded similar results.

FINDINGS

As a result, in our study, we found that the emotion regulation difficulties of individuals who participated in the art therapy program decreased, whereas the emotion regulation difficulties of individuals who participated in the art therapy training program did not decrease. An empathic and supportive approach is required to experience and regulate challenging emotions (Greenberg & Goldman, 2019). Considering that the empathic and supportive approach was more limited in the art therapy training group compared to the art therapy program, the importance of group work on emotion regulation skills should be emphasized.

Group therapy, a psychosocial treatment method, can help individuals regulate challenging emotions by creating a safe, empathic and affirming environment. The healing factors of the group can be analyzed under eleven headings. These are as follows: instilling hope, universality, knowledge transfer, altruism, restorative repetition of the primary family group, development of socializing techniques, imitative behavior, individual learning, group cohesion, catharsis and existential factors. Interpersonal relationships can become the force that gives birth to these eleven factors, so interpersonal relationships are in fact the mother of healing forces. Horney and Fromm argued that mental disorders are caused by inappropriate interpersonal relationships (cited in Yalom, 2002). Sullivan (2013) emphasizes the therapeutic aspect of relationship harmony. If the therapy process, which helps the person to know himself/herself, to make sense of his/her problems and to create solution options, is transformed into a group environment in which interpersonal relationships are also involved, it will facilitate the easier recognition, acceptance and meaningful expression of feelings and thoughts (Kepçeoğlu, 1986 cited in Bilge, 1997; Kuzgun, 1988 cited in Voltan- Acar, 2014).

LIMITATIONS

As in every study, it should be taken into consideration that this study has some limitations. There is no control group in the study. However, it was thought that the presence of a normal control group could provide data richness and be important in the interpretation of the results, and its absence was accepted as a limitation of this study. Another limitation of the study is that

there was no follow-up measurement. This situation prevents the evaluation of the long-term effect of the results of the study. In addition, factors such as living conditions, family dynamics, income level and working conditions that may affect the results of the study were not taken into consideration. It is thought that it would be appropriate to take these limitations into consideration in future studies.

RECOMENDATIONS

Based on the findings of the study, the following recommendations were developed in line with the conclusions reached.

1. Difficulties in emotion regulation negatively affect many areas of individuals' lives. Similar studies can be conducted on larger sample groups with different characteristics, including all age groups.

2. The scope of the program can be expanded by making the program sessions applied in the research more detailed and increasing the number of sessions.

3. Follow-up studies can be conducted at certain intervals to understand whether the effect of the art therapy program is permanent.

4. In this study, emotion regulation levels of individuals were addressed. Similar studies can be conducted on other subjects such as alexithymia, depression, hopelessness, anxiety disorders

5. One of the most important elements of effectiveness studies is whether the evidence-based method based on statistical significance can provide clinical validity. As a result of therapeutic efficacy studies, it seems important that an approach characterized as "effective" provides a change in symptoms, but how much this change increases the functionality in the individual's life or how close it brings the individual to normal population characteristics. It is observed that art therapy provides statistically significant changes in symptoms, attitudes and behaviors, but studies examining the clinical validity of this change are quite limited. Therefore, it may be useful to conduct structural studies evaluating the effectiveness of art therapy.

REFERENCES

Allen, R. (2017). *The effects of mindfulness-based art therapy on stress and cortisol levels in graduate and professional-level students*. Doctoral dissertation, The Florida State University.

Arch, J. J., & Craske, M. G. (2008). Acceptance and commitment therapy and cognitive behavioral therapy for anxiety disorders: Different treatments, similar mechanisms?. *Clinical psychology: Science and practice*, *15*(4), 263.

Aydın, B. (2012). Tıbbi sanat terapisi. *Psikiyatride Güncel Yaklaşımlar*, *4*(1), 69-83.

Bilge, F. (1997). Eğitim bilimleri öğrencilerinin sürekli kızgınlık düzeyleri ve kızgınlıklarını ifade biçimlerinin bazı değişkenler açısından incelenmesi. *Hacettepe Üniversitesi Eğitim Fakültesi Dergisi*, *13*(13).

Cahill, M. A., Adinoff, B., Hosig, H., Muller, K., & Pulliam, C. (2003). Motivation for treatment preceding and following a substance abuse program. *Addictive behaviors*, *28*(1), 67-79.

Campbell-Sills, L., & Barlow, D. H. (2007). Incorporating Emotion Regulation into Conceptualizations and Treatments of Anxiety and Mood Disorders. In J. J. Gross (Ed.), *Handbook of emotion regulation* (pp. 542-559). Guilford Press.

Case, C., & Dalley, T. (2006). The therapy in art therapy. *The Handbook of Art Therapy*.

Chiodelli, R., Mello, L. T., & Jesus, S. N. (2018). Effects of a brief mindfulness-based intervention on emotional regulation and levels of mindfulness in senior students. *Psicologia: Reflexão e Crítica*, *31*.

Cloitre, M. (1998). Intentional forgetting and clinical disorders. In J. M. Golding & C. M. MacLeod (Eds.), *Intentional forgetting: Interdisciplinary approaches* (pp. 395-412). Lawrence Erlbaum Associates Publishers.

Demir, V. (2017). Dışavurumcu sanat terapisinin psikolojik belirtiler ile bilişsel işlevlere etkisi. *OPUS- Uluslararası Toplum Araştırmaları Dergisi*, *7*(13), 575-598. https://doi.org/10.26466/opus.337250

Demir, V. ve Yıldırım, B. (2017).Sanatla Terapi Programının Üniversite Sınavına Hazırlanan Öğrencilerin Depresyon, Anksiyete ve Stres Belirti Düzeylerine Etkililiği. *Ege Eğitim Dergisi (18)*1, 311-344.

Demir, V., & Gündoğan, N. (2018). Bilinçli farkındalık temelli bilişsel terapi programının üniversite öğrencilerinin duygu düzenleme güçlüklerini azaltmadaki etkisi. *Ege Eğitim Dergisi*, *19*(1), 46-66.

Denollet, J., Nyklìček, I., & Vingerhoets, A. J. (2008). Introduction: Emotions, emotion regulation, and health. *Emotion regulation: Conceptual and clinical issues*, 3-11.

DeRubeis, R. J., Brotman, M. A., & Gibbons, C. J. (2005). A conceptual and methodological analysis of the nonspecifics argument. *Clinical Psychology: science and practice*, *12*(2), 174.

Dingle, G. A., & Fay, C. (2017). Tuned In: The effectiveness for young adults of a group emotion regulation program using music listening. *Psychology of Music*, *45*(4), 513-529.

Edwards, D. (2004). *Creative therapies in Practice Art therapy*. London: Sage Publications Ltd.

Erden-Çınar, S., & Eminoğlu, Z. (2020). The effect of cognitive behavioral based psychoeducation program on psychological resilience and emotion regulation. *OPUS: International Journal of Society Researches*, *21*(15), 555-582.

Gençoğlu, C., & Yılmaz, M. (2013). Duygusal farkındalık eğitim programının duygu kontrol düzeyine etkisi. *The Journal of Academic Social Science Studies*, *6*(5), 961-980.

Geue, K.L., Goetze, H., Buttstaedt, M., Kleinert E., Richter, D., & Singer S. (2010). An overview of art therapy interventions for cancer patients and the results of research, *Complementary Therapies in Medicine*, *18*(3-4), 160-170

Gibb, B. E., Alloy, L. B., Abramson, L. Y., Rose, D. T., Whitehouse, W. G., Donovan, P., ... & Tierney, S. (2001). History of childhood maltreatment, negative cognitive styles, and episodes of depression in adulthood. *Cognitive Therapy and Research*, *25*(4), 425-446.

Gratz, K. L., & Chapman, A. L. (2007). The role of emotional responding and childhood maltreatment in the development and maintenance of deliberate self-harm among male undergraduates. *Psychology of Men & Masculinity*, *8*(1), 1.

Gratz, K. L., & Gunderson, J. G. (2006). Preliminary data on an acceptance-based emotion regulation group intervention for deliberate self-harm among women with borderline personality disorder. *Behavior Therapy*, *37*(1), 25-35.

Gratz, K. L., & Roemer, L. (2004). Multidimensional assessment of emotion regulation and dysregulation: Development, factor structure, and initial validation of the difficulties in emotion regulation scale. *Journal of Psychopathology and Behavioral Assessment*, *26*(1), 41-54.

Greenberg, L. S., & Goldman, R. N. (Eds.). (2019). *Clinical handbook of emotion-focused therapy* (pp. xiv-534). Washington, DC: American Psychological Association.

Gross, J. J., & Muñoz, R. F. (1995). Emotion regulation and mental health. *Clinical psychology: Science and practice*, *2*(2), 151. https://doi.org/10.1111/j.1468-2850.1995.tb00036.x

Gruber, H., & Oepen, R. (2018). Emotion regulation strategies and effects in art-making: A narrative synthesis. *The Arts in Psychotherapy*, *59*, 65-74.

Gülgez, Ö., & Gündüz, B. (2015). Diyalektik Davranis Terapisi Temelli Duygu Düzenleme Programinin Üniversite Ögrencilerinin Duygu Düzenleme Güçlüklerini Azaltmadaki Etkisi. *Çukurova University. Faculty of Education Journal*, *44*(2), 191.

Hankin, B. L. (2005). Childhood maltreatment and psychopathology: Prospective tests of attachment, cognitive vulnerability, and stress as mediating processes. *Cognitive Therapy and Research*, *29*(6), 645-671.

Hayes, S. C., Wilson, K. G., Gifford, E. V., Follette, V. M., & Strosahl, K. (1996). Experiential avoidance and behavioral disorders: A functional dimensional approach to diagnosis and treatment. *Journal of Consulting and Clinical Psychology*, *64*(6), 1152.

Hiller, M. L., Knight, K., Leukefeld, C., & Simpson, D. D. (2002). Motivation as a predictor of therapeutic engagement in mandated residential substance abuse treatment. *Criminal Justice and Behavior*, *29*(1), 56-75.

Ilagan, G., Vinson, M. L., Sharp, J. L., Ilagan, J., & Oberman, A. (2015). Exploring outcomes and initial self-report of client motivation in a college counseling center. *Journal of American College Health*, *63*(3), 187-194.

Jacobs, E. E., Masson, R. L., Harvill, R. L., & Schimmel, C. J. (2011). Group counseling: Strategies and skills: Cengage learning.

Jalambadani, Z., Borji, A., ve Bakaeian, M. (2019). Examining the effect of mindfulness-based art therapy (MBAT) on stress and lifestyle of Iranian pregnant women. *Journal of Obstetrics and Gynaecology*, (2), 1–5. https://doi.org/10.1080/01443615.2019.1652889

Jang, J. H., Jung, K., Kim, J. S., Jung, I., Yoo, H.,ve Moon, C. (2018). Potential Application of Yokukansan as a Remedy for Parkinson's Disease. *Evidence-Based Complementary and Alternative Medicine*, 1–19. https://doi.org/10.1155/2018/1875928

John, O. P., & Gross, J. J. (2004). Healthy and unhealthy emotion regulation: Personality processes, individual differences, and life span development. *Journal of personality*, *72*(6), 1301-1334. https://doi.org/10.1111/j.1467-6494.2004.00298.x

Karataş, E., & Güler, Ç. Y. (2020). Grup sanat terapisi programının ergenlerin mutluluk düzeyleri, duyguları ifade etme eğilimi ve duygu düzenleme güçlüğüne etkisi. *OPUS International Journal of Society Researches*, *15*(25), 3328-3359.

Keithly, L. J., Samples, S. J., & Strupp, H. H. (1980). Patient motivation as a predictor of process and outcome in psychotherapy. *Psychotherapy and psychosomatics*, *33*(1-2), 87-97.

Killick, K. (1993). Working with psychotic processes in art therapy. *Psychoanalytic Psychotherapy*, *7*(1), 25-38.

Linehan, M. (1993). *Cognitive-behavioral treatment of borderline personality disorder*. Guilford Press.

Longshore, D., & Teruya, C. (2006). Treatment motivation in drug users: A theory-based analysis. *Drug and alcohol dependence*, *81*(2), 179-188.

Luborsky, L., Singer, B., & Luborsky, L. (1975). Comparative studies of psychotherapies: Is it true that everyone has won and all must have prizes?. *Archives of general psychiatry*, *32*(8), 995-1008.

Maciejewski, P. K., & Mazure, C. M. (2006). Fear of criticism and rejection mediates an association between childhood emotional abuse and adult onset of major depression. *Cognitive Therapy and Research*, *30*(1), 105-122.

Malchiodi, C. A. (2003). Expressive arts therapy and multimodal approaches. *Handbook of art therapy*, 106-119.

Malchiodi, C. A. (2005). Expressive Therapies History, Theory, and Practice. In. C.A. Malchiodi (Ed.), Expressive Therapies (pp.1-15). Guilford Press.

Melnick, G., De Leon, G., Thomas, G., Kressel, D., & Wexler, H. K. (2001). Treatment process in prison therapeutic communities: Motivation, participation, and outcome. *The American Journal of Drug and Alcohol Abuse*, *27*(4), 633-650.

Menezes, C. B., & Bizarro, L. (2015). Effects of focused meditation on difficulties in emotion regulation and trait anxiety. *Psychology & Neuroscience*, *8*(3), 350.

Mennin, D. S., Heimberg, R. G., Turk, C. L., & Fresco, D. M. (2002). Applying an emotion regulation framework to integrative approaches to generalized anxiety disorder. *Clinical Psychology: Science and Practice*, *9*(1), 85-90.

Moore, L. E., Tambling, R. B., & Anderson, S. R. (2013). The intersection of therapy constructs: The relationship between motivation to change, distress, referral source, and pressure to attend. *The American Journal of Family Therapy*, *41*(3), 245-258.

Nan, J. K., Hinz, L. D., & Lusebrink, V. B. (2021). Clay art therapy on emotion regulation: Research, theoretical underpinnings, and treatment mechanisms. In *The Neuroscience of Depression* (pp. 431-442). Academic Press.

Nazeri, A., Ghamarani, A., Darouei, P., & Ghasemi Tabatabaei, G. (2020). The effect of expressive arts therapy on emotion regulation of primary school students. *Quarterly Journal of Child Mental Health*, *7*(2), 132-143.

Peterson, C. (2014). Mindfulness-based art therapy: Applications for healing with cancer. In L. Rappaport (Ed.), *Mindfulness and the arts therapies: theory and practice* (pp. 64-81). Jessica Kingsley Publishers.

Peterson, C., & Rappaport, L. (2014). Mindfulness-based art therapy. *Mindfulness and the art therapies: Theory and practice*, 42-58.

Rizvi, S. L., & Steffel, L. M. (2014). A pilot study of 2 brief forms of dialectical behavior therapy skills training for emotion dysregulation in college students. *Journal of American College Health*, *62*(6), 434-439.

Rosenzweig, S. (1936). Some implicit common factors in diverse methods of psychotherapy. *American journal of Orthopsychiatry*, *6*(3), 412.

Rubin, J. (2010). *Art Therapy: Sources and Resources.* Routledge.

Rugancı, R. N., & Gençöz, T. (2010). Psychometric properties of Turkish version of Diffuculties in Emotion Regulation Scale. *Journal of Clinical Psychology, 66*(4), 442-455.

Sim, L., & Zeman, J. (2006). The contribution of emotion regulation to body dissatisfaction and disordered eating in early adolescent girls. *Journal of Youth and Adolescence*, *35*(2), 207-216.

Sitzer, D. L., & Stockwell, A. B. (2015). The art of wellness: A 14-week art therapy program for at-risk youth. *The Arts in Psychotherapy*, *45*, 69-81.

Sullivan, H. S. (Ed.). (2013). *The interpersonal theory of psychiatry*. Routledge.

Vatan, S. (2020). Duygu düzenleme eğitiminin duygu düzenleme becerileri üzerindeki etkisinin incelenmesi. *Anadolu Psikiyatri Dergisi*, *21*(4), 396-402.

Voltan-Acar, N. (2014). *Grupla psikolojik danışma: İlke ve teknikleri*. Nobel Yayın.

Whiteside, U., Chen, E., Neighbors, C., Hunter, D., Lo, T., & Larimer, M. (2007). Difficulties regulating emotions: Do binge eaters have fewer strategies to modulate and tolerate negative affect?. *Eating behaviors*, *8*(2), 162-169.

Yalom, İ. D. (2002). *Grup psikoterapisinin teori ve pratiği* (Çev. A. Tangör ve Ö. Karaçam). (1. Baskı). Kabalcı Yayınevi.