

Integrating Art Therapy into the
Modules of Dialectical Behavior Therapy

Alyse Ruriani

Maryland Institute College of Art

Abstract

A look at art therapy and Dialectical Behavior Therapy (DBT), followed by how art techniques and art therapy can fit into each module, and some specific skills, of DBT. Implementation of integrating art therapy into DBT is considered as well as author's speculation of impact.

Keywords: Art Therapy, Dialectical Behavior Therapy

Integrating Art Therapy into the Modules of Dialectical Behavior Therapy

Art therapy and Dialectical Behavior Therapy (DBT) are two treatment methods that hold common ground in some of their theories, applications, and ideas. Because of this, art therapy techniques could be easily integrated into the four modules of DBT: Mindfulness, Distress Tolerance, Emotional Regulation, and Interpersonal Effectiveness. Art therapy infused into DBT treatment, or congruent DBT-informed art therapy sessions, could help clients digest and acquire DBT skills, as well as enhance their treatment and recovery in a multidimensional approach. This paper explores these ideas by correlating art therapy within each DBT module, and furthermore, the skills within the modules that can directly relate to therapeutic art techniques.

Art Therapy

According to the American Art Therapy Association, art therapy is:

a mental health profession in which clients, facilitated by the art therapist, use art media, the creative process, and the resulting artwork to explore their feelings, reconcile emotional conflicts, foster self-awareness, manage behavior and addictions, develop social skills, improve reality orientation, reduce anxiety, and increase self-esteem. (2013)

These principles of art therapy are touched on and achieved through the process of art-making, the self discovery it opens, and the conversations between therapist and

client before, during, and after. Art therapy can vary, as there are a multitude of approaches in which it can be conducted, such as psychoanalytic, person-centered, feminist, cognitive, and behavioral. The different approaches one can take in art therapy show it's versatility and ability to adapt to the needs of the client and the expertise of the art therapist.

Art therapy sessions themselves can also look different, as it can be implemented in various ways. Like other therapies, art therapy can exist in a group or individual format and on an outpatient, inpatient, or residential basis. The way the session is led can depend on numerous factors, such as the art therapist's training and preference, as well as being formatted to fit the needs of the client(s). A session can be structured or in an "open studio" style.

A structured session could be led with a specific directive or prompt for the client(s), or specific materials. The art therapist will choose a prompt and/or material(s) that address the treatment goals and needs of the client(s). Sessions in the style of an open studio are unstructured, meaning the art materials are provided and the client(s) may make whatever they want.

No matter the type of session, the art therapist may speak with the client(s) as they work, may work alongside the client(s), or may have them work in silence and reserve talking for after the art making. All of these options and session examples are

changed, modified, and expanded upon in whatever way the art therapist sees fit depending on the client(s).

Brief Background of Art Therapy

It is hard to pinpoint the history of art therapy, as the use of art as a method or tool in healing has been in existence before history was written (Vick, 2003, p. 6; Malchiodi, 1998). In the 19th and 20th centuries, art was being used simultaneously with talk therapy, with the term “art therapy” starting to be used (Vick, 2003, p. 7; Naumburg, 1950/1973). The field is said to be pioneered by four writers who detailed their work in using art and therapy in treatment: Margaret Naumburg, Edith Kramer, Hannah Kwiatkowska, and Elinor Ulman. Their writings paved the way for the field of art therapy as we know it today (Vick, 2003, p. 9).

Art Therapy vs Art as Therapy

As stated above, art therapy is a treatment method carried out by an art therapist, who is a trained and educated in both art and clinical work. The term “art therapy” is often misappropriately applied to art related things that are therapeutic to an individual, such as the new trend of adult coloring books. It is important to make a distinction between the profession and treatment of art therapy versus the use of art-making in a self-help, non-clinical nature, or even between non-art therapist clinicians using art in their practice. All of these methods have merit, but they are not the same. That is where the term art as therapy can be useful. Many find the process of

using different materials and creating art healing, which is why it is often called “therapeutic” even outside of the actual clinical psychotherapy field of art therapy. Cathy Malchiodi, MA, ATR, LPAT, LPCC summarizes the power of art and art therapy well, saying:

Art is a powerful tool of communication. It is now widely acknowledged that art expression is a way to visually communicate thoughts and feelings that are too painful to put into words. [it has an] inherent ability to help people of all ages explore emotions and beliefs, reduce stress, resolve problems and conflicts, and enhance their sense of well-being. (2003, p. ix)

Dialectical Behavior Therapy

Dialectical Behavior Therapy (DBT) is a broad-based cognitive-behavioral treatment originally developed for chronically suicidal individuals diagnosed with borderline personality disorder (BPD) (Linehan, 2015, p. 3) Today, the uses of DBT have since been expanded largely, even into the non-clinical realm. The therapy is based around a set of DBT skills, which is broken down into modules and taught to clients in a DBT Skills group, alongside individual therapy with a DBT therapist and DBT phone coaching. The modules are: Mindfulness, Distress Tolerance, Emotional Regulation, and Interpersonal Effectiveness (Linehan, 2015). Within each module are skills that clients are taught to use in order to improve in relation to the issues addressed in that specific module.

DBT in its truest form has a very specific implementation. As previously mentioned, there is a DBT skills training group, DBT individual therapy, and DBT phone coaching. In addition to that, there is an additional component for the DBT therapists, which is the DBT therapist consultation team.

The DBT skills training group is the core of the program, as this is where the clients learn the skill sets. Unlike traditional group therapy, the DBT skills training group is highly structured and resembles a class setting more than group therapy. The instructor teaches the skills as well as assigns homework to help clients put the skills to use. The length and occurrence of the group may vary, but traditionally it is a weekly group that meets for 2.5 hours, for 24 weeks, which is sometimes repeated for a longer program (Linehan, 1993).

DBT individual therapy is used to target difficulties and symptoms that are specific to the client's life. Traditionally, the client continues this therapy on a weekly basis while they also attend the skills training group. A segment of the DBT individual therapy is the DBT phone coaching, in which the client can call their DBT therapist to be walked through using the skills in a moment of crisis or struggle (Linehan, 1993).

Finally, the DBT therapist consultation team is to aid the therapists and group leaders in treating their clients. The group typically meets weekly to support and

motivate one another, and to ensure the best treatment is being given to clients

(Linehan, 1993).

Using Art Techniques and Art Therapy Ideas in DBT

While not extremely common or researched, there are some books, papers, and talks focused on the integration of art therapy and DBT. They have found that many of the principles of art therapy and the principles of DBT align- and even overlap- in some aspects. Heckwolf, Bergland, and Mouratidis designed a table (see Table 1) in which they listed the six common factors of art therapy principles and DBT principles that they found (2014, p. 331)

Table 1
Common factors of art therapy and DBT.

Art therapy principle	DBT principle
Awareness	Mindfulness
Holding environment	Egalitarian stance
Containment	Distress tolerance
Sublimation	Emotion regulation
Intrapersonal effectiveness	Interpersonal effectiveness
Transitional objects	Homework

Heckwolf et al. (2014) found that, with knowledge and intentional coordination of the common factors of art therapy and DBT by the therapist, the patient in their study had a

positive therapeutic experience by working through them simultaneously. Furthermore, Heckwolf et al. (2014, p. 335) state that, while not explored in their study due to a clinical decision based on their particular client, that specific art directives could prove useful for populations that benefit from high structure, such as children. Specifically, art directives that are connected to specific DBT skills could be beneficial if further developed (Heckwolf, 2014, p. 335)

This following subsections delve into this area by explaining how art techniques, whether with an art therapist or through art as therapy with a non-art therapist, can be integrated into the modules and specific skills of DBT.

Mindfulness

Mindfulness skills are the core of DBT and one of the main components of the process (Linehan, 2015, p. 151). It focuses on being present and aware in the current moment. As the foundation of all the other modules and skills, the Mindfulness module is taught first and refreshed throughout treatment and at the beginning of the other modules. The skills in this section aim to help clients accept and sit with what is currently happening in life, and to do so in a non-judgmental and effective way. Linehan states:

I have drawn most heavily from the practice of Zen. But the skills are compatible with Western contemplative and other Eastern meditation practices, as well as with emerging scientific knowledge about the benefits of “allowing” experiences

rather than suppressing, avoiding, or trying to change them.

Allowing experiences is at the heart of mindfulness, and in essence, at the heart of DBT. Alongside the mindfulness skills, general mindfulness exercises are also often utilized in DBT groups, usually in the beginning before the group starts, to bring everyone into the space, physically, mentally, and emotionally.

Mindfulness Exercise. Art therapy techniques can be easily interwoven into the practice of mindfulness, as art-making can be a mindfulness exercise. The act of painting or drawing can be the exercise on which clients must focus. This can be done in several ways, such as finger painting, which would require clients to feel the paint, or watercolor, which would have clients accept the fluidity of the material without care. The act of making art can be meditative, which can be harnessed for use as a mindfulness exercise.

Art therapy techniques could also be used to help make skills and ideas solidify in the client's mind. Creative and visual methods are often useful in helping one learn and understand what is being taught, or to form concrete connections in the mind in a way words could not.

States of Mind: Emotion Mind, Wise Mind, Reasonable Mind. In DBT, "states of mind" are often used to represent where the client is in thought and feeling. "Emotion mind" is where actions are fueled by emotions. It tends to be "hot," intense, and feel

very large. This is where individuals are typically in times of conflict or passion.

“Reasonable mind” is on the other end of the spectrum, where actions are logical, matter-of-fact, and “cool.” This is where individuals think intellectually and solve problems. In the middle where the two minds overlap is the “wise mind.” (Linehan, 2015, p. 153) Linehan states:

Wise mind is that part of each person that can know and experience truth. It is where the person knows something to be true or valid. It is almost always quiet, it has a certain peace. It is where the person knows something in a centered way.

The wise mind is an abstract concept that can sometimes be difficult to grasp. It is also easily translatable to a visual format. For example, a specific intervention from Susan Clark is the “States-of-mind mandalas.” In this activity, Clark has clients create a mandala for emotion mind, wise mind, and reasonable mind, while encouraging clients to create their own symbols rather than relying on words or common images. The discussion afterwards would focus on the similarities and differences in the visual language of each mandala (Clark, 2017, p. 178) Other art activities can also be used to have clients illustrate what each mind looks and feels like for them, such as through mask-making or venn diagrams. Making a tangible representation of the emotion mind, wise mind, and reasonable mind could help make sense of the concept and bring it into a space personal to the client.

“What” skills: Observe, Describe, Participate. The “What” skills are self-explanatory in that they are “what” you do to take control of your mind. Observing is the first part of the “What” skills with the goal of simply looking at the environment, situation, or feelings without words or judgement- just look, and observe. (Linehan, 2015) The second part of the “What” skills, Describe, is where the art can be utilized, especially for clients who have difficulty using words or are more comfortable with visual-based methods. After observing, the client could “describe” by creating a picture of what they observed, with or without words, and in whatever style they choose- so long as it is still encompassing the “How” skills, which can be seen below. In order to make sure the client is sticking to facts, the image created by the client could be used as a talking point. The therapist can ask them to describe the visual picture in words, using only facts and not feelings. The image then becomes a transitional step in between “Observe” and “Describe.” Finally, in making the art, they are participating in the now, and placing their focus on creation. This is beneficial because it is often difficult, and even seemingly threatening, for people to try and be mindful or clear their mind. Individuals will come up with excuses saying they cannot do it, but through the help of art as a tool, being mindful becomes more attainable.

“How” skills: Non-judgmentally, One-mindfully, Effectively. The “How” skills, like the “what” skills, also are self-explanatory. These skills tell you “how” to do the

“what” skills. Art-making can be used to practice the “How” skills, because it is a challenge to make art without passing judgment on yourself or the artwork, and without anything else stealing your attention. Creating art while actively trying to be non-judgmental and mindful would be a good homework challenge to improve upon this skill, which they can then incorporate into real life situations. Examples of applying this skill in art-making are:

1. Making a mistake in the artwork, then acknowledging it and accepting it.
2. Letting go of expectation when something is not coming out the way they intended.
3. Not evaluating the artwork with a value.
4. Concentrating on the process and letting go of distractions

These are just some issues that may come up that clients can learn to handle through creating art non-judgmentally (in a non evaluative stance) and one-mindfully (with focused attention) (Linehan, 2015, p. 154-155). In mastering these skills, they can also learn what is effective- “doing what works”- and apply that as well (Linehan, 2015, p. 155)

Distress Tolerance

Distress Tolerance is a module that addresses times of crisis. Its purpose is to provide skills that can help clients make it through times of strong, overpowering emotions or painful events without reverting back to inefficient behaviors, such as self

harm or substance abuse. Many of the clients coming into DBT programs struggle with dealing with distress due to their disorders that are often highly impulsive or addictive.

Distract with Wise Mind “ACCEPTS”. The first skill set is the word ACCEPTS, which is a mnemonic for: Activities, Contributing, Comparisons, Emotions (opposite to the current negative emotion), Pushing Away, Thoughts, Sensations. (Linehan, 2015, p. 417) ACCEPTS strategies that can be linked to art therapy techniques will be described in detail below.

Activities. This is a skill that has an obvious connection to distraction- keep yourself busy with activities so that your mind is distracted from the emotions and events that are distressing you. The activities can be anything, so long as they work in distracting you! Art is a tool that can be used as a distracting activity, especially when given a specific prompt so that the client can immerse themselves in the making rather than in the thought process of what to do. Picking a prompt that is more involved and requires full attention would be better than asking a client to “just paint” as that lets the mind wander- something that is not good when the goal is to distract.

Contributing. The purpose of this skill is to move the mind off of the self and onto others. Giving to others can make us feel good, and as a bonus provides another distraction. Art-making does not always need to be for oneself or for nothing- clients can create something to give to someone else to share a talent with another person. They could make a card for a friend, a painting for a parent, or a craft for a sibling. These are

purposeful ways to make art that is centered on someone else, which can in turn can raise the self esteem of the giver and help them to focus on gratitude for the positive relationships in their life.

Sensations. Art-making incorporates various senses at once. The process can help to make the client aware of their senses, especially when using tactile materials. Painting with fingers or working with fabric and fiber materials would be options that engage senses in a more prominent way.

Self Soothe with Five Senses. These skills are based in the five senses- vision, hearing, smell, taste, and touch. (Linehan, 2015, p. 417). While visual art-making is not typically heard or tasted, it can be seen, smelled, and touched. The process of creating can be focused on one of these three senses through material and method. For example, to focus on touch, the client could make a blind contour drawing using oil pastels or charcoal. This would take away the sense of vision, increasing the strength in the sense of touch, and make the feeling of the charcoal or pastels on the paper the focal point of the exercise. To focus on smell, clients could be asked to create an image using only scented markers. Vision is a sense that comes along with most forms of art, but to truly hone in on the sense of seeing, clients could work on a large-scale project so that it takes up most of their vision space. The same type of projects can be adapted

to lessen some senses and improve others in order to create a soothing activity based in one or two senses.

Improving the Moment. This skill set uses the word IMPROVE as a mnemonic for: Imagery, Meaning, Prayer, Relaxation, One thing at a time, Vacation, Encouragement. The goal of these strategies is to actually improve the quality of the moment (Linehan, 2015, p. 417). Many of them transfer seamlessly into an art prompt.

Imagery. Imagery can help clients feel safer as they imagine an environment different from the one they are currently in- one where they feel secure. (Linehan, 2015, p. 446) In using the imagination, this strategy can “increase one’s chances of coping effectively in real life.” (Linehan, 2015, p. 446). While imagery can be done strictly within the mind, it can also be helpful to have clients physically make their imagined environment. This can include drawing or painting, or can explore 3D media such as clay and sculpture.

Prayer. This does not need to be a prayer in a traditional sense. Instead, it can be searching within oneself, a higher power, or to your wise mind for strength in getting through this moment. Because the word “prayer” produces visual imagery, it can be used as a jumping off point for a creative prompt. Clients could be asked to write a prayer in nice lettering on a “stain glass window” made of tissue paper. The tangible item that has the client’s individual and personal prayer on it can be placed in an area

where the client can see and benefit from it. One could also put forth a prompt that asks clients to create a prayer box where they can place their personal prayers whenever needed.

Relaxation. Relaxing activities are often individualistic, as something that calms one may not calm another. However, art offers a variety of activities and mediums that can aid in relaxation. Art-making activities can often prove soothing, especially those that are methodical in nature, such as knitting, crocheting, sewing, and painting.

One thing in the moment. This strategy is the same as the mindfulness skill of “one-mindfully.” (Linehan, 2015, p. 447) As previously stated, focusing in the process of creating art is one way to practice being mindful of what one is doing.

Encouragement. This skill is essentially being one’s own cheerleader. It means saying positive things to oneself in order to build one up and improve self esteem. This action can be implemented in a visual way through having the client write affirmations where they will see them each day, such as on their bathroom mirror or on a note taped to their front door. It can even be created in a card or key chain format, where the client can carry with them positive affirmations wherever they go.

This skill can also be easily adapted into a group art activity. One idea is having everyone make a nameplate that will be passed around the room for group participants to write one nice thing, or one adjective, on the nameplate for that person. At the end, each group participant will have a nameplate that not only has their own name written

and decorated however they would like, but also kind messages and descriptive words from their group peers. Group based activities such as that can be extremely useful if clients have difficulty thinking of positive traits about themselves, which can be the case for many disorders that have low self-worth or self-esteem as a symptom.

Emotional Regulation

When an individual has trouble regulating their own emotions, it can cause immense pain, suffering, and confusion in their lives. That is why the Emotional Regulation module of DBT is essential. Learning how to regulate emotions can make the individual less likely to use ineffective behaviors, such as self harm, substance use, restricting, or overeating. It also can prevent, or lessen, the amount of times the person hits a level of distress and crisis.

Understanding and Naming Emotions. A core goal of the Emotional Regulation Model is to have clients identify and understand emotions (Linehan, 2015, p. 320). It is important for them to know how to label what they are feeling, and in turn, to understand the function of this feeling. Often, it is difficult to name tough emotions or to use words to label them. Art can be extremely helpful as an aid in identifying emotions and can be used as a reference of how different emotions manifest. At the beginning of the session, clients can be asked to show how they feel through use of art materials. Then, as a group or individually, the facilitator can lead the group or individual client in

identifying the emotions. That activity can move into learning the model of emotions and connect the art to the words needed to identify emotions.

Reducing Vulnerability. There are various things one can do to reduce vulnerability to negative emotions. According to Linehan (2015),

All people are more prone to emotional reactivity when they are under physical or environmental stress, are in situations where they are out of control, or are living in a state of deprivation, particularly when the deprivation extends to many areas of life. (p. 320)

The following skill sets are aimed at increasing resilience so that individuals are less likely to be overwhelmed and burdened by negative emotions.

Building Mastery. One of the goals is to help individuals feel in control, competent, and self-efficient (Linehan, 2015, p. 321). A way to do this is to engage in activities that foster a sense of capability in order to give confidence to the individual. Activities should be something the person enjoys and can learn and “master.” There is a plethora of art activities that could be used to build mastery. Clients can choose to learn and improve on any type of art they choose- drawing, painting, design, video, etc. One of the most common and teachable activities would be drawing. There are many books out there that can help someone learn how to draw, as well as tutorials and courses

online. As long as the client has someone or something to teach and guide them with the material, art is a perfect activity for building mastery.

Art is a uniquely good choice for building mastery because there are vast ways to produce art. In order for art to be “good,” it does not need to be photo-realistic. Clients can pursue abstract expressionism, cubism, or a number of other art movements that challenge the notion of “good art.” There is no wrong way to make art, and many believe that if something is made with intention to be art, then it is. With this in mind, clients can work on their own art practice and build their self esteem by coming into their own art style and direction without the pressure of it needing to look a certain way.

Mindfulness of Current Emotions. This skill is about experiencing emotions through one of the mindfulness skills: nonjudgmentally. The goal is to let the emotions happen and be mindful of them. Clients are encouraged not to try to make them disappear or label them as good or bad. Art can be used as a type of initial intervention in this skill- when someone is having difficulty just sitting with their emotions without judgment, or it feels too painful, a step that could be added is having them mindfully illustrate the feeling on paper using art materials. This creates a buffer, but still has the focus on the emotion. If the client does this skill through art initially, eventually it can lead them to being able to complete the skill without the use of art and truly be mindful in the moment and in the emotion.

Interpersonal Effectiveness

The Interpersonal Effectiveness module is focused on the client within relationships with others. The goal is for clients to gain respect, get what they want or need out of conversations, and ease some of the communication difficulties that happen in interpersonal relationships. In general, the skills are intended to help clients have healthy relationships with others.

Obtaining Objectives. This goal of the following skills is to gain the objective one wants from a conversation. They give strategies to help one be assertive while maintaining relationships when asking for something or saying “no.” (Linehan, 2015, p. 231) In order to gain these skills and put them to use effectively, one needs to practice and master them so when the time comes, they are able to use them. In addition to practicing through mock-conversation, clients could practice on their own through art, as described below.

DEAR MAN, GIVE, FAST. These three words and phrases are mnemonics for different strategies. DEAR MAN is for use when asking for what you need. It stands for: Describe, Express feelings, Assert wishes, Reinforce, (stay) Mindful, Appear confident, Negotiate (Linehan, 2015, p. 232). GIVE is for maintaining a relationship. It stands for: (be) Gentle, (act) Interested, Validate, (use an) Easy manner. These strategies are meant to be utilized when you care about the relationship with the other person. FAST

stands for the skills for keeping your self-respect. It stands for: (be) Fair, (no) Apologies, Stick to values, (be) Truthful.

While these are all skills with different objectives, they are put in the same section in this paper because the way to incorporate art methods into them is similar. Each of these situations takes place within conversation with another person. In order to practice these skills so that they can be employed when needed, clients can do worksheets, practice with others, and/or use them in non-essential situations (such as practicing saying “no” in non-threatening or unimportant situations). However, all people learn differently. For visual learners, art can be a constructive tool in helping individuals understand the material and be able to utilize the skills in the moment, as described below.

Since these skills are communication skills, art can be used by an individual through the use of storyboarding and comics. The client can “act out” a practice situation on their own by creating a comic or a storyboard of how the conversation would go. This way, the client can practice real-life situations (or ones they may expect to encounter) and feel more prepared. They can write out what they would say, inclusive of body language through the use of drawing the people in the comic. This prompt could be also be given as a homework assignment, so that in the client’s

individual DBT session, the therapist and client could go over the comic or storyboard and talk about how the “situation” was handled effectively, or how it could be improved.

Implementing Integration

Coordinating art therapy and DBT must be done with thorough understanding of both treatments. Art techniques can be used in DBT without an art therapist, so long as they are activity based and not meant as a psychotherapy tool. Art therapy, specifically, could be implemented in several ways

- An integrative art therapy and DBT group, where an art therapist works with the clinical DBT team to implement art therapy prompts during the DBT group meetings
- DBT-informed art therapy sessions that are offered as an optional additional group meeting for clients currently in a DBT treatment program
- An art therapist, trained and certified in DBT, creating an integrative approach that follows the DBT structure with added art therapy throughout

Exploration and research would need to be done to assess how implementing art therapy in DBT would affect the structure of DBT, especially in the proposed ideas of art therapy being introduced directly in the DBT sessions. DBT-informed art therapy sessions that exist independently, not within an already established DBT program, is the option that would be the most doable as of now since it would not affect the

structure of a DBT program, rather, would exist as a supplemental group that reinforces ideas of DBT through art therapy.

Personal Speculation of Integration Impact

Further research and case studies are needed, but based on my experiences and current findings, it is my belief that art therapy integrated into DBT would have a positive impact on recovery. For individuals who are highly emotional and sensitive, art can provide an outlet and space to express these feelings in a safe and honest way. Encouraging art-making, along with use of the skills learned in DBT, could lessen the instances of ineffective behaviors and help regulate emotions of the client.

However, just like art therapy is not for everyone, and DBT is not for everyone, nor would DBT-informed art therapy be for everyone. But for those who it is determined that art therapy would be beneficial in the treatment plan, as well as DBT, I believe that integrating the two would provide a greater impact than if they existed in silos.

Integrated DBT-informed art therapy sessions would provide reinforcement of the DBT skills through the expressive and healing nature of art therapy, solidifying what the individuals have learned and how they can will cope in the future.

References

- American Art Therapy Association. (2013). What is art therapy? [Association mission description]. Retrieved from American Art Therapy Association website:
<http://www.arttherapy.org/aata-aboutus.html>
- Clark, S. M. (2017). *DBT-Informed Art Therapy*. Philadelphia, PA: Jessica Kingsley.
- Heckwolf, J. I., MA, Bergland, M. C., MCAT, MFA, & Mouratidis, M., Psy.D. (2014, September). Coordinating principles of art therapy and DBT. *The Arts in Psychotherapy*, 41(4), 329-335. doi:https://doi.org/10.1016/j.aip.2014.03.006
- Linehan, M. M., & Linehan, M. (2015). *DBT skills training manual* (2nd ed.). New York: The Guilford Press.
- Linehan, M. (1993). *Skills Training Manual for Treating Borderline Personality Disorder*. New York, NY: Guilford Press.
- Malchiodi, C. A. (1998). *The Art Therapy Sourcebook*. Los Angeles, CA: Lowell House.
- Malchiodi, C. A. (2003). Preface. In C. A. Malchiodi (Ed.), *Handbook of Art Therapy* (pp. ix-Xiii). New York, NY: Guilford Press .
- Naumburg, M. (1950/1973). *An Introduction to Art Therapy: Studies of the "Free" Art Expression of Behavior Problem Children and Adolescents As a Means of Diagnosis and Therapy*. New York, NY: Teachers College Press.
- Vick, R. M. (2003). A Brief History of Art Therapy. In C. A. Malchiodi (Ed.), *Handbook of Art Therapy* (pp. 5-15). New York, NY: Guilford Press .