



Extreme Imagination

Therapy workshop

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Introduction

- What I do and where I work
- NHS: psychotherapy is used “to treat emotional problems and mental health conditions... it usually involves talking, but sometimes other methods may be used – for example, art, music, drama and movement.”
- Aphantasic or hyperphantasic, show of hands.
- Verbal – analytical - mathematical strengths in aphantasia - potentially directing away from artistic or creative expression?

Discuss different types of therapy

- Cognitive and behavioural
- Psychodynamic and psychoanalytic
- Humanistic, person centred
- Existential
- Arts therapies
- Mindfulness
- Compassion-focused therapy
- And many more...

Eye
Movement
Desensitization
&
Reprocessing



Trauma and psychological distress can interfere with visual imagery

- Aphantasia and hyperphantasia are not conditions to be treated in therapy, unless they have been caused by trauma, depression or other difficulties.
- Therapy can, however, help to come to terms with acquired hyperphantasia or aphantasia, or for those who struggle to manage it. It can also help to understand and accept it – to work on the individual's relationship with his/her visual imagination (for examples, feelings arising from a sense of being different in aphantasia, or strategies to cope with imagery overload in hyperphantasia).

When the cause is psychological...

- We would expect all areas of creativity and imagination to be affected, not just visualisation.
- The changes in visual imagery is accompanied by other psychological difficulties.
- New Scientist, 2010: “For people with depression the world really does look dull. That’s because their ability to perceive contrast is impaired.”
- Visual processing is impaired in PTSD. Potential for hyperphantasia of trauma material or dissociation/derealisation and “shutting down” of visual imagery.

The window of tolerance

HYPER-AROUSAL

Hyper-arousal

Fight or flight response

Survivors experience extreme awareness and vigilance against perceived fear or threat. Overwhelming feelings, high levels of anxiety and emotional outbursts of anger and rage. Rush of adrenaline is exhausting, addictive and unsustainable long term.

COMFORT ZONE

Optimal state

Feeling calm and in control

Comfort zone, ability to regulate emotions. Triggers such as fear or threat cause survivors to leave this balanced mental state. Over time, they find it more difficult to regulate emotions and may overshoot repeatedly when trying to do so.

HYPO-AROUSAL

Hypo-arousal

Freeze response

Survivors 'shut down' against perceived fear or threat. They feel disconnected, unaware and numb. Long term they may lose the ability to 'feel' or lose touch with reality.

Areas of difficulties identified by people with aphantasia or hyperphantasia

- Differences and difficulties in relationships, causing interpersonal issues. Psychoeducation, relationship counselling?
- Grief and difficulties around grieving
- Guilt about inability to recall events in aphantasia
- “I should be able to”... - feeling negative about being different
- Self-acceptance and self-compassion
- Overwhelm or difficulties being “in the moment” in hyperphantasia

Imagination in therapy

- Symbolism – representational, or “as if” quality
- Metaphor and storytelling
- Play and creativity
- An important part of development
- Winnicott: “It is in playing and only in playing that the individual child or adult is able to be creative and to use the whole personality, and it is only in being creative that the individual discovers the self.”
- Imagination is much wider than visualisation, as is clearly demonstrated in this conference!

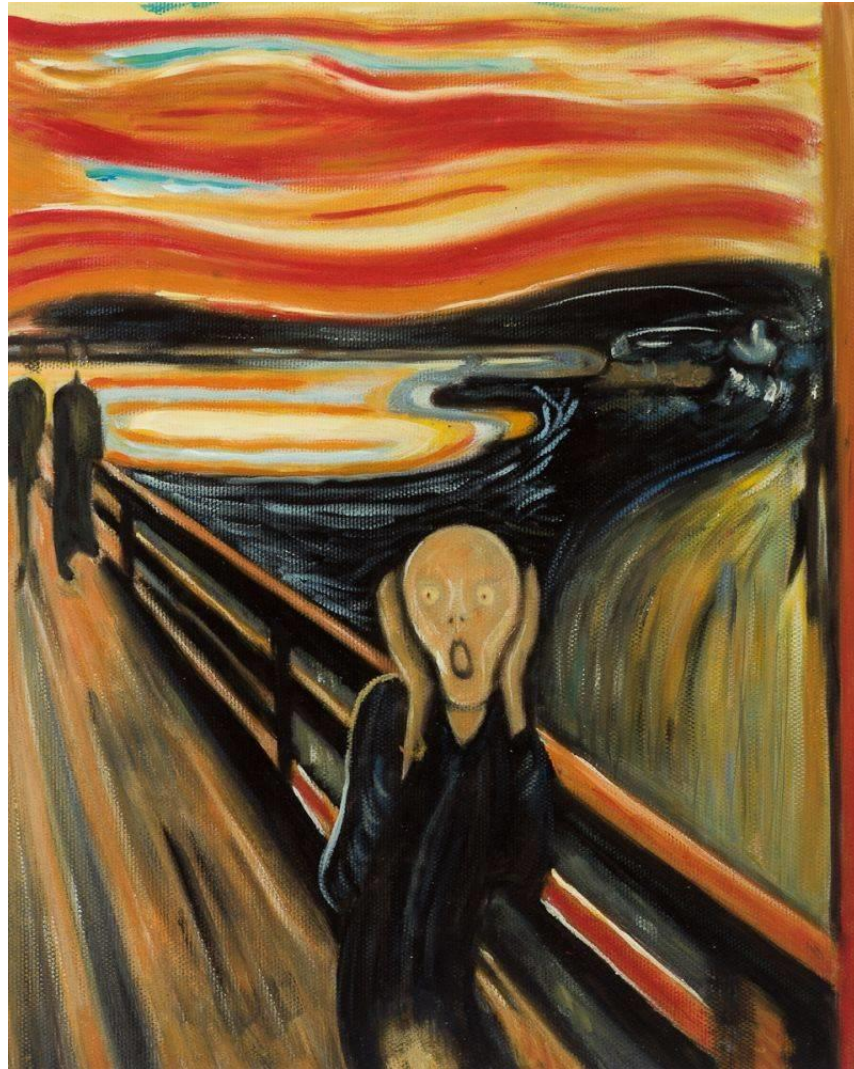
What is creativity?

- Google: “the use of imagination or original ideas to create something; inventiveness.”
- Can apply to all walks of life
- Science, arts, business, academia, cooking...
- Winnicott: “Somewhere in the scheme of things there can be room for everyone to live creatively. This involves retaining something personal... that is unmistakably yourself. If nothing else, try breathing, something no one can do for you.”

Imagery \neq creativity

- Making images is not the only way to be creative
- Therapies which have a focus on imagery or creativity can be accessible to people with a range of visual imaginative abilities
- If cognition, logic and language are a strength, it might be useful to seek interventions that enhance artistic creativity and playful imagination
- People with aphantasia have the same emotional responses to looking at images, which can also be used therapeutically.

Images as a “gateway” to feeling states
Can use an actual image/ photograph





Imagery in therapy – not a barrier

- In art therapy: the focus is on self-expression and “here and now” engagement with the art materials in a mindful and exploratory way. Visually imagining or having a pre-conceived idea of the image to be made in the session is not necessary and sometimes discouraged. Options: collage, sandplay, photographs, reflecting on pictures or art, working with objects and in 3D, “taking a line for a walk”, spontaneous mark-making, sensory engagement.
- Drawing or making art in order to express and “find out” about our internal world – a creative process of discovery, in therapy or for self-development.
- Alternatively, other arts therapies might feel more accessible (music, drama, dance & movement).

From Friday's exhibition - quoting artists with aphantasia...

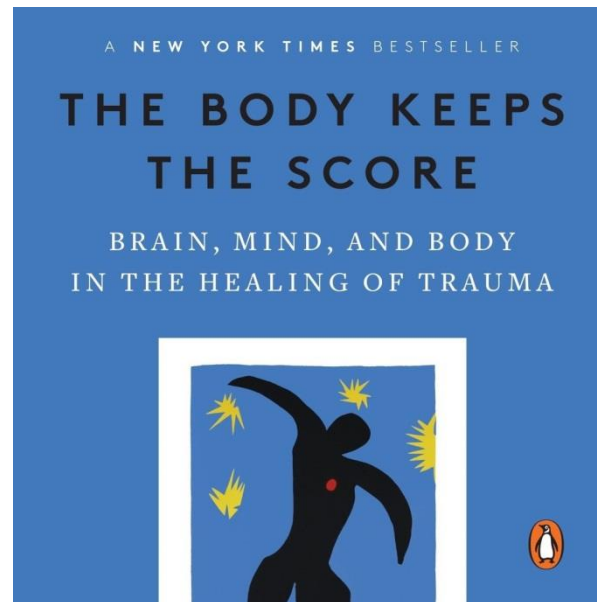
- **Isabel Nolan:** “I’ve always strongly felt it is necessary to make the work in order to discover what it might do, how it will appear”.
- **Claire Strickland:** “I have aphantasia but I also have a very active imagination...” She uses a large collection of reference images and photographs.
- **Susan Baquie:** “My emotional state caused me to work blind within a process of cutting and tearing papers and applying the mixed media in abstract form... Gradually, shapes and colours evoke essences of meaning within the experience being blindly depicted”.

EMDR and mindfulness

- The imagery is, to some extent, a means to access “feeling states” in the body. Visual imagination can be a useful way in for many, but it is not the only way.
- The goal is often to connect with the felt sense – of being calm and feeling safe and resourced, being at peace, or (in trauma processing) of accessing the distress in order to re-process it.
- Interoception, emotions and intuition.
- Focus on here-and-now sensations, use of objects.
- Therapists should be able to modify protocols and work individually. Might need educating!
- EMDR and REM sleep...

Body-focused therapies

- Somatic Experiencing, Sensorimotor Psychotherapy, Body Psychotherapy...
- Less emphasis on visualisation. Typically for trauma and PTSD treatment.
- Bessel van der Kolk – The Body Keeps the Score.



In Summary...

- Aphantasia and hyperphantasia are variations of human experience rather than disorders to be treated, but therapy can help if there is a mental health cause or if people find it difficult to manage.
- Creativity **is** for everyone! Having aphantasia does not mean you should avoid exploring your own creativity, playfulness or imagination.
- Modifications can be made to accommodate the absence of visual imagery across therapeutic approaches, but you might need to explore with your therapist and potentially educate them about aphantasia or hyperphantasia.
- You can find the modality that is right for you.