

*A Picture is Worth a Thousand Words —***Using PhotoTherapy Techniques in
Counselling Practice¹**

by

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PhotoTherapy Techniques use clients' own personal snapshots and family photos — and the feelings, memories, thoughts and information these evoke — as catalysts for therapeutic communication and personal healing.

***The Secret Lives of Personal Snapshots and
Family Photographs***

Any time a photograph is viewed, remembered, or even taken, projection of meaning (and triggering of associated feelings or memories) always spontaneously occurs! Therefore, every snapshot a person takes or keeps is also a type of self-portrait, a kind of “mirror with memory” reflecting back those moments and people that were special enough to be selected for freezing in time forever.

Collectively, a person's photos make visible the ongoing stories of their life, serving as visual footprints marking where they have been (emotionally, as well as physically) and also perhaps signaling where they might next be heading. Even their reactions to snapshots taken by others (or postcards, magazine pictures, greeting cards, and so forth, which “call” to them somehow) can provide illuminating clues to their own inner life and its stories.

While looking at a snapshot, people actually spontaneously create the meaning that they think is coming from that photo itself, and this may or may not be the meaning that the photographer originally intended to convey.

And from all the above, it quickly becomes clear that the actual meaning of any photograph lies less in its visual facts and more in what these details evoke inside the mind (and heart) of each viewer.

Thus, the meaning (and emotional “message”) of any photo is dependent upon who is doing the looking, because people's perceptions and unique life experiences will always automatically frame, and actually define, what they see as real. And therefore people's reactions to photographs that they feel are special can actually reveal a lot about themselves, if only the right kinds of questions are asked.

***How Therapists Use Photos to
Help People Heal***

Because personal snapshots permanently record important daily moments (and the associated emotions unconsciously embedded within these), they can serve as natural bridges for accessing, exploring, and communicating about feelings and memories (including deeply-buried or long-forgotten ones), along with any psychotherapeutic issues these bring to light. Clients' photos are tangible symbolic self-constructs and metaphoric transitional objects, as well as visual traces of family systems dynamics — silently offering them inner “in-sight” about things less consciously-evident or verbally accessible.

Under the guidance of a therapist trained in PhotoTherapy techniques, clients explore what their own personally meaningful snapshots and family albums are about emotionally, in addition to what they are of visually. Such information is latent in all personal photos, but when it can be used to focus and precipitate therapeutic dialogue, a more direct and less censored connection with the unconscious will usually result.

During PhotoTherapy sessions, photos are not just passively reflected upon in silent contemplation, but also actively created, posed for, talked with, listened to, reconstructed, revised to form or illustrate new narratives, collected on assignment, re-visualized in memory or imagination, integrated into art therapy expressions, re-enacted/sculpted for revised versions, or even set into animated dialogue with other photos. This allows clients to better reach, understand, and express parts of themselves in ways that words alone cannot as fully represent or deconstruct.

Used alone, or in combination with various other therapy techniques, clients' photos prove to be worth far more than the proverbial “thousand words” — and thus therapists trained in PhotoTherapy techniques can learn how to make use of these “secret lives” of ordinary snapshots to help their clients learn more about themselves.

The Techniques of PhotoTherapy

Like the fingers of a hand, the five PhotoTherapy techniques are interrelated and interdependent, working best when synergistically combined. PhotoTherapy is not about interpreting people's photos for them; instead, the input should always come from the client, guided by the therapist's photo-stimulated questions, while both explore the image (and its emotional impact) together.

As clients discuss the layers of meanings contained within their photographs, they also reveal a lot about themselves: their inner value system, beliefs, attitudes and

Using Photo Therapy Techniques

(continued from page 3)

expectations that inseparably accompany their words. These nonverbal codes hold important clues about how people make sense of their world (and their place within it), and the more therapists know these “inner parts” of their clients, the better they can help them.

Making the photos, or bringing them along to the therapy session, is just the first step — once the photo can be viewed, the next step is to activate all that it brings to mind (exploring its visual messages (and the emotions and memories these trigger), entering into dialogues with it, asking it questions, considering the results of imagined changes or different viewpoints, and so forth). Therefore, what for photographers is usually an end-point (the finished photo) is, for PhotoTherapy purposes, just the beginning...

The therapist’s primary role is to encourage and support clients’ own personal discoveries while they explore and interact with the ordinary personal and family snapshots they themselves make, collect, view, remember, or even only imagine. Each of the five PhotoTherapy techniques is based on one or more of the following kinds of photographs (although in practice these categories often naturally overlap):

- 1) Photos which have been taken or created by the client (whether actually using a camera to make the picture, or “taking” (appropriating) other people’s images through gathering “found” photos from magazines, postcards, Internet images, digital manipulation, and so forth),
- 2) Photos which have been taken of the client by other people (whether posed on purpose or captured spontaneously),
- 3) Self-portraits, which means any kind of photos that clients have made of themselves, either literally or metaphorically (but in all cases, these are photos of clients where they themselves had full control and power over all aspects of the image’s creation),
- 4) Family album and other photo-biographical collections (whether of birth family or family of choice; whether formally kept in albums or more “loosely” combined into narratives by placement on walls or refrigerator doors, inside wallets or desktop frames, into computer screens or family websites, and so forth), and,
- 5) “Photo-Projectives”, which make use of the (phenomenological) fact that the meaning of any photo is primarily created by its viewer during their process of perceiving it. Looking at any kind of photographic image produces perceptions and reactions that are projected from that viewer’s own inner map of reality which determines how they make sense of what they see.

Therefore, this technique is located not in a particular

kind of photograph, but rather in the less-tangible interface between a photo and its viewer (or maker), the “place” where each person forms their own unique responses to what they see.

Like so many holistic approaches, PhotoTherapy suffers somewhat from having to be taken apart for studying in any step-by-step order, when in fact each technique is partially formed by, and overlaps, several others. Therefore, the most effective application of these techniques will occur when they are creatively combined — because they comprise an integrally interconnected system that is far more useful as a whole, than in any linear summation of its parts.

PhotoTherapy — The Bigger Picture

Since PhotoTherapy involves people interacting with their own unique visual constructions of reality (using photography more as an activating verb than as a passive/reflective noun), these techniques can be particularly successful with people for whom verbal communication is physically, mentally, or emotionally limited, socioculturally marginalized, or situationally inappropriate due to misunderstanding of nonverbal cues. And, since PhotoTherapy is about photography-as-communication rather than photography-as-art, no prior experience with cameras or photographic art is required for effective therapeutic use.

As the general public becomes increasingly comfortable with using electronic technology and digital imagery, more exciting possibilities arise for using photos as counselling tools with clients who have scanners, digital cameras, photo-manipulation software, family websites, and/or those who are able to participate in online cyber-therapy.

In summary, since PhotoTherapy is a collection of flexible techniques, rather than fixed directives based upon only one specific theoretical modality or therapeutic paradigm, it can be used by any trained therapist, regardless of their conceptual orientation, preferred intervention model or theoretical approach, or degree of prior familiarity with photography itself. Doing good therapy, and doing it well, is itself an art, and one which needs as many different intervention tools as possible for helping a client in the most beneficial way...

For more information about PhotoTherapy:

<http://www.phototherapy-centre.com> — or the book,

PhotoTherapy Techniques — Exploring the Secrets of Personal Snapshots and Family Albums

Or, contact the author at the *PhotoTherapy Centre*
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Editor's Notes

Thanks for the interest in back issues. It was nice to hear from some new Chapter members. The offer is still open. If you're a new member and would like to get caught up, give me a call, (see number to the left) or e-mail me and I will send you all of our back issues. Note that e-mails must be identified in the subject line as Private Practitioner or counselling-related or they will get dumped. I don't know about you, but I am fed up with e-mails trying to sell me drugs, mortgages, degrees, porno, trips, and patches. All are identified by everyday names. Lately, some of the most insidious ones come in with the subject 'unspecified'.

It occurs to me that we most often try to contact our members by e-mail. What if you don't 'e'? We will be compiling a list of members to send snail mail to. Or, you could learn about electronic mail from one of your colleagues. It could be a subject at your group networking meetings or perhaps some kind soul would tutor you in the ways and means of getting on line.

I got my first letter to the Editor from a therapist in the Toronto area looking to start a group - see page 7 for details. Call Mary now and get a new private practitioner group for support and encouragement, ideas, promotion, etc. Be sure to read your next issue of Cognica as it will be focusing on the Private Practitioner. We rapidly became

the largest Chapter of CCA soon after our inception. I would welcome feedback as to whether you feel you were well represented in that issue. Cognica is asking for regular input from our Chapter and we could write about your concerns. Better yet, you could write about your concerns. Send it to me or to Cognica or to Lucy MacDonald at: 218 Gifford Ave
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I've been working on an article for Cognica on who are Private Practitioners. To provide accurate information, I used the listing of the CCC counsellors on the CCA website. Have you thought about how you are represented there? There will soon be a new catalogue printed. Review your listing and scroll through lots of other listings for inspiration. Also, there are scads of typos, words hanging without meaning, and unclear specialities. If you only put your name and no or very little contact information, it looks like you are not interested in being contacted. If you are doing something new or different from your previous activity, change your speciality. It's your responsibility to clean up your listing. Send an e-mail or call Doris at CCA and he will make sure it is updated.

Last Spring I started working for an EAP program doing Solution Focused Therapy. I will have to update my own listing on the CCC list. Imagine my surprise when I came across a therapist in Alberta doing EAP - with horses. I was so pleasantly surprised to find something so marvellously hands-on. Of course, EAP now has taken on a whole new meaning. Actually, it's Equine Assisted Psychotherapy and Catherine Johnson has promised to write us an article for our next issue. If you want advance info have a look at her website: www.winningstrides.com Enjoy.

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