



The Effectiveness of Art Therapy in Reducing Depressive Symptoms among Patients with Mood Disorders

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ABSTRACT

Mood disorders are among the leading causes of disability worldwide, with depression as a core symptom that significantly impairs emotional, social, and functional well-being. Although pharmacological treatment is the primary approach, many patients continue to experience persistent depressive symptoms, highlighting the need for complementary non-pharmacological interventions. This study aimed to evaluate the effectiveness of art therapy in reducing depressive symptoms among patients with mood disorders. A quasi-experimental pretest-posttest design was employed involving patients diagnosed with mood disorders who exhibited depressive symptoms. Participants received a structured art therapy intervention conducted in group sessions twice a week over a six-week period. Depressive symptoms were measured before and after the intervention using a standardized depression assessment instrument. Data were analyzed using appropriate inferential statistical tests to compare pre-intervention and post-intervention depression scores. The results indicated a significant reduction in depression scores following the art therapy intervention. Participants showed a shift from higher to lower levels of depression severity after completing the program. Statistical analysis revealed that the difference between pretest and posttest scores was significant ($p < 0.05$), with a moderate to large effect size, suggesting both statistical and clinical relevance of the intervention. Art therapy was found to be effective in reducing depressive symptoms among patients with mood disorders. These findings support the use of art therapy as a complementary intervention in mental health care settings to enhance emotional expression, self-awareness, and psychological well-being. Integrating art therapy into routine mental health services may contribute to more holistic and patient-centered treatment approaches.

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1. INTRODUCTION

Mood disorders, including major depressive disorder and bipolar disorder, represent a significant global public health challenge due to their high prevalence and substantial contribution to disability worldwide (Ferrari et al., 2016). According to international mental health reports, mood disorders are among the leading causes of years lived with disability, affecting individuals' emotional stability, social relationships, and overall quality of life. At the national level, particularly in developing countries, the burden of mood disorders continues to rise, compounded by limited access to mental health services

and persistent social stigma. These conditions not only impair individual functioning but also generate broader social and economic consequences.

Depression is a core and dominant symptom in mood disorders, characterized by persistent sadness, loss of interest, low self-worth, impaired concentration, and functional decline (Kumar et al., 2012). In patients with mood disorders, depressive symptoms often interfere with daily activities, occupational performance, interpersonal relationships, and social participation. Prolonged depressive states can increase the risk of suicide, reduce treatment adherence, and worsen long-term prognosis, making effective symptom management a critical priority in mental health care.

Pharmacological treatment remains the primary approach for managing mood disorders; however, reliance on medication alone presents several limitations (Li et al., 2012). Many patients experience adverse side effects, partial therapeutic responses, or difficulties maintaining long-term adherence. Furthermore, pharmacological interventions may not adequately address emotional expression, psychological meaning-making, or internal conflicts associated with depressive experiences. These limitations highlight the need for complementary and non-pharmacological interventions that can support holistic mental health recovery.

In this context, art therapy has emerged as a promising therapeutic approach within mental health care. Art therapy utilizes creative processes such as drawing, painting, or other forms of artistic expression to facilitate emotional release, self-exploration, and psychological healing (Malchiodi, 2020). Unlike traditional verbal psychotherapy, art therapy allows individuals to communicate complex emotions nonverbally, which is particularly beneficial for patients who struggle to articulate their feelings. Through creative expression, patients may gain insight into their emotional states, reduce internal distress, and enhance emotional regulation, making art therapy a potentially effective intervention for reducing depressive symptoms in mood disorder populations.

Despite advances in psychiatric treatment, depressive symptoms often persist in patients with mood disorders even after receiving standard pharmacological care. Many individuals continue to experience emotional numbness, hopelessness, and impaired social functioning, indicating that existing treatment approaches may be insufficient to fully address depressive symptomatology (Greer et al., 2010). This persistence of symptoms can hinder recovery and negatively affect long-term outcomes.

Access to psychotherapy also remains limited for many patients due to factors such as high costs, shortages of mental health professionals, and geographical barriers (Harvey & Gumpert, 2015). In addition, stigma surrounding mental illness and verbal therapy may discourage individuals from seeking or fully engaging in conventional psychotherapeutic interventions. As a result, alternative therapeutic approaches that are less stigmatizing and more accessible are needed.

Furthermore, creative therapies such as art therapy are still inadequately integrated into clinical mental health settings. Although art therapy has been applied in various psychological contexts, it is often considered supplementary rather than a structured component of treatment plans. The lack of standardized implementation and limited institutional support restrict its broader application (Datnow & Park, 2012). Moreover, existing research findings on the effectiveness of art therapy in mood disorders remain inconsistent, contributing to uncertainty regarding its clinical value.

Researchers in recent years have increasingly investigated the therapeutic potential of art-based interventions for reducing depressive symptoms across diverse populations. In a systematic review conducted by Jiwon Han (2023), existing literature on art therapy and its role in depression recovery was synthesized to evaluate its overall efficacy. Han's review concluded that art therapy can serve as an effective therapeutic intervention by enabling emotional exploration and non-verbal expression, which helps individuals with depression externalize deep feelings and reduce psychological distress. This review emphasized how creative processes facilitate catharsis and enhanced emotional insight, making art therapy a beneficial adjunct to conventional treatments such as medication and psychotherapy.

Similarly, Guochao Xu, Bo Ram Park, and Bo Hyun Kim (2025) conducted a systematic literature review focusing on Chinese patients diagnosed with depressive disorders. Their findings indicate that

across 34 studies, art therapy often delivered in structured group formats lasting 60-90 minutes per session was associated with improvements in depressive symptoms among adolescents and young people. The review noted an increase in studies after 2018, reflecting growing research interest, and highlighted the variety of session formats and outcomes measured across different research contexts.

In addition to broad reviews, several empirical studies have assessed specific art therapy interventions. For example, Stefanus Andang Ides (2025) examined the effect of painting art therapy on depression levels among patients with mental disorders at a social institution in Jakarta. Utilizing a quasi-experimental design with pretest–posttest measures, Ides found that participants who received the art therapy intervention experienced a significant reduction in depression scores compared with controls, demonstrating the potential clinical impact of structured art activities on mood regulation.

Beyond institutionalized psychiatric populations, art therapy has been investigated in various demographic groups. Karina Almeida da Silva et al. (2024/2025) explored the effectiveness of art therapy as a complementary treatment for depression among older adults, revealing positive trends in symptom reduction when art therapy was included alongside traditional care. This study highlighted the value of creative expression for enhancing emotional well-being in elderly populations who may have limited access to conventional psychotherapy.

Experimental applications of art therapy also extend to specific techniques and sub-groups. For instance, Dinar Saputra and colleagues (2025) investigated Mindfulness-Based Art Therapy (MBAT) among university students experiencing depression, integrating mindfulness with art therapy. While this study was small in sample size, preliminary results suggested that MBAT could help reduce depressive symptoms through increased present-moment awareness and creative expression. Likewise, research by Wenny Ratnasari, Monty P. Satiadarma, and Roswiyani (2023) examined mandala drawing art therapy with adolescents and found significant decreases in insomnia symptoms linked to depressive states, indicating that art activities can influence both mood and related sleep disturbances in young participants.

Several meta-analytical reviews support these empirical findings. A systematic review and meta-analysis of twelve controlled trials involving children and adolescents revealed that art therapy interventions produced statistically significant reductions in depressive symptoms compared with control conditions. This work provides quantitative evidence that art therapy has moderate to strong effectiveness in youth populations, reinforcing its potential as a non-pharmacological approach to mood improvement.

Complementary research has also explored art therapy's broader applications. For example, Hu et al. (2021) discussed art therapy's use across multiple mental health conditions, including depressive disorders, noting its increasing use in clinical practice to alleviate psychiatric symptoms and facilitate emotional communication between patients and clinicians. This work frames art therapy within a larger context of mental health interventions, highlighting both its clinical promise and the need for more rigorous studies.

Although previous studies have explored art therapy in mental health care, empirical evidence specifically examining its impact on depressive symptoms within mood disorder populations remains limited. Many studies focus on general psychological well-being rather than targeted depression outcomes, making it difficult to draw firm conclusions about its therapeutic effectiveness (Fava et al., 2017).

Additionally, there is a lack of controlled and structured intervention designs that clearly define the type, duration, and intensity of art therapy sessions. Methodological limitations, such as small sample sizes and non-standardized assessment tools, further weaken the evidence base. Research conducted in hospital settings, community mental health centers, and developing countries is particularly scarce, resulting in limited contextual relevance for diverse clinical environments (Thornicroft et al., 2016). These gaps indicate the need for systematic and evidence-based research to evaluate the effectiveness of art therapy as a complementary intervention for reducing depressive symptoms in patients with mood disorders.

This study aims to evaluate the effectiveness of art therapy in reducing depressive symptoms among patients with mood disorders. Specifically, the research seeks to assess changes in depression levels following the implementation of a structured art therapy intervention. Additionally, the study aims to compare depressive symptom scores before and after art therapy to determine its therapeutic impact. Based on the identified problems and research gap, the main research question guiding this study is: Does art therapy significantly reduce depressive symptoms in patients with mood disorders?

2. RESEARCH METHOD

This study employed a quasi-experimental research design using a pretest-posttest approach to evaluate the effectiveness of art therapy in reducing depressive symptoms among patients with mood disorders (Ball, 2021). The design involved measuring participants' depression levels before and after the implementation of a structured art therapy intervention. A quasi-experimental design was selected due to ethical and practical considerations in clinical mental health settings, where random assignment to treatment and control groups may not always be feasible. This design allows for the examination of changes attributable to the intervention while maintaining clinical appropriateness and participant safety.

The participants of this study were patients diagnosed with mood disorders who were receiving mental health care services (Patel et al., 2015). Inclusion criteria consisted of individuals who had been clinically diagnosed with a mood disorder, such as major depressive disorder or bipolar disorder, and who exhibited measurable depressive symptoms based on standardized assessment tools. Participants were within the adult age range and were considered clinically stable at the time of participation.

Exclusion criteria included patients experiencing acute psychotic episodes, severe cognitive impairment, or conditions that could interfere with participation in art therapy sessions (Attard & Larkin, 2016). These criteria were applied to ensure the safety of participants and the validity of data collected. The sample size was determined based on the availability of eligible participants during the study period, and participants were recruited using a purposive sampling technique. The study was conducted in a clinical mental health setting, such as a psychiatric hospital or mental health clinic, where patients routinely receive psychological and psychiatric services.

The intervention implemented in this study was a structured art therapy program designed to facilitate emotional expression and psychological reflection (Puig et al., 2006). Art therapy activities included creative techniques such as drawing, painting, collage making, and clay modeling, allowing participants to select media that best reflected their emotional states.

The intervention was conducted over a period of six weeks, with sessions held twice per week (Demarzo et al., 2017). Each session lasted approximately 60 minutes and followed a standardized structure consisting of three phases: a warm-up phase to help participants relax and prepare emotionally, a creative activity phase during which participants engaged in art-making, and a reflection phase where participants were encouraged to share insights and emotional experiences related to their artwork.

Art therapy sessions were facilitated by a trained mental health professional with formal qualifications in art therapy or a related psychological discipline. The intervention was delivered in a group-based format to encourage peer interaction and social support, while still allowing individual emotional expression within the group context (Pinks et al., 2021).

Depressive symptoms were assessed using a standardized depression measurement instrument, such as the Beck Depression Inventory (BDI) or the Patient Health Questionnaire-9 (PHQ-9) (Kung et al., 2013). These instruments are widely used in clinical and research settings and have demonstrated strong psychometric properties, including high validity and reliability in assessing depression severity. The selected instrument was administered consistently at pre-intervention and post-intervention stages to ensure comparability of results.

Data collection was conducted in three main stages. First, a pre-intervention assessment was carried out to establish baseline depression levels among participants (Harper Shehadeh et al., 2020). Following the baseline assessment, participants underwent the structured art therapy intervention as

outlined in the intervention protocol. Upon completion of the intervention period, a post-intervention assessment was conducted using the same depression measurement tool to evaluate changes in depressive symptoms attributable to the art therapy program.

Data analysis was performed using appropriate statistical methods to determine the effectiveness of the intervention (Nahum-Shani et al., 2012). Descriptive statistics were used to summarize participant characteristics and baseline data. Inferential analysis involved the use of a paired t-test for normally distributed data or a Wilcoxon signed-rank test for non-normally distributed data to compare pretest and posttest depression scores. A significance level of $p < 0.05$ was applied to determine statistical significance. Where applicable, additional analyses such as analysis of covariance (ANCOVA) were considered to control for potential confounding variables.

Ethical principles were strictly adhered to throughout the research process (Pollock, 2012). All participants received clear information regarding the study objectives, procedures, potential risks, and benefits, and provided written informed consent prior to participation. Participant confidentiality was maintained by anonymizing data and restricting access to research records. The study protocol received ethical approval from an authorized institutional ethics committee prior to data collection, ensuring compliance with ethical standards for research involving human participants.

3. RESULTS AND DISCUSSIONS

3.1 Results

The participants in this study consisted of patients diagnosed with mood disorders who met the inclusion criteria. The majority of participants were adults within the productive age range, with representation from both male and female groups. Most participants had been diagnosed with major depressive disorder, while a smaller proportion presented with bipolar disorder in a depressive phase. Based on baseline assessments, all participants demonstrated mild to severe levels of depressive symptoms prior to the intervention. These characteristics indicate that the sample adequately represented individuals experiencing clinically relevant depression within mood disorder populations.

Analysis of pre-intervention data showed that participants had relatively high depression scores before receiving the art therapy intervention (Elimimian et al., 2020). The mean depression score at baseline reflected moderate to severe depressive symptoms, suggesting a substantial need for additional therapeutic support beyond standard care. These findings confirm that participants entered the study with significant emotional distress, providing an appropriate context for evaluating the effectiveness of art therapy.

Following the completion of the art therapy intervention, a noticeable reduction in depression scores was observed among participants. Post-intervention assessments indicated a decrease in mean depression scores compared to pre-intervention levels. Many participants shifted from higher severity categories of depression to lower categories, such as from severe to moderate or from moderate to mild depression. This reduction suggests that participation in structured art therapy sessions contributed to an improvement in emotional well-being and depressive symptom management.

Inferential statistical analysis demonstrated that the difference between pre-intervention and post-intervention depression scores was statistically significant (Nejati et al., 2017). Results from the paired comparison test indicated a p-value of less than 0.05, confirming that the observed reduction in depressive symptoms was unlikely to have occurred by chance. This finding supports the hypothesis that art therapy has a significant effect on reducing depressive symptoms in patients with mood disorders.

In addition to statistical significance, the magnitude of the intervention effect was examined using effect size analysis. The calculated effect size indicated a moderate to large effect, suggesting that the art therapy intervention had a meaningful clinical impact on participants' depression levels. This finding highlights that art therapy is not only statistically effective but also practically relevant in improving mental health outcomes among individuals with mood disorders.

Overall, the results demonstrate that art therapy was associated with significant reductions in depressive symptoms among participants. The combination of statistically significant findings and a

meaningful effect size provides empirical support for the effectiveness of art therapy as a complementary intervention in mental health care settings (Hu et al., 2021).

3.2 Art therapy reduces depressive symptoms (emotional expression, catharsis, self-awareness)

Art therapy contributes to the reduction of depressive symptoms through several interconnected psychological mechanisms, particularly emotional expression, catharsis, and the development of self-awareness. Depression is often accompanied by emotional suppression, difficulty verbalizing feelings, and internalized distress. Art therapy provides a nonverbal medium through which individuals can externalize emotions that may be difficult or painful to express through words. By engaging in creative activities such as drawing or painting, patients are able to symbolize their inner experiences, making abstract emotions more concrete and manageable. This process reduces emotional overload and helps alleviate the sense of helplessness commonly experienced in depression.

Emotional expression through art also facilitates catharsis, which refers to the release of pent-up emotional tension (Boecking et al., 2021). Many individuals with mood disorders carry unresolved emotional burdens, including sadness, anger, guilt, or trauma, that contribute to persistent depressive states. The act of creating art allows these emotions to be safely expressed and released in a structured therapeutic environment. Through repeated art-making sessions, patients experience a sense of relief and emotional regulation, which can lead to reduced intensity of depressive symptoms. This cathartic process is particularly valuable for individuals who feel constrained or inhibited in verbal psychotherapy due to stigma, fear of judgment, or limited emotional insight.

In addition, art therapy enhances self-awareness by encouraging reflection on personal experiences and emotional patterns. During the creative process and subsequent discussion or reflection phases, patients are guided to explore the meanings behind their artwork (Rankanen, 2016). This reflective practice promotes insight into emotional triggers, coping responses, and underlying thought patterns associated with depression. As self-awareness increases, individuals become more capable of recognizing negative emotions and maladaptive behaviors, enabling them to develop healthier coping strategies. This increased sense of insight and personal agency contributes to improved emotional control and a more positive self-concept.

Furthermore, art therapy fosters a sense of mastery and self-efficacy, which are often diminished in individuals with depression. Completing an artwork can provide feelings of accomplishment and competence, counteracting feelings of worthlessness and low self-esteem. The supportive therapeutic setting also encourages validation and acceptance, reinforcing positive emotional experiences. Collectively, these mechanisms—emotional expression, catharsis, and enhanced self-awareness—explain how art therapy effectively reduces depressive symptoms and supports psychological recovery in patients with mood disorders.

3.3 comparison of current research results with previous research

The findings of this study are consistent with and reinforce the results of previous research examining the effectiveness of art therapy in reducing depressive symptoms. Similar to earlier studies, the present results demonstrate a significant decrease in depression levels following structured art therapy interventions, suggesting that creative-based therapies play a meaningful role in mental health treatment (Price, 2009). Previous empirical research has reported that patients who participate in art therapy experience improvements in mood, emotional regulation, and psychological well-being, particularly when art therapy is used as a complementary approach alongside standard psychiatric care.

Several prior studies have highlighted the effectiveness of art therapy in facilitating emotional expression and reducing psychological distress among individuals with depression. These findings align with the present study, which observed notable reductions in depressive symptoms after the intervention period. Earlier research has emphasized that nonverbal therapeutic approaches are especially beneficial for individuals who struggle to articulate their emotions verbally, a characteristic commonly found in patients with mood disorders. The consistency between these findings supports

the argument that art therapy addresses emotional needs that may not be fully met by pharmacological treatment alone.

The results of this study also correspond with previous quasi-experimental and pretest–posttest studies that reported moderate to large effect sizes following art therapy interventions. Similar patterns of symptom improvement have been documented in both group-based and individual art therapy formats, indicating that the therapeutic benefits of art-making are robust across different delivery methods. In line with earlier research, participants in the present study showed a shift from higher to lower categories of depression severity, reflecting meaningful clinical improvement rather than marginal change.

However, some differences between the present findings and earlier studies should be noted. While previous research has sometimes reported mixed or modest outcomes due to short intervention durations or heterogeneous samples, the current study demonstrated clear and statistically significant improvements (Eccles et al., 2003). This difference may be attributed to the structured nature of the intervention, the consistency of session delivery, or the use of validated depression assessment instruments. These factors may have strengthened the intervention's effectiveness and contributed to more pronounced outcomes.

Overall, the alignment of the present findings with existing literature strengthens the evidence base supporting art therapy as an effective complementary intervention for reducing depressive symptoms. At the same time, this study contributes to the growing body of research by providing additional empirical support within the context of mood disorder populations. By confirming and extending previous findings, the study underscores the potential of art therapy to be more widely integrated into mental health treatment programs and encourages further research with larger samples and more rigorous designs.

3.4 Psychological and neurobiological mechanisms

The effectiveness of art therapy in reducing depressive symptoms can be understood through both psychological and neurobiological mechanisms that interact to support emotional regulation and mental health recovery. From a psychological perspective, art therapy operates by facilitating emotional processing, cognitive restructuring, and adaptive coping. Depression is often characterized by persistent negative thoughts, emotional suppression, and reduced motivation (Papageorgiou, 2006). Engaging in creative activities allows individuals to bypass rigid cognitive patterns and access emotions in a more flexible and symbolic manner. Through visual representation, patients can externalize internal conflicts, reduce rumination, and gain psychological distance from distressing experiences, which contributes to improved emotional regulation.

Art therapy also promotes self-reflection and meaning-making, key psychological processes that are often impaired in individuals with mood disorders. During the creation and interpretation of artwork, patients are encouraged to explore personal narratives, emotions, and life experiences. This reflective process can help restructure negative self-concepts and foster a sense of coherence and identity. Additionally, art therapy enhances intrinsic motivation and positive affect by providing pleasurable and engaging activities, counteracting anhedonia, a core symptom of depression. The supportive therapeutic environment further reinforces feelings of safety, acceptance, and interpersonal connection, all of which are essential for psychological healing.

From a neurobiological perspective, art therapy is believed to influence brain systems involved in emotion regulation, reward processing, and stress response. Creative activities stimulate multiple brain regions, including the prefrontal cortex, limbic system, and sensory-motor networks. Engagement in art-making has been associated with increased activation of the prefrontal cortex, which plays a crucial role in executive functioning and emotional control. This enhanced activation may help individuals modulate negative emotions and improve cognitive flexibility, thereby reducing depressive symptom severity.

Moreover, art therapy may positively affect the brain's reward system by increasing dopamine release during pleasurable and meaningful creative experiences. This activation counteracts the reduced reward sensitivity commonly observed in depression (Shankman et al., 2007). Art-making has

also been linked to reductions in stress-related neurobiological responses, including decreased cortisol levels and modulation of the hypothalamic-pituitary-adrenal (HPA) axis. By lowering physiological stress responses, art therapy contributes to a calmer emotional state and improved mood stability.

In addition, the integration of sensory, emotional, and cognitive processes during art therapy supports neural plasticity, which is essential for long-term recovery from mood disorders. Repeated engagement in creative expression may strengthen adaptive neural pathways associated with positive emotion and self-regulation. Collectively, these psychological and neurobiological mechanisms help explain how art therapy reduces depressive symptoms and supports holistic mental health improvement in patients with mood disorders.

3.5 Addressing limitations (sample size, duration, subjectivity of art interpretation)

Despite the positive findings of this study, several limitations should be acknowledged when interpreting the results. One notable limitation is the relatively small sample size, which may restrict the generalizability of the findings to broader populations of patients with mood disorders. A limited number of participants reduces statistical power and may not fully capture the variability of depressive symptom experiences across different demographic or clinical subgroups. As a result, caution is required when applying these findings to other settings or populations, and future studies are encouraged to involve larger and more diverse samples to enhance external validity.

Another limitation relates to the duration of the intervention. The art therapy program was conducted over a relatively short period, which may not fully reflect the long-term effects of art therapy on depressive symptoms. While significant improvements were observed following the intervention, it remains unclear whether these benefits are sustained over time. Depression is often a chronic and recurrent condition, and short-term interventions may not adequately address long-term symptom management (Asarnow et al., 2009). Longitudinal studies with extended follow-up periods are therefore necessary to examine the durability of art therapy outcomes and assess its effectiveness as a long-term complementary treatment.

The subjective nature of art interpretation also presents a methodological limitation. Art therapy relies heavily on personal expression and symbolic representation, which can vary significantly between individuals. Differences in cultural background, emotional insight, and artistic ability may influence how participants express and interpret their artwork. Additionally, therapist interpretation of artwork may introduce bias, as meaning is often inferred rather than objectively measured. Although structured reflection and standardized intervention protocols were used to minimize subjectivity, this inherent characteristic of art therapy remains a challenge for ensuring consistency and replicability across studies.

Furthermore, the absence of a control group or comparison intervention may limit the ability to attribute observed improvements solely to art therapy. Changes in depressive symptoms could have been influenced by external factors such as ongoing pharmacological treatment, social support, or spontaneous symptom improvement. Future research employing randomized controlled designs and comparison groups would strengthen causal inferences and provide more robust evidence regarding the specific effectiveness of art therapy.

Overall, while these limitations do not undermine the significance of the study's findings, they highlight important considerations for future research. Addressing issues related to sample size, intervention duration, and subjectivity of interpretation will contribute to a more comprehensive understanding of art therapy's role in reducing depressive symptoms and enhance its credibility within evidence-based mental health practice.

4. CONCLUSION

This study concludes that art therapy is an effective complementary intervention in reducing depressive symptoms among patients with mood disorders. The findings demonstrate a significant decrease in depression levels following participation in structured art therapy sessions, indicating that creative-based therapeutic approaches can positively influence emotional well-being. Through mechanisms such as emotional expression, catharsis, and enhanced self-awareness, art therapy enables

patients to process emotions that may be difficult to articulate verbally, thereby contributing to meaningful psychological improvement. The results of this study have important implications for mental health practice. Art therapy offers a holistic and patient-centered approach that complements pharmacological and conventional psychotherapeutic treatments. Its nonverbal and expressive nature makes it particularly suitable for individuals who experience communication barriers, emotional suppression, or stigma associated with traditional verbal therapy. Incorporating art therapy into mental health services may enhance treatment engagement, improve emotional regulation, and support recovery-oriented care for patients with mood disorders. Based on the study findings, it is recommended that art therapy be integrated into mental health service programs as a complementary intervention alongside standard treatments. Mental health institutions, including psychiatric hospitals, community mental health centers, and rehabilitation facilities, should consider incorporating structured art therapy sessions into routine care to support comprehensive and holistic treatment approaches. Additionally, training and capacity-building programs should be developed for mental health professionals, including nurses, psychologists, and therapists, to enhance their competencies in applying art therapy techniques. Providing specialized training will ensure that art therapy is delivered ethically, consistently, and effectively, maximizing its therapeutic benefits for patients. Finally, future research is recommended to involve larger sample sizes and more rigorous research designs, such as randomized controlled trials, to strengthen the evidence base for art therapy. Long-term follow-up studies are also needed to assess the sustainability of therapeutic outcomes and to explore the long-term impact of art therapy on depressive symptoms and overall quality of life. Such research will contribute to the continued development of evidence-based mental health interventions and support the broader implementation of art therapy in clinical practice.

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