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André Zandoná
The Use of Photography as a
Clinical Tool in Social Work:
A Theoretical Exploration
Using Winnicottian and
Jungian Lenses

ABSTRACT

In this theoretical study, the photographic process was examined as having the potential to be used as a psychodynamic clinical tool in social work. Psychodynamic theoretical concepts by Carl Jung and Donald W. Winnicott were examined as guiding principles that will allow clinicians to understand how photography can be useful as a means to understand one's internal experience as well as external relationship with the world. This body of work presented current and potential uses of the camera as an instrument in interpreting the world according to one's subjectivity. In addition to theoretical examination, this research study also presented real application of photography as it is used by local communities to empower specific communities of color. The use of photography as a clinical tool in social work is a potentially relevant and culturally lucrative opportunity in community advocacy and empowerment work. This research study ultimately focused on how one's disposition and willingness to observe, examine and express a subjective interpretation of the world through the photographic lens, acts as a means to elucidate that which is clinically relevant and conducive to create social change at different levels.

THE USE OF PHOTOGRAPHY AS A CLINICAL TOOL IN SOCIAL WORK:
A THEORETICAL EXPLORATION USING WINNICOTTIAN AND JUNGIAN
LENSES

A project based upon independent
investigation, submitted in partial fulfillment
of the requirements for a degree in of Master
in Social Work

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CHAPTER I

Introduction

This body of work offers an exploration on how photography can be used in social work. Psychodynamic concepts derived from the work of Carl Jung on dream interpretation as it relates to symbolic language will be used in the recognition of potential unconscious dynamics that influence those who engage in the photographic process. The work of Donald W. Winnicott will serve as a theoretical platform used to understand the clinical relevance of what happens when photographs are used in the co-creation of a process that allows us to gain insight into one's internal experience and representation of the world.

Photography has been a useful tool in several of the helping professions including clinical nursing as well as occupational therapy (Erdner & Magnusson, 2011; Lal, Jarus & Suti, 2012). Another modern application of photography is the Photo Voice method and its client-centered approach to community development, public health and education that allows community members to represent their community or point of view using photographs as part of their own narratives. Photo voice and other participatory photography methods have often been successfully used with marginalized groups that social workers provide services to (Adams et al., 2012; Graziano, 2004; Markus, 2012; Mizen & Ofofu-Kusi, 2010) and yet the literature in the field of social work appears to lack research on the subject. This body of work is an effort to address this gap using theoretical conceptualizations as the foundation for present understanding and future work.

This study presents psychodynamic theory as a means to offer a theoretical explanation of how social workers can use photography as a clinical tool. For decades, photographs have and continue to be a major element in the process of social change. At a large scale of application such as documentary photography or photojournalism, photographs have defined generations, inspired masses to move towards change or informed us of atrocities that needed to end. The advent and widespread popularity of mobile digital photography combined with the development of social media has contributed to the development of social networks that connect millions of users across the globe through photographs. In this regard, photography is quite relevant today as both a means of visual communication as well as social connection. As an art form, photography is also a valuable means of individual self-expression. This body of work presents an explanation of how photography can be valuable in social work *as a clinical tool* as well as an instrument for change and venue of advocacy and empowerment of marginalized populations.

The following chapter introduces concepts from the work of Carl Jung on symbolism and dream interpretation as a means to help us understand unconscious processes that influence the creation of photographs. Chapter Three utilizes Object Relations theory as presented by Donald W. Winnicott to describe how the use of photography as a process and photographs as objects can be applied, maintained and nurtured in social work practice. Chapter Four provides a thorough and in-depth discussion on current and potential applications of photography in social work. Chapter Four also examines potential biases and makes recommendations for future work.

CHAPTER II

Photography and the Unconscious

This chapter explores one of the many possible uses of photography as a clinical tool. This particular section will use theoretical work by Carl Jung in the nature of the unconscious as well as dream interpretation and symbolism. This theoretical framework will serve as a context by which one can use the photographic process to further the exploration of one's internal world as well as to assist clients in the process of expressing their internal experiences in ways other than traditional Western oratory traditions.

Photography and Self-Understanding

The concept of self-understanding has been the topic of various theoretical explorations from Cartesian Philosophy to modern Intersubjectivity and Interobjectivity (Sammut, 2010). In the context of this body of work, self understanding can be thought of as a motivational force or the ability to further understand, reflect and change one's actions. While this definition may be a helpful starting point, it omits details of how this process develops and where the sources of self-knowledge can be found throughout one's lifespan. To further our understanding of these motivational forces we can take into account both external and internal forces that impact one's development and mental states. This particular section will emphasize internal forces characterized by unconscious processes and how these processes come to surface in one's environment as one of the major sources of self-knowledge.

There are processes that take place in our minds automatically and outside of our capacity for introspection. These unconscious processes range anywhere from thoughts, memories, affect and motivation (Czigler, I. & Winkler, I., 2010.Reinhard, 2013;Westen, 1999) and are not to be mistaken by autonomic nervous system processes such as respiratory rate, heart rate and perspiration.

Clinical Relevance

The unconscious has been a fruitful ground of exploration for centuries. From works of philosophy by Baruch Spinoza, Arthur Schopenhauer and Friedrich Nietzsche, to major bodies of literature by Dante Alighieri and William Shakespeare, it appears that a desire to explain our deepest motivations and fears lies at the core of modern humankind (Jung and Franz, 1964).

The tension that arises from opposing desires, functioning at an unconscious level and encouraging or repressing conscious action is at the core of what drove Sigmund Freud to develop some of the early conceptualizations of the mind in psychoanalytical terms (Bazan et al., 2013). The result of excessive tension between the conscious and unconscious aspects of our minds is often great anxiety, which can further impact how we go about managing aspects of daily life. This manifestation of anxiety as well as specific phobias and difficulties with psychosexual development has been associated with what many psychodynamic theories aim to explain and offer clinical venues of treatment (Berzoff, 2012).

Over the course of the last century, several different types of theories have been developed as attempts to help us better conceptualize the inner workings of our minds and how to best address and repair what happens when we end up at war with ourselves (Mitchel and Black, 1995). At their basic level, these theories are rooted in the process of making unconscious material accessible to conscious examination (Mitchel and Black, 1995). The use of

photography as a clinical tool is a different approach to encouraging the same process. The difference here is this assumption: we do not always have to be able to put our experience into written or spoken words before we are able to *feel* that we have finally had a glimpse of how our unconscious minds impact our daily lives and some of our struggles. After all, most of us have found ourselves at some point in our lives caught up in an experience so new or intense such as a deep emotional bond to another person or grief over the loss of a loved one that we found ourselves “at loss for words”. And finally, an introduction to the clinical relevance of self-understanding would not be complete without an age-old reference: To “know thyself” was a long established wisdom presented by the Delphic Oracle since the time of Plato. And in light of our current understanding of unconscious conflicts and recent findings in neuroscience demonstrating clear evidence for a cause-and-effect relationship between unconscious conflicts and psychopathology (Bazan et al., 2013), one could say that this ancient piece of wisdom is still as relevant today as much as it was in ancient Greece.

Theoretical Lens

As previously mentioned, there have been (and most certainly there will continue to be) many different approaches to the question of how we can go about making the unconscious conscious. The work of Carl Jung and his theories on symbolism and dream interpretation can serve as a useful framework to explore how photography can be used as a tool to facilitate the delicate and personal process of exploring one’s internal world and its emotional and experiential topography. In addition, Sigmund Freud and his work on the structural theory of the mind, as well as basic concepts of ego psychology such as defense mechanisms, will serve as additional theoretical grounding for understanding some core concepts of the use of photography as a clinical tool.

Jung and the unconscious. According to Jung, the unconscious is to be seen as a vital and lively part of human life. Unlike Freud, Jung did not see the unconscious simply as a repository of past experiences and unresolved conflicts (Jung and Franz, 1964). While he agreed that the neurotic symptoms that led to Freud's description of hysteria and other types of psychological pain were ways in which the unconscious mind expressed itself, Jung also felt that the unconscious is an infinite realm of possibilities where time flows in a nonlinear fashion and it influences every aspect of our lives (Jung and Franz, 1964). Of particular interest to Jung was our ability to use symbols in order to make meaning of our world (Jung and Franz, 1964). This unconscious world is seen as vital to our everyday lives and yet it is not where our conscious minds live. According to Jung, these separate realms operate under separate basic premises or "reality rules". On the one hand there is deductive and inductive reasoning and the different types of thinking that fit this cognitive paradigm ruling conscious life. The unconscious according to Jung, however, is a realm of its own where the linearity of logic and time take turns and flow in a variety of directions (Jung and Franz, 1964). A lengthy discussion is required in order to accurately describe the methods developed by Jung and his contemporaries; however, for the purposes of this body of work, it suffices to say that Jung used a dialectical method where symbolic language and interpretation of dreams as means of deciphering the language of the unconscious.

Jung posed that our capacity to use symbols comes about as a natural progression to our limitations in understanding previously unknown experiences (Jung and Franz, 1964). In other words, symbols are one way by which we try to describe what we are unable to communicate through written or spoken language or simply do not yet know or understand. With regards to unconscious processes and dream interpretation, Jung felt there was much to be discovered in the

actual form and content of one's dream (Jung and Franz, 1964). While Freud emphasized "free associations" that led to a train of thoughts connecting dream content to pathological complexes, Jung gradually gave up following associations that led one away from dream content and chose to concentrate instead on just dream content. Jung felt that in order to understand one's deepest psychic processes and overall personality, one needed to understand unconscious expressions such as dreams and symbolic images (Jung and Franz, 1964).

In a comparison between the conscious and the unconscious aspects of our mind in "Man and his Symbols", Jung felt that:

A story told by the conscious mind has a beginning, a development, and an end, but the same is not true of a dream. Its dimensions in time and space are quite different; to understand it you must examine it from every aspect—just as you may take an unknown object in your hands and turn it over and over until you are familiar with every detail of its shape (p.112).

Jung's method followed a sinuous route to describe an infinitely complex aspect of our minds. In the process of its development, Jung's ideas and conceptualizations of the unconscious gained added levels of complexity reaching far and wide, including archetypes and the collective unconscious as the "the inherited part of the human psyche not developed from personal experience" (Hunt, 2012). The application of Jung's ideas were often difficult to understand and not always popular with the status quo of the rest of the psychoanalytic community.

In the introduction of Jung's last psychological work, *Man and His Symbols*, John Freeman provided a simple description of Jung' and his colleagues:

They convince not by means of a narrowly focused spotlight of the syllogism, but by skirting, by repetition, by presenting a recurring view of the same subject seen each time

from a slightly different angle—until suddenly the reader who has never been aware of a single, conclusive moment of proof finds that he has unknowingly embraced and taken into himself some wider truth” (p. 5).

Symbols and dreams. Logic is often associated with and expressed by conscious written and spoken language (Ayer, 2001). The development and incredible accomplishments achieved by scientific instruments such as the stethoscope, microscope, or the telescope are demonstrations of what humankind can do when faced with phenomena beyond the range of our understanding either due to sensory limitations or lack of knowledge. However, according to Jung in “Man and his Symbols”, there comes a time when “no matter what instrument he uses, at some point he reaches the edge of certainty beyond which conscious knowledge cannot pass.” (Jung and Franz, 1964). At that crossroad of knowledge, Jung felt that humankind often resorts to comparisons and metaphorical language in order to represent concepts we cannot fully comprehend. One needs to look no further than religious symbolic language and imagery throughout the ages to find evidence of such conscious use of symbolism in the face of the unknown.

While symbolism can be used consciously, Jung felt that it was in our dreams that symbolism was free to flow without the limitations of logic and create a certain type of “dream language.” Jung felt that *waking* life is filled with events that occur below the threshold of consciousness and that such events are absorbed subliminally, without our conscious registration. According to Jung, the impact of these experiences could be brought into our awareness in a moment of intuition or profound reflection leading to a later realization (Jung and Franz, 1964). He also felt that dreams were psychic phenomena aimed at transmitting unconscious reactions or spontaneous impulses to consciousness and it was in the interpretation of symbols found in our

dreams that Jung felt the richest material could be found and explored. Similar to dreams, photographs can be thought of as representations, made by one's mind, as opposed to the perception of lived experience through one's senses (Bergstein, 2010).

Finally, on the topic of dream interpretation, Jung felt that motifs were to be understood in the context of each dream and not as "self-explanatory ciphers" (Jung and Franz, 1964). "The individual is the only reality": in this simple and yet powerfully humble statement one can find a point of reference to much of Jung's thoughts and ideas around the interpretation of dream symbolism as an individualized process in which the analyst and patient work together to learn and translate the language of one's dreams.

Role of Photography

In a series of seminal essays named "On Photography" published in 1977, Susan Sontag examined the historical and modern roles of photography in capitalistic societies. Sontag reminded us "photographs are not so much an instrument of memory as an invention of it or a replacement" (p.71). While Sontag's statement was aimed at warning us of the inherent difficulties of the mass use of photographs in political activism, it contains a basic element of clinical relevance and that is the act of taking photography itself. The process that goes into the seemingly simple act is where perhaps the discovery of clinical material through the use of photography as a clinical tool can begin.

Questions exploring why one chooses a certain subject over another, a particular composition or type of lighting can initially reveal a conscious explanation that, with the help of a clinician, opens the doors to a clinical process of deeper reflection and understanding of the latent or unconscious motivations that led to capturing the moment in the first place. This deepening of one's understanding of conscious and unconscious motives is at the core of many

psychotherapy methods (Mitchel and Black, 1995) and photography can facilitate this process by providing an experiential starting point linked to both conscious decision and unconscious motivation.

The other way in which photography can be helpful in this process of self-understanding is related to the study of the client's photographs themselves. Photographs can be seen at its most basic definition as the visual representation of a scene that unfolds in front of the photographer's eyes and captured in light sensitive material (Bergstein, 2010). If one considers the fact that our own eyes are made of "light sensitive material", the definition of a photograph can be woven with that of a memory. Similar to memories, this visual representation has an element of time that is still in terms of time being perceived as frozen in the past. And in a process similar to what happens when one recalls memories or dreams, the development of photographic film or the opening of a digital file can elicit a chain of associations of thoughts and emotions to the initial scene or memory (Lefcowitz, 2011).

Functioning as a type of memory (voluntary or involuntary), photographs provide the viewer with a certain degree of "pleasurable detachment" thus making room for the expressive content to exist without conscious intervention or criticism (Bergstein, 2010). This idea of the experience of taking or viewing a photograph as "pleasurable detachment" offered by Mary Bergstein invites room for a rich discussion of some basic Freudian concepts about the structure of the mind as well as psychological defense mechanisms. While that is a worthy discussion to engage in, it is a lengthy one and for the purposes of this body of work, it is sufficient to say that Freud's basic structural model of the mind was one where the conscious element of our mind, the ego, exists to modulate unconscious sexual and aggressive wishes residing in the *Id* with the enduring moral beliefs and prohibitions of the *superego* (Berzoff, 2012). According to this view,

the conscious mind cannot possibly register and process the entirety of one's waking experience. Freud and his contemporaries described a plethora of unconscious ego defenses, which in their most basic form exist to maintain basic ego functions such as reality testing, affect modulation as well as impulse control (Berzoff, 2012). These defense mechanisms are thought to keep overwhelming experiences from entering conscious life. On one hand, they serve an adaptive purpose and on the other hand, these ego defenses can be at the root of psychopathology such as the overwhelming and intrusive experience of having traumatic repressed memories rush into one's waking life (Herman, 1997). Photography as "pleasurable detachment" (Bergstein, 2010) then could be seen as a method that uses psychological distance as a means of circumventing overly active psychological defenses in order to retrieve unconscious fragments of the past and hold these lightly in the present where these can be further understood.

When considering the previously discussed theoretical material and how it relates to self-understanding, we can think of the clinical use of photography as a means of looking out into our internal world and using a camera to gain insight into what may be inside of the psyche. By exploring the content and the symbolic associations of the narrative moment captured in one's photographs both therapist and clinician can enter a therapeutic space that is not too different than the space described by Jung. A space outside of our conscious mind accessible through the "dream language" unique to that person's unconscious. The end result of this process being a gain in self-knowledge and possibly leading to thoughtful self-use thus making one's life more wholesome and potentially bringing some relief to the tension that can result when we are at war with ourselves.

This concludes the discussion on how Jung's theories of the unconscious mind can be used to understand how the photographic process can be of assistance in the psychoanalytic

process of making the unconscious the conscious. The next chapter will use some of the main concepts in Object Relations theory as posed by Donald W. Winnicott to describe how the use of photography as a clinical tool can be applied, maintained and nurtured in practice.

CHAPTER III

Photography, Transitions, and Play

This chapter will present key components of Object Relations theory, as defined by Donald W. Winnicott, as a means of understanding how photography can be of clinical relevance. This chapter will present the following objectives: present a detailed exploration of how photographs can often serve as valuable transitional objects; examine the external representations of internalized relationships; discuss Winnicottian concepts of play; as well as present how Winnicott defined the *true* and *false self*.

Definitions

Self-esteem. The earliest definition of self-esteem was written by William James in 1890. According to James, the construct of self-esteem is related to an individual's overall sense of positive self-regard that develops when people meet or exceed the important goals in their lives (Zeigler-Hill & Virgil, 2013). As of 2013, over 350,000 publications contained discussions in which self-esteem features as the main topic. There was an increase in interest in understanding self-esteem in the United States during the 1970s. This rise in interest was linked to the publication of several studies aimed at understanding self-esteem and its relationship to a number of social problems such as drug abuse, violence, unemployment and academic underachievement. This interest peaked during the 1980s when Gov. George Deukmejian signed into law a piece of legislation that created "The State Task Force to Promote Self-Esteem and Personal and Social Responsibility' (Brown, 1998; Tafarodi & Swan, 1995; Zeigler-Hill &

Virgil, 2013). In general, high self-esteem is associated with a favorable view of one's self; conversely, low self-esteem is reflective of uncertain or even outright negative self-evaluation (Campbel et al., 1996).

One can also think of self-esteem as part of a continuum with ebbs and flows of what we come to accept, seek, approve or disapprove in ourselves over the course of a lifetime. There are various levels of influence that have a direct and indirect impact on one's level of self-esteem. And while this is a useful discussion, this body of work will be attentive to one aspect of self-esteem. The emphasis in this research will be on internal conflicts related to self-image and self-worth.

It is important to underscore that self-esteem is rooted in perception. The common trend in the many definitions of self-esteem since the time of William James in 1890 is the subjective aspect of the experience of positive self-regard. In other words, self-esteem as a concept is limited by, and at times restricted to, the influence of one's internal feeling states and as such it does not easily lend itself to objective measurements with accurate and predictable outcomes (Zeigler-Hill & Virgil, 2013). So until we can devise a contraption that allows us to read another person's mind, we need to come to terms with the fact that measurements such as self-esteem are subjective and if accuracy of measurement is possible at all it has to come from the individual's capacity to access these internal states and develop a language to describe them.

Object Relations. Object relations theory is one of the many theoretical underpinnings of traditional psychodynamic theory. As a type of psychodynamic theory, object relations is an attempt to better understanding unconscious behaviors and experiences. Object relations theories pay particular attention to the growing infant's mind as it begins to make sense of their immediate environment and relationships. As indicated in the previous chapter, insight into our

unconscious motivations and actions can be gained through dream interpretation with symbols as the “language” of the unconscious or through free associations using dream content as a gateway into unconscious conflicts. Object relations theory emphasizes the caretaking environment and internalized images of primary caretakers as the central influence in how we unconsciously experience the world around us and establish relationships over our lifespan (Berzoff, 2011; Ogden, 2005). The term “object relations” was first coined by Otto Rank in the late 1920s and it can be understood as referring to “interactions with external and internal (real and imagined) people, and to the relationship between their internal and external object worlds” (Brickman, 2009).

Some of the early usages of the term *object* were cited in 1905 in Sigmund Freud’s “Three Essays on the Theory of Sexuality”, when he delineated the idea of the “great reservoir” from which object-cathexes are “sent out,” (Brickman, 2009). By 1917, a dramatic shift occurred in the way the psychoanalytic community conceptualized the mind when Freud redefined his initial usage of the term *object* in his seminal paper “Mourning and Melancholia”. When Freud proclaimed that “the shadow of the object fell upon [a part of] the ego, and the latter could henceforth be judged by a special agency [another part of the ego]”, he was laying the groundwork for the proposal of a new model of the mind. The emphasis of Freud’s paper was on understanding mourning as the acceptable departure from one’s ability to operate in the world that goes away with time in comparison with melancholia as “a profoundly painful sense of dejection, a cessation of interest in the outside world, loss of capacity to love, inhibition of all activity...a lowering of the self-regarding feelings...” (Ogden, 2005). Freud successfully accomplished this task and in the process he introduced important elements such as is the idea that the unconscious is organized around stable and internal object relations. Freud also

introduced issues of ambivalence and split-off parts of the ego resulting from bonds of love mixed with hate (Ogden, 2005).

Otto Rank and Sándor Ferenczi led the way to the development of object relations theory during the decades that followed the publishing of “Mourning and Melancholia”. By the 1940s and 1950s a large number of British psychologists such as Melanie Klein, Ronald Fairbairn, Harry Guntrip, Scott Stuart, Donald W. Winnicott and others were actively shaping the world of object relations introducing new and revolutionary ideas on the influence of relationships in our lives as early as infancy (Berzoff, 2012).

Object Relations Theory by Donald W. Winnicott

Donald W. Winnicott was a British psychoanalyst and pediatrician whose work significantly influenced the field of object relations theory. Winnicott’s work was largely influenced by the work of his predecessors particularly Anna Freud and Melanie Klein (Greenberg and Mitchell, 1983). Over the course of time, his work began to take its own shape provided unique contributions to psychoanalytic tradition. Winnicott’s work emphasized the delicate balance between individuated existence and intimate contact with others or in Winnicott’s own words; “the separation that is not a separation but a form of union” (Greenberg and Mitchell, 1983). As a practicing pediatrician, much of his clinical perspective was influenced by his observations and familiarity with the intricacies of the relationship of mothers and their babies. The essence of Winnicott’s attention was on the emergence of one’s awareness of themselves as separate from other people (Greenberg and Mitchell, 1983).

Winnicott’s conceptualization of early life experiences were so innovative as to suggest that within the relational structure of mother and baby, there was no such thing as a baby, only a nursing couple (Greenberg and Mitchell, 1983). This idea of a “nursing couple” reflects not only

Winnicott's affirmation of the importance of the relationship and early attunement between primary caregiver and infant, but it also illustrates his view of psychopathology as a state in which developmental needs were not yet met by an environment that has failed the infant or child (Greenberg and Mitchell, 1983). The curative value of psychoanalysis, according to Winnicott, was not in its interpretive aspect "but in the manner in which the analytic setting provides the missing parental provisions and fills early developmental needs" (Greenberg and Mitchell, 1983).

Two important concepts presented by Winnicott related to formulations of the emergence of the self are of particular relevance to our understanding of the use of photography as a clinical tool.

The transitional object. The first concept is that of the transitional object and transitional experience. The "transition" here is one that is best explained as the developmental phase where the "nursing couple" begins to move from being a nursing couple to becoming mother and baby. It is in this transition that separation can be a form of union. This process of moving from "nursing couple" to mother and baby involves the realization on the child's behalf that its psychic (internal) reality exists alongside a developing sense of awareness of separation between itself and desired objects (Berzoff, 2011). This process brings periods of frustration and anxiety that are navigated by mother and child. The realization that it is ultimately impossible for the primary caregiver to prevent all frustration and anxiety from happening brings discomfort and is a somewhat painful experience for the child. Comfort begins to be found in fantasizing about the object of its wishes and a transitional object can be used to facilitate this process. "The transitional object is the first "not me" possession that really belongs to the child" (Berzoff, 2011). This object can be a physical item such as a teddy bear or a blanket and it can also be

more conceptual in nature such as a melody (Greenberg and Mitchell, 1983). In summary, the idea here is that anxiety and frustration are evoked as the child begins to distinguish between “me” and “not me” and a transitional object serves as a soothing defense against these feelings such that the child is able to start to develop the capacity to distinguish between inside and outside. Over time, the external separation between mother and infant becomes an internal union with the transition from pre-symbolic to symbolism. The transitional object then serves as a bridge to separation and its value is in what it actualizes. The following example is a simplification of the process but it does provide some illustration. One can think of the infant that no longer needs their teddy bear to feel safe and fall asleep. What once required the physical presence of a caretaker was initially substituted by the teddy bear and eventually the internal union of the two (teddy bear and an overall sense of safety) is actualized and the infant no longer needs the transitional object. With the advent of this new capacity for symbolism, the infant is able to differentiate between fantasy and fact, between psychic and external reality.

True self and false self. Another important concept explored by Winnicott that can be of help in understanding how photography can be a useful clinical tool is that of *true self* and *false self*. As previously discussed, Winnicott explored the delicate balance between individuated existence and intimate contact with others. His concepts of *true* and *false self* are also rooted in that same basic premise. The balance here is slightly shifted from separation and union with its focus being about the impact of meeting other’s expectations in one’s sense of “aliveness” and authentic experience.

According to Winnicott, the *false self* has a defensive nature and “its defensive function is to hide and protect the *true self*, whatever that may be” (Winnicott, 1960). The defensive presentation of the *false self* can take on different qualities along a spectrum of functioning. On

one extreme, the *false self* sets itself up as a real depiction and observers tend to think that is the real person. As is the case with many defenses, there is a functional as well as a challenging aspect to *false self* organization at this extreme. Winnicott believed that it was on living relationships such as friendships and work relationships that the degree of *false self* presentation was to be observed (Winnicott, 1960). At this extreme, “in situations in which what is expected is a whole person the *false self* has some essential lacking” (Winnicott, 1960) and the lived experience for that person is one of feeling “phoney”, lacking spontaneity and aliveness. In health, the *false self* serves to assist in the regulation of a necessary presentation of mannered social attitude and politeness. Winnicott saw this process as necessary where one foregoes omnipotence and other aspects of primary process functioning in order to gain a place in society, which could not be accomplished or maintained strictly by the *true self* (Winnicott, 1960).

In line with the relational nature of his work, Winnicott felt that the primary caregiver had a marking influence in the development of *false self* organization. On one instance, the mother’s response to the infant’s demands can be *good enough* with the result being an infant that accommodates the loss of omnipotence through symbol formation (Winnicott, 1960). On the other instance, the mother’s response to the infant’s demands is *not good enough* and the infant’s capacity of symbol formation is hampered. Winnicott felt that in this case, the infant went on to live falsely through a compliant *false self* that reacts to environmental demands.

Winnicott felt that the repeated success on the mother’s behalf in meeting the infant’s spontaneous gestures was necessary in order for the *true self* to become a reality. Winnicott felt the *true self* came from an overall sense of life being worthwhile. He associated much of its basic functions to primary processes and an “aliveness of the body” (Winnicott, 1960). Winnicott preferred to steer clear from detailed definitions of the *true self* as he felt that conceptualizations

of it were only helpful in so far as they assisted our understanding of the *false self* and its impact in our lives. To him, the *true self* “does no more than collect together details of the experience of aliveness” (Winnicott, 1960). Over the course of time, Winnicott felt that the strengthening of the *true self* increased the infant’s capacity to tolerate breaks in continuity of *true self* living or *false self* experiences related to compliance (Winnicott, 1960).

In terms of how self-esteem can be tied to *false self* development we can think of a situation when one is faced with a compliance-related task such as being polite or having to follow different social codes. Here, one needs to use the *false self* in order to anticipate the demands of others or society. Some of this is needed and the challenge to self-esteem levels comes when this is done excessively and to the extent that one’s own sense of aliveness (*true self*) is no longer directly accessible to the individual and the result is an internal sense of forced compliance instead of loving, understood and consciously accepted adaptation.

Clinical relevance. Winnicott’s work provided great theoretical insight into the relational structure of our minds. His work is still relevant today in a variety of academic and clinical practices. From child psychology to parenting practices and even in the assistance of termination of clinical treatment, the use of transitional objects is a common practice of modern age (Rudnytsky, 1993; Kutner, 1993).

Difficulties that can arise in less than nurturant attachment relationships have been shown to lead to difficulties in the areas of representation (of the self and others in relationships) and emotional regulation (Bradley & Westen, 2005). On the far end of the spectrum of developmental deficits and dysfunctions that lead to challenges in personality development is the construct of Borderline Personality Development (BPD). Amongst different attempts at explaining personality types in the Borderline spectrum is the idea that caregivers with

tremendous difficulties with separation and emotional regulation unknowingly are not able to reflect their child's internal state during development. This general misattunement with the child places the emphasis on the caretaker's needs and emotions, may lead to the development of a *false self* (Bradley & Westen, 2005; Masterson, 1976). Over the course of time, this process leads to a severe form of internal incoherence where one's social persona does not match their inner experience. Ultimately, a developmental misattunement of this large degree leads to an adult with basic difficulties with fear and abandonment that often needs the presence of another person to manage and tolerate emotions.

The delicate balance that leads to a healthy balance between *true* and *false self* development is not restricted to the caretaker-child relationship. Unexamined societal values and norm enforcing practices can, and often do have an impact in the development of internal experience of authenticity and aliveness (Carpenter & Mathews, 2005). Social norm creation and enforcement is a complex discussion that is relevant to many and is often the subject of fields such as Sociology and Economics. For the purposes of this paper, it suffices to state that societal norms exist and that they have both positive and negative impacts in the development of social beings. The negative impact of societal norms is often a result of unexamined enforcement of the same (Carpenter & Mathews, 2005). Gender roles, gender identity, non-conforming gender expressions, idealized body size as well as majority and mixed minority identifications are but a few of the topics that can be used in a discussion of the impact of societal norms in individual psychological development.

With regards to the clinical relevance of *false self* development at the societal level, we can examine the experience of trans and gender nonconforming individuals. Many trans and gender non conforming individuals who receive negative feedback in response to their place

outside the so-called societal norms (heteronormativity in this case), or are acutely aware of the imagined consequences, may need to adapt by unconsciously repressing their *true selves* and putting forth a compliant or *false self* out of defense (Borden 2009; Ehrensaft 2012; Ray 2012; Winnicott 1971). Winnicott believed that in adapting a false/compliant self, the subject sacrifices healthy, creative modes of being and is in this forceful adaptation, a pervasive “sense of futility” that could eventually lead to feeling that “life is not worth living” (Winnicott, 1971). Certainly this experience is not restricted to trans and gender nonconforming individuals. As indicated by Crandall (1988), social pressures and conformity even in relatively small groups such as sororities can have a direct relationship with the onset and maintenance of severe eating disorders such as bulimia nervosa.

The widespread use of images can and often is associated with the enforcement and application of societal norms be it in the form of advertisement or entertainment (Sontag, 1977). Amongst these populations, people of color are at a greater risk of developing low self-esteem as a result of *false self* compliance (Borden 2009; Ehrensaft 2012; Ray 2012). Idealized images of families, couples, sports figures and successful entrepreneurs are skewed in how they misrepresent communities of color. Over the course of time this can, and often does have a strong impact in one’s development and overall sense of positive regard.

Role of Photography

So far, a brief description of some of the main concepts of Winnicott’s work has been provided. The clinical result of challenges in development related to self-esteem has also been described. The role of photography here can be seen as that of an intermediary between our internal world of object relations and its associated memories and feeling states as well as our everyday relationships. A physical object such as a photograph can then serve as a bridge to

objects within our psyche. Over time, the process of examining this liminal space may create a lasting impression allowing for the internalization of the object and thus assisting the transitional process. The following sections provide a more detailed exemplification of how photography can be used as clinical tool for the application and understanding of clients and their internal world of object relations.

Photography and transitional objects. This body of work is not the first to examine the clinical role of photographs as transitional objects (Young, 2004). As a psychoanalyst and photographer with over 55 years of experience in private practice, Barbara Young's article "Rebirth at 40: Photographs as Transitional Objects" provides an intricate discussion of a 10-year long analysis where photographs served as transitional objects for both the analyst, in the receiving of a photograph as a gift from her patient and analysand in the longing for photographs capture by the analyst and displayed in her waiting room. Young also explores the clinical waiting room as a transitional space where the client is able to feel the presence of the analyst but is alone. She also discusses the process of patients seeing photographs in the waiting room that belong to the analyst and feeling like they are his/her own in the meantime as an element of internalization of maternal objects. Accepting that one cannot get that item becomes part of accepting that one cannot possess the analyst, his mother, and that feeling needs to be found elsewhere. Young's article provides an extremely helpful framework to understand a practical example of how photography can be clinically relevant even in a process that is as oratory in nature as psychoanalysis.

The idea that photographs can be of great assistance in helping others confidently feel as whole and separate beings is not restricted to clinical exchanges. Many times our own intuitive ways of dealing with challenges to our development can serve as a starting point on a long road

to feeling wholesome and alive. Since its early inception in the late 19th century, photography has been used as a form of both self-expression and as a record of memories of loved ones (Sontag, 1977). In her personal memoir, “The Distance Between Us”, author Reyna Grande tells the story of a childhood marked by a long and difficult separation from her parents. In a recounting of her story without self-pity, she beautifully writes about the challenges of growing up in a family shattered by poverty and immigration. Throughout the memoir, photographs play an instrumental role in maintaining the memory of distant family members alive. When referring to significant relationships from her early life, Reyna often talks about the “Man Behind the Glass...this paper face behind a wall of glass was the only father I’d ever known” (Grande, 2012). The portrait of her father served as not only as a physical representation of the man she never met but also as a reference to her internal fantasy of whom she felt he was. Later in childhood, distance also separated Reyna and her siblings from their mother and at that point, Reyna’s internal representation of her mother did not seem to be enough to hold her memory in mind and once again, the possible use of photographs as a bridge of comfort to one’s internal world becomes evident when Reyna longs for her mother; “I wish I had a picture of Mami. I wanted to tell her that I missed being with her” (Grande, 2012). Much of Reyna Grande’s memoir provides an example how photography can encourage “separation that is not a separation but a form of union” (Winnicott, 1960).

Photography and the *true and false self*. Until this point, the work of Barbara Young has been utilized to exemplify how photographs can be helpful as transitional objects for both clinicians and patients. And the memoir from Reyna Grande has also provided grounds for the understanding of how photographs can serve as physical representations of fantasized parental figures and in the process, help the viewer work through the internal loss that comes from the

involuntary long-term absence of a loved one. Another possible application of the use of photography as a clinical tool is in understanding family portraits taken over the course of a lifetime.

Judy Weiser is another pioneer in the field in presenting what has been termed *Photo Therapy*: her work has been pivotal in establishing techniques and guidelines on possible uses of photography as means of personal growth (Weiser, 1993). Amongst different suggested techniques, Weiser discusses the use of family albums as a means of gaining insight into one's internal relational experience. While her work in this regard focuses on using Narrative and Family Systems theory as a theoretical framework, one can also apply Winnicottian concepts to further understand the same process. The development of a *false self* structure through compliance as a result of caretaker misattunement can occur in more than one family member and perhaps a reflection with a broader scope of this type can assist the individual in deepening their understanding of the impact of primary relationships in their upbringing. As is the case with any photograph, a family portrait represents a slice of time and thus it serves not only as a visual representation of one's family as a whole but also as the visual representation of one's family at a particular point in time. The concrete and somewhat permanent aspect of a photograph can serve as an object to assist clients feeling "stuck" at a particularly undesired family role. The slice of time represented by a family photograph can then serve as a starting point that hopefully allows the client to accomplish what Winnicott often referred to as "going on being".

Conclusion

This concludes the third chapter and the present discussion on how the use of photography as a clinical tool can be understood through theoretical concepts posed by Donald W. Winnicott. Photographs here have been discussed as having the potential to represent, as

transitional objects, fully or incompletely internalized relationships. Photographs have also been discussed as having the power to assist in the process of uncovering aspects of one's self that may have not been given the *holding environment* necessary for its expression as a result of parental misattunement to the infant's needs and now lie under the surface of over-compliance and an overall feeling of lack of spontaneity and aliveness.

The following chapter will include a review of some of the main concepts discussed in this body of work along with a discussion of potential biases and potential areas of further exploration.

CHAPTER IV

Discussion and Conclusion

This body of work, thus far, has discussed the work of Carl Jung and his theories in symbolism and dream interpretation in the context of the clinical use of photography as a means of self-exploration/understanding. Jung's theories of the unconscious mind have been presented as potential grounds for using the photographic process in the assistance of the psychoanalytic method of making the unconscious conscious. One practical application of these concepts was presented in the introduction of the idea that the examination of photographs captured by clients is akin to eliciting a chain of associations of thoughts and emotions to the initial scene or memory where the photograph was captured. The clinical relevance of this process has been discussed in the context of clinician and client developing a common "dream language" corresponding to the client's unconscious processes with the end result being a gain in self-knowledge and possible thoughtful self-use ultimately relieving some of the tension that gets built up when we are at war with ourselves.

Another major point of discussion has been based on the work of Donald W. Winnicott. Concepts such as transitional objects and *false-self* development were utilized when discussing photographs as internal representations (transitional objects) and transitional spaces of one's experience. Photographs were also discussed, as a means to assist in the uncovering of aspects of one's self that could not be expressed as a result of environmental shortcomings including parental misattunement of one's basic needs. Photography was also discussed as a means of

deepening one's understanding of *false-self* dynamics such as over-compliance that can result in an absence of spontaneity and aliveness. Photographs as a physical object (on paper or digital) were also described as holding the potential for creating a third space in clinical settings. This new transitional space then becomes a place where the clinician and client can engage in play, as described by Winnicott, as a means to assist clients in the process of *true self* development.

Critique of Methodology

This body of work is limited by its methodology. As a theoretical exploration, the work presented here is best viewed as a detailed discussion of possibilities. Instead of using empirically verified data to support conclusions, the attempt set forth in this research is anchored to two major psychodynamic theories as a means of providing us with grounds for further examination of the opportunities that can be created through the use of photography as a clinical tool in social work.

This body of work is not only limited by its methodology, it is also limited by the very theories that have been presented. Jung and his theories of the unconscious, symbolism and dream interpretations have been the source of multiple criticisms ranging from calling attention to the lack of empirical evidence to questioning Jung's method of inquiry as "illogical" to the point of disregarding Jung's conceptual complexities as merely fictional as a result of Jung's own struggle with mental health (Sonu, 2012). As previously mentioned in Chapter Two, the symbolic language of the unconscious as expressed in dreams does not follow the same line of logic argumentation that we are accustomed to. Therefore, to criticize Jung's conceptualizations for a lack of deductive reasoning and logical conclusions speaks more to the critics' understanding (or lack of the same) of Jung's work than it does about some of the real limitations of the theory such as the absence of empirical evidence or reproducible methods of application.

A second point of theoretical criticism involves Winnicott's conceptualizations of our internal world in relation to our external experiences. This has been criticized for placing excessive emphasis on the role of the mother as a primary caregiver as well as overstressing the intersubjective experience of the infant as opposed to the ongoing relationship between caregiver (subject) and infant (Kirshner, L.A. 2010). The downfall of Winnicott, as this avenue of criticism would suggest, was not on making incorrect claims as much as it was on failing to take into account more information such as what happens to both the infant and caregiver as a function of their ongoing relationship in addition to their subjective experiences as individuals. These valid points of criticism served as talking points for further work and a deepening of our understanding of the human condition.

Theoretical explorations are beneficial, as they allow for creative freedom to apply complex and often immeasurable concepts to a specific phenomenon. Empirical studies are often limited in scope and generalizability due to the practical and understandable constraints posed by the research design. Theoretical theses can be limited by how few theories can feasibly be integrated into the discussion. The perspective of the writer also biases theoretical theses. Many of my experiences are influenced by my background as a Latino male who was born and raised outside of the United States. As an immigrant, I can be both the participant and observer of cultural practices in the United States in ways in which U.S.-born citizens cannot. My undergraduate and early professional background in scientific research in Biotechnology and Molecular Biology also encompass part of my personal bias towards the importance of careful observations and theoretical explorations as the first step in the process of understanding different phenomena. The work presented here has laid a theoretical foundation that can be used

to further explore venues of application of the use of photography in social work. A qualitative study aimed at extracting valuable themes and deepening our understanding of *why* and *how* photography can be beneficially used in social work could be a great future exploration on the topic.

Subjectivity is the condition through which we come to develop perspectives, experiences, feelings, beliefs and desires in a way that informs how we interpret truth and reality. The camera as an instrument provides us with the capacity to interpret the world according to our own subjectivity. Understanding this phenomenon within the context of the psychoanalytic theories presented has lent wonderful insights about the potential utility of photography as a clinical tool; but future empirical research about how photography can be beneficial for specific populations (e.g., transgender communities, adolescents, etc.) and in specific settings (e.g., individual, group, inpatient, outpatient) will sponsor greater interest within the clinical world and perhaps make room for different methods of therapy that are not considered right now.

The scope of the work presented here has been limited to clinical applications of photography in individual work. There is a variety of ways in which the photographic process and photographs can be utilized by social workers that does not involve individual clinical work. These include group work in clinical or community settings as well as macro level social change and action-oriented work.

Implications for Social Work Practice, Policy, or Research

Social change. From the work of Lewis Hine denouncing child labor practices in the United States to the gruesome and unsettling visual statements by Eddie Adams and Nick Ut of the Vietnam War era, the work of documentary photographers and photojournalists has historically been one of the many ways in which photography has been a major catalyst of social

change. In 1935, in the midst of the Great Depression, President Franklin D. Roosevelt helped establish the Farm Security Administration (FSA). The FSA commissioned a variety of documentary photographers such as Gordon Parks, Walker Evans and Dorothea Lange to cover the human impact of a major period of extensive poverty and economic hardship in this country. As Beaumont Newhall put it, the goal of documentary photography is “not to inform us, but to move us.” Contemporary work by the same type of professionals continues to invite us to reflect on the human condition. And yet there appears to be little to no cooperation or direct involvement by social workers or social work agencies in this process.

Organizations such as Photo Voice have been contributing to the fields of community development, education and public health for several years. This contribution is accomplished through what is termed as “participatory photography”, a process in which participants are asked to engage in the process of representing their community or expressing their point of view by photographing scenes or elements relevant to the examined location (Holgate et al., , 2012). The work of Photo Voice provides us with a great framework to understand how photography can be utilized as a means of empowering marginalized communities. This writer was involved in the organization of a Photo Voice-based group designed to empower members of the Latino community through the use of photography. The group members were recipients of mental health services from a local adult outpatient psychiatry clinic. Following a series of meetings, members agreed that the operating theme of their work was “What contribution have Latino members of your community made to your immediate community and society at large? This seemingly simple question elicited a reflective process in which group members reported not only participants but also creators. The work produced in this group was not published in major news sources nor will it become part of the annals of history, and yet the positive impact it had on

community members that engaged in the process was strongly evident. Some members reported feeling empowered by overcoming aspects of internalized oppression and coming to the realization that they indeed had a positive impact not only in their immediate community but also in society at large. Other members were positively impacted in terms of dealing with some of their depression symptoms such as social isolation and lack of motivation. For these particular clients, the camera and the photographic process, in the context of a mental health service clinic, offered an opportunity to engage in a new type of treatment activity. This novelty element combined with feelings of group membership and accountability were sufficient to motivate some of the clients to leave the confines of their homes to capture images and to engage in the group process.

Some of the observations made during the Photo Voice group served as the starting point for the design of yet another group aimed at using photography as a means of assisting clients dealing with challenges in self-esteem as well as symptoms of depression. In this particular group, the photographic process was used as a means to encourage clients to develop a greater level of mindfulness and self-reflection. The group process also involved the sharing of images with colleagues for a group review and sharing of what the experience of their photographic process was like. This proved to be an added level of involvement and enrichment in which clients that struggled with different levels of social anxiety and self-esteem found themselves sharing aspects of their internal world in a group setting. Another level of enrichment that clients were involved in was the editing process of their images. Issues of self-doubt and shame were common challenges clients had to overcome in order to identify no more than three images they felt best represented what they wished to convey. Participants were asked to carry their cameras daily as they collectively decided on what the weekly theme of their explorations would be. The

photographic assignments were varied, they ranged from topics related to gratitude, to attention, to obstacles we encounter daily as well as self-portraits as a means of self-representation.

Many of the observations made by this writer during the administration of this group were the primary motivators for the writing of this body of work. To this date, there is no qualitative or quantitative study specific to the field of social work that attempts to describe in detail how the impact of the implementation of photography as a clinical tool. Future opportunities for research exist, particularly in light of the current widespread use of mobile device photographs and social media image sharing.

Individual work. Thus far, the work of Carl Jung and Donald W. Winnicott has been used to suggest a process in which client and clinician can engage in a Winnicottian playful practice where introspection and the clinical relationship can be used to nurture one's wholesome sense of self. What follows are different ways through which photography can be used as a clinical tool in the service of clients.

The work of the W.H.Y. project in San Francisco, CA is an example of a blend between social change and group work utilizing photography as a clinical tool. The W.H.Y project encourages self-expression for high school students of color who have been previously incarcerated and have not been successful in other school settings. The use of photography in the W.H.Y. project serves as a venue for several weeks of a mentoring relationship. Over the course of this period, students reflect on various aspects of their identity and capture images that assist them in the process of putting some of their experiences, doubts and fears into words. The following are excerpts from what students that participated in the W.H.Y. project reported after weeks of reflection and engagement in the project. The first quote is from a student named Justice who was seventeen years-old at the time of the project and decided to use the

photographic process as a means of exploring her sexual identity and homophobia in both her own family and in society at large. Justice's photographs have a theme of shadows of her and her partner as well as of joined hands. Strangers are often seen glancing at Justice and her partner on the corner of different frames. The W.H.Y. Project's Director Luanne Dietz (2014) writes the story of Justice as follows:

Justice, 17

Is Acceptance truly acceptable everywhere? Where I live, you don't see couples holding hands, just me and my girlfriend.

Not being accepted affects people more than you think. To be accepted is to feel comfortable in your environment and your surroundings, to feel like you don't have to act different by changing your appearance or the emotion you show in public. I feel like I have to prove constantly that I'm not this monster.

The generation that my mom grew up in everyone looked at being gay as just horrible, you didn't do it, it was just something that was unseen.

Her vision of acceptance is totally different than mine. Her approach is that 'I accept that what you are doing is wrong.' In my eyes I was just saying why can't you accept me instead of trying to change me or turn me into something that I'm not.

My girlfriend is my heart. She's right by my side. She's very supportive. I hold her hand tight letting the world know that we're still here even though I'm hurting inside and afraid at times (The W.H.Y. Project, 2014).

Next is the story of Demond, an African American boy who was eighteen years old at the time of the project. His images are a mixture of double exposures with harsh contrasts and

textures. The W.H.Y. Project's Director Luanne Dietz (2014) writes the story of Justice as follows:

Demand, 18

I'm looking at the new me.

When I was younger I witnessed things no kid should see. It took me getting locked up to change my lifestyle. One day I was in court and the judge called me a "menace to society." She told me I had two sides of me, and that it's up to me to decide what kind of guy I want to be.

These images show a new me. Transitioning for me was a challenge because I thought I would never change the way I live (The W.H.Y. Project, 2014).

The previous examples demonstrate how photography can be useful as a clinical tool. In the case of the W.H.Y. project, the photographic process was clinically relevant in a few different ways. Photography here was shown to be helpful as both a means of self-expression and identity exploration as well as a venue for interpersonal connection. The project provided students with a number of interactions with mentors and with other classmates. Week after week, content was explored either in conversation or through the student's presentation of their work. In this process of utilizing photographs as a means of individual reflection and intersubjective exchanges, the student's level of understanding of their internal world was deepened and with time, a new language and level of understanding was reached. The final expression of this new level of understanding was a locally sponsored exhibit of the work produced by students. The exhibition took place at a public venue where students that often felt and experienced the world in the margins were, perhaps for the first time, seen and perceived as valuable, insightful and as contributing members of society.

Another possible venue of exploration for the use of photography as a clinical tool in social work is on the examination of photographs produced by clients and used in their social media profiles. It appears that a desire to share aspects of our lives and connect with others is part of the motivation that spurred the several different types of social media websites that are available today. At the time of this writing, an astonishing 1.4 billion people have a Facebook profile. Social media websites cater to needs such as professional networking, dating or social connection between family and friends. And throughout these websites, photographs are used as a means of representing one's image to others as well as sharing aspects of their lives with family and friends. There is great potential in the exploration of motivation and meaning of photographs captured by clients and presented on their social media profiles. In some ways, social media profiles are slightly different versions or elements of individuals. Differences and similarities in how clients present themselves through photographs in social media can be helpful material in the process of understanding individuals as a complex system of experiences.

Another aspect of the widespread use of digital photography on mobile devices is the use of applications that are designed to engage users in the sharing of images. In this type of social network, communication is almost entirely visual with occasional support of a short caption below each photograph. The GlobalWebIndex, the world's largest market research study on digital consumers, surveyed teenagers in 30 countries and in the process they revealed that the number of teenagers claiming to be active on Facebook (i.e. doing more than just "liking" a separate page on the web) had dropped to 56% in the third quarter of 2013, from 76% in the first. The findings were conclusive in that they demonstrated that the 20% drop on active Facebook users was directly related to a major increase in the use of photo and video sharing applications. Financial market trends aside, this new pattern also raises questions of why teenagers appear to

be starting to favor visual instead of written statements. Is this trend simply a societal manifestation and confirmation of the age-old cliché that “a picture is worth a thousand words”? If that were true then, would it not be beneficial to teenagers and clinicians to develop a deeper understanding of visual language including content and motivation? Much of photo sharing is done in a reactionary and impulsive fashion to capture what is happening in one’s life. This “spur of the moment” act of taking a photograph and sharing it with others can serve as a fruitful starting point of conversation between client and clinician. The exploration in this case is not only helpful in terms of understanding the symbolic content of the images but also about one’s motivation to share a part of themselves. Much clinical material can also be elicited by a simple conversation about who teens, as well as adults, choose to share their images with.

Whether one is fully cognizant of it or not, showing one’s photographic body of work is an exercise of self-disclosure and personal revelation. The work of Vivian Maier is a great example of deep internal conflicts that can be elicited by the potential for personal revelation associated with the sharing of photographs. Over the past five years, the name of Vivian Maier has risen from anonymity to one of the most influential street photographers of her era. Vivian’s work was completely unknown, not only to society at large but also to anyone in Vivian’s life until a serendipitous chain of events in 2009 led Chicago-based historian, John Maloof to an auction house where he purchased a chest full of old negatives and undeveloped film. Over the course of the next several months, Maloof went on to uncover a lifetime of photographs adding up to nearly 200,000 negatives and 3,000 prints plus hundreds of undeveloped film and movie-clips created by Vivian. Vivian’s story is uniquely multifaceted; on one end she was an incredibly talented self-taught female photographer at a time when photography was even more male-centered than it is today. Vivian was also someone who worked as a nanny for forty years

and carried her camera along with her everywhere she went, taking photographs of everyday moments of life and, quite literally, developed a record of how she saw the world. On the other end, as Maloof's research revealed, Vivian was a deeply reclusive individual preoccupied with persecutory ideas and a great deal of interpersonal difficulties. Vivian's childhood was challenged by multiple episodes of sexual and physical abuse. Though she successfully worked as a nanny for decades, Vivian did not build lasting intimate relationships in her life. Vivian Maier was a street photographer; this genre of photography describes the act of photographing strangers, and everyday events in a mostly unobtrusive way. Unlike a voyeur who remains detached and hidden from the subject, street photographers are actively engaged with their surroundings and often with their subject. Vivian Maier craftily used her camera to comfortably enter the space of strangers and engage with the world. This vacillation between involvement and detachment was a major trend in Vivian's life and it is the opinion of this writer that her camera and the photographic process were absolutely vital in keeping Vivian involved and engaged with the world outside and to be less preoccupied with an internal world that was both threatening and fragile—a world formed by early experiences of sexual and physical trauma that were rarely, if ever, examined and processed with the assistance of a trained professional.

Conclusion

This research study was an attempt to demonstrate how psychodynamic theory can be used to understand some useful clinical applications of photography in social work. The language of Carl Jung's description of the unconscious mind and its symbols has been used to explain how the photographic process can be seen as a rich venue of self-examination. Winnicott's emphasis on relationships, creativity and play were utilized as important elements to be included in the co-creation of a process in which photographs can be understood as a window

into one's internal experience and representation of others. This study also strived to demonstrate the utilization of photography as a means of empowerment of clients through a PhotoVoice based project. This writer also drew upon previous experiences in the design and implementation of a process group that utilized photography as a clinical tool. While brief in duration and limited in terms of the number of clients involved, the experiences from that group can be used as the basis for future work. Collaborations with photojournalists and documentary photographers were shown to have historical and hopefully future significance in larger systems work.

The use of photography as a clinical tool is an effort to utilize one's natural disposition and willingness to observe, examine and express their interpretation of the world at large. The clinical application of this process comes about in the intentional and targeted utilization of grounded theoretical concepts as a framework of understanding our client's internal world and interpersonal relationships.

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