



In The First Person: Anxiety, Depression and Art Therapy

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Host (00:01):

Hi there. Welcome to Mental Health Professionals' Network podcast series MHPN's aim is to promote and celebrate interdisciplinary collaborative mental health care.

Mark Creamer (00:18):

Hello, and welcome to this episode of MHPN Presents In The First Person. In this podcast series, we have the opportunity and indeed the privilege actually of hearing people's stories in their own words. My name's Mark, Mark Creamer. I'm a clinical psychologist and a professorial fellow in the Department of Psychiatry at University of Melbourne. And in this episode, I am looking forward to hearing from my guest, Trent McWhinney. Welcome, Trent.

Trent McWhinney (00:43):

Hi Mark. It's nice to be here.

Mark Creamer (00:45):

Thanks, and thanks very much for agreeing to share your personal story with us. Trent. It's a fascinating one, I think as far as I can work out from chatting to you, it incorporates a whole lot of key elements that you've been able to integrate, as it were to become the person that you are today. And I'm thinking of things like your lived experience of anxiety and depression, being a mental health advocate, being an advocate for the LGBTQI+ community. You're an artist, you're a creative arts therapist, and I just heard before we went on air that you're also a journalist by background. So there's a million things and we're going to try and cover at least most of those key points.

Trent McWhinney (01:21):

Sounds great.

Mark Creamer (01:21):

First though, just to provide a little bit of context for our listeners, can you tell us something about where you grew up? You grew up here in Melbourne, in Australia?

Trent McWhinney (01:29):

Yes. I'm Melbourne, born and bred in the southeast. So I spent probably a longer amount of time at home living with Mum, living a bit of a Peter Pan syndrome. Then I moved to London to the UK for two years and followed that rite of passage that us Australians do. Then I came back from London, moved to Sydney for five years. Then from Sydney, I moved to Montreal for about three months. But when I realised how cold it got and it was hard to get a job, I thought, no, I'm going to come back to Melbourne, back to Australia.

Mark Creamer (02:02):

Wow, that is interesting. I didn't realise that you'd done so much travelling actually. Very good. But is Australia permanent now, do you think?

Trent McWhinney (02:09):

Yeah,

Mark Creamer (02:09):

Got a travel bug out the system.

Trent McWhinney (02:11):

Well, definitely not got the travel bug out. Definitely want to visit more of the world. I've actually just this year decided that for the next 10 years I'm actually going to try and visit three new countries each year. That's a big call, so it's a big call. But the thinking is what I'd like to do is spend, even if it's three or four days in a different country, so three different countries, group them together in terms of location. And the thinking is yes. I mean, there's parts of the world I'd love to spend weeks and months and years in, but if I could at least experience different parts of the world, even just for a few days,

Mark Creamer (02:46):

Absolutely. The old saying, travel broadens the mind and I do think it's really good for us. Moving on though, you've been very open about your lived experience of anxiety and depression and talking about growing up. I'm wondering when you first noticed these kinds of things as a child, did you notice those kinds of feelings?

Trent McWhinney (03:04):

Probably not as a child, I think certainly going into teen years and young adult years, I mean, I've always been super nervous when it comes to presenting. It's very interesting for me because I actually love public speaking sharing information, but there's always been just that real anxiety, that fear of fear itself.

Mark Creamer (03:25):

Of course, and as you well know, I'm sure public speaking anxiety is the most common anxiety by far. So you're not exactly Robinson Crusoe, but it is an interesting paradox, isn't it, that you really like doing it. It's fun to do, but it's also so nerve wracking.

Trent McWhinney (03:40):

And the thing is, it's so interesting. So especially over the last few months, I've really leaned into opportunities to public speak and to put myself in those positions. I think it's maybe speaks to exposure therapy. Exactly. And I've definitely noticed a difference, but I can still find myself being tripped up or triggering myself for a bunch of reasons. And then the best thing is, and I say that tongue in cheek, my anxiety and my nerves can become quite physiological. So there's sweating and then the more you sweat, the more you think about the sweat, the more you think about it, the more it happens and -

Mark Creamer (04:19):

Exactly.

Trent McWhinney (04:20):

And then even when the anxiety is quiet and down a little bit, I'm still sort of readjusting.

Mark Creamer (04:27):

Sure it takes a while to settle down. But those three domains that we often think about with anxiety, which is as you say, the physiological side of it, the cognitive or thought side of it, and also the behavioural side, which of course for a lot of people means, well, I just won't do it. I'll avoid it because it's too difficult. So I think it's fantastic that you are confronting it actually because that is going to be the way going to get on top of it.

Trent McWhinney (04:48):

Yeah, I've shared with friends and people along the way as I've gone through that journey of anxiety and trying to lean into the public speaking, I jokingly say to people, I get one of two looks on people's faces. If I'm speaking to an audience, especially when the sweat starts, they'll either look at me with this sort of, ah, you've got this buddy. Don't worry. Kind of look on their face. Or I'll get a, oh, poor man, you poor man.

Mark Creamer (05:16):

Which is worse. Really. I don't want that sympathy for goodness sake. Okay. So there were indications of it as you were growing up in your adolescence. And I guess between then and now, the severity has fluctuated at different times there's been worse and better times.

Trent McWhinney (05:31):

So I got officially diagnosed with both anxiety and depression probably about 10 years ago, give or take. And with anxiety, definitely the last few years have noticed it more and more even outside of actually public speaking or those situations that are previously found angst driving. But people talk about post covid. So during Covid I worked from home and then after Covid I was in a part-time job where I could still work from home. And so there's that social isolation. I don't know where I sit in terms of where those two line up, the angst and anxiety becoming more so post that period and whether it's related to,

because I actually love spending time by myself, but I'm also very sociable. But I do see a correlation between that sort of timing.

Mark Creamer (06:23):

Absolutely. And yeah, I think those covid lockdowns have a lot to answer for in terms of mental health across the community really. So I want to talk later about things that help or perhaps might make it worse, and particularly art, but for the moment, I'm just interested in more formal kind of therapy or treatment. Have you tried pharmacological or psychological treatments over the years?

Trent McWhinney (06:45):

All the above. Yeah, all the above. So no particular order, even though I'm an art therapist, I'm a massive advocate for seeking out therapy. I think everyone should, I will jump on my soapbox every time when it comes to that subject. And so I see a psychologist at the moment. I've seen different therapists throughout the years and tried different modalities. So from that psychological perspective, definitely tried CBT, traditional talk therapy. But then from the pharmacological side of things, I've tried medicinal cannabis mindfulness practices. I'm a big advocate for when it's stuff like this stuff to do with my mental health, I go right in. I research, I try different things. EMDR. I haven't tried, but I'm super curious to have that experience to go with my personal anxiety or depression. I tried this, this was my outcome or response to it. So I can hopefully advocate or share to someone who might be interested in knowing.

Mark Creamer (07:44):

You can absolutely, as long as I guess we do remember to say this was my experience.

Trent McWhinney (07:49):

Absolutely.

Mark Creamer (07:49):

And I think for all of us, really finding what works best for us, whether it's a formal therapy or other aspects of our lives, what's going to help our mental health and wellbeing. When you look back on it, does anything stand out as being particularly useful in your journey through the minefield of therapy?

Trent McWhinney (08:04):

Well, for me, with anxiety even the last six, 12 months, again leaning into this new period of my life, this new chapter, planning and preparation, it sounds like a trivial thing, but just learning that knowing the times that I probably will get a bit anxious depending on the situation. What can I do to help me navigate or pre-plan for that time? What do I need to think through? What do I need to do if it's somewhere outside of my house, how do I get there? Giving myself enough time that I can arrive and land both physically, but mentally in that space, it's a game changer for me. But in terms of talk therapies, just such an advocate for sharing those things that are on your mind. It's so easy to keep these sorts of things to ourselves, to different degrees or think it just happens every so often. So I'll just deal with it. I'm still working through it with my psychologist at the moment around what are these different minefields and spaces that I find myself in and where's it coming from? Is it early childhood? Is it a specific lived experience?

Mark Creamer (09:07):

Absolutely. And just going back to what you were saying a minute ago about planning, I agree entirely. I think that's so important. But the irony is that often when we're very anxious, part of the avoidance is that we don't want to think about it. I'm not going to think about it. And of course that makes it worse. So yes, I agree. I think planning is very important and certainly things like we were talking before about public speaking, I think the better you can plan for it. And as you say, stack the cards in your favour, get there early, get them plenty of time, make sure everything's organised.

Trent McWhinney (09:34):

Yeah, and look, I probably want to share that one thing that's just sprung to mind. I have tried in the public speaking situation or presenting, I had to in previous jobs, facilitate meetings or presentations. And so sometimes I experimented by letting people know, this is what I'm feeling. Bear with me. I think it helped probably not as much. The planning is just again that key, but letting people know and being really sort of open, authentic and just saying, oh, okay, my words might come out sideways or I'm feeling a bit like this. I haven't had a person yet who's taken that and turned it into a negative.

Mark Creamer (10:11):

Yeah, exactly. Absolutely. Absolutely. And the other key thing that struck me as you were talking there is also being so careful when we look back on things that you don't just focus on the negative. I stumbled over that word, and so that's ruined the whole thing and give yourself a hard time. That's a complete waste, isn't it?

Trent McWhinney (10:27):

Complete waste. I tell you, Mark, that work around dealing with that inner saboteur and that critique is still very much a work in progress for me.

Mark Creamer (10:34):

I'm sure it is. I think it's probably a work in progress for all of us actually. Now you are also a member of the LGBTQI Plus community. I'm not sure if I should ask this really, but if I'm not allowed to, you can just tell me.

Trent McWhinney (10:46):

Sure.

Mark Creamer (10:46):

I'm interested in whether or not you think that your sexual orientation as you were growing up and negotiating the difficult developmental phases of adolescents and so on, whether that perhaps contributed to some of the anxiety and depression.

Trent McWhinney (10:59):

I don't think it did. I think my experiences growing up within the community and as I discovered my relationship as being part of the community probably more informs the work that I do now as an art therapist and my desire to want to help people help themselves in terms of the anxiety and depression, I think, and again, this is work that I've been doing with my psychologist around early childhood experiences, not necessarily related to my sexuality, but stuff around the primary caregivers in my life of

which there are multiple for all of us, and how that may have informed perceptions, things like self-worth giving and receiving love. Just some small topics that can really impact us all.

Mark Creamer (11:44):

Absolutely, absolutely. And you're very involved in the LGBTQI Plus community. And one thing that I'd love you to talk about, because I hadn't heard of it until you and I did a quick chat to plan this, and that's Joy FM. So Joy FM, tell us about it and your involvement with it.

Trent McWhinney (11:59):

Yeah, so Joy Radio is, and I say Joy Radio, so I did the radio training late last year, and one thing they instilled into us is that it's not Joy FM, either Joy 94.9 or Joy Radio. So with Joy, they are Australia's one and only LGBTQI plus community radio station. And I wanted to do their radio training for probably a year or two, and they offer it a few times a year. I have a friend, she and I both wanted to do it together. We used to work together and we used to pretend we were on radio together. And this was only a couple of years ago. This wasn't like when we were kids as fully grown adults. We used to pretend we're on radio. And so the opportunity came up, did the radio training, loved it. And then as I've always done with my different careers and where I've looked into areas of interest, I've always been big advocate for trying to get work experience or volunteer experience to get an understanding. So after the radio training, I then went into the station and listened to the brekky show live and watch them do their thing. And then I have always wanted to do something like my own podcast or have a space where I can share thoughts and knowledge and experience around mental health and similar topics.

Mark Creamer (13:14):

So are they going to give you an opportunity to do some of that, to do your own podcast?

Trent McWhinney (13:19):

I've been given one, and a few weeks into the podcast, and it's also been on Tuesday nights on Joy. So it's really just gone straight in and made it a bit of a dream for me.

Mark Creamer (13:31):

That is very exciting, I must say. Very exciting. And we will make sure that on the landing page for this episode, we'll give some links or whatever so people can listen to you in your podcast space. Amazing. Thank you. That's wonderful news. We've got to move on. The other thing that I heard is, and I might have got this wrong, is the LGBTQI+ mental health network. Perhaps you could tell us a bit about what it is and what your role is in that one.

Trent McWhinney (13:54):

So this is such an amazing opportunity for me personally and professionally. And I say that because late last year, I think it was, I saw an EOI put out for the network coordinator role for the Melbourne LGBTQI+ network. And I looked at that opportunity and I thought, that is an amazing opportunity. I'm about to go full-time into my art therapy career. So I submitted my interest and I was given the opportunity. It's a network that's been around for four years,

Mark Creamer (14:24):

A network of mental health professionals.

Trent McWhinney (14:26):

Yeah, yeah.

Mark Creamer (14:27):

Okay. Yep.

Trent McWhinney (14:27):

Yeah. So mental health professionals who work with patients and clients that identify as part of the LGBTQI+ community.

Mark Creamer (14:36):

Excellent. And what a great idea to have a network of people to presumably support each other and refer to each other and share resources and all those kinds of things.

Trent McWhinney (14:46):

And so part of the role is for me to come up with and facilitate different network meetings, which can both be online and in person to date. We've done two, the first meeting that I facilitated, which was for Trans Day of Visibility, and we got a trans woman, trans advocate to come along and talk about mental health care from that lived experience perspective. And then the second meeting we had, we had a guest speaker who had lived and living experience of dissociative identity disorder, DID. They came along and spoke.

Mark Creamer (15:18):

Sounds wonderful. And so if any of our listeners there identify with the community, then they can perhaps get in touch. And I think a great thing we're going to go on of course and talk about your creative art therapy, but let's just talk about art more generally first. So you are an artist. Are we talking any particular format? Are we talking fine art, painting or sculptures or music?

Trent McWhinney (15:37):

So I stumbled across painting probably about six, seven years ago. Abstract painting, throwing paint on a canvas. So real life drawings. I cannot do stick figures at best with my clients. It's definitely a running joke that I can't draw to save myself. But in terms of artwork, abstract painting as well. I have a x-ray of my skull from when I was 14, which I use to frame up things that I see and then use my phone as the camera. So I take photos that are framed with an x-ray skull.

Mark Creamer (16:11):

Sounds amazing. Okay. I'm just reminded because I went to Canberra just a few weekends ago and went to the National Gallery and I saw Jackson Pollock blue poles and thought that's just someone who's thrown paint in a canvas. And course, what's it worth? Tens of millions of dollars. Let's just talk about the relationship between art and mental health for you. I think that your creative and artistic expression is important in your mental health and wellbeing.

Trent McWhinney (16:36):

So look, art making is definitely my mindfulness practice. I really strongly believe that any activity that we do where the rest of the world stops existing is a mindfulness practice. And for me, that is painting. I pull out the canvas, I pull out the paints. I'm in that space. I'm in that moment, which is a rarity for me outside of that practice. My head is constantly running around and pretty manic. So certainly important to my mental health from that regular practice.

Mark Creamer (17:05):

Yeah, absolutely. And presumably the creativity side of it is really important, which is what you're talking about there. What about as a recipient as it were? I mean, do you think that seeing nice art or listening to nice music or whatever, is that good for our mental health and wellbeing?

Trent McWhinney (17:20):

Yeah, definitely. I think music is great for the soul. I think music is so important. You can use it to lift your mood up to match and marry perhaps a low mood.

Mark Creamer (17:28):

Sure. I'm wondering whether it's possible for art actually to be bad for our mental health. And this is just my personal bias here, but I'm thinking about things like death metal or perhaps really shocking art or art that might be quite distressing. Do you think that might happen?

Trent McWhinney (17:43):

I think the way it could become distressing, and it's interesting that you mentioned that style of music. I have a client who listens to a band that, I won't mention their name, but I was introduced to this band by this client. The titles of their songs are just absolutely horrendous because I'd said to this client, what music do you like? I looked it up on Spotify because generally I try and play music in my sessions, and if a client likes a particular kind of music, then I'll play that for them. And I just have to say, I can't play this. There's no way I can play this.

Mark Creamer (18:17):

And yet, perhaps for that client, actually, maybe it is helpful.

Trent McWhinney (18:21):

And that's exactly right.

Mark Creamer (18:22):

We, I suppose, must be careful not to impose our own artistic judgments on them.

Trent McWhinney (18:26):

Yeah, that's exactly right. And that's the thing that this client has said. They listen to this music and it can lift them up, but it can also be really comforting and calming if they are feeling dysregulated. So I think to your point, absolutely.

Mark Creamer (18:37):

Okay. So you kind of introduced the idea of art therapy. What took you from being an artist if you like, to becoming an art therapist? How did that come about?

Trent McWhinney (18:45):

It actually kind of happened around the same time. So I had a friend who was studying art therapy, but I'd never heard of art therapy before she spoke about it. And then probably only a few months or so later, I stumbled across painting, throwing paint on a canvas. I had another friend and she was very much an abstract painter, so she kind of got me into it.

Mark Creamer (19:06):

And then did you do some training?

Trent McWhinney (19:07):

Yeah, so I studied a master's in therapeutic arts practice, which was at a college called MIECAT, and they offer master's in doctorate level art therapy and that's it. They have a unique niche college, absolutely loved it. Each semester we'd get new readings and you've found something that you love. When I would be given the readings on day one of that subject and I couldn't wait to get home and open up the readings and highlight and underline and read these mandatory readings.

Mark Creamer (19:39):

That is a good sign. I quite agree. It is a good sign. So what sort of clients do you work with? What's your practice look like?

Trent McWhinney (19:45):

Yeah, so I've landed in NDIS land, and that's come about through a couple of connections. Probably about two years ago was when I really started I guess seeing clients on a regular basis. Prior to that, I had been doing some workshops and I very much had my art therapy training wheels on. But about two years ago, yeah, I started seeing clients on the NDIS, over the journey, and certainly now my clients range from as young as seven right up through the lifespan, and presenting with varying mental health diagnoses.

Mark Creamer (20:18):

Have you got any idea what you think the therapeutic ingredients are? What is it about art or art therapy that's helpful?

Trent McWhinney (20:25):

Well, I'm going to speak from a very personal perspective, personal professional perspective. And this is what I wrote my thesis on, which is the therapeutic benefit of the relationship between therapist and client. And that being by establishing and doing that work on the relationship between myself and say a client that can hold the therapeutic benefit because it allows a client to feel safe, seen, heard. It allows them to feel like they're in a trusting space, which a lot of them sometimes can't be. And then art can just be the modality which we work with. So a lot of the work I do at the moment I would say is art as therapy as opposed to art therapy. And I distinguish the two as art therapy, which is what I was trained in, allowing a client to work through their lived experience. So we use art to help where words may stop, they fall short or they might not be able to express themselves properly. That to me is art therapy.

Mark Creamer (21:27):

Interesting. I mean, as you say, perhaps sometimes the art is the therapy in itself. Sometimes the art is actually just setting a kind of context for the person to work through some other stuff and so on, I guess.

Trent McWhinney (21:39):

Yep, that's exactly right. And by creating that space, looking at the relationship and working on the relationship, providing art within that space then allows a person to become more playful, become more curious. It breaks down that stigma of perhaps more traditional one-to-one talk therapy where you're sitting and talking and looking into each other's eyes the whole time. This allows that sense of playfulness.

Mark Creamer (22:03):

Absolutely. There's a lot to be said for that I think. Not that I do it much, but going for a walk with a client or something, taking it out of the consulting room where it is very intense, potentially. Look, unfortunately time is running out Trent. I could chat away for another hour or two with you, I must say. But almost all our listeners are healthcare professionals, mental healthcare professionals, many of them. Looking back on all your myriad experiences over the years, do you have any sort of advice about what we could be doing better when we're working with people such as yourself or your kinds of backgrounds?

Trent McWhinney (22:33):

I've had this discussion with various people professionally and personally around the benefits of therapeutic art support. So I personally think that art therapy is a complimentary therapeutic support. I don't think it should replace other therapies, but certainly work in conjunction. And so I think by sharing that mindset, it shouldn't be either or. It should be an opportunity for a client to put another tool in their tool belt with someone who has the expertise to do that.

Mark Creamer (23:04):

And also, even if you don't have as the therapist, the time or the expertise to be doing that, maybe recommending it as something they might do. I've actually just had a chat to the cab driver on the way here, and he was talking about how he and his partner went to an art class, as it were for an hour and a half on the weekend, and just how they came out feeling on top of the world. And so together it was sort of part of their relationship building as well.

Trent McWhinney (23:26):

Yeah absolutely. And art doesn't have to be necessarily in that therapeutic environment. It could be art as that mindfulness or art as just timeout. I haven't met anyone yet who's done something artistic that they enjoy doing. That's probably the catch. If you're doing an art activity and you don't actually like doing it, you're probably not going to have a nice time. But if it's an activity that you like doing and you take some time out to do it, I guarantee you, you will question why you hadn't started doing it before.

Mark Creamer (23:54):

Yes. Good. So I was going to say, I mean, the first question was about what have we got for therapists and health professionals and so on, but I was next going to say, what about advice for people who have

had similar experiences to you, but it sounds like the similar kind of thing, that the benefits of art and creativity and so on.

Trent McWhinney (24:10):

Yeah pretty universal I'd say.

Mark Creamer (24:12):

You did say, I think that you were quite a fan of therapy generally, so perhaps we would encourage 'em, if you're struggling, stick your hand up, go and ask for some help.

Trent McWhinney (24:20):

Yeah, absolutely. If I have time, I'll quickly give the analogy that just like with our cars that we take to get serviced, to maintain the car's health, the same with us. When something goes wrong, yes, we should go seek out guidance and advice, but we shouldn't just wait till something goes wrong. We should maintain ourselves.

Mark Creamer (24:41):

And if we can maintain ourselves, it's much easier than slipping down into the abyss and trying to get back out again.

Trent McWhinney (24:46):

Absolutely. Yeah.

Mark Creamer (24:48):

Well, perhaps that's a good point to end on. Trent, look, thank you so much for agreeing to chat to me. I think it's been a fascinating discussion. I've really enjoyed the opportunity to hear about all the various elements in your life that have come together to bring you to where you are now and who knows what the future will hold. So thank you very much. Thank you to our listeners for joining us today in this episode of MHPN Presents In The First Person. If you want to learn more about Trent or myself, our bios and some useful links, including as I hope, as I said before, a link to your Joy Radio podcast, they will be on the landing page. You'll also be able to find a link to the feedback survey. So please let us know what you thought about the episode, provide suggestions to help shape the future of MHPN podcasts.

(25:32):

And if you want to hear more about Creative Arts Therapy, what it is and how it contributes to better mental health outcomes, subscribe to or search for the Mental Health in Focus podcast. We'll be releasing the next episode in our four-part series on creative arts therapy. In this series, we're taking a close look at this innovative and exciting field, and over the course of the four episodes, we are looking at topics like the evidence base for Creative arts therapy. We're looking at competencies and training. We're looking at the different settings and cohorts that creative therapists work in, and we're looking at some of the innovations in the future directions for the field. So please do join me for that. If you want to stay up to date with future episodes of In the First Person and other MHPN podcasts, make sure you subscribe to MHPN Presents. But for now, it's thanks very much again to my guest, Trent. Thanks, Trent.

Trent McWhinney (26:29):

Absolute pleasure. Thank you so much.

Mark Creamer (26:31):

I've enjoyed it myself and thank you very much to all of you for listening to us. Bye for now.

Host (26:39):

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