The Efficacy of Interactive Drawing Therapy for Emotional Regulation in Children: A Literature Review and Critical Appraisal of Research Gaps

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Introduction

Emotional regulation (ER) is a foundational developmental task in childhood, with direct implications for mental health, interpersonal functioning, and academic achievement (Adynski et al., 2024). ER involves monitoring, modulating, and appropriately expressing emotions (Fancourt et al., 2019). According to Drake (2023), this process demands not only the identification of strategies, but also the capacity to implement them appropriately in context. This underscores its complexity as a developmental task.

ER is closely tied to interoception, language development, motor coordination, and reflective thinking (Fancourt et al., 2019). For children with developmental delays, trauma histories, or neurodivergent presentations, talk-based therapies may not be developmentally appropriate. As an accessible and non-verbal method, drawing offers a psychologically safe avenue for emotional processing (Yilmaz Bursa, 2024). It externalises affect using colour, shape, and metaphor (Withers, 2006), serving as a therapeutic tool for both distraction and reflection (Boulton et al., 2023). Research findings suggest that irrespective of whether the therapeutic benefits relate to distraction or reflection, positive shifts in sad affect can persist for multiple days post-intervention (Drake et al., 2016).

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Interactive Drawing Therapy (IDT) addresses the more nuanced aspects of ER, as it features an eclectic combination of free drawing, narrative, and therapist-guided inquiry to support those navigating states of distress (Withers, 2006). It enables symbolic processing, emotional containment, and self-reflection, often in the absence of robust verbal skills (Withers, 2009).

This literature review critically examines the theoretical and empirical evidence supporting IDT's efficacy when applied to dysregulated children. To reflect the paucity of research on this modality for younger demographics, search terms have been expanded to include terms such as "drawing", especially when the therapist's technical application mirrors IDT's approach. This includes when words/narrative elements are included, when clients draw in response to specific prompts, or when new images/words are added retrospectively to capture novel/emerging insights. Gaps and areas requiring further research are also highlighted.

Development of Emotional Regulation in Children and Intersections with Drawing Interventions

The development of ER is biologically grounded in the limbic system, particularly the amygdala and hippocampus (Zharova et al., 2025). These structures facilitate emotional response and memory formation (Zharova et al., 2025). Secure attachments and co-regulatory relationships with caregivers promote neural development, enabling children to differentiate real from perceived threats and eventually self-soothing with greater effectiveness (Fitter et al., 2022). Trauma (Pollack & Smith, 2020), inconsistent/hostile parenting styles (Goagoses et al., 2022), and developmental delays (Marquis et al., 2017) can interfere with limbic system development and functionality, thereby complicating the ER process for vulnerable young people.

Drawing serves as a compensatory pathway, by allowing children to externalise/symbolise what would otherwise be abstract internal experiences (Olaoye & Abdallah-Tani, 2024). Drake (2023) notes that drawing can also be used as a form of distraction for dysregulated children. Skinner and Zimmer-Gembeck's (2007) earlier research notes that while younger children seem to prefer the behavioural distraction that drawing affords, children utilise cognitive distractions more readily as they transition into adolescence. Drawing accommodates both strategies; younger children can behaviorally distract themselves whilst continuing to engage with evocative symbolic material,

whilst adolescents can cognitively distract themselves by responding to drawing prompts that divert attention away from the evocative imagery and towards something more hopeful.

Theoretical Underpinnings of Drawing Interventions

The Expressive Therapies Continuum (ETC), developed by Kagin and Lusebrink (as cited in Bergs Lusebrink et al., 2013), provides a tripartite model through which drawing facilitates ER and processing (Kinaesthetic/Sensory [K/S], Perceptual/Affective [P/A], and Cognitive/Symbolic [C/SY]). The K/S level involves physical engagement, the P/A level enables emotional expression, and the C/SY level supports abstract reflection (Bergs Lusebrink et al., 2013). IDT aligns closely with this model, potentially enabling children to progress fluidly across these domains.

Furthermore, Gross' (1998) Process Model of Emotions (PME) describes the emergence of emotion as occurring in four stages: Situation, Attention, Appraisal and Response. This model can be applied to IDT, with evocative scenarios being drawn (Situation), attended to by the therapist and client (Attention), collaboratively interpreted according to the client's meaning (Appraisal) and engaged with therapeutically (Response). When applying this model, it could be reasonably assumed that IDT's collaborative search for meaning allows the clinician to become more adept at helping the child client appraise emotionally evocative stimuli with greater accuracy, potentially resulting in more appropriate responses. Fancourt et al. (2019) reiterates that the appropriateness of emotional expression is a core sub-task within the broader task of ER, thereby enhancing the relevance of Gross' PME (1998).

Theoretical Framework of IDT

IDT, created by Withers in the early 1990s, is grounded in psychodynamic, client-centred, and attachment-based theories (Withers, 2006). Using simple materials, clients alternate between drawing and narration on the same page, producing a visual record of emotional growth (Withers, 2009). The process attempts to track changes associated with inner psychological states, revealing new unconscious material symbolically and progressively (Everts & Withers, 2006).

IDT departs from classical Freudian projections by inviting clients to imbue drawings with personalised meaning (Everts & Withers, 2006). The therapist supports exploration without imposing interpretation (Pearson & Wilson, 2024), consistent with Winnicott's (1965) "holding environment". Drawings can become ritualised, either by being folded, preserved or destroyed (Malchiodi, 1998). This provides the individual with unique opportunities to express themselves beyond the act of drawing itself.

Attachment theory informs IDT's relational stance. Early emotional imprints shape how children navigate ER, and symbolic representations in IDT can bring implicit relational patterns to the surface (Olaoye & Abdallah-Tani, 2024). This highlights IDT's capacity to capture symbolic information about relationship dynamics and the young person's self-concept, potentially allowing for more accurate conceptualisations about attachment.

Evidence from Literature: Individual Case Studies

An existing body of literature supports drawing interventions for children struggling with ER. Brownlow (2022) provides an anecdotal example, describing a client who used a spider to symbolise strength and developed increased emotional literacy through iterative modification of the drawing. Similarly, Stenner (2022) illustrates how drawing containers helped a client symbolically set aside distress and cultivate intentions for self-care. While these examples have not been empirically tested, they represent a growing number of therapists who have personally observed shifts in ER, through monitoring subtle shifts in body language, emotional arousal and/or the child client's attitude towards their personal stories of hardship.

Ho and Chiu's (2020) case study working expressively with an Autistic child and his mother provides a more robust analysis into the application of art-based modalities and the potential to address dysregulated affect and attachment-related issues. Joint painting, drawing and other expressive techniques were applied across 23 sessions and the mother learnt to recognise that her own responsiveness had a subsequent impact on her son, thereby affirming the relational and regulatory benefits of artmaking (Ho & Chiu, 2020; Yan et al., 2021). Similar findings that speak to the broader efficacy of drawing for Autistic children have been replicated on a larger scale in subsequent studies (An, 2025).

Evidence from Literature: Peer-Reviewed Literature

Everts and Withers (2006) provided 235 IDT clinicians with an anonymous survey, prompting reflections about its efficacy. Whilst some had only completed a foundational IDT course and reported success in a limited portion of their work, responses highlighted its usefulness with both child and adolescent populations (Everts & Withers, 2006). While individual differences in therapists' interactional style will vary, similarities between Australian and New Zealand cohorts, especially in relation to cultural attitudes about artmaking (Gattenhof et al., 2022) could see Everts and Withers' (2006) findings generalised cross-culturally.

Torabi Goodarzi et al. (2024) looked further into parent-child interactive drawing and found that it had the potential to reduce separation anxiety and fortify damaged attachment bonds. The cohort included 16 parents of 6–8-year-old children with separation anxiety and randomly assigned them to either the experiential or control group (Torabi Goodarzi et al., 2024). Those in the experiential group completed 13 sessions of interactive drawing and this had a significant effect on the presenting separation anxiety ($p=<0.05$). This finding substantiates the importance of moving beyond the client-counsellor relationship and inviting parental involvement for enhanced results.

More recently, Podobnik et al. (2024) asked 226 pedagogy students to interpret a six-year-old child's drawings and captured their analyses in a questionnaire. Results indicated that it was impossible for students to accurately interpret the content of the drawings without engaging in a dialogue with the client (Podobnik et al., 2024). With Gross (1998) outlining the importance of Appraisal, these findings implicitly suggest that client-led interpretations can amplify interpretative analysis. This sentiment aligns closely with IDT's reflective ethos (Withers, 2006)

Quantitative studies offer insight into drawings and their potential mechanisms of action. Drake (2019) found that children

assigned to distraction-based drawing prompts had better mood outcomes than those engaging in expressive drawing, thereby acknowledging instances where distraction can be reframed as protective rather than maladaptive. Brechet et al. (2022) reached similar conclusions; drawing that expressed either happiness or neutral affect enhanced ER comparative to children who were prompted to draw emotionally evocative material as a means of venting.

Critical Analysis of the Literature and Future Directions

Therapist responses to questions posed about the efficacy of IDT placed importance on the speed in which emotional relief is achieved (Everts & Withers, 2006). Whilst broadly relevant to ER, the importance of subtler shifts over longer treatment periods remains largely unexplored, at least from the therapist's perspective. After considering Gross' PME (1998) and Kagin and Lusebrink's ETC (as cited in Bergs Lusebrink et al., 2013), it becomes apparent that ER features a more nuanced series of sub-tasks, emphasising not just the immediacy of ER strategies, but also the importance of parental collaboration (Ho & Chiu, 2020) and accurate therapeutic input (Podobnik et al., 2024). More longitudinal research could be conducted, to honour self-reports from parents and children about longer-term shifts in ER capacity. Measuring a child's capacity for ER pre-, during and at various points post-intervention, could bolster the credibility of the existing research on adult clients (Drake et al., 2016).

Greater exploration of IDT's bihemispheric and attachment-informed processes could enrich our understanding of how symbolic expression contributes to regulatory processes within the parent/child dyad. Studies by Torabi Goodarzi et al. (2024) and Podobnik et al. (2024) underscore the importance of child-led interpretations and engaging primary caregivers when the distress relates to separation anxiety. Additional research could investigate whether the parent's involvement has a modulating or mediating effect on the child client. This could be achieved by changing independent variables (absent versus present parent groups), or by thematically analysing how the quality of the parent's attunement impacts pre and post-testing results.

Additionally, neuropsychological studies demonstrate that drawing stimulates bilateral brain activity in healthy individuals (Raimo et al., 2021). IDT engages the right hemisphere's implicit emotional processes, then integrates this information via verbal reflection, activating the left hemisphere (Withers, 2006). At present, no study has explicitly explored how an IDT therapist's efforts to activate the left hemisphere may need to involve non-conversational approaches, especially when working with younger children with speech language deficits. This interhemispheric bridging could be explored in greater detail, with additional scope to differentiate how bilateral brain activation can be achieved differently, depending on whether the deficit is because of neurodivergence, traumatic dissociation or something else.

Conclusion

Research on the efficacy of IDT for younger demographics remains sparse and the existing literature focuses on short-term outcomes post-intervention, with less emphasis on longer-term follow-ups. In this context, drawing is predominantly positioned as a distraction-based tool for children and adolescents. Future research could look beyond the behavioural and cognitive distraction that drawing affords, perhaps by differentiating observable shifts in mood in-the-moment from longitudinal outcomes. Honoring the child's lived experience, whilst continuing to collect data from the adult caregiver and assigned therapist, may result in a more refined understanding of IDT's efficacy, rather than prioritising a sole opinion. Irrespective of what future research reveals, the results of this literature review remain clear. Drawing can facilitate enhanced emotional regulation, with improvements in both a child's self-concept as well as enhanced connectivity between parent and child, both noted as additional positive outcomes.

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