The Critic, the Child and the Nurturer: A group case study of art therapy in a weight-neutral frame for women with body image concerns

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Bio

Tavia Viglietti is currently completing her Master of Art Therapy through the University of Johannesburg. She has a special interest in fat liberation – particularly as it applies to the therapeutic space. Her clinical work has taken place at public psychiatric hospitals surrounding Cape Town, where she has worked extensively with clients with intellectual disabilities and complex mental health needs. Prior to this, Viglietti lectured Psychology modules for Southern New Hampshire University's Bachelor of Arts programme in partnership with the Global Education Movement and the Scalabrini Centre of Cape Town, which offers scholarships to refugees across seven countries.

Abstract

This article explores how art therapy can function as a weight-neutral practice for South African women experiencing body image distress. Grounded in a six-week narrative art therapy group, the study drew on Ashlee Bennett's (2022) three characters: the Body Critic, the Younger Self, and the Body Nurturer. Participants were able to externalise shame and imagine new ways of relating to their bodies. Using a qualitative, arts-based approach, the group revealed how internalised body criticism often stems from gendered, cultural, and familial influences. Through arts-based thematic analysis, three

therapeutic processes were identified: the externalisation of internalised shame, the re-authoring of body narratives, and the emergence of self-compassion. Findings suggest that art therapy grounded in a weight-neutral stance offers an inclusive, ethically responsive alternative to weight-centric models of care. The article concludes with recommendations for (1) practice – embedding weight-neutral and anti-fat-bias frameworks in therapeutic work, (2) training – integrating critical engagement with weight-neutral practices and confronting anti-fat bias in art therapy education, and (3) research – developing decolonial and contextually grounded approaches to body image in South Africa. This study represents the first documented application of weight-neutral narrative art therapy in the region.

Keywords: Art therapy, weight-neutral practice, body image, anti-fat bias, South Africa, inner child, inner critic, fat liberation

Introduction

This article explores the unique potential of art therapy as a weight-neutral therapeutic approach. I draw from a master's research project that explored group narrative art therapy for individuals struggling with body image distress. This article is a distillation of how art therapy works as a weight-neutral practice (Viglietti, 2024). A weight-neutral therapeutic stance actively resists the widespread anti-fat bias found in society. Body neutrality in general emerged in response to criticisms of the body positivity movement, which has demonstrated itself to have limits of *who* is allowed to love their body, usually accompanied by healthism or capitalism (Gordon, 2023). Furthermore, while aspects of body positivity may be uplifting, it is my view that it is not a helpful stance for a therapist to have, as it values a single feeling about the body. Just as we need fat[1] joy in spite of the anti-fatness in society, we need to welcome negative feelings in the therapy room without our clients feeling like they are failing. Weight-neutral practice would distance the individual's value from their weight or body shape and instead put therapeutic focus on other key issues. Furthermore, this approach does not demand everyone 'love' their body all the time, instead opting for acceptance with bodies and inevitable ebbs and flows. This research

1 The word *fat* is used in this research in its reclaimed state per fat liberation activism – as a neutral descriptor. Having said that, I do acknowledge that it is a word that is frequently weaponised. Not everyone does or has to feel safe with the word.

also aligns with the Health at Every Size (HAES) movement, which seeks to separate assumptions about health and *healthism*[2] from the shape and size of one's body, advocating for equitable access to physical and mental healthcare without individuals being dismissed or pathologised through weight-loss advice (Bacon, 2010).

My engagement with fat studies scholarship stems from my own lived experience of inhabiting a fat body that has changed over time, yet has almost always been made to feel *too big*. These experiences have surfaced in many ways – through interpersonal interactions, in medical settings where unrelated concerns drew unsolicited weight-loss advice (even when in perfect health), and in therapy, where a therapist's anti-fat bias reinforced the very body criticism for which I had sought support. I first explored how art therapy could support individuals exploring body image concerns in 2023. I found that artmaking often felt less threatening than purely spoken methods when working with emotionally charged material like body shame. The creative process enabled a gentler entry point into vulnerable inner narratives and allowed for complex feelings to be externalised and reflected upon with greater safety.

My thinking has been most influenced by the work of Australian art therapist Ashlee Bennett. In *The Art of Body Acceptance*, Bennett (2022) combines narrative approaches with practical art therapy strategies to help people reframe their relationships with their bodies. Her three-character framework – the Body Critic, the Younger Self, and the Body Nurturer – has been central to my research and is woven throughout the group process described in this article. By bringing Bennett's framework into dialogue with the experiences of South African women, this article extends weight-neutral art therapy scholarship into a new cultural and therapeutic context where such work has not previously been documented.

This article aims to demonstrate the value of art therapy as a weight-neutral practice by drawing from my time holding a six-week narrative art therapy group with South African women navigating body image distress. I designed the group around Bennett's (2022) three narrative characters – the Body Critic, the Younger Self, and the Body Nurturer – which served

2 *Healthism* is a systematic belief that individual health is indicative of one's diligence and overall character (Gordon, 2023). Under healthism thin individuals are interpreted to be hardworking and of higher moral fibre, while fat people are perceived to be the opposite.

as guiding figures throughout the process. These characters offered participants a symbolic language through which to externalise internalised narratives of shame, explore past wounds, and begin cultivating self-compassion. The Body Critic emerged as a particularly potent therapeutic hurdle: harsh, familiar, and deeply internalised. Rather than attempting to erase it, the group used this figure as a starting point. Over time – and at their own pace – group members began to explore beyond this starting point. Externalisation of internalised shame, the re-authoring of body narratives, and the emergence of self-compassion emerged as beneficial therapeutic processes.

This research is deeply personal to me. It represents a stride toward becoming the kind of therapist I once needed as a child, a young woman, and an adult.

Literature

There is a growing amount of literature critiquing the global state of anti-fat bias (Bacon, 2010; Flegal, 2021; Gordon, 2023), challenging the flawed assumptions linking body size to health, the medicalisation of fatness, and the cultural systems – such as diet culture and healthism – that uphold weight stigma. Authors like Aza (2019) and Kinavey and Cool (2019) draw important links between anti-fatness and how it shows up in therapeutic spaces, often unnoticed. More specifically, in relation to art therapy, Bennett (2022) remains the only practitioner explicitly applying and publishing on weight-neutral principles. While Bennett writes from a feminist, decolonial perspective, her work is grounded in an Australian context. To date, there is no South African research explicitly engaging weight-neutrality in art therapy or psychotherapy, despite clear evidence of widespread weight stigma in local health discourses (Bosire et al., 2020). This article seeks to fill a gap at this intersection.

Anti-fat bias is a pervasive societal tendency embedded across social and institutional levels, and even impacting therapeutic spaces (Aza, 2019; Kinavey & Cool, 2019). Its effects on women are particularly significant, often leading to body criticism, chronic dieting, and disordered eating (Fikkan & Rothblum, 2012; Jovanovski & Jaeger, 2022). This bias is interwoven with diet culture, which is seen by many scholars as patriarchal, racist, and profit-driven (Jovanovski & Jaeger, 2022). Diet culture merges health and

appearance ideals into the notion of an ideal female body – achievable only through genetics or extreme dieting (Gordon, 2023; Jovanovski & Jaeger, 2022). As this body of scholarship demonstrates, diet culture stems from the sexual objectification of female bodies (Bartky, 1990; Bordo, 1997, 2005; Gordon, 2023).

Within therapy, anti-fat bias manifests as a weight stigma characterised by negative attitudes, beliefs, or behaviours toward fat clients (Fikkan & Rothblum, 2011). Traditional individual therapy often fails to acknowledge the broader social, cultural or political backdrops of weight stigma and steers therapists towards encouraging weight loss as a form of self-discipline (Matachin & Simone, 2019). Research indicates that mental healthcare practitioners are impacted by anti-fat bias, and their attitudes towards fat clients are informed by the myth that fat people are lazy and their inability to become thin is due to lacking motivation (Kinavery & Cool, 2019; Gordon, 2023). In therapeutic relationships, anti-fat bias may arise through countertransference, where a therapist's own feelings or biases impact the therapeutic process (Aza, 2009; Kinavey & Cool, 2019). I argue that the prevalence of anti-fat bias in the therapy room is higher than we would like to believe and, ultimately, that this is a public health issue in how it both overtly and inadvertently prevents fat people from appropriate mental healthcare services (as well as other health services).

As critical literature and lived experience accounts have increasingly shown, weight stigma – rather than body size itself – is a major driver of poor mental health outcomes, including depression, anxiety, disordered eating, and body dissatisfaction (Aza, 2009; Kinavey & Cool, 2019; Gordon, 2023). Yet, few therapeutic models offer alternatives to the weight-centric paradigm that is embedded not just in the anti-fatness of society but also in the DSM-5, which informs much of mental healthcare (APA, 2013). For clients in fat bodies, therapy may become another site of surveillance and judgment, even when well-intentioned.

When searching for literature that relates specifically to group therapy and anti-fat bias in the context of this research, it is not without significance to report that search results were primarily South African support groups promoting weight loss. Similarly, I often observed that narratives around fatness in South Africa frequently used stigmatising narratives around

'obesity'[3] – often merging Black South African culture with this highly contested term (Bosire et al., 2020). Problematising fatness through medical terminology in association with culture reveals the intensity of Eurocentrism in research. This is also indicative of the gap in the literature to which this study aims to contribute. While literature specifically on the South African context is lacking, there is significant evidence of narrative art therapy being highly impactful in multicultural settings (Padilla, 2022). Sabrina Strings' (2019) and Sonya Taylor's (2021) respective books both speak to the racist origins of anti-fat bias in the context of the United States. These writings are relevant to the South African context, in which the legacy of apartheid is felt today. When it comes to body image in the South African context, it is clear that the literature is steeped in assumptions and oversimplification of a topic that is richly nuanced. It is essential that mental healthcare professionals begin to unpack some of these assumptions (Viglietti, 2024).

The literature thus reveals a substantial gap in research on group therapy approaches addressing anti-fat bias within a South African context, where the dominant narrative around body size remains rooted in weight-loss promotion and stigmatising language. Additionally, the conflation of cultural identity with problematic terms like 'obesity' highlights a persistent Eurocentrism, which further reinforces stereotypes and marginalises diverse cultural perspectives on body image. While international studies underscore the effectiveness of narrative art therapy in multicultural settings, there is a clear need for more South African research that acknowledges the complex interplay between culture, history, and body image and that challenges simplistic narratives around weight. Anti-fatness cannot be understood in isolation; it is entwined with broader systems of power and oppression.

Methodology

I used a qualitative, arts-based research approach to explore narrative art therapy as a weight-neutral practice. Six women took part in a closed art therapy group, recruited through flyers distributed both digitally and physically across Cape Town communities. The group was grounded in psychodynamic group art therapy, supported by narrative art therapy

3 *Obesity* is medically defined as having a BMI of 30.0 or higher. Fat liberation activists argue that labelling fatness as a medical issue is rooted in flawed science and worsens stigma (Gordon, 2023).

theory and body acceptance work. The research centred on the storytelling aspects of art therapy and the meaning participants found in the process of expressive artmaking.

Arts-based research supports both embodied and implicit forms of knowing (Malchiodi, 2017). Participants were encouraged to choose from a wide variety of art materials – wet, dry, 2D, 3D, and natural-supporting autonomy and self-expression. While some prompts were directive, especially early on to provide containment, these were always framed as optional. The group was held in a responsive way, allowing for participants to bring what felt most present for them.

The core narrative components guiding the group included the Younger Self, Body Critic, and Body Nurturer, drawn from Bennett's (2022) narrative art therapy framework. This framework informed both the structure of the six-week group and the interpretive lens used throughout the study. Key narrative processes – externalisation, deconstruction, and re-authoring – were explored through both artmaking and reflective dialogue. The sessions were designed to move from identifying and externalising critical internal voices, then later toward exploring self-compassion through engagement with the Body Nurturer. Artmaking provided a natural vehicle for externalising internalised narratives, while group sharing allowed these stories to be witnessed and re-authored in community. Importantly, the interpretation of artworks came from participants themselves to avoid imposing meaning.

The group ran for six consecutive weeks, a duration selected for its feasibility within the scope of a master's mini dissertation and ethical approval timelines. The venue was a local community art studio, ideal for privacy and confidentiality. Each 90-minute session followed a consistent structure: check-in, artmaking, and group reflection. Ethical considerations were carefully managed throughout. Participants gave informed consent and all data was securely stored in line with the Protection of Personal Information Act (POPIA) of 2021. As a trainee art therapist, it was also crucial to abide by the guidelines of the Health Professions Council of South Africa (HPCSA), where I am registered. Pseudonyms were given to protect the identity of group members. Data included photographs of artwork, session recordings, facilitator field notes, and written reflections submitted by participants. The recordings were transcribed using the services of a

transcriber who signed a confidentiality agreement. Transcriptions were thematically analysed using Atlas.ti (Braun & Clark, 2006). A crisis protocol was in place, and regular supervision supported the group's ethical holding.[4]

Although attendance varied due to participants' schedules, connection was maintained through a WhatsApp group where members shared artworks and reflections between sessions. The short timeframe limited the depth of exploration, and participants expressed that more sessions would have been beneficial. Nonetheless, the group provided a meaningful space for beginning to question internalised body narratives and to imagine alternative, more compassionate relationships with the self. This approach allowed for a deep and embodied engagement with participants' internalised narratives, offering insights into how weight-neutral art therapy can support self-reclamation and resistance to anti-fat bias.

Thematic analysis, as outlined by Braun and Clarke (2006), was used to analyse the verbal data drawn from recorded group sessions and therapeutic process notes. Participants' interpretations of their own images guided the discussion, and these verbal narratives were the focus of coding and theme development. Visual and verbal data were cross-referenced, with participants' own verbal interpretations guiding thematic coding of imagery. This approach ensured that the analysis remained consistent with the study's narrative focus while honouring the role of artmaking as a catalyst for storytelling rather than as an object of interpretation. As both facilitator and researcher, I remained mindful of my dual role and engaged in ongoing supervision to reflect on my positionality and its impact on the group process.

Discussion

This study contributes to a practice-based extension of Bennett's (2022) narrative art therapy model, demonstrating how it can be applied within a weight-neutral framework in the South African context. In doing so, it also offers a conceptual argument for how art therapy can ethically engage with body image concerns without reinforcing weight stigma. The findings are drawn from a more expansive master's study, which is organised around three recurring internal figures introduced through the narrative art therapy framework: the Body Critic, the Younger Self, and the Body Nurturer. These

4 Ethical clearance number: SEM 2-2024-060. This was granted by the National Health Research Ethics Council (NHREC).

characters, adapted from Bennett's (2022) work, became powerful tools through which participants explored their relationships with their bodies, their histories, and themselves. The characters served as living metaphors that evolved through the artmaking process. In particular, the Body Critic emerged early and forcefully, often dominating the therapeutic space, while the Body Nurturer remained more elusive – appearing gently, yet offering hope for increased self-compassion. The Younger Self acted as a bridge between these extremes, drawing attention to the emotional wounds beneath entrenched body criticism. What follows is a closer look at how each figure came to life in the group, and what their emergence revealed about the therapeutic possibilities of a weight-neutral art therapy approach.

The central hurdle: The Body Critic

The Body Critic emerged as a central hurdle throughout the therapeutic process, presenting itself as a place to become stuck. The hurdle was frequently represented by authority or parental figures, embodying a protective yet critical role, often linked to major life changes such as weight gain, illness, puberty, or pregnancy. Participants explored how culture, gender, religion, and relationships shaped their experiences of being perceived and tied into the Body Critic. The Body Critic consistently reinforced negative body image while presenting itself as a voice of truth and protection. What emerged through artmaking reflected internalised judgments from authority figures and societal expectations, often rooted in the narratives of others.

Through artmaking, these critical voices were externalised and visually explored, revealing the origins and emotional impact of internalised body narratives. For example, D depicted her Body Critic as her paternal grandmother, including phrases like "*Never good enough*" and "*Always something to say*". In reflecting on the work, D said, "*They don't want me to be more in control of my life than they are*".

Figure 1: Participant D, Session 3 artwork, 2024, oil pastel

In another artwork (see Figure 2), F explored her body's story, incorporating her parents' voices. While her father's influence was subtler, her mother's was explicit and critical. F recalled memories of her mother's negative remarks, including comparisons to others: *"Last year, she bought a dress for my brother's girlfriend and whispered, 'I thought to give it to her because she's the only one in the family whose body would look nice in it'".*

Figure 2: Participant F, Session 2 artwork, 2024, mixed media

Participants frequently linked the Body Critic's intensity to transitional periods. M described pressure to "*stay one size*" as a way to maintain control. F used art to process how pregnancy altered her body, while A shared a painful memory of puberty marked by her father's lack of support when she first menstruated.

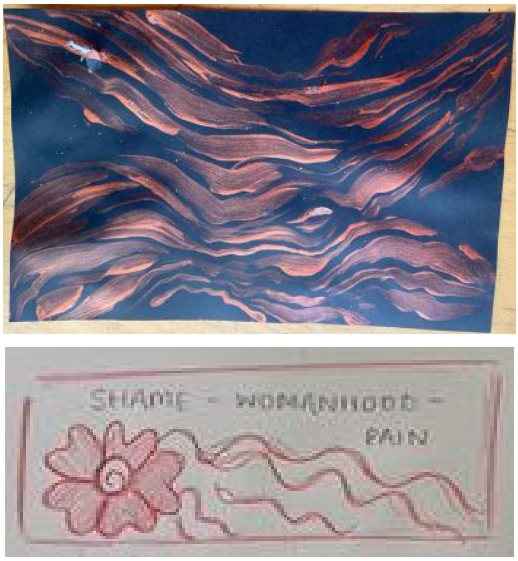

Figure 3: (Left) Participant F, Session 2 artwork, 2024, copper poster paint
Figure 4: (Right) Participant A, Session 2 artwork, 2024, pencil crayon

For D, childhood illness shaped her relationship with the Body Critic. Her artwork traced a journey from visible scars and hair loss to a rejection of femininity as performance: "*When you have no hair […] to prove to everyone you're a girl, you've got to be all in pink […] and that wasn't really who I was*".

Figure 5: Participant D, Session 2 artwork, 2024, pencil crayon

While each participant's narrative was unique, the Body Critic remained a shared figure – convincing, punitive, and often inherited. Through narrative art therapy, participants began to question the truth of its voice, inviting the possibility of alternative narratives grounded in self-compassion and body acceptance.

The Younger Self: Neglected inner child

The Younger Self emerged as a quiet yet potent theme in the group. While often overshadowed by the dominance of the Body Critic in the early sessions, this character began to surface more clearly as participants progressed through their therapeutic journey. The Younger Self did not arrive fully formed – it often appeared as fragile or inaccessible – but its emergence marked a turning point. It opened a pathway to vulnerability that had been buried under years of body criticism and cultural messaging.

N noted during Session 4 that she spent most of her time on other elements of her artwork and only added the Younger Self in the last five minutes. When given a voice, anger was at the fore as A shared in her Session 4 debrief: "*My Younger Self is angry at many things and people. They want to be set free. The Younger Self is ready*". Playful engagement with childhood materials like glitter glue often accompanied this character's emergence.

The Younger Self often appeared dependent, much like an actual child, especially when exploring its relationship with the Body Critic. Participants frequently described the Body Critic as controlling and silencing the Younger Self to suppress emotions and conceal authenticity. For example, A in Session 2 remarked: "*It felt almost impossible to reach her. She has so much pressure on her and has been squashed. It's like she can't reach out to me either*".

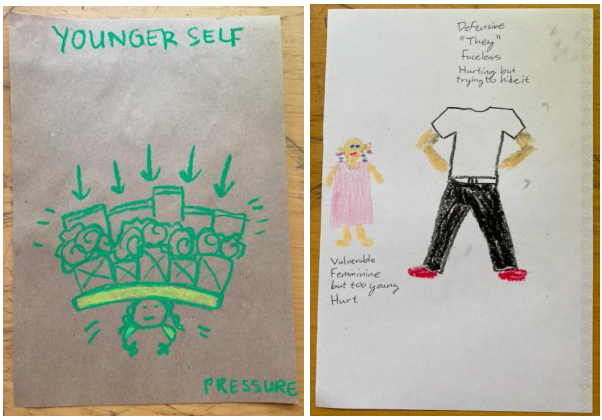

Figure 6: (Left) Participant A, Session 3 artwork, 2024, oil pastels
Figure 7: (Right) Participant D, Session 3 artwork, 2024, mixed media

In her Session 3 artwork (see Figure 7), D depicted her Younger Self as a child recovering from cancer, symbolising the emotional vulnerability that had long been repressed by the Body Critic. This image made visible how the Body Critic had stifled tenderness under the guise of protection. Through artmaking, D began to explore a different relational dynamic – one where the Body Nurturer could step in to care for the Younger Self, challenging the Body Critic's authority and showing that another, more compassionate path was possible.

In Session 5, participants used clay to depict the relationship between these characters. A's sculpture (see Figure 8) showed her Younger Self with wings, safely cradled in the Body Nurturer's open palm. She explained:

> "*She's [the Younger Self] also learning to fly 'cause she was squashed previously because of lots of expectations and perfection. [...] And I put clivias [flower petals] next to her. And a heart to indicate that she is loved. She's supported, because the Body Nurturer is the hand, and the hand is strong and smooth. A good foundation. She's a good landing and taking-off spot, so if the hurt child flies, but is a little hesitant, like, 'I don't wanna fly that high', she can come back to the hand, and the Body Nurturer will hold her and […] not hold her back. That's why the hand is more open*".

This imagery highlighted a shift in A's depiction of her Younger Self, moving from squashed and inaccessible (see Figure 9) to empowered and supported

by the Body Nurturer. The open hand symbolised a nurturing foundation, contrasting the constrictive control of the Body Critic.

These shifts suggest the therapeutic process helped participants reconnect with their Younger Selves, empowering them to explore alternative, nurturing narratives while challenging the dominance of the Body Critic.

Figure 8: Participant A, Session 5 artwork, 2024, clay and found objects

The emergence of the Body Nurturer: Reclaiming internal safety and care

Early into the art therapy sessions, the Body Critic emerged as harsh and cruel. However, ultimately it was perceived as containing the truth – cold hard facts for why we must strive for thinness, be it health or feeling lovable, even desirable. This marked a point where participants could become stuck without the third character: the Body Nurturer. Although the Body Nurturer

represented a potential respite from the Body Critic, the Body Nurturer was the least developed.

Unlike the Body Critic, who felt entrenched and familiar, the Body Nurturer appeared tentatively at first – less defined, more aspirational. For some participants, this figure was imagined for the first time in the group. For others, it echoed fleeting past experiences of being cared for, seen, or soothed. In all cases, the Body Nurturer represented a significant internal shift. She was a symbol of the possibility of care without condition and of value without conditions. The Body Nurturer did not arise by replacing the Body Critic or 'fixing' the Younger Self. Rather, she entered the internal landscape alongside these other figures, offering a new relational dynamic – one that interrupted the binary of either self-hate or self-love. Within a weight-neutral framework, this is essential. For example, the Body Nurturer does not demand transformation of the body. Instead, she invites a transformation of the *relationship* with the body.

In Session 5, participants were invited to use clay and found objects to represent the relationship between the Body Nurturer and the Younger Self. The tactile, grounding nature of clay provided a sense of containment and physicality that supported the exploration of nurturance in concrete ways. A's sculpture portrayed her Younger Self (see Figure 8) as a small figure with wings, seated safely in the palm of a large, open hand. She placed heart-shaped beads and clivias around the figure. A explained: "*She's supported, because the Body Nurturer is the hand [...] a good foundation. Not holding her back*". This open, holding gesture stood in stark contrast to earlier imagery where her Younger Self was overwhelmed or unreachable. In this image, care was not smothering or corrective – it was spacious and respectful.

M created an artwork (see Figure 9) where colourful swirls began to infiltrate the tight swaddle her Younger Self had been wrapped in by the Body Critic. While the Body Critic's presence remained, the new perspectives introduced by the Body Nurturer created space for alternative narratives to co-exist. M described the swirls as "*different understandings of self*", noting that they "*are starting to weave their way into the swaddle*". In this subtle but powerful metaphor, nurturance was not a loud or aggressive counter to criticism – it was quietly transformative.

Figure 9: Participant M, Session 6 artwork, 2024, mixed media

Unlike the Body Critic, who often mirrored real-life figures (parents, teachers, partners), the Body Nurturer was frequently imagined as internal, symbolic, or spiritual. For some, she took the form of an elder, a future self, or a presence they wished they had encountered earlier in life. Her emergence was often accompanied by grief: the pain of not having been cared for in this way before, and the fear that she might not remain. Still, the Body Nurturer's presence allowed for the possibility of repair – of the relational template participants held with their own embodied selves.

This is where art therapy's unique strengths as a weight-neutral modality truly came to the fore. Participants did not need to intellectualise what compassion means. They *felt* it through colour, form, texture, and imagery. In the safety of the group, they witnessed each other experimenting with self-kindness – tentatively at first, then with growing confidence. Participants were practising new internal relationships, sculpting new patterns of response, and imagining new possibilities for being with their bodies.

By the end of the group, the Body Nurturer was not fully formed in all participants' narratives – but she was present. Sometimes flickering, sometimes fragile, but undeniably there. Her emergence pointed toward the longer arc of healing – one that weight-neutral art therapy is uniquely

positioned to support. Through image, metaphor, and material, participants began to explore a critical thinking voice that is not created of fear or stigma as the Body Critic was.

Across participants, three interrelated therapeutic processes became apparent: externalisation, re-authoring, and the emergence of self-compassion. Through externalisation, participants gave form to the internal Body Critic, transforming abstract judgment into a tangible image that could be examined and challenged. Through re-authoring, they began to reshape their narratives, moving from stories of control and shame toward those of agency and care. Finally, moments of self-compassion – most visible through the imagery of the Body Nurturer – suggested internal shifts to previously critical narratives. These processes unfolded at each participant's pace, underscoring how narrative art therapy supports weight-neutral work by creating space for new stories of embodiment to take root.

Findings

To my knowledge, this is the first South African study to explore weight-neutrality in art therapy, marking an important contribution to both local and global conversations about inclusive therapeutic practice. A weight-neutral, art therapy framework can offer not only a counterpoint to weight-centric norms but a place where alternative stories can emerge.

The provided group case study offers insight into how a weight-neutral approach to art therapy offers curiosity and compassion toward how one's body narratives have been shaped. This is beneficial for clients who struggle with body criticism. This offering goes against the grain of societal expectations of women. Body criticism is deeply gendered and connected to diet culture, which mainly targets women by equating their value with appearance and thinness. In South Africa, these pressures intersect with histories of colonial beauty standards, post-apartheid socioeconomic inequalities, and local cultural narratives about health and body size. According to Jovanovski and Jaeger (2022), diet culture upholds patriarchal control over women's bodies and labels any deviation from its ideals as a moral failing. As a result, the Body Critic also becomes an internalised voice shaped by these gendered pressures, encouraging ongoing self-monitoring and regulation. The creative process supported this shift by allowing participants to access and reflect on non-verbal, emotional layers of

experience. Participants like M and A linked the Body Critic to the silencing of their Younger Selves, identifying how critical internal voices had long overruled more vulnerable or spontaneous parts of themselves. Through clay, mixed media, and pastels, they began to express these younger, suppressed parts with tenderness – showing them held, growing wings, or beginning to push against constricting "*swaddles*" of internalised criticism. These transitions were subtle but powerful, suggesting that while the Body Critic remained present, its role was beginning to change. No longer the dominant narrator, the Body Critic was now being countered by softer, more expansive perspectives. This aligns with Bennett's (2022) narrative art therapy framework, which positions these three characters as narrative devices that allow internal dynamics to be shifted.

Mental health professionals must recognise the significant internalised narratives clients hold, particularly concerning body criticism. This study demonstrates that art therapy provides a valuable approach to exploring and addressing these internal voices in a supportive and gentle way. In the South African context, where body ideals are mediated by colonial legacies, a weight-neutral approach invites a more contextually sensitive practice. It challenges therapists to hold space for multiple meanings of body size – beyond colonial biomedical framings – while acknowledging how race, class, and gender shape experiences of embodiment. These findings suggest that South African therapists need not only to adapt global frameworks like Bennett's, but also to critically consider how local conditions – including public health discourses, limited access to diverse therapy modalities, and entrenched weight-centric norms – shape body image concerns. Integrating a weight-neutral stance into practice can help resist these pressures while offering more ethically attuned care.

Limitations

The limitations of this research lie in that it is a fairly small, limited study. Therefore, these findings are preliminary. This study offers insights into the potential of narrative art therapy as a weight-neutral approach through the rich detail that a small qualitative study allows for.

However, there are several limitations to note. Despite efforts to recruit a group that reflects South African women, the group was composed primarily of white women, which limits the transferability of findings across

South Africa's diverse racial and cultural landscape. This overrepresentation reflects broader trends in the South African art therapy field, which remains small and contains structural and historical inequalities. More contextually grounded South African studies are needed that integrate decolonial and feminist embodiment frameworks.

My own positionality as a white, small fat, cisgender woman in training inevitably shaped the group dynamics and the lens through which I facilitated and interpreted the work. Although supervision and reflexivity were prioritised throughout, power imbalances may have influenced who was drawn to participate and participants' engagement and disclosures. In addition, occupying dual roles as both facilitator and researcher introduced complexity. While boundaries were maintained to the best of my ability, my investment in the success of the group and the field may have subtly shaped how the process unfolded and was documented.

Lastly, while this intervention was highly applicable to this specific group context, this study offers only initial insight into how weight-neutral practice can be enacted in art therapy. Further research is needed to develop clearer, context-specific guidelines for resisting anti-fat bias in therapeutic spaces.

Conclusion

In a world that profits from fear, healthism, and the sexual objectification of bodies, a weight-neutral approach to art therapy does not ask participants to change themselves, but instead invites them to explore new ways of relating to themselves. This study explored the potential of art therapy as a weight-neutral practice for women navigating body image distress in a South African context. By engaging the three central characters – the Body Critic, the Younger Self, and the Body Nurturer – participants externalised internalised shame, unearthed neglected parts of the self, and began to experiment with more compassionate ways of being in their bodies.

In South Africa, where therapeutic spaces are making strides toward body diversity and inclusion, this research signals the value in adapting existing models to better serve those in marginalised bodies. The study points to clear implications. For art therapy practice, this study emphasises the need for weight-neutral reflexivity and attention to internalised bias. For training, this study underscores the importance of explicitly addressing anti-fat bias.

For research, this study signals the need to expand South African scholarship on body image and culturally attuned weight-neutral approaches.

Art therapy offered a uniquely applicable space for this work. Art therapy is open to metaphor, image, material, and symbol. Therefore clients are not limited to spoken language, which can easily be shaped by stigma. Through creative expression and group solidarity, participants began to re-author stories that had long been dominated by diet culture, and systemic anti-fatness. The process did not demand a resolution or a perfect outcome. Instead, with some curiosity, it invited a loosening of the critical voice that had long ruled.

The work is unfinished, as is much therapeutic work. In what is unfinished, raises the need for more robust research from the South African context. With regards to art therapy, anti-fat bias, and body image concerns for clients, this study has perhaps relied too heavily on authors from Northern America, Australia and Europe due to the unfortunate reality that relevant literature from local contexts is limited. For clients, this work presents a beginning, while asking questions that may never have been asked and goes against the grain of diet culture. Not "*How can I fix my body*?" but instead "*What does my body remember?*", "*What part of me needs support?*", and "*Whose voice am I listening to?*". Art therapy, in its spaciousness and sensitivity, proved well suited to hold these questions – and whatever answers began to take shape. This weight-neutral practice of narrative art therapy demonstrated its value especially through the key therapeutic processes: externalisation, re-authoring and accessing self-compassion. All of which are incredibly useful in the treatment of clients who experience stigma and body criticism. In my time observing this group, it occurred to me that the body is such an easy target and that there is a lot more life going on under the surface of what presents as a body image concern. To my mind, this emphasises the importance of striving for body neutrality. The desire to alter one's body often serves as a distraction from something deeper. If mental healthcare professionals cannot look beyond the physical (or from their own internalised stigma), they risk overlooking significant aspects of a client's life and emotional well-being.

References

APA. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). American Psychiatric Publishing, pp. 189–190. https://doi.org/10.1176/appi.books.9780890425596

Aza, M. (2009). *What's the skinny on fat women in psychotherapy: Mental health clinician's countertransference with women of size*. Smith College (master's).

Bacon, L., & Aphramor, L. (2011). Weight science: Evaluating the evidence for a paradigm shift. *Nutrition Journal, 10*, Article 9. https://doi.org/10.1186/1475-2891-10-9

Bacon, L. (2010). *Health at every size: The surprising truth about your weight*. BenBella Books.

Bacon, J., Scheltema, K., & Robinson, B. (2001). Fat phobia scale revisited: The short form. *International Journal of Obesity, 25*(2), 252–257. https://doi.org/10.1038/sj.ijo.0801537

Bartky, S. L. (1990). *Femininity and domination: Studies in the phenomenology of oppression*. Routledge.

Bennett, A. (2022). *The art of body acceptance*. Page Street Publishing Co.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Bosire, E. N., Cohen, E., Erzse, A., Goldstein, S. J., Hofman, K. J., & Norris, S. A. (2020). 'I'd say I'm fat, I'm not obese': Obesity normalisation in urban-poor South Africa. *Public Health Nutrition, 23*(9), 1515–1526. https://doi.org/10.1017/S1368980019004440

Bordo, S. (2005). *Unbearable weight: Feminism, Western culture, and the body*. University of California Press.

Flegal, K. (2021). The obesity wars and the education of a researcher: A personal account. *Progress in Cardiovascular Diseases, 67*(1), 75–79. https://doi.org/10.1016/j.pcad.2021.06.009

Fikkan, J. L., & Rothblum, E. D. (2012). Is fat a feminist issue? Exploring the gendered nature of weight bias. *Sex Roles, 66*, 575–592. https://doi.org/10.1007/s11199-011-0022-5

Kinavey, H., & Cool, C. (2019). The broken lens: How anti-fat bias in psychotherapy is harming our clients and what to do about it. *Women & Therapy, 42(1–2)*, 116–130. https://doi.org/10.1080/02703149.2018.1524070.

Gordon, A. (2023). *"You just need to lose weight": And 19 other myths about fat people*. Beacon Press.

HPCSA. (2021). *Health Professions Council of South Africa: Guidelines for ethical practices in the healthcare professions*. Health Professions Council of South Africa. https://www.hpcsa.co.za/Uploads/professional_practice/ethics/Booklet_1_Guidelines_for_Good_Practice_vDec_2021.pdf

Jovanovski, N., & Jaeger, T. (2022). Demystifying "diet culture": Exploring the meaning of diet culture in online "anti-diet" feminist, fat activist, and health professional communities. *Women's Studies International Forum, 90*, 102558. https://doi.org/10.1016/j.wsif.2021.102558

Malchiodi, C. A. (Ed.). (2022). *Handbook of expressive arts therapy* (1st ed.). The Guilford Press.

Padilla, V. (2022). Integrating art therapy and narrative therapy through a multicultural lens. Lesley University (Capstone thesis).

Protection of Personal Information Act 4 of 2013. (2013). Government of South Africa. https://www.gov.za/documents/protection-personal-information-act

Strings. S. (2019). *Fearing the black body: the racial origins of fat phobia*. New York University Press. https://doi.org/10.18574/nyu/9781479831098.001.0001

Taylor, S. R. (2018). *The body is not an apology: The power of radical self-love* (2nd ed.). Berrett-Koehler Publishers.

Viglietti, T. (2024). *Group narrative art therapy as a weight-neutral practice for South African women processing weight stigma and body image*. University of Johannesburg (master's).