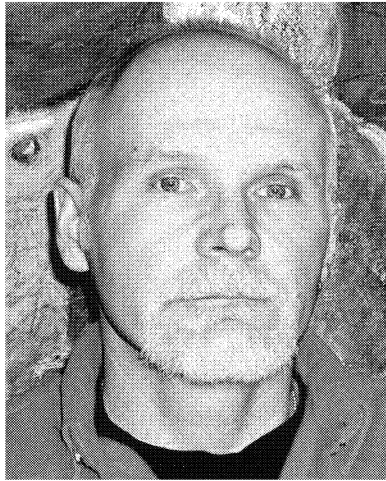


**WORKING WITH IMAGES:
THE ART OF ART THERAPISTS**

ABOUT THE EDITOR



Bruce L. Moon is an artist and art therapist with extensive clinical, teaching and administrative experience. He is a registered and board-certified art therapist who holds a doctorate in creative arts with specialization in art therapy. Bruce is the Director of the Graduate Art Therapy program at Mount Mary College in Milwaukee. His clinical practice of art therapy, focused on the

treatment of emotionally disturbed children, adolescents and adults, has spanned over twenty-five years. He has lectured and led workshops at many universities in the United States and Canada.

Bruce is the author of Existential Art Therapy: The Canvas Mirror, Essentials of Art Therapy Training and Practice, Introduction to Art Therapy: Faith in the Product, Art and Soul: Reflections on an Artistic Psychology, The Dynamics of Art As Therapy With Adolescents, and Ethical Issues in Art Therapy. He has also written a number of journal articles. Bruce brings to this project many years of experience in art studios, clinical and educational settings. His educational background integrates a rich tradition of interdisciplinary training in theology, art therapy, education and visual art. He is an active painter, songwriter and performer.

WORKING WITH IMAGES: THE ART OF ART THERAPISTS

Edited by

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EDITOR'S NOTES

Each of the contributing artist-writers in this book submitted 5 by 7 black and white glossy and/or color photographs of the artwork(s) presented here. The majority of the artworks appear as submitted, but in a few instances photographs were cropped for presentation purposes.

The artists also provided photographs of themselves. Some sent studio portraits while others submitted candid snapshots. This of course leads to a wide range of portraiture style. Enjoy.

The contributors were asked to write a brief biographical sketch. Some of these are written in a very personal style while others present a more academic biography.

Finally, each contributor authored an essay, or artist's statement, related to the artwork(s) accepted for inclusion in this text. They were asked to comment on the following themes in their written contribution:

- their motivations for art making,
- the inspiration for, and significance of works included in the text,
- how art making has been incorporated into their lives, and
- the role of personal art making related to their professional identity.

The editing in this book has been minimal. We did not want to do anything to change the spirit or intent of the artists' words. As a result, you may find phrases that seem awkward, or idiosyncratic. I guess that's ok. We art therapists can be an eccentric bunch. I have made very few changes, and only done so in the service of citation, grammar, spelling and syntax. Still, there are, no doubt, grammatical errors in this text. If you listen closely as you read, perhaps you will hear the voice of the writer. Many of the artist's statements are written in conversational style. I saw no reason to change them.

I did wrestle with the issue of inclusive language. As a scholar I find general references to people as "mankind," and individuals as "he" offensive and devaluing of both women and men. While being male, I consider myself a feminist, at least as feminist as I can be. So, for the most part this book is written with attention to utilizing inclusive, non-sexist language.

I wish to thank Don Seiden for writing the preface to this book. Don is Professor Emeritus in the Department of Art Education and Art Therapy at the School of the Art Institute of Chicago. He is formerly Chair of the Sculpture Department and founder of the art therapy program at SAIC. Don is a recipient of the Special Service Pioneers Award of the American Art Therapy Association, and he was the Charter President of the Illinois Art Therapy Association. Co-author of *Direct Metal Sculpture* (1966, Crown Publisher), Don has a new book in progress titled, *Living With Art*.

Finally, I must offer my deepest thanks to Eleanor Jones, for her editorial work on the manuscript. As has often been the case with my writing, Ellie has prodded, rephrased and polished my clumsy efforts.

PREFACE

In the introduction to this book, Bruce Moon writes, “Art celebrates the mundane and the amazing, the routine and the extraordinary aspects of existence.”



Figure 1. Don Seiden—The Family (one member of seven)

The rest of this book proves that statement with examples from the experiences of the art therapists who are represented along with their text and art. Bruce Moon has been a powerful influence in our profession for years and this book may be his most important contribution to date. He states that “art” is the first word in art therapy and it is “art” that distinguishes what we do compared to other helping professions. The artists, in their words, confirm his beliefs by presenting their work and their process in both art making and in their work as therapists. They define the many ways in which these two processes balance and contribute to one another.

It is certainly the case that our special energy and the information we have accumulated over time has made this profession immensely valuable to our clients. Now we have a book which supports the image of the therapist-as-artist which points to that individual as one who derives personal power from the creative act of working with images. The people who speak to us in this book discuss their experiences as artists. They express with passion and power. Their stories reach the reader by bringing us into the private world of creativity and the professional world of therapy. The process of healing is viewed as a creative act.

This chorus of voices literally sings about the memories, the insights, the emotions and ideas that fill the pages of this book. I personally came away from this reading with a pride in being an art therapist, and I felt enriched in my own experience by an awareness that all these wonderful people are my colleagues in a very important mission.

The artists here write about their involvement in creating images and the personal benefits gained through this creative process. These include self exploration and the insights gained from interactions with clients. Activating memory, dealing with grief, loss and separation are helped through the art process. A sense of freedom is gained, a joy of discovery is stimulated.

Stress is mediated and relaxation is often felt. One artist says that art is “A path to the interior.” Another states “I am what I create.” Still another discovers “How I see what I see.” This collection is filled with examples of the benefits attributed to the art experience for the therapist and client. They both are artists.

Working With Images articulates the freedom to be oneself in art, to learn to see, to participate in a group spirit, and to confront and overcome life obstacles . . . to find creative solutions. These are only some of the messages of this publication. Art is seen as a companion in one’s life. It can be like a friend, a spouse, a parent, a child and sometimes a critical voice. It seems to enter the life of the artist with a very human spirit. Virtually all of the artists represented here express a quality of love which enters their process. Their words are full of hope and discovery.

Whatever the variety of themes discussed that reflect countless life events, art seems to have an important role to play in defining and fulfilling the journey that is being described. Experiences are understood better through art, and images are tools of resolution. John Dewey titled his classic work *Art As Experience*. Bruce Moon, in this collection, brings those art experiences to the reader with a fresh quality.

It is good to feel the energy in this book and to know that these people are out there helping others. The theme of this book is art. The art is passionate, and smart. These works stand as strong evidence of the healing value of artistic processes and products.

This is a book of true stories. The stories reveal personal artistic journeys that often share similar experiences with different narrators. Some of the writers speak of life encounters that are unique. Although the themes of self discovery, interaction with clients, personal relationships, education and personal artistic histories are common themes, the nature of each contributor's experience is "special." It is revelatory in each individual case.

This book is the first of its kind in the field of art therapy and like Bruce Moon, I also hope it is not the last. The need for the profession to look to its roots in art making is essential for us to develop a unique and honest self portrayal as a discipline. We are a professional entity with a historical connection to the healing process. We have learned from our history and have added to our knowledge base the wisdom of other professional entities. It is important for art therapists to reattach ourselves to our artistic origins in order to not lose the essence of our defining history. This does not mean severing our education from all the other professional information that surrounds us. It means that we are open to learning from the that world. Artists are generally open-minded to life experience. We have to be in order to document faithfully what we see, feel and think.

This book presents a way for readers from all walks of life to participate in the art experience. The artists represented are exploring the world within the mind's eye. They are reporting about the inner world of imagination and this world is as vast as is the space we humans are able to envision. This is a pioneering work and we art therapists have Bruce Moon to thank for his contribution to our professional as well as personal lives.

Don Seiden
Chicago, Illinois

INTRODUCTION

*A plausible mission of artists is to make people appreciate
being alive at least a little bit.*

Kurt Vonnegut, *Timequake* (1998, p.1)

W*orking With Images: The Art of Art Therapists* is about artworks and the artists who created them. It so happens that all the artists presented here are art therapists. This is the first book of its kind in art therapy publications. I hope it is not the last. “Art” is after all, the first word in our professional moniker. Yet the bulk of art therapy literature has focused primarily on the therapeutic aspects of the discipline. Still, it is a certainty that the vast majority of art therapists in the world were artists before they became art therapists. So this book is an attempt to honor the first word . . . art.

The best part of this book, hidden between the pages, is a permission slip: *you can, you should, make the time to, make art.* Painting, drawing, sculpting—is powerful stuff, like magic . . . the bread of life. The bread is within your reach. So eat. As the Nobel Prize-winning poet Derek Walcott (1976) said, “Sit, feast on your life.”

Making art isn’t about getting famous, making friends or making money. When all is said and done, it’s about inspiring the lives of those who will see your work and inspiring your own life, as well. It’s about appreciating being alive. I hope this book will inspire art therapists and laypersons alike to make art.

As you will see in these pages, art has to do with the intent to express some essential aspect of human existence. Making art involves the use of skill and creative imagination in the production of objects that convey fundamental qualities of life as it is. Art affects people by revealing meanings—deepening, enriching and ensouling daily experiences. It involves construction, ownership and sharing with others the complex arrangement of how the world and individual lives are perceived. Art provides opportunities for validation from, and attachment to, others. Artworks transcend the artist while

simultaneously defining and expressing unique qualities of the artist. Art celebrates the mundane and the amazing, the routine and the extraordinary aspects of existence.

The Genesis of this Book

Who knows how these things get started? Maybe this book began on September 16, 1974, my first day as a student in the Clinical Internship in Art Therapy at Harding Hospital, in Columbus, Ohio. I was twenty-three years old. My head was full of ideas (and hair, believe it or not). On that first day my mentor, art therapy pioneer, Don Jones, asked if I had a sketchbook. I assumed he wanted me to have something in which to document clinical observations. I brandished a notepad and asked, "Do you want me to write progress notes?"

Don shook his head, "No Bruce, I want you to draw and write poetry."

"Why?" I asked.

Don did not explain. He said, "You'll figure it out."

Perhaps *Working With Images: The Art of Art Therapists* is another step in my "figuring it out." It's been nearly twenty-seven years since Don told me to get a sketchbook. Here I am, still drawing, still writing poetry. I've gone through a number of sketchbooks between then and now and I've covered hundreds of canvases with paint. Lately I've been thinking a lot about the artworks we art therapists make, still trying to figure it out.

NOVEMBER 1999. I was drinking a beer in a hotel bar with Millie Lachman-Chapin in Orlando, Florida. The national conference of the American Art Therapy Association was winding down, the third or fourth day. Millie and I were shooting the breeze, talking about paintings we'd been working on. *Bam*, just like that, this book appeared in my imagination. I said, "Millie, I'm going to make a book about the art of art therapists."

"That's nice," she replied, "we need something like that."

I'm not sure Millie believed me, but here I am in late January of 2001, writing this introduction. The book will be published in early fall. It has had a very short gestation period. Conceived in November 1999, in print in October (or thereabouts) 2001. An Indian Elephant's gestation period is right around two years.

Rationale

Over the past fifty years, the professional identity of art therapy has been heavily focused on the psychological and therapeutic aspects of the work. There have been many reasons for this. First, there was a desire to be re-

garded as “truly professional” by colleagues in other helping disciplines. Second, there was a perceived need for recognition by governmental authorities and insurance companies. Third, there was some resistance toward identifying too closely with the art world.

Throughout much of our history, art therapists have worked in psychiatric treatment institutions and medical hospitals. In such institutions, the professionals whose disciplines are anchored in science, physicians and psychiatrists, have traditionally sat atop the pyramid of power and prestige. In terms of institutional and political clout, medical doctors have been closely followed by psychologists, counselors and social workers. The therapies provided by clinicians in these disciplines have historically relied upon verbal interactions with the client and psychotherapeutic techniques. In order for art therapists to be recognized as professional colleagues, and thereby assume some measure of influence and status within such institutions, it seemed necessary for them to incorporate, or assimilate, the language and methods of the aforementioned disciplines. Hence, many art therapists absorbed the language and values of these disciplines and emphasized the therapeutic aspects of art therapy while simultaneously de-emphasizing their artistic roots. This was done in order to survive.

The notion that art therapy must assimilate the style of other professions remains prevalent today. Efforts to emulate other disciplines’ research methodologies, construct rigorous certification processes, and seek status through state licensure legislation are evidence of this mindset. Recently, Gantt (1998) asserted that, “. . . art therapy is, and must be, a blend of both art and science if the field is to develop further or have any standing among other professions or scholarly disciplines” (p. 3).

During the late 1980s and 1990s, as health care systems in the United States shifted from a service orientation to an emphasis on profit margins, art therapists felt a practical need for recognition by third-party payers and insurance companies. In order to receive reimbursement for their services, art therapists practicing in institutions reliant upon third-party payment were encouraged to present themselves to insurance companies and HMOs in ways that would be understood and valued by those entities.

The need for disciplinary recognition and validation was also felt by art therapists working in private practice whose economic survival depended upon third-party payment. This led to art therapists seeking any number of credentials beyond those of art therapy and resulted in a plethora of initials after their names. Among these credential letters are: LPAT, LPC, LPCC, LCPC, NCC, LMHC, MFCC, MFT, LMFT, MSW, LCSW, RPT, and RPT-S, to name a few. Letter salad. Malchiodi (1997) commented, “Each of us hopes the letters in back of our names will be recognized, particularly in terms of respect from our art therapy colleagues and other professionals in the

workplace. Each of us hopes that the letters in back of our names will also be useful in terms of employment and meeting career goals . . .” (p. 86).

At about this same time some art therapy educators began to extol the virtue of requiring art therapy education programs to apply for accreditation by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The fact that the National Association of Schools of Art and Design (NASAD) already had accreditation standards in place for art therapy education programs was dismissed, by those advocating for CACREP accreditation, as being not helpful in terms of improving art therapy’s professional status. This was a telling example of seeking status from another therapy-based accreditation body while devaluing accreditation from an art-based body.

The need for third-party payer recognition also fed concerns regarding the nature of research within the art therapy community. Gantt (1998) notes a comment of one representative of a behavioral health care company who said, “In God we trust; all others must provide outcome data” (p. 3). It is safe to say, the sort of outcome data an insurance company might value has little or nothing to do with the aesthetic or artistic sensibilities of either the client or the art therapist.

In addition, some art therapists may have felt a subtle resistance to identification with art because of art’s position as “frivolous” in our culture (Ewens, 1988). Evidence of this cultural bias can be seen in the public school system. Whenever a school board faces budgetary cuts the arts programs are often among the first to be placed on the chopping block.

Finally, some art therapists express a sense of low self-regard in relation to their artistic skill level. Other art therapists are uncomfortable with the exclusionary overtones that are sometimes associated with the lofty label of artist. As one art therapist put it, “I don’t really think of myself as an artist. I mean, you have to be pretty good to call yourself an artist.” This is reminiscent of the sarcastic comment sometimes applied to art educators: “Those who can, do; those who can’t, teach.” In our case, it would be, those who can make art, do; those who can’t, do therapy.

For these reasons, and probably more, the artist aspect of art therapists’ professional identity has remained in the background until recently. Despite the inhibiting factors noted above, art therapists have raised questions about their professional identity. They ask, “Are we therapists who only happen to use artistic techniques, or are we artists who work in treatment settings?” This critical question goes right to the heart of the discipline. It moves us toward the roots of art therapy. Our answer defines who we are, both as individual art therapists and as a professional community.

It is impossible to say just where, when or by whom the arts were first recognized as having healing qualities. It has been suggested that art therapy’s

roots go back as far as the ancient cave paintings of Lascaux, France. Early Greek philosophers described art and music as medicine of the soul. Some point to the writings of Freud that mention his patients' imagery as being the foundation of art therapy. Carl Jung articulated high regard for the therapeutic role of the arts, both in his own life and in his work with patients. Hans Prinzhorn brought attention to the art of the insane in Europe, thus stirring interest in the formal use of the arts as a therapeutic agent. In France, Jean Dubuffet committed vast amounts of energy and time in his fight on behalf of disturbed artists who were rejected or ignored by their contemporaries. In the mid-1900s, artist-therapists emerged in Great Britain and Europe.

At about the same time in the United States, the "pioneers" of art therapy surfaced simultaneously in various locales as artist-clinicians. Among these early practitioners were Myra Levick, Bob Ault, Elinor Ulman, Felice Cohen, Don Jones and Rawley Silver, each accomplished artists and skilled clinicians.

Regarding her development as an artist and therapist, Rawley Silver writes:

When I was a child, art classes in school ended in the 7th grade, and thereafter, I attended Saturday classes at Parsons School of Design, a train-ride away in New York City. Studio art consisted of drawing, painting, and sculpting from observation, usually human models.

In college and ever since, I greatly admired ancient Chinese painting (Sung Dynasty). One of the painters, Ching Hao, wrote that the aim should be: not to obtain the true likeness of an object or to create beautiful things, but to fathom the significance of things and try to grasp reality . . . resemblance . . . reproduces the formal aspect of objects, but neglects their spirit; truth shows the spirit and substance in like perfection. (*The Spirit of the Brush*, p. 84)

When I graduated from college in 1939, I believed a career in painting was impossible for a woman. Instead of commercial art, I went to the Smith College School of Social Work, and became a medical social worker.

During the 1950s, I returned to painting. After exhibiting in group shows and three individual shows, I volunteered to teach art in a school for deaf children, having been deafened myself, temporarily, in an accident. Unaware of Art Therapy, I went to Teachers College, Columbia University, for its Masters degree and doctorate in Fine Arts and Fine Arts Education, graduating in 1966.

I then used what I knew about art and social work with children and adults who had various disabilities. I was delighted to find Elinor Ulman's *Journal of Art Therapy*, and when it announced the formation of an "American Society of Art Therapists," I presented a paper at its meeting in Airlee, Virginia, and was accepted for membership in AATA in 1970.

I have continued painting over the years, and will be having an exhibition of my work in April, 2001. This landscape (Figure 2) is a view from our house in Rye, NY, where we lived 40 years before moving to Florida. It was painted from observation on a foggy day in late autumn. Painting and drawing have always been, for me, a way of losing myself in something other. Painting becomes automatic and my hand knows what to do.

Rawley Silver (personal communication, December 21, 2000)



Figure 2. Rawley Silver–Autumn

In reference to the integration of the artistic and therapeutic aspects of her professional identity, Myra Levick wrote:

Drawing and painting has been an integral part of my life since I was a very small child. My mother started taking me for art lessons when I was 10 years old. The class was in a neighborhood art center and our models were generally children from the street. Learning to draw from life at that age was an incredible experience.

During the years when most of my creative energy was focused on my clinical and teaching work in art therapy, I carried a sketch book and a camera, took jewelry making classes, sewed and did needlepoint. It is wonderful to have more time now to paint.

While sightseeing on a small quiet street in Jerusalem, I came upon two Lebanese women resting on the curb. Their traditional garb was sparked by the very contemporary yellow plastic totes resting at their feet. The image evoked a painting and they graciously nodded when I took a photograph. At home in my studio, it seemed that only water color on rice paper would do to recreate their quietude. And so the painting, *Women in Israel* (Figure 3) was done.

But there is more. While I was sitting with an exhibit of some of my work, including my “Lebanese ladies,” a couple and a woman came by, stopped and began talking excitedly in Hebrew. The woman explained that the couple, her guests, recognized the street and wanted to know when I had been there. That was very nice.



Figure 3. Myra Levick—Women in Israel

My becoming an art therapist was serendipity—a happening I have never regretted. On the other hand, my paintings are planned, stimulated by an image, an idea, a special child, person or place. And they all have stories.

Myra Levick (personal communication, February 14, 2001)

Whoever and wherever the first artist-healer was, she or he must have had high regard for the healing power of images and artworks. Because of this history, I believe we art therapists are obliged to embrace our artist selves. This is more than just a matter of symbolic and semantic interest. It is a matter of professional authenticity. Over the past several years there has grown a movement to re-ignite our artistic passion and to welcome it back into our professional identity.

Since 1993 this movement has been evidenced at AATA national conferences by a daily slide show of art therapist's artworks. The movement has also been documented in a stream of conference papers and workshops and professional journal articles, focused on examining the integration of the **artist** and the **therapist** aspects of our work. Finally, in 2000, the AATA formed an "Art Committee" whose mission is to foster, study and support artistic aspects of art therapy.

Working With Images: The Art of Art Therapists, is an effort to give voice to the artist aspect of our identity as art therapists.

The Subject

This book is about how the artists work, how they learned to do it, why they do it. Artists, it seems, live two lives. They move along in their ordinary lives, go to the gas station, buy groceries, pay bills, and work their day jobs. But there is another life that relives events. This second life stands before canvas or stone and goes over it all again . . . looks at the textures, the colors, the tiny details and the sweeping patterns. This other part, the extraordinary second life, dares to dip the brush into the paint, to pound the chisel, to mold the clay. All these things are done to tell stories, to find meaning. Stephen King (1990) puts it this way, “. . . Because writers [artists] remember everything . . . especially the hurts. A little talent is a nice thing to have . . . but the only real requirement is that ability to remember the story of every scar. . . . Art consists of the persistence of memory.” This book will give you glimpses of the memories, and perhaps the scars, of the artists. Be honored.

The artists in this book know that it is good to make art and they make good art. Through their work they demonstrate their faith in the product and the process. For some of them, art making is their anchor, in the turbulent world of helping professions. For some, images come in response to their clients. For all of them, making art deepens and enriches their lives.

Several of the artists in this book write about their employment situations. They express the belief that artistic activity has helped them to survive in the professional world. They speak of art making as their anchor, the soul of their profession. This does not necessarily mean they enter competitive juried exhibitions, or try to sell their work (although some do). Rather, it suggests ways they think about their identity as art therapists.

The Process

Once I decided to create this book there were several tasks confronting me. First, I needed to secure a publisher. I developed a book proposal and sent it to several companies. Within a few weeks Charles C Thomas responded with a contract for the book.

I then needed to solicit submissions of work from the professional art therapy community. The initial goal was to select approximately fifty artist's works for inclusion in the book. The spring 2000 Newsletter of the American Art Therapy Association contained a call for submissions. Art therapists were asked to submit two slides of work they had made at some point in their career.

The next step in the process was the formation of a jury committee. I wanted to form a committee that would be free to select art pieces on the basis

of their aesthetic and expressive sensibilities. Since the art therapy community is relatively small, I decided the jury would consist of art professionals. In order to avoid any possible bias, no art therapists were invited to serve on the jury. The task of the committee was to select works for publication from the submitted artworks. The three-person jury was comprised of Mr. Mathew Povse, Darlene Miller-Lanning, and Sandra Ward-Povse.

Mathew Povse is the chair of the art department and teaches ceramics at Marywood University in Scranton, Pennsylvania. He received his MFA from Cranbrook Academy of Art in sculpture and BFA from Ohio University. A furniture maker and ceramic sculptor, he focuses his claywork on thrown and altered elements fired in a wood kiln.

Darlene Miller-Lanning is an art historian, painter and gallery director with a PhD in museum studies and art history from SUNY Binghamton, and BFA and MFA degrees in painting. She directs the University Art Gallery and teaches art history and studio art courses at The University of Scranton.

Sandra Ward Povse is the director of the Marywood University Art Galleries in Scranton, Pennsylvania. With an MFA in fiberarts, she was an artist in residence and arts administrator at Peters Valley Craft Center in Layton, New Jersey. Her mixed media constructions incorporate found objects, paper and surface embellishment.

When the August deadline for submissions passed, the jury committee met several times to screen and select art works for inclusion in the book. Approximately one hundred and twenty art therapists submitted work for consideration. Rest assured the jury's task was not an easy one. When the committee made their initial selections, they were then asked to decide on ten of the artworks to be featured as plates. Finally, the jury selected one piece to be the cover image for the book. I hope you enjoy their selections.

Structure

Working With Images: The Art of Art Therapists is structured in the following way. The artists and their work are presented alphabetically. Each artist's section begins with a brief biographical sketch and portrait of the artist. Following the biographical sketch is the artist's statement. The presentation of the artist's work(s) concludes the section. In the middle of the book there is a special plate section. Finally, I conclude with a brief epilogue.

Artistic Inquiry

I have had several motivations for the creation of this book. In addition to the reasons articulated above, *Working With Images: The Art of Art Therapists*,

has been a fascinating research project. Clarke Moustakas (1995) refers to this form of exploration and analysis as heuristic research (pp. 21–40). In his 1998 text, Shaun McNiff describes the emergence of a new vision of investigation that he calls art-based research (pp. 21–82). He states, “Over the course of my career I have progressively come to the realization that it is the arts, the primary contributors to the emergence of creative arts therapy, which have been conspicuously absent from the profession’s discourse about research” (p. 21). I have been so curious about the artwork my colleagues make. Creating this book has afforded me the opportunity to look inside the motivations, aspirations, and inspirations of other art therapists. I am deeply grateful.

As you will read and see, art making is a form of investigation for many of the artists in this book. Preliminary analysis of the artists’ writings suggests five prominent modes of artistic inquiry. They are:

1. Art making as self-exploration and reflection,
2. Art making as a form of exploration and documentation of therapeutic work,
3. Art making as a form of responsive interaction with clients,
4. Art making as a form of clarification and containment of the art therapist’s feelings that surface in therapeutic work,
5. Art making as a form of spiritual practice, or participation in soul-making.

It has been fascinating to be let into my colleagues’ thoughts about these things. As you reflect upon the artworks and artists’ statements, if you identify other modes of inquiry, please forward your ideas to me. I will be very interested in your thoughts. As McNiff states, “We have to find ways to communicate the truths that we experience within the art therapy experience” (p. 120). The works of art and accompanying words presented here are simply that; the truths experienced within the art therapy context. I hope you will find *Working With Images: The Art Of Art Therapists*, an inspiring example of artistic inquiry.

Conclusion

The time is right for this book. It presents art therapists as serious, fine artists. I believe this is a significant contribution to the literature and identity of the art therapy profession. I hope this book will help to shape the professional identity of future generations of art therapists in America and throughout the world.

As I said earlier, I hope this is not the last book of its kind. Maybe somebody else will get inspired to make another book about art therapists and their art. I didn’t think it would be right for me to submit any of my artwork

for inclusion in this one. But, if someone else does a book like this, I will gladly enter the fray.

Again, please let me know what you think of this effort. We are breaking new ground here and I look forward to your feedback regarding this project. Enjoy!

Bruce L. Moon
Scranton, PA

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**WORKING WITH IMAGES:
THE ART OF ART THERAPISTS**

THE ARTISTS

SIMONE ALTER-MURI



Dr. Alter-Muri is the Program Director and Associate Professor of Art Therapy and Art Education at Springfield College in Springfield, Massachusetts. She has worked as an art therapist for over 20 years. Dr. Alter-Muri has published articles and produced a video on several issues in the field of art therapy.

She has lectured and presented at numerous workshops, conferences

and schools nationally and internationally. Dr. Alter-Muri served in various positions in the New England Art Therapy Organization. She is an advocate for art education and a member of the arts advisory board of the Massachusetts Department of Education. Dr. Alter-Muri has volunteered on several committees of the American Art Therapy Association. As a practicing artist, she exhibits her art locally and abroad. Dr. Alter-Muri conducts research on the relevance of Lowenfeld's stages of art development to our cross-cultural world.

Artist's Statement

The process of creating art is both an inner and external dialogue and an integral part of my identity as an art therapist. Being engaged in the creative process increases my ability to work effectively with clients. As an art

therapist, my art is a journey of self-discovery. Something occurs when the marking instrument touches the paper that words cannot describe. I am interested in the integration of aesthetics and expression in my art.

My art can represent a description of a moment in nature, or a response to an external or internal event. My art as art therapy and my art as art are two distinct styles of creating. Understanding space in the picture plane is a challenge that continues to inspire and motivate me, a quest to create art that reflects a mood, a moment in time and a locale.

I have been creating art since childhood. My mother was an art teacher and I have studied art formally. My style could be described as a blend of impressionism and expressionism. In accordance with postmodernist thought, (a woman's studio could be her kitchen table) my studio is adjacent to the kitchen. This is a metaphor of my life, an interweaving of my artist self and my mother and family role.

As a landscape artist, I travel with art materials. My vacations are interwoven with creating art. Art making is a meditative process, a time to push the limits and understand the simplicity of the creative process. As a professor and program director of art therapy I tend to work on a small scale during the semester.

My oil pastel and mixed media drawing entitled *Homage to Gregory Gillespie* is 16 by 14 inches. Gregory Gillespie, an internationally known painter, has had art exhibited in the collections of the Metropolitan Museum of Art, the Whitney Museum of American Art, the Hirshhorn Museum, The National Museum of American Art, The Museum of Fine Arts in Boston, The Rose Art Museum at Brandeis University and others. Gregory was a two time Fulbright grant award winner and received additional grant funding to assist him to live in Italy for eight years. He was the youngest artist to ever have a major retrospective at the Hirshhorn Museum of American Art. The Forum Gallery in New York City represented his work.

It was a cold April day in 2000, when I interviewed Gregory Gillespie on the topic of self-portraiture and self-acceptance. Greg's art was a part of my presentation on "Why Artists Create Self-Portraits" at the Massachusetts Art Education Conference. It was also included in a panel discussion entitled "What's Behind the Face: Self-Portraits in Art Therapy" presented at the 31st Annual Conference of the American Art Therapy Association.

Two weeks before my talk, Gregory Gillespie committed suicide. To help process my shock I created sketches and this drawing entitled *Homage to Gregory Gillespie*, emerged. As an art therapist, I believe every piece of art I create describes who I am at the moment. Creating art can serve as a container to hold and process feelings. Art helps to transform the pain experienced in loss and mourning. In this drawing my professional art therapist-self and the artist merge.

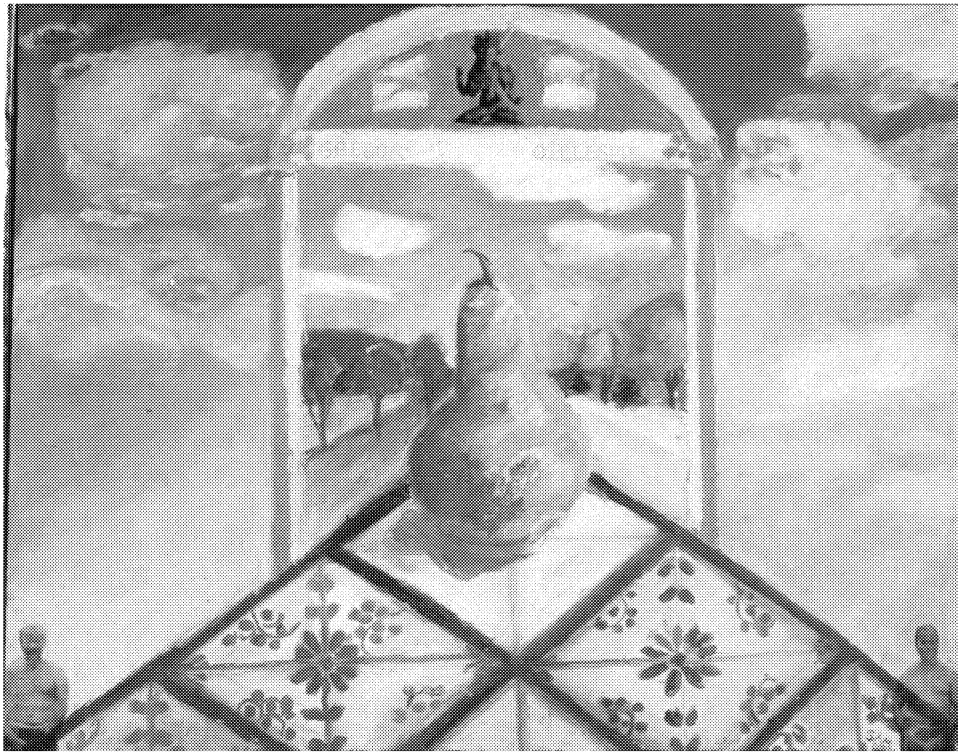


Figure 4. Simone Alter-Muri—*Homage to Greg Gillespie*

My drawing blends aspects of Greg's style and aspects of my own work. The image of the pear represents the year after graduate school that I studied art at the Museum School in Boston. I took several classes in Renaissance painting and techniques and I spent two semesters devoted to painting pears in this style. Greg studied Renaissance painting and integrated his years of knowledge of these techniques in his art. I also grew pear trees at my former home. Greg loved to garden and cook, and he gave me pear recipes. Pears are one of my favorite foods; I spent time preserving pears and drawing pears. Greg and I discussed the sensuality of fruit and the inclusion of fruit or squash in his paintings.

The table was inspired from a print of a still life that Greg made and gave me as a present when my daughter was born. The still life reminded me of my sabbatical in Provence, and of Cezanne and the unevenness of life. Greg had taught me how to create the collage skins that I incorporated into this piece. I included collage skins of one of Gillespie's most recent self-portraits that depicted Greg as an older individual. When I asked Greg, during my last

visit, why he portrayed himself as older, he said he wanted to paint the reality of getting older and not gloss over the aging process.

Greg was interested in eastern philosophy and religion and he often incorporated Buddha or other deities in his art. I included the image of Shiva, the Indian God of power beyond the distinctions of good and evil. Another important symbol in my drawing is the sky. Greg was a gentle spirit and I can imagine him floating with the clouds. I incorporated a landscape in my drawing from a sketch that I once created close to Greg's home and studio. I included an archway in my drawing, an archway to nature. The archway has gold supports and borders, which symbolizes alchemy and transformation.

Greg created many large shrine pieces and even created a tomb for his ashes. He felt that the tomb sculpture (1998–1999) was a continuation of his self-portraits. I wanted to create an altarpiece for Greg. Thank you, Greg, for bringing beauty into the world with your presence.

Since I am a professor of art therapy, Greg would sometimes ask me to reflect and analyze his paintings. I told Greg that I was interested in his own interpretations of his art. Some of his comments on his recurrent symbols which were interesting are “sexual images are life force images,” and “icons can be illusions.” (Personal communication, 1999)

I knew Greg for 13 years. Our chats often happened spontaneously when I saw him in coffee shops. I have fond memories of spending time with him. Greg was interested in art therapy but he was concerned about how art therapy might affect the creative process.

As an art therapist, a professor, an art teacher and a researcher in art development, my exploration of art materials assists my understanding of the psyche. When I do not have the opportunity to create, I can become out of touch with understanding the language of imagery. I tend to view my art from aesthetic and emotional criteria. I do not look at every pictorial representation as a puzzle with hidden meanings. I prefer to view art as Picasso allegedly said, “Every picture can be a self-portrait.”