

IDENTITY *and* ART THERAPY



PERSONAL AND PROFESSIONAL PERSPECTIVES

Maxine Borowsky Junge

(With 22 Other Art Therapists Contributors)

Borowsky

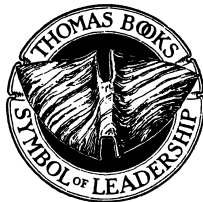
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CONTRIBUTORS

Pat B. Allen, PhD, ATR, HLM, is an author, artist, and art therapist. Her books—*Art Is a Way of Knowing* (Shambhala, 1995) and *Art Is a Spiritual Path* (Shambhala, 2005)—explore the borders between art, psychology, spirituality, and social action. She lives in Ojai, California, exploring her passion for the landscape.

Charlotte Boston, MA, ATR-BC, has provided art therapy services for more than 28 years in the mid-Atlantic region of the United States. Her experiences include clinical work with various populations and age levels of inpatient military and residential patients with a broad range of diagnoses. She has served as Director of Expressive Therapy and Clinical Director in inpatient settings. She has been an art therapy supervisor, consultant, and lecturer and is currently Adjunct Professor at the George Washington University Art Therapy master's program.

Sarah Deaver, PhD, ATR-BC, has been an art therapy educator, researcher, and clinician over 25 years. A professor at the Eastern Virginia Medical School (EVMS), her scholarly interests include art therapy educational theory and practice as well as art therapy and efficacy research. At EVMS she is the Research Director of the Graduate Art Therapy and Counseling Program, teaches the program's research curriculum and ethics course, and provides clinical supervision to students. She has presented prolifically and has published numerous articles and book chapters. She is the incoming president of the American Art Therapy Association.

Elizabeth Donahue, MA, ATR, LMHC, joined the Antioch University–Seattle faculty as an Adjunct in 2010 and is now full-time teaching faculty. She has worked as an art therapist in a community mental health setting and a residential treatment facility for adolescents and maintains a private practice in Seattle, where she specializes in the treatment of children and adolescents who are experiencing symptoms related to depression, anxiety, and trauma.

Nancy Gerber, PhD, ATR-BC, LPC, is Clinical Associate Professor and Director of the Doctorate in Creative Arts Therapies and former Director of the master's degree in Art Therapy at Drexel University in Philadelphia. She has presented and published on art therapy assessment, doctoral education for art therapists, mixed methods research, and art-based research. Dr. Gerber was the first recipient of the Distinguished Educator's Award from the American Art Therapy Association.

David Gussak, PhD, ATR-BC, is Chair of the Department of Art Education and Clinical Coordinator of the Graduate Art Therapy Program for Florida State University in Tallahassee. He has published and presented extensively on art therapy in correctional settings and with violent and aggressive clients. His latest book, *Art on Trial: Art Therapy in Capital Murder Cases*, is available from Columbia University Press. With Marcia Rosal, he is currently at work on *The Wiley-Blackwell Handbook of Art Therapy*.

Janice Hoshino, PhD, ATR-BC, LMHC, is Chair of Art and Drama Therapies Programs and faculty member in the Marriage and Family Therapy Program at Antioch University, Seattle. She received her doctorate from U.S. International University (now Alliant) in San Diego. She has previously taught art therapy at Marywood College in Scranton, PA, and Emporia State University in Kansas and is a board member of the Art Therapy Certification Board (ATCB.) Her publications include *Family Art Therapy* (co-author) and the "People of Color in Art Therapy" series (co-author) in *Art Therapy, Journal of the American Art Therapy Association*. Her primary focus is multiculturalism, and she received the Pearlie Robison Award from the American Art Therapy Association for her work in multiculturalism.

Don Jones, ATR-BC, HLM, is a full-time artist-clinician, painter and sculptor, and founder and past President and Honorary Life Member of the American Art Therapy Association and the Buckeye Art Therapy Association. He worked six years at the Menninger Clinic in Topeka, Kansas, and retired from Harding Hospital in Ohio after 22 years. In retirement, he continues with private studio practice, workshops, mentoring, lecturing, consulting, and working artfully with those wanting to be "weller-than-well."

Karen Rush Jones, MA, ATR-BC, is an art therapist and artist of more than 35 years. She has worked in psychiatry, teaching, and, most recently, bereavement services with HomeReach Hospice in Columbus, Ohio. She says, "Making art is a way of attending to one's own life. The interior landscape is as

real and important as that of the exterior world.” Jones is co-author with Don Jones of the essay in this book, “Why Art Therapists Must Make Art.”

Frances F. Kaplan, MPS, DA, ATR-BC, holds a doctorate in art therapy from New York University. She has extensive experience teaching, practicing, publishing and presenting in the field and is the author of *Art, Science and Art Therapy*, and *Art Therapy and Social Action*. She is currently at work on a book about art therapy assessments. Dr. Kaplan was the Executive Editor of *Art Therapy, Journal of the American Art Therapy Association*. A past director of the art therapy Master’s program at Hofstra University, she has taught at Marylhurst University in Oregon since 1997.

Myra Levick, PhD, ATR-BC, HLM, established the creative arts therapy program at Hahnemann Hospital and Medical College (now Drexel University) in Philadelphia, the first graduate art therapy program in the United States. She is one of the founders of the American Art Therapy Association and its first president (1969–1971). She was editor of *The Arts in Psychotherapy: An International Journal* and has published many books and articles. Dr. Levick’s books center around children’s art and their developmental processes. Some are *They Could Not Talk and So They Drew: Children’s Styles of Coping and Thinking* and *See What I’m Saying: What Children Tell Us Through Their Drawings*. Her 2009 publication is the *Levick Emotional and Cognitive Art Therapy Assessment: A Normative Study*. She lives in Florida.

Debra Linesch, PhD, MFT, ATR-BC, is Chair and Director of the Graduate Program in Marital and Family Therapy, Specializing in Clinical Art Therapy at Loyola Marymount University (LMU). She is the author of many articles and five books, including *Adolescent Art Therapy*, *Art Therapy With Families in Crisis*, *Celebrating Family Milestones Through Art Making*, *Facing Genesis: Visual Midrash*, and *Midrashic Mirrors: Creating Holiness in Imagery and Intimacy*. She developed LMU’s Art Therapy in Mexico collaboration with Universidad Iberoamericana, an intercultural training, research, and service endeavor, and she is currently establishing a research institute in the department.

Cathy Malchiodi, PhD, LPCC, LPAT, ATR-BC, HLM, is the President of Art Therapy Without Borders and Director of the Trauma-informed Practices and Expressive Arts Therapy Institute. She has written and/or edited 18 books including *The Art Therapy Sourcebook*, *Handbook of Art Therapy*, *Art Therapy and Health Care*, and *Understanding Children’s Drawings*. Dr. Malchiodi has given more than 350 invited keynote addresses, workshops, and courses

throughout the United States and internationally. She is an Honorary Life Member of the American Art Therapy Association and received Kennedy Center Honors for her international work in art therapy. She is also a syndicated writer for *Psychology Today* and gave the very first TEDX talk on art therapy in October 2012.

Mercedes ter Maat, PhD, LPC, ATR-BC, is the current President of the American Art Therapy Association. She is an art therapist and Associate Professor of Counselor Education in the graduate programs at Nova Southeastern University in Fort Lauderdale, Florida. Dr. ter Maat practices, teaches and conducts research in the areas of ethics, multicultural counseling and risk, and protective factors of cultural minority families and youth.

Brenda Maltz, BA, RN, CCM, is working on graduate studies and mental health counseling at Antioch University, Seattle. She is transitioning to the field after more than 30 years as a nurse and case manager specializing in the care of trauma patients and adults with chronic illnesses. She is a sculptor with bronze pieces in private and public collections across the United States.

Kim Newall, BFA, is currently pursuing her graduate degree in art therapy and mental health counseling at Antioch University, Seattle. She is an artist-in-residence and educational consultant in the arts throughout Washington state, working with children and adults in educational settings. Her passion for psychology, creativity, and spirituality has finally found a synthesis in the field of art therapy.

Jordan Potash, PhD, ATR-BC, REAT, LCAT, is faculty, consultant and Expressive Art Therapy Program Coordinator at the Centre on Behavioral Health, University of Hong Kong. He is primarily interested in the applications of art and art therapy in the service of community development and social change, with an emphasis on reducing stigma, confronting discrimination, and promoting cross-cultural relationships.

Arthur Robbins, EDD, ATR, HLM, was Professor of Creative Art Therapy at Pratt Institute in New York City and was a founder of the program. He is also the founding director for the Institute for Expressive Analysis. He is a licensed psychologist and psychoanalyst as well as a sculptor. His books include *Creative Art Therapy*, *The Artist as Therapist*, and *The Psychoaesthetic Experience*. Dr. Robbins' memoir appears in Junge & Wadeson's book, *Architects of Art Therapy, Memoirs and Life Stories*.

Marcia L. Rosal, PhD, ATR-BC, HLM, is Professor and Director of the Florida State University Art Therapy Program. She is a past president of the American Art Therapy Association (AATA). Throughout her career, she has chaired numerous AATA committees and continues to serve on the Conference Program, Honors, and Research Committees. She was the Founding Senior Editor for the *Journal of Art for Life* (2009–2012) and is on the editorial boards of *The Journal of Art for Life*, *Clinical Art Therapy* and *The Arts in Psychotherapy*. She has lectured nationally and internationally and is a Fullbright Scholar. Over the years, she has published numerous articles and chapters on art therapy. With David Gussak, Rosal is currently at work on *The Wiley-Blackwell Handbook of Art Therapy*.

Judith A. Rubin, PhD, ATR-BC, HLM, is past President and Honorary Life Member of the American Art Therapy Association. She is Professor Emerita at the Pittsburgh Psychoanalytic Institute and a faculty member at the University of Pittsburgh. She is the author of six books and ten films about art therapy and is President of Expressive Media, Inc. (<http://www.espressivemedia.org>). Two of her books are *Child Art Therapy*, *Art Therapy: An Introduction* and *Approaches to Art Therapy*.

Gwendolyn McPhaul Short, MA, ATR-BC, lives in Washington D.C., and received her degree from George Washington University. Since 1976 she has served on many committees of the American Art Therapy Association and assisted with the creation of the film, “Wheels of Diversity: Pioneers of Color in Art Therapy.” Her memoir appeared in the “People of Color” series in *Art Therapy, Journal of the American Art Therapy Association*.

Harriet Wadson, PhD, LCSW, ATR-BC, HLM, has directed art therapy programs at the University of Houston, the University of Illinois, and Northwestern University, over a period of 35 years. She has published eight books on art therapy, approximately 70 papers, and numerous chapters in psychology and art therapy texts. She is a frequently invited national keynote speaker and an international guest lecturer in 14 countries and has led professional delegations to many of them. Dr. Wadson has received awards for her artwork, her educational contributions and her research, including a first prize from the Smithsonian Institute for art, a Distinguished Faculty Award from Northwestern University, the Benjamin Rush Award from the American Psychiatric Association, and a Resolution of Commendation from the Illinois Legislature.

*For Benjamin,
With love*

Works by Maxine Borowsky Junge

A History of Art Therapy in the United States
(With Paige Asawa)

Creative Realities, the Search for Meanings

Architects of Art Therapy, Memoirs and Life Stories
(With Harriet Wadeson)

Mourning, Memory and Life Itself, Essays by an Art Therapist

The Modern History of Art Therapy in the United States

*Graphic Facilitation and Art Therapy,
Imagery and Metaphor in Organizational Development*
(With Michelle Winkle)

Identity and the Art Therapist

PREFACE

Nearly every morning I walk with my dog Betsy through the woods near the Margurite Bron Dog Park on Whidbey Island in Washington where I live. Some years ago, I walked on the headlands of Mendocino, California, with the ends of the coastal land—the rocky bluffs—open to the crash of the ocean; constant attention needed to be paid to stay firmly on the uneven path. Unlike Mendocino’s expansiveness, in the woods where I walk now, tall evergreens of the Pacific Northwest woods form a protective and silent cozy cradle where only flashes of light come in and where I can dream. With fall winds, Betsy wears her red and black checked coat, and evergreen needles come down to form a brown carpet on the path. I watch leaves dry up, turn yellow, and float from the Bigleaf Maples, and I hear my footfalls crunching. In winter, rains appear and sometimes ice and snow, and then, always a surprise and as if by magic, spring green flows as the leaves fluff out the trees and make them dense again. On those daily walks, I fantasize, construct, and, ultimately, write my books. Of course, when I get to the computer, the words and phrases are nowhere near as striking as those I find in the woods. I once concocted a theory that if one goes outside on a wet foggy night, all the lost bits from computers can be seen hanging in the trees.

Identity, the subject of this book, can be a huge muddle; it is nowhere near as neat or coherent as it is usually thought to be nor is it as opaque as the leaves in the woods. Depending on perspective, identity can and does vary by context. Transparent, it shifts constantly, is always malleable, and is intensely fluid—full of contradictions, tensions, and paradoxes existing together, often making little logical sense. Still we talk and write of identity as an “object” as if we could capture it and pin it to a board to study.

I have been thinking about art therapy identity and its development for many years—before I became an art therapist and certainly since. With the variety of books I have written with their vastly different foci, it must appear to some that I’m harboring a diagnosis of Attention Deficit Disorder. But visible or not, there is an overarching meta theme flowing through all: Implicitly, my books are about identity—my own and art therapy’s—and about

how the field of American art therapy positions itself on art, psychology, clinical practice, and education.

Although seldom formally discussed, throughout my career, most of my writing has been an attempt to describe and proclaim art therapy's identity. *The Modern History of Art Therapy* (2010) and before it *A History of Art Therapy in the United States* (1994) are examples, in that a profession must have a coherent, contextualized, and preferably *written* history and identity to move forward—and American art therapy does.

It is my suspicion that art therapists consciously and unconsciously think about identity as they go about their day-to-day business; its shifts, twists, and turns have provided a basic truth for the field. Identity has been vociferously argued forever, openly and behind the scenes in organized art therapy, overtly and directly and in unconscious, subliminal language. This book is my attempt to afford art therapy identity the out-front and clear position it deserves. Despite my efforts toward clarity, there will nevertheless remain here many contradictory notions, often paradoxically existing at the same time. That is the nature of identity and of art therapy's identity.

I remember a panel at a long-ago American Art Therapy Conference, which asked, "If you were awakened in the middle of the night and asked the question, 'Are you an artist or a therapist?' what would you answer?" Panelist Robert Ault replied, "An artist!" The question implies that there are only two correct answers and that art therapists may innately be more one than the other. I reject this idea and propose that "art therapy" is neither a form of artist nor a form of therapist, but rather a *whole new field*—a separate and special profession with core values and attributes of its own that must lead to a special and separate identity.

Chapter 1 is the "Introduction" to this book. In Chapter 2, "Images of Identity," I lay a basic groundwork describing definitions of personal and professional identity and discuss the concept of "intersectionality." Then the history and evolution of identity in the field of American art therapy are described. Finally, I argue for art therapy as a new profession that is not simply an offshoot of either art or therapy.

Living and surviving in the real world is a particularly tricky pathway for art therapists with hazards suddenly appearing out of the darkness, like skeletons in a carnival ride. Chapter 3, "Living in the Real World," discusses some unique problems faced by art therapists as they strive to achieve personal and professional identity and credibility. In Chapter 3, I describe challenges that art therapy currently encounters and, in particular, discuss dual-degree educational training programs and what they may mean to identity.

Chapter 4, "Essays on Identity by Art Therapists," contains twenty-one essays by prominent art therapists who were invited to contribute their ideas.

A prelude to this chapter is a list of Contributors. These essays can be considered different “readings” of what identity is in the art therapy field. I invited people with different ideas and from different “generations” to participate. As it turned out, most of the art therapists who wrote essays have been in the field for a number of years and are intimately acquainted with the field’s evolution. Two contributors are students. I said that honesty and a willingness to express one’s opinions were crucial. I wrote, “This is your opportunity to say some of those things you may have been thinking for a long time” (Appendix A is “Letter to Potential Book Contributors”). To art therapists who agreed to participate, I sent “Fifteen Defining Questions,” which I invited them to use in their essays or not (these questions appear as Appendix B). The essay chapter concludes with a “Summary” outlining characteristics of the group of writers and illuminating major repetitive themes.

Chapter 5, “Identity Initiative, Steps Toward a New Definition: An Action Plan,” describes a two-year process, including all segments of the art therapy community to achieve and promulgate a shared public professional identity. Chapter 6 underscores “Conclusions.”

Curious to discover some baseline information about identity for students entering graduate art therapy programs, I constructed a brief questionnaire and contacted three art therapy master’s program directors who agreed to conduct my survey with their entering students in fall, 2012. In addition, I searched out a few recent graduates to get some ideas about the nature of their identity when people finished their graduate programs and began their careers. These mini-surveys were not formal, scientific research studies and should not be considered as such, nor were they intended to evaluate the programs concerned. I merely hoped to generate some ideas about identity from these specific populations of art therapy students and graduates.

While I have tried to be fair and objective, the ideas in this book (except for the essays) are obviously my own, and I assume there will be some, perhaps many, who will disagree and want to argue. In large part, an important and essential discussion of the nuances of identity by the art therapy community is a significant intention of this book.

Identity and Art Therapy is primarily written for art therapists—experienced ones and novices. It is for those who teach them now and for people thinking about entering the field in the future. In addition, this book has a frankly acknowledged social action goal: By bringing into the light and illuminating concepts of personal and professional identity in American art therapy as it has been and is now, I hope to clearly show that identity *IS a core issue for art therapy*, which needs careful reexamination and definition for the 21st century.

I am fascinated with the development and history of the healing professions in general, and I suspect that they have similar and perhaps even uni-

versal evolutionary stages. *Identity and Art Therapy* may be of interest to mental health professionals of all stripes who can find reflections of their own struggles in this story. Implicit, but not directly spoken of, in much of the clinical writing by art therapists is some sense of personal and professional identity. Nonetheless, this is the first book to explicitly focus on issues of identity and to ask art therapists to publically give voice and presence to their ideas.

During its history, American art therapy has grown up and come of age. In this book, I have asked art therapists to think and write carefully about their own identity and that of the profession and to make suggestions for moving forward. I have tried to do that myself. The last chapters of the book then will be a suggested series of action steps to be taken by the art therapy community, educational programs, and the professional organizations, which I believe could help art therapy continue to survive and effectively grow.

ACKNOWLEDGMENTS

I am most grateful to all the art therapists who recognized that identity is an essential issue and took the time to write an essay for this book, when they had many other things to do. Their thoughtful words reflect a variety of viewpoints, and many contain fine suggestions for change.

Over my writing time, I have discussed many of the ideas in this book. I thank all those who were so willing to informally dialogue with me about the issues, over lunch, over drinks, around the fireplace, and driving in the car. My “Uninstructed Drawing Group” gets a loud clap for being ever provocative, useful, and pleasurable.

In particular, I thank Dr. Sarah Deaver of Eastern Virginia Medical Center for her help and knowledge of research in art therapy; Dr. Donna Kaiser, Director of Art Therapy Programs at Drexel University; and the directors of art therapy graduate programs who gave my questionnaires to their beginning students and new graduates. This population added data and insights and has my appreciation.

Scott and Jason of Lincoln Computers on Whidbey Island have kept me rolling technologically, and Chris Dennis took the pictures of my drawings for the cover and for the “About the Author” section.

My son, Benjamin Junge, Associate Professor of Anthropology at SUNY, to whom this book is dedicated, deserves more than my thanks. His steadiness, willingness to listen to my ideas and add his own, deep knowledge, and thoughtfulness have made this a much better book. In addition, he is my first line computer expert—always patient. And he doesn’t try to teach me how to do it—he simply tells me how, so I can go on.

Michael Thomas of Charles C Thomas Publishers has published all but two of my books. He is the perfect publisher for me—supportive, helpful, and non-intrusive. I appreciate his humanity and that of his staff. His consistent publication of books over the years in and about art therapy must be mentioned as a major contribution to the identity of the profession.

I want to single out Trevor Ollech of Charles C Thomas, who has created the exceptional cover designs for my books. His work embodies creativity,

uniqueness, and collaboration. I have been very lucky with his contributions, which I believe make an immense contribution to my work.

It is perhaps atypical to mention those people in one's life who helped through some very dark times, but there were many during the writing of this book. I expect they know who they are. I certainly hope so.

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IDENTITY AND ART THERAPY

The mind that has conceived a plan of living
must never lose sight of the chaos against
which that pattern was conceived.
–Ralph Ellison, *Invisible Man*

Chapter 1

INTRODUCTION

In this book I explore the crucial issue of art therapy identity. In preliminary chapters, I lay out definitions and challenges of the field as it attempts to continue to establish its credibility, values, and uniqueness. The next portion of the book is 21 essays—readings on identity by art therapists. Here the reader will find many differences, some confusion, and a little agreement. This is exactly the point of the book: I want to open a dialogue about what I believe is a seldom discussed and yet extraordinarily important issue. In the final chapters of the book, I outline a potential Action Plan for the art therapy community to take art therapy forward into what I hope will be an invigorating and exciting future.

Poet T.S. Eliot wrote about the end being the beginning. The end, he said, is where we start from, and as we explore, we return again to the beginning where we can really know it for the first time. My intention in this book is to shine a strong light on art therapy identity, in both its personal and professional vicissitudes at this unique historical time—the beginning decades of the 21st century. Looking back to see where we have been may enable us to go forward with more clarity and effectiveness. While what emerges may not all be pretty images, I believe it is a central necessity to understand what identity has been for art therapists individually and collectively and to recognize art therapy identity in its history as it ebbed and flowed and sometimes seemed a confusing and wrongheaded muddle. As William Faulker (2011) wrote in *Requiem for a Nun*, “The past is never dead. It’s not even past.” We need to understand the polarization and competitiveness that initially apparently gripped the field and, some would say, still exists

today. Finally, envisioning the leadership role that art therapy's most visible professional organization, the American Art Therapy Association (AATA), has played and continues to play today can lend clarity to what must be essential strategies for the profession of art therapy.

A slippery and confusing concept, individual identity often exists in considerable tension with concepts of group identity. Art therapy as a community has had a stunning history, in large measure built on its special core values of creativity in therapy. In many ways, it is amazing that art therapy has done as well as it has. But perhaps we have come now to be victims of some of our own success. While art therapy remains a relatively small profession, and probably always will, it holds within its reach and ambitions similarities to other evolving mental health professions, and, therefore, a reasoned inquiry is doubly important.

In the last 40 years or so, educational programs have trained and graduated art therapists across America. Typically, they emerge from the protective cocoon of graduate school into the reality of a highly competitive world of work and into a nation where the mental health system is financially unsupported, crumbling, and in dire straits—and it has been for a long time. Art therapists, like other students, often graduate with large loan debts that can impact their lives negatively for years to come.

I was an art therapist before I knew the words and before there was an established field of art therapy. Passionately interested in art since early childhood, I was always making art, trying to understand it and how it affected others. I grew up in Los Angeles during the McCarthy and Blacklist era. My father was a movie writer and professor of screenwriting and playwriting at UCLA. My mother had been a costume and scenic designer in New York Theater during the W.P.A./Depression era who became deaf in Los Angeles. Both my parents were painters.

My mother and father regularly had parties where conversation was central. In this innovative and flourishing world, writers and other Hollywood intellectuals, along with historians and psychoanalysts, talked ideas and politics. I remember the living room of our house on Forrester Drive where these gatherings took place. I remember sitting on the slip-covered yellow, orange, and blue couches that my mother had bought at Goodwill listening to the fascinating talk going on. From an early age, I was allowed to sit in. Listening quietly, I learned from the

best. Sitting in, but seldom speaking (I was a child, after all), I picked up huge amounts of cultural information and learned how to effectively express ideas, take apart and tease out concept's meanings, argue, and, perhaps most importantly, to hear and understand the subtext underneath the obvious. These listening and subtext skills served me well when later I became an art psychotherapist. Perhaps I also realized my identity then as an outsider. From my parents, I learned a model of social justice, courage, and action during the McCarthy and Blacklist years, which engulfed the movie business and large portions of the United States.

I formally entered the art therapy field in 1973 and began teaching in Helen Landgarten's master's program at Immaculate Heart College in Hollywood, California—the first art therapy educational program in the West. Helen invented the term “clinical art therapist.” By this, she meant an art therapist who was not necessarily a member of an inpatient psychiatric treatment team, but one who could carry the whole responsibility of the case, was “equal” in training to other mental health professionals, and who could function in outpatient psychiatric clinics.

In those days, before most people had any idea of what art therapy was or could be, Helen and I evolved a strategy for making art therapy known within the region by creating jobs for graduates; we considered it the crucial first priority, and, as good as our art therapy education was, we believed if a graduate couldn't get a job, it didn't matter. For us, excellent education was always tied to employment and awareness and expansion of the field. Sadly, many art therapy programs, historically and currently, do not integrate education and employment together in this way.

Helen and I reasoned that the way to expand knowledge and awareness of art therapy was to train the best clinicians we could and provide internships for them in local mental health clinics. We would show off the quality of art therapy through the superb students we trained. Many graduates were later employed by their internship sites or in other facilities. Once an art therapy “slot” was established at a clinic, we made sure it was passed on and continued.

Previously, Helen and Frances Anderson had carried out a series of studies concerning knowledge of the art therapy field. They sent a survey to mental health clinics asking, among other things, whether they would like an art therapy intern (Anderson , 1973; Anderson & Land-