

ATOL: Art Therapy OnLine

Covid-19 Creativity or Collapse?

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A few days before lockdown, a service user I was working with took their own life, it was the final shocking act of a long, painful, irresolvable journey for us both and I was shaken to the core of my identity as an art therapist and in many ways as a human being. Perhaps in some way this made the total shut down of ordinary life more bearable. The clocks had stopped for everyone with the collective shock of Covid, and I needed some time to think, read, reflect, and grieve.

Much of what is written about the suicide of a patient describes the stages of mourning common to any loss of a loved one. It is not uncommon to experience it as a trauma: reliving the event and ruminating about what one did and didn't do. We can feel intense shame at our perceived failure in the face of our colleagues' apparent competence. (Horn, 1994; Grad, Zavasnik, Groleger, 1997; Valente, 2003; Tillman, 2005; Causer, et al, 2019). Campbell and Hale (2017) describe the huge sense of personal failure and how attacked, isolated and invalidated one can feel by the patient who has essentially fooled us and 'triumphantly shown our inadequacy.....that [their] wish for self destruction has been greater than our capacity to keep them alive' (p.91). We can try to diminish stress by intellectual or rational retreat or become risk averse in an attempt to reassert our control over that which is unpredictable or unknown (Campbell and Hale, 2017). Might these also be collective responses in the aftermath of the pandemic?

There is an emerging consensus that Covid-19 is a collective trauma (Stubley, 2020; Lloyd and Usiskin, 2020; Malchiodi and Gray, 2020; Spring, 2020). We have all been encouraged to see one another as asymptomatic carriers of an unknown threat, magnifying attachment wounds yet unable to co-regulate through proximity to others. If we have been exposed to a threatening environment, from which we perceive there is no escape, we may involuntarily freeze and for many, lockdown may feel like a similar paralysis. It is this inability to escape that creates 'fear without solution' Hesse & Main, (2006). We become unable to enter a state of relaxation, regulate our emotional responses to threat, or access higher cortical functioning (Porges, 2017). In severe or enduring trauma we may become stuck in this perpetual state of threat and our ability to perceive danger or read others' intentions can become severely compromised.

In many ways COVID-19 has accentuated these features already present in society Lockdown froze us: Suffocation and oppression became a collective metaphor which

ignited long-standing real issues, mobilising us to fight in the form of mass protest with BLM.

My initial response to all of this was to turn to the more introspective and personally expressive art making that underpins my therapeutic practice to help me process the loss (Figures below).



Figure 1: *Mother*. Hall, J (2020). Mixed media on paper

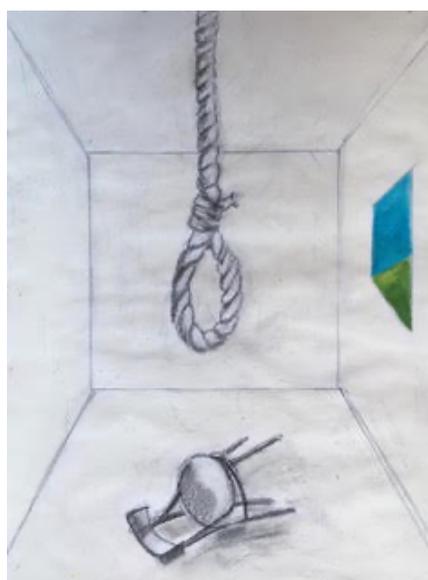


Figure 2: *This is really where it happened*. Hall, J (2020). Pencil and acrylic on paper



Figure 3: *Peace or Pain?* Hall, J (2020). Acrylic on paper



Figure 4: *Caught up in the middle of it.* Hall, J (2020). Acrylic on paper

However I also started to realise that a key part of my on-going recovery was being worked out through a life drawing class I discovered on line. Here the naked visceral vulnerability of the body, which would have somehow felt too painful to contemplate at that time was replaced with clothes and props. Drawing the body, brought me into my body too. As Maggie Hambling (2020) states "if I am properly identifying with the subject I become the subject". Perhaps it was similar to what Maurice Merleau-Ponty (1964) named the 'carnal formula'. He described an artist's vision as not a purely representational process, but something that is recognised and resonates viscerally throughout our bodies because we are inseparable from the external world. Healing

trauma is an embodied process and the 'body' was/is under attack both personally and collectively.



Figure 5: *Curtly*. Hall, J (2020). Charcoal and watercolour on paper



Figure 6: *Mateo*. Hall, J (2020). Chalk pastels on paper



Figure 7: *Mateo*. Hall, J (2020). Acrylic on paper

Being part of a virtual group gave me just enough anonymity and connection. The external experience of the small windows of various virtual platforms where the work is shared allowed me to rebalance my own internal critical gaze with the external gaze of an enjoyable shared experience, thereby reinforcing my good internal objects. In this context, looking outside myself and trying to visually understand something about the essence of another person seemed to parallel therapy. The format lends itself to both real connection and fragmented projections. The straight-on close-up of the model creates a paradoxical intimacy as they appear to be looking directly at you.



Figure 8: *Monika*. Hall, J (2020). Charcoal and watercolour on paper



Figure 9: *Frieda*. Hall, J (2020). Charcoal pencil and watercolour on paper



Figure 10: *Monika*. Hall, J (2020). Chalk pastels on paper



Figure 11: *Danni*. Hall, J (2020). Pencil and watercolour on paper

I recognised that I was becoming overly risk averse with people on my caseload and that unconsciously I'd been working this out through my drawing. Responding to the subtleties of movement within the pose rather than a still shot after the event was thrilling, I had to do what I could in the time I had, which is all any of us can do with the life we have. I saw this as a drive towards life in the face of death.

Life drawing also restored my capacity to tolerate the unknown. Rebecca Salter (2020) puts this so well: 'You actually work the whole time with the possibility of failure and the certainty of uncertainty, when you're working on a drawing every mark you make could ruin it'. Taking risks in mark-making, allowing them to be incorporated into the bigger picture or tolerating their incongruity is an acceptance of loss. It is part of mourning.

Covid 19 has magnified how we value life and how we manage death. Lockdowns exposed the deep fissures in society in and how deeply embodied we are as beings, dependent on one another to sustain meaningful lives. Without seeing each other in the other's eyes we fail to find ourselves. We have a collective relationship to this virus, whose capricious strategies for survival meet our own adaptive response to the threat of annihilation. We end up precariously struggling to balance our need for intimacy with the necessity of distance. The crisis is simultaneously an external and internal one, and my personal reflection and exploration through the art-making process has been invaluable for my own process of recovery from traumatic events.

About the Author

Jessica Hall is an Arts Therapies lead working in an adult community setting for Hertfordshire Partnership NHS Foundation Trust. She is an Associate Fellow and visiting lecturer on the M.A in Art Therapy at University of Hertfordshire.

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