

ATOL: Art Therapy OnLine

Crafting The Visual Voice: Art As Agency In Studio Art Therapy

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Abstract

The art therapy studio model has important implications for practice that include the role of the facilitator and the social setting of the therapeutic space. The studio environment brings art making to the forefront as a communal connected activity. The Artist Mentoring Program (AMP) is a supportive studio group of adults with experiences in the mental health system. This ten-year studio art program provide a unique lens to examine the role of community and creative agency within the context of recovery in mental health. The studio is viewed as a unique, nurturing, relational environment that allows group members to self-determine and develop individual visual voices. The artwork of one artist member serves to illustrate how ongoing aesthetic engagement can provide a path to independence and transformation.

Keywords

studio art therapy, social connection, mental illness, recovery

Art-making is a central focus in studio art therapy, which is grounded in visual aesthetic practice. Studio art therapy exists within a continuum of practices. Understanding what distinguishes art therapy in a studio context from the other visual arts is best illustrated by the considering of practices and adaptations to specific populations and settings (Hogan 2009; Moon 2002). Aesthetics in art therapy that best apply to the Artist Mentoring program (AMP) include aesthetic sensibility (Henley 1992, 1995) and, aesthetic regard and empathy (Franklin 2010; Wix 2010). Each of these aspects stems from Kramer's 'art as therapy' approach and an orientation of artistic practice (Kramer 2000: 20). Kramer's concept of the 'third hand' established that the aesthetic development and formation of an image can be intentionally and directly intervened upon by the art therapist (Kramer 1986: 71). The 'third hand' is a direct and sensitive therapeutic intervention which values art as an integrative process of sublimated expression. Art as therapy emphasizes both the process and product as essential elements of the art experience. Furthermore, Kramer's orientation demonstrated the contribution of an informed use of materials and the therapeutic experience inherent in the art-making process (Wix 2010).

Henley's (1992) reference to 'aesthetic sensibility' includes the expression, motivation, and intention of the artwork (p.153) and is adopted from Kramer's continuum of aesthetics. The practice of the 'third hand' and the discernment of the quality of an artwork are both considered empathetic interventions, used only when a strong therapeutic alliance has been formed. For Henley, the inclusion of formal aspects of evaluating art can provide the client with direction in art-making, as well as a motivation for exploration. Franklin (2010) and Wix (2009) both linked aesthetics to empathy. Franklin (2010) stressed the needs of the client as a central motivation in art therapy. The act of viewing visual aesthetics is based on 'feeling into' an artwork (p.161); regarding an image becomes an act of contemplation. Additionally, Wix (2009) considered 'aesthetic empathy' as being rooted in the sensory explorations of the art-making process (p.154). The process of making art and the perception of the image are embedded in the artist's self-knowledge and inner nature.

Participants in an art therapy studio setting focus on developing personal art-making in a nonjudgmental and inclusive atmosphere (Allen 1995; McGraw 1995). Wood (2000) detailed and compared traditional art therapy studio environments with contemporary practices of art therapy, with each lending itself to a different approach. An older studio model is described as, 'where it is possible to work, whether seated or standing, at a shared table, at an individual table or in a slightly concealed place' (p.6) which is contrasted with a contemporary studio environment as having 'a cool, uncluttered ambiance to the room that has been thoughtfully put together' (p.46). Both are constituted of the physical elements of the group space that potentially impact on art-making and also reflect the personality of the practitioner (Moon 2002).

As a non-judgmental and inclusive atmosphere, the art therapy studio provides an intersection between artmaking and relationship that includes social and relational aesthetics. Wix (1995) described the studio as a 'web-like structure of connectedness' (p.175), while Franklin (2010) cited the neurological interconnections embedded in relationships. Moon (2002) posited that the inclusion of social factors in a milieu-based studio setting elicit a relational holding environment. As a social network, the studio can be regarded not only as a base for relational aesthetics, but also as a guide that directs practice.

Historically, art-making is a social activity that reflects the cultural fabric of a practice community. Dissanayake's (1992) concept of 'making-special' posited art-making as a universal phenomenon that embeds social meaning-making through the act of invested embellishment (p.175). Gilroy (2004) acknowledged that the social base is a neglected aspect in the theory and practice of art therapy. The art therapy studio offers a contrasted social matrix between the role of the art therapist on the one hand, with the focus and authority of invested art activity on the other, creating an egalitarian atmosphere. Aesthetic creativity can further be valued as a social act to 'foster and deepen bonds with oneself, others, or the larger community' (Moon 2002: 142). Art-making as a social act can provide an alternative path of

practice, where the psychological lens of the practitioner is superseded by the relational healing atmosphere of social creativity.

The Artist Mentoring Program (AMP) developed from a support group for artists in the mental health system, which I co-facilitated with another art therapist and educator. When group members stated that they were interested in making art, the AMP was established and relocated to art-for-all studio, an art-based private practice in a semi-industrial artists' building located in the heart of an active art community. The small industrial building was in a residential neighbourhood. Members entered the building as individual artists with no mental health agencies in sight; the group space was one studio on a floor shared by other artists' in the building.

For AMP participants the studio became what Allen (2008) considered 'a place of all possibility' (p.11). The studio building was located at the centre point of the city's lively art community. Prior to the formation of the AMP I was an active member of this community. While personal art making was important for my well-being and identity as an art therapist, up until the relocation of the AMP, my art practice had remained separate from my art therapy practice. As an exhibiting artist, I understand the need to share and display completed artworks. By and large I was able to extend and share my knowledge of this artists' community through facilitating exhibition opportunities. Members of the AMP were able to step beyond the walls of the studio and establish an artist-self in the broader community. Through an annual exhibition event, AMP artists became familiar with other artists in the building, community and overarching groups. Group members were able to experience themselves as practicing artists with a sense of agency beyond the walls of the studio.

All AMP artists had had experiences in the mental health system. Group membership ranged between three to nine artists, the male to female ratio shifted depending on the size, members tended to be over 40 years of age and most received social services. Group members arrived to the program in a number of different ways – some had cars, some took taxi cabs, and others

used a range of public transportation. Artist members came with a range of experiences and exposure to art-making. One longstanding member had been an art teacher and practicing watercolorist, another was self-taught, while others had become exposed to art-making through art psychotherapy groups.

The cornerstone of the AMP was an interactive social system where participants were able to witness each other create a body of artwork. Overall, the focus of art-making was based on meaningful engagement and exploration. Artist members were invested in growing their individual skills and came to experience a sense of accomplishment with each completed artwork. While there were no formal art critiques, artworks were viewed as steps in self-discovery and experimentation and risk-taking became a valued act of growth. Engagement in critique varied from artist to artist. Some artist members requested little to no feedback, content with the acknowledgement that they had completed a work, while others wanted to understand what was most successful or unsuccessful in each artwork. Group members came to understand that making art elevated their self-worth, and that taking risks was directly connected to their sense of accomplishment and self-esteem. The motto 'there are no mistakes' was often cited when providing feedback and support to one another. This established a sense of understanding that expression was not a unique singular event, but something progressively built. The artists in the AMP group followed their unique visual languages while remaining open and inspired by the media and imagery of the artwork created by others in the program. Mutual respect was garnered by looking, valuing and acknowledging the growth that was present in each artwork as it was created.

While it was understood that group members all shared the experience of mental illness, the specifics about diagnosis and intra-psychic issues were not the focus of the group. At times, there was group discussion about experiences with mental health services but the central point remained positive in how to best navigate the system of care. A long-standing group allowed for key life events to be supported. There was ongoing

acknowledgement of the impact of stress and change, such as loss, grief and medical ailments that impacted the lives of group members. However, the point of convergence remained the ongoing engagement in making art. The productive hub of art-making in a setting divorced from the mental health system allowed AMP artists to re-experience themselves outside the confines of stigma.

Persistent mental illness results in an ongoing need for mental health services, which typically combine medication, and inpatient and outpatient care. Like many mental health consumers, AMP members had experienced an interrupted life trajectory. For some, personal identity and daily activity became centred solely around the mental health system. Spaniol, Gagne and Koehler (1999) acknowledged the system of care in mental health is experienced as devaluing and dehumanizing. An ongoing use of services separates the service user from society and provides a base for stigma and discrimination. Interventions in mental health care tend to lack a holistic approach, typically focusing on diagnosis and symptoms that can deepen a sense of alienation. The resulting stigma and discrimination impacts a person's sense of self and self-worth (Ottati, Bodenhausen and Newman 2005). As dependency on the mental health system increases, it is understandable that being an active agent in one's life can be diminished. Parr (2005) recognized the crucial role of creativity in recovery and how art therapy can help to restore social connection and well-being. Such specific arts programming has been developed to address social isolation and reduce stigma within a construct of positive mental health awareness (Tillyer and Accordino 2002). Likewise, the AMP furnished the artist members with social and societal connection. Ongoing creative engagement in the program fostered independence and allowed motivation to replace apathy.

The process of recovery from mental illness includes adjusting to beliefs and perceptions of self and integrating these with feelings that are associated with being a client of mental health services (Spaniol 2012). Deegan (1996) considered recovery from mental illness a transformational experience that

allows a person to reestablish his or her unique individuality. Haigh (1999) found that an empowered individual 'is the seat of action and from which true personal power and effectiveness must come' (p.247). Agency and the ability to direct one's life is a cornerstone of recovery. Visual art-making entails decision-making and problem-solving skills that are immediate and based in the senses (Van Lith, Fenner and Schofield 2011). Creating artworks within a nurturing, egalitarian and therapeutic environment allowed AMP artist members to rebuild their sense of power and agency. Making art provided a sense of productivity through creative autonomy and re-established a sense of self through building a visual voice. Additionally, the AMP group reflected important components of a therapeutic community based on the recognition of individuality, capacity, responsibility and the ability to take initiative (Clark 1999; Lewis 1990).

Thompson (2009) extended the key elements of self-discovery and interconnection present in studio art therapy to include the centrality of exhibiting. The opportunity to exhibit artwork for AMP members evolved naturally via a large city wide open art studio event, Somerville Open Studios (SOS). Participating artists opened their studios to the public for one weekend a year. For AMP members, SOS transformed a therapeutic space to a public domain. The physical space was altered to allow for traffic flow and every available wall was used to display completed artwork. Participating in SOS entailed unique challenges and opportunities. The familiar predictability of social interactions within the context of making art was replaced with discussion with an unfamiliar public. SOS provided the AMP artists equal access in a public domain interested in contemporary art. AMP artists participated in SOS as independent artists with no affiliation or identification as mental health consumers. Each registered participant had a website profile page that included a brief biographic and artist statement, and images of selected artworks. An affiliated museum allowed each registered artist to self-select one artwork for an exhibition. This level playing field allowed group members to experience the exhibition of their artworks within an inclusive but competitive framework, independent of mental health services. Exhibiting in this venue allowed an artist identity to be further forged and supported

through the eyes of other artists and the public. The studio became a transformational space where self-actualization fostered agency and a new sense of self.

Highlighting the transformational journey of one AMP artist, Dixie Manley, will provide a deeper understanding of support fostered in the art therapy studio. A review of Dixie's artwork and her investment in exhibiting can serve to illuminate important aspects of identity formation and agency and the role that art has in recovery. Ethical permission and consent for full disclosure related to this article were given and reflects Dixie's wish and investment in being identified as an artist. Dixie was an active and invested member of the AMP since its inception. We first met in 1995 at a day treatment centre, where I was the art therapist. In between the AMP and day treatment Dixie attended an art group in a social clubhouse setting and a program for artists with disabilities. Each of these programs was under the umbrella of mental health services. While in the day treatment art therapy group Dixie often cited her lack of ability and experience and needed encouragement to remain a participant. A turning point occurred when she began to experiment with liquid watercolors and wet-on-wet techniques. The experimentation then extended to the use of highly fluid acrylics on raw canvas. Two independent acts of self-determination emerged from the exposure to this painting technique: that of autonomous art-making and an investment in art materials. In order to continue working at home Dixie had to independently purchase her own art supplies. Despite a limited monthly budget, she began to order art supplies. This allowed her to not only make independent choices but to experiment further with paint viscosity. As embedded and spirited statements of self-determination, her artworks can be viewed as visual acts of focused risk taking.

Following the structured day treatment program Dixie attended a skill-building art group in a social club setting, where art techniques and materials were the focus. She was exposed to traditional and nontraditional art materials (charcoal, graphite, conte crayon) and applications (newspaper collage) that were used to explore pictorial composition and images. She thrived in this

environment and became interested in the work of modern and contemporary artists. This art group led her to consider a dedicated art program for adults with disabilities. Dixie worked diligently to create an art portfolio that consisted of paintings and drawings, which was part of the application process. This program had a gift shop where artworks were displayed for purchase. This underscored the importance of creating art for revenue and as employment. Dixie learned how to plan and execute a painting and to equate the price of an artwork to the time invested and materials used (Figure 1). The art therapy group, art group, and artists with disabilities program had built her capacity and base of self-knowledge as an artist when she joined the AMP in 2004.

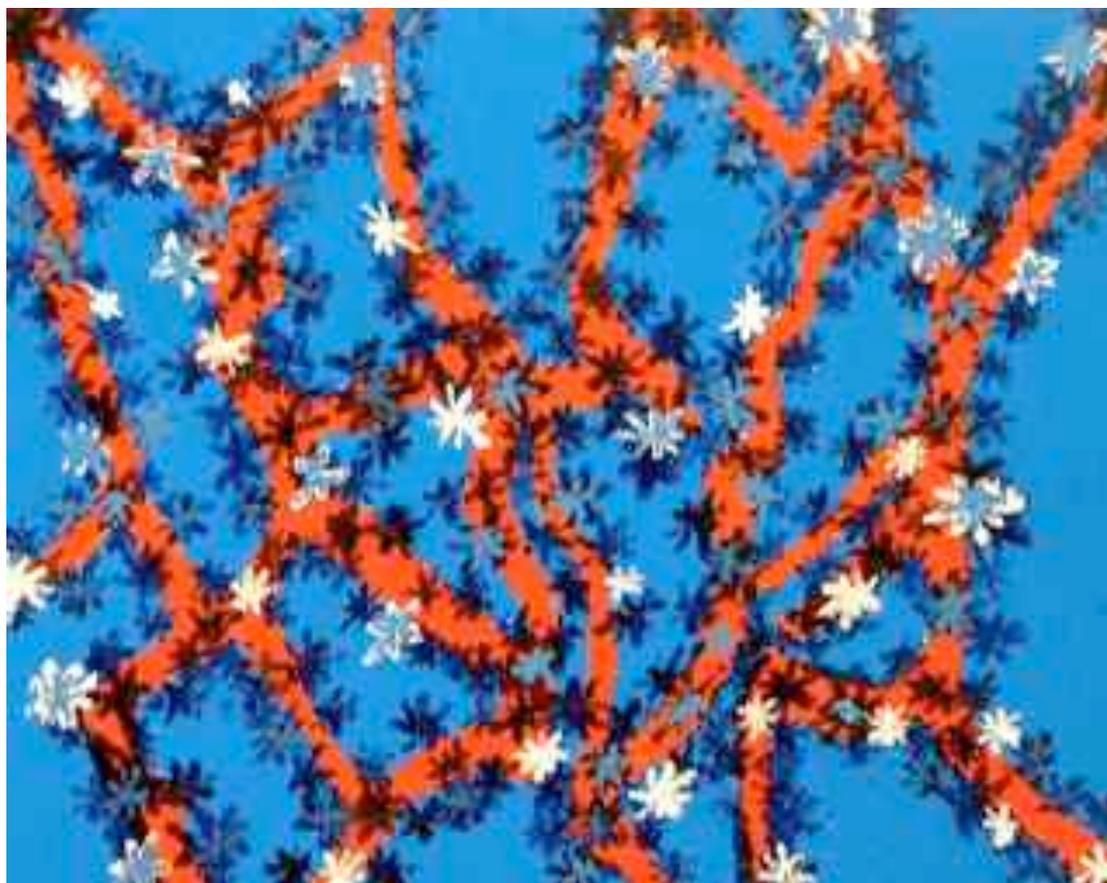


Figure 1: Dixie Manley, *Underwater*, Acrylic on mason panel, 18" x 22", 2002.

Dixie continued to be invested in building skills primarily as a painter during her 10 years at the AMP. A survey of Dixie's artwork reflects her interest in experimental technique. Dixie produced artwork both within the studio environment and at home. Other AMP artists noticed the risks that she took in

her art-making and how she used traditional and non-traditional art materials. Dixie was open to 'paint on anything', which included wooden or Styrofoam surfaces, recycled boxes, as well as two and three dimensional objects. Dixie was a prolific painter and often developed images using specific abstract and representational motifs. Leaves, interlocking line and shape or 'puzzle pieces', and circles are repeatedly used as familiar approaches to explore media, composition and technique. One form that has remained central over her development as an artist is the circle, which has been explored in size and media, and as an element for compositional experimentation.



Figure 2: Dixie Manley, paintings and collages, mixed media, varied sizes, 2010.

Figure 2 provides a view of five different uses of circles where a wide range of size, surfaces, technique and a variety of media have been used. How the circle is incorporated varies ranging from as elaborate detail, to being used as a small compositional element or focal point.



Figure 3: Dixie Manley, *Untitled*, wall paper, fabric, canvas, acrylic paint on adhesive plastic, 4' x 4', 2011

Figure 3 is a large scaled work that was created both at home and in the studio. Dixie was provided with samples of patterned wallpaper and fabric to take home with her and create elements that could be incorporated and collaged onto a larger surface at the studio. At her home work place she created small circular shapes on the wallpaper and then developed a number

of small cutout circular canvas paper paintings. These were brought back to the AMP studio and assembled onto a larger surface that she continued to develop. Dixie's absorption in the art-making and collage processes are evident in the way in which the circle becomes a template for visually exploring pattern, color and texture. Her concentration and absorption in the process is reflected in the final artwork and evident in the details.

Dixie regularly requested that her artworks be reviewed. She not only wanted to develop skill sets, but also remained curious about how and why a painting was considered complete or successful. She was interested in art history and wanted to understand the formal components of abstract art and painters such as Stuart Davis. Similar to Henley I had learned the value of sensitively exploring the aesthetics of an artwork within the context of a strong therapeutic alliance. Specifically, with Dixie I had developed a therapeutic relationship that was based on trust, authenticity and candid rapport. I had surmised an emotional detachment in Dixie's painting and noticed that she was quickly finishing artworks. There seemed to be a lack of investment with little to no depth engagement in the process. Because she was also experiencing mobility issues I suggested a mindful application of dots (pointillism) that would allow her to slow down and make decisions, while building other skills. Directing Dixie to paint with a different technique can be seen as a 'third hand' intervention within the context of a studio art therapy environment. The egalitarian therapeutic relationship within the social context of the studio provided Dixie with the supports she needed to consider changing the process of her art-making.

Applying paint, one dot at a time, allowed Dixie to focus her attention and build purpose and intention into her artwork. Dixie had always been inspired by colour and colour mixing but had a strong pull towards using primary colours. She created colours intuitively on the surfaces of her paintings, usually when elements, lines and forms overlapped and became layered. Pointillism allowed her to understand that small red and green dots in an area of a painting created brown. For Dixie, this technique brought the artist's colour wheel to life and allowed her to re-experience her passion for colour.

The work created using the pointillism technique dates from 2012 to 2014, during the last two years of the AMP. Dixie became passionate about this technique, but what I considered most important was that pointillism allowed her to develop a different relationship with her artwork - to see what she was doing while remaining energized and connected to what was emerging on the canvas. The energy that she had previously placed into five paintings was now focused into one (Figure 4).



Figure 4: Dixie Manley, *Untitled*, Acrylic on canvas, 18" x 22", 2014.

As she continued to evolve in her application of pointillism she began to experiment with word inclusion (Figure 5). Dixie balanced these highly focused pointillist artworks with paintings that allowed her to discharge energy and created fluidity-based paintings, by tilting a canvas with paint on the surface (Figure 6). Over this two-year period, Dixie developed a robust body of artwork that reflected a reenergized base of creativity.



Figure 5: Dixie Manley, *Sky*, acrylic on canvas board, 18" x 24", 2014.

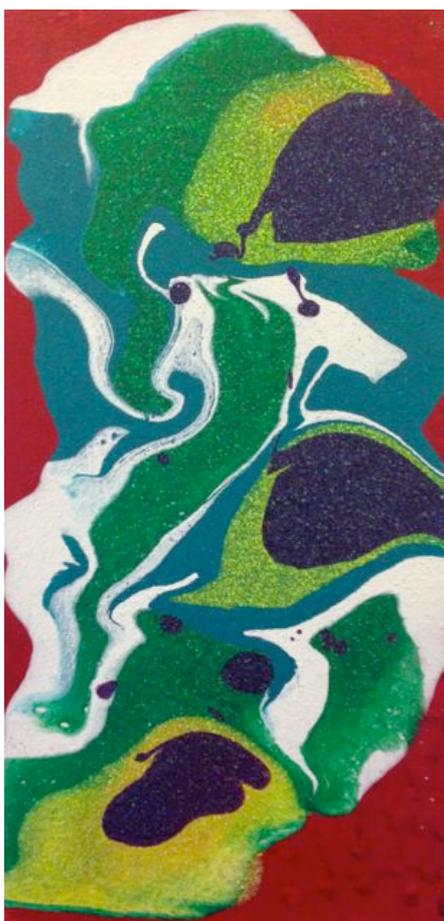


Figure 6: Dixie Manley, *Untitled*, acrylic paint and glitter paint on canvas, 12" x 28", 2014.

Participating in SOS for all AMP artists was motivating and challenging. Each artist focused on creating artwork that would be viewed and potentially purchased. Artists came to understand that the indifference of visitors to the displayed artworks was more difficult than answering questions. Artists were also aware of what art sold or garnered attention. Each artist grew in their ability to manage their own expectations of open studio as the weeks that followed the event were spent openly discussing the highs and the lows. For Dixie, the culmination of participating in SOS for 10 years provided her with an additional and unexpected opportunity. A curator for a local community television program viewed her artworks and extended an invitation for a one-person art exhibition with an accompanying online televised interview (Cormier 2014). Although anxious about the degree of exposure outside of the auspices and safety of the studio group, Dixie accepted the invitation. She had several months to prepare additional artworks and prepare for the 30-minute interview. On the show, *Art at SCATV* she appeared relaxed and engaged and candidly answered questions about her artwork, influences and inspirations. Ten years of gradually becoming accustomed to interfacing with the public during SOS, and participating in museum and gallery group exhibitions allowed Dixie to fluidly present herself to the community as an active and dedicated artist. The interview had the unexpected benefit of allowing Dixie to reconnect with family. Since *Art at SCATV* was an open-access online program, family members who resided in the Midwest and the west coast were able to view it. Dixie reconnected with her siblings, some of whom she had not spoken to for many years. The exhibition and interview validated Dixie's identity as an artist, as well as reestablished family supports.

<https://www.youtube.com/watch?v=VYv1ASGUeJU>

Despite significant mental health issues, members of the AMP established a new sense of self through the prolonged engagement of making art. A sense of social connectedness developed between the artists, despite long periods of silence and engrossed art-making. Through purposeful engagement and authentic relationship, artist members restored agency and hope in their lives. Through various avenues of exhibiting and interfacing with the public, AMP artists discovered their active selves, where art was an intermediary in

communicating with others. As a result, members developed a wider social network and experienced themselves outside of the confines of stigma and discrimination. As the art therapist, I provided an authentic relationship that is attuned to the aesthetics of each artwork, allowing each artist to develop a unique visual voice.

Biography

Denise Malis, Ph.D., MFA, LMHC, ATR-BC, is a board certified art therapist, artist and assistant professor in the graduate art therapy program at Lesley University. As an art therapist she has focused on integrating studio based art therapy into her work with students, supervises, and clinical and nonclinical settings. Denise is committed to the inclusive creative development of individuals in their communities and believes that art is an ongoing personal process of expression and well-being.

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