

THE FUNCTION OF ART IN THERAPY

by

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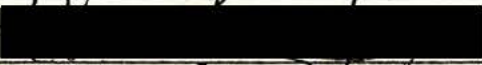
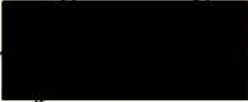
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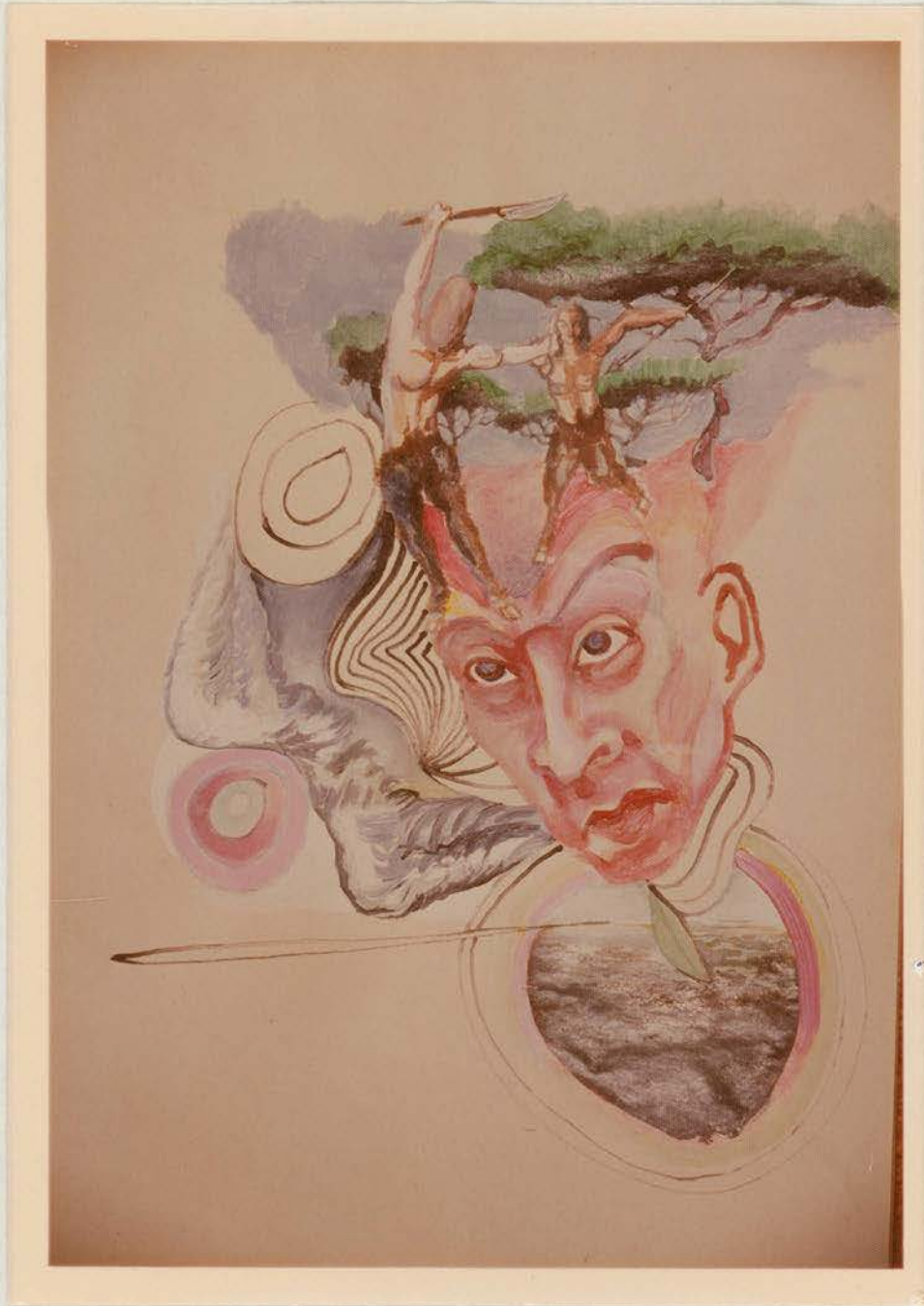




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Frontispiece: A primary process dream and fantasy image has undergone secondary elaboration. It contains its own rationale for order; its expressive content is symbolic and mythological; it dramatizes action. Its problem solving purpose is evident; it is an integrative experience.

ABSTRACT

The function of art in therapy was examined within the context of the major literature on art therapy, and through study of seven other theoretical positions. These positions include culture and art; Freudian psychoanalytic theory; Jung's interest in expression and art in Analytical Psychology; Existential Psychology; Perls' eclectic Gestalt Therapy; and a nomothetic-experimental approach to the function of art. The relationship of the art image to the mental image was explored. Clinical examples of art work provided throughout the study include a case history which demonstrates the practical value of an eclectic art therapy mode. Suggestions for further study were made.

An eclectic art therapy model based primarily on the cultural use of art was proposed. It was suggested that conflict between psychoanalysts and medical psychologists, Gestaltists and experimentalists, which appears before 1970 in the literature, has been resolved in recent research on bimodal brain function.




TABLE OF CONTENTS

FRONTISPIECE	ii
Abstract	iii
Table of Contents	iv-viii
List of Illustrations	ix-x
Acknowledgments	xi
 <u>CHAPTER</u>	
I	INTRODUCTION 1
	Statement of the Problem 2
	The Purpose of the Study 3
	The Method 3
	The Significance of the Study 4
II	A REVIEW OF THE LITERATURE 5
	Historical Development of Art Therapy 6
	The Development of Art Therapy Within The Psychoanalytic Model 10
	The Introduction of Gestalt Art Therapy ... 17
	The Growth of Art Therapy Within The Medical Psychological Model 20
	Summary 32
	 <u>PART II</u>
III	CULTURE AND ART 36
	The Cultural Role of Art 37
	Art as Order, Identification and Record . 37
	Art as Expression, Interpretation and Communication 40
	Art as Enhancement 43
	Art as Suggestion: Image Magic 45
	Therapeutic Implications and Clinical Application 48
	Art as Order 48
	Interpretation 55
	Communication 56
	Enhancement 58
	Suggestion, Image Magic 58

<u>Chapter</u>		<u>Page</u>
	<u>PART III</u>	
IV	PSYCHOANALYSIS AND ART	72
	Freudian Dream Theory	73
	Dream Theory and the Function of Art In Therapy	77
	Freudian Character Structure	78
	Character Structure and Art Psychotherapy ..	79
	Freudian Theory of Psychic Organization, and Sublimation	81
V	ANALYTICAL PSYCHOLOGY AND THE FUNCTION OF ART.	91
	C.J. Jung	91
	Active Imagination and the Symbols of Transformation	94
	The Mandala	95
VI	ANALYTIC THEORY AND ART EDUCATION	98
	Sir Herbert Read: An Aesthetic Theory	98
	The Abstract Elements in Art	100
	Line	101
	Form, Shape and Mass	103
	1. Energy forms	104
	2. Areal and atmospheric forms	105
	3. Water forms	107
	4. Solid earth forms	108
	5. Plant forms	108
	6. Organic animal forms	109
	7. The forms of disintegration, decay and death	109
	Pattern	110
	Scale, Proportion and Size	111
	Analysis and Dissection	112
	Lightness and Darkness	112
	Human Modes of Perception and Expression ...	116
	<u>PART IV</u>	
VII	EXISTENTIAL PSYCHOLOGY AND THE FUNCTION OF ART IN THERAPY	120
	Existential Psychology: Toward a Definition	121

<u>Chapter</u>	<u>Page</u>
Action	121
Existence and Essence	121
Being and Becoming	122
Freedom	122
Awareness	123
Anxiety and Dread	124
Courage	124
Existentialism and the Therapeutic Function of Art	125
Existence and Essence	125
Being and Becoming	126
Awareness, Anxiety and Self-consciousness .	128
The Absurd	129
Action	130
Attitudes Toward Change, and the Aesthetic Experience	132
An Aesthetic Attitude Toward Life	133
VIII GESTALT THERAPY AND ART	139
Gestalt Therapy	139
The Field Theory of Gestalt Psychology	140
Gestalt Theory as an Holistic Organismic Concept	141
Awareness	143
Creative Indifference	145
Perls' Dreamwork	146
Creative Integration	146
Gestalt Therapy and Art	147
Perls Extended	149
Figure/Field Formation and Destruction	149
Exploring Possibility from a Position of Creative Indifference	150
Awareness	151
Fantasy	153
Problem Solving	155

<u>Chapter</u>		<u>Page</u>
	<u>PART V</u>	
IX	A NOMOTHEIC-EXPERIMENTAL APPROACH TO THE FUNCTION OF ART IN THERAPY	156
	Experimental Psychology, Behavioral Therapy And Art	156
	Systematic Desensitization	158
	Neuropsychology and Art	159
	Right and Left Hemispheric Function in the Human Brain	160
	Psychobiological Implications of Bilateral Assymetry for an Art Therapy Mode	162
	a. Brain damage	162
	b. Psychosis	163
	c. Fatigue and brain function	163
	d. Psychoanalytic theory re-examined ..	165
	<u>PART VI</u>	
X	A COGNITIVE APPROACH TO THE DYNAMICS OF IMAGE	168
	The Modes of Representation of Thought	169
	a. Enactive thought	169
	b. Image thought	169
	c. Lexical thought	170
	Types of Mental Image	171
	a. Vividness	172
	b. Content	172
	c. Interaction with perception	173
	d. Context	174
	Increased Image Formation	176
	Psychopathology and Image Formation	177
	Types of Art Image	178
	a. Automatic drawing	179
	b. Spontaneous drawing	182
	c. Expressive drawing	182
	d. Fantasy	183

<u>Chapter</u>		<u>Page</u>
	e. Dreams	185
	f. Drawing of entoptic experiences	185
	g. Perceptual drawing	186
	h. Historical drawing	187
	i. Caricature	188
	j. Copying	188
	k. Scientific drawing	189
	l. Illustrations	189
	m. Idea sketching and problem solving ..	190
 <u>PART VII</u>		
XI	AN ECLECTIC APPROACH TO ART THERAPY: A CLINICAL STUDY	203
XII	SUMMARY AND CONCLUSIONS	219
	SUGGESTIONS FOR FURTHER STUDY	226
	REFERENCES	228

LIST OF ILLUSTRATIONS

<u>Figure(s)</u>	<u>Page(s)</u>
Frontispiece	
1	60
2	61
3 (a) (b)	62
4 (a) to (c)	63
5	64
6 (a) (b)	65
7	66
8 (a) to (i)	67 to 69
9 (a) (b)	70
10 (a) (b)	71
11	85
12 (a) to (c)	86 to 87
13 (a) to (f)	88 to 90
14 (a) (b)	135 to 136
15	137
16	138
17	167
18	192
19 (a) (b)	193 to 194
20 (a) (b)	195
21 (a) to (c)	196 to 197
22	198

<u>Figure(s)</u>	<u>Page(s)</u>
23 (a) (b)	199
24 (a) (b)	200
25 (a) (b)	201 to 202
26 (a) to (s)	210 to 218

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PART I

CHAPTER I

INTRODUCTION

I think (1) that most psychological problems do and should begin with phenomenological rather than with objective, experimental, behavioral laboratory techniques, and also (2) that we must press on from phenomenological beginnings toward objective, experimental, behavioral laboratory methods. This is I think a normal and usual path - from a less reliable beginning toward a more reliable level of knowledge. To begin the scientific study of love, for instance, with physicalistic methods would be to be meticulous about something only crudely known, like exploring a continent with a pair of tweezers and a magnifying glass. But also to restrict oneself to phenomenological methods is to be content with a lower degree of certainty and reliability than is actually attainable (Maslow, 1966, p. 47).

So it is with art therapy. The function of art is a process only crudely known. The phenomenological method with which one must begin a study of the therapeutic qualities of art provides a lower degree of certainty and reliability than will be attainable as our knowledge increases our physicalistic skills. It is, however, a stage through which knowledge must pass.

The following study acknowledges present limited progress on the path to a final state of knowledge and must forego

the experimental statistical design; at the same time it assumes this is a goal which may be reached at some future time.

Statement of the Problem

What is the therapeutic function of art? There is no clear or inclusive definition of either process or procedure in art therapy. In the literature on art therapy, art is used largely as an adjunct to psychoanalysis and to medical psychology, two therapeutic modes which frequently disagree with one another. As an outgrowth of psychoanalysis, art therapy is vulnerable to any criticism of Freudian and neo-Freudian theory; as part of the medical psychological model it is limited by the inadequacies of the scientific method for dealing with art. In order to move beyond the confines of these two approaches to the function of art, it is essential that the student first examine existing literature on art therapy, and then explore other theoretical fields which concern themselves with art. These areas of additional study should include art and culture, philosophical and aesthetic considerations, as well as Gestalt Therapy and experimental psychology. Since theory must find practical application, such a study must include examples of the clinical use of art as it relates to each of these fields.

The Purpose of the Study

The purpose of this study is to develop a broad working definition of the function of art in therapy by synthesis of conceptual research with illustrations of practical experience in using art as a therapeutic method.

Method

This study will begin with a review of the major literature on art therapy to 1976. This literature will be divided into two broad categories, the analytic and the medical psychological therapeutic modes.

In the main body of the thesis, the theoretical rationale for a system of art therapy within a variety of approaches to the function of art will be examined. These will include a study of art and culture; the analytic theories of Freud and Jung, followed by Herbert Read's use of these ideas in an aesthetic theory of education; existentialism and art; Gestalt therapy; a nomothetic-experimental investigation which includes behavioral psychology; and finally a cognitive approach to the study of image. Examples of work from clinical practice and an eclectic case study will be included. Permission will be obtained for the use of both art and case histories. Adequate measures will be taken to protect the identity of the artists.

The Significance of the Study

This study will provide an understanding of the present styles of art therapy. It will examine the theoretical bases for these styles. It will also offer a broader, more eclectic theoretical structure than now exists on which to build an art therapy model designed to meet the individual needs of the patient in therapy. It will suggest some areas for future study to extend the therapeutic use of art.

CHAPTER II

A REVIEW OF THE LITERATURE

The literature on art therapy before 1973 reflects the dominant theoretical models within which it has developed over the past century: psychoanalysis and medical psychology. Confined within these larger therapeutic systems, art therapy has had difficulty establishing and maintaining its credibility as a discipline in its own right. As an adjunct to the psychoanalytic method it is subject to the same criticism as psychoanalysis, while within the medical-psychological approach to psychotherapy it remains chiefly a diagnostic tool and monitor of progress.

The literature since 1973 reflects the influence of Gestalt Therapy, new developments in neuropsychology, and a growing interest in the general dynamics of the creative process separate from a therapeutic system.

This review of the literature will consider only those works specifically defined as "art therapy". Relevant material from aesthetics, Gestalt psychology, existentialism and neuropsychology, which contribute to a comprehensive study of the function of art, will be discussed in the main body of the thesis.

Historical Development of Art Therapy

The concept of art as an integrative "healing" agent has no clearly defined date of origin. Twenty-four centuries ago the elements of art, defined as order, morality, and beauty, were considered inseparable. In *The Republic*, Plato observed that all grace of movement and harmony of living - the moral disposition of the soul itself - are determined by aesthetic feeling: by the recognition of rhythm and harmony. The same qualities enter largely into painting and all other arts and crafts, even into the constitution of living bodies and plants, "for in all these things, gracefulness or ungracefulness finds place. And the absence of grace, and rhythm, and harmony, is closely allied to an evil style and an evil character: whereas their presence is allied to, and expressive of the opposite character, which is brave and sober minded" (Read, 1969, p. 62). In reasoning, according to Plato, aesthetics provides a "key to truth", because it teaches rhythms and balances, the "instinct of relationships".

Counterbalancing the views of Plato, Aristotle observed that art "purges the soul". There is thus pleasure to be experienced in the unpleasant, a cathartic function for art.

Collections of the art of patients in mental hospitals began to attract attention in the late 19th century.

This art work was viewed as expressive of underlying pathology, the diseased psyche (soul). A philosophy of art developed around the expressive function of drawing, painting and sculpture; art as an expression of inner disharmony. Patients' art was valuable to the therapist for its autobiographic and diagnostic content.

A wide catalogue of international literature dealing with artistic behaviour in the abnormal to 1940, an exhaustive study of the relationship of graphic expression to underlying pathology, was compiled by Anne Anastasi and John P. Foley, Jr. (1940, 1941). Ten years later, a summary of the material relevant to the development of art therapy appeared at the beginning of Margaret Naumburg's *Schizophrenic Art: Its Meaning in Psychotherapy* (1950). Naumburg's historical survey describes the growth of art therapy to the status of a separate therapeutic mode using Freud's postulates and the psychoanalytic method.

Max Simon and Cesare Lombroso (Naumburg, 1950) were among the first to recognize that the curious daubs and scribbles of the insane represented a compelling need for self-expression. Between 1876 and 1888, Simon and Lombroso separately established the value of art productions as diagnostic aids which were useful in distinguishing between the disease syndromes of the various psychoses. These strange graphics appeared to be descriptive of the particular

syndrome of the 'monomaniac', the 'melancholic', etc.

The two therapists next independently perceived the correlation between the conflict of the patient and the subject matter of the art. Patients used their odd symbols and scribbles to allude with varying degrees of directness to their real and imaginary misfortunes. Both observed, further, the similarity of the art of psychotics to that of primitives and children, and began to explore the psychological function of primitive and children's art with the hope that this might cast some light on the expressive process in the psychotic. In these studies both Simon and Lombroso acknowledged the similar communicative function of primitive and psychotic art, suggesting that there occurred a reversion to a prehistoric stage in civilization when picture and speech were combined, the phonetic-ideographic stage through which primitives passed in creating their alphabets, where image was first used as a symbol and later evolved, with use, into a sign or letter.

The symbols of both primitive and Christian art appeared to have much in common with the art of psychotics, suggesting sense and meaning in symbolic form - frequently universal sexual symbols. Descriptive studies of the similar expressive qualities of psychotic and primitive art at this time stimulated modern art movements, particularly Expressionism.

In 1906-7 Fritz Mohr carried out the first experiments utilizing free verbal association of the individual to his art as a tool in differential diagnosis. Mohr provided the patient with a specific set of tasks, including exercises in picture copying, picture completion, and story illustration. He observed in the exercises certain universal responses peculiar to each of the various types of mental disorder. These tests and others were accepted as dependable diagnostic aids. Mohr was thus the precursor to such experimentalists as Goodenough and the "Draw a Man" tests, Rorschach and his projective ink blots, and the Szondi tests, to name only a few of those using art in the diagnosis of mental illness and deficiency.

In an aesthetic rather than a scientific approach to the art of the insane, Hans Prinzhorn (1972) elaborated upon the value of all art as essential to creating a bridge from experience to form and communication through the use of an expressive urge. For Prinzhorn the "expressive urge" was as necessary to human understanding and communication as the erotic urge is to the preservation of the species, and its qualities as predictable as those recognized in other basic life urges. He listed these qualities as a universal impulsion to play, to ornament, to order, to copy, and to imitate. Prinzhorn recognized art as an expression of the psyche greater than the measurable elements of its

parts - colour, form, texture, etc. - and superior to rational verbal association because of the ambiguous quality of the form, its potential as symbol. Naumburg (1950, p. 11) considered this aesthetic approach "a blind alley".

The Development of Art Therapy Within The Psychoanalytic Model

Prinzhorn's aesthetic theories and the study of "normal" artistic behavior as a key to abnormal expression in art lost out in the 1920's to the general interest in Freud's exploration of the unconscious and speculation on the pathological motivation of artists.

In a study of psychotic art, Francis Reitman (1950) outlined Freud's theory of art derived from his study of Leonardo da Vinci. Freud declared the subconscious to be a motivating force in creative activity, and described a cathartic effect (a relief of nervous tension) in the symbolic expression of subconscious conflicts. Artists such as Leonardo sublimated their sexual impulses in the socially acceptable, ego-building process of painting and sculpture, substituting a higher satisfaction for a base one. The symbols of art work are non-verbal substitutes for a meaningful experience which has been repressed; their function is similar to that of the dream symbol. It conceals its real meaning from the artist, and graduates and reduces

emotions which in direct, non-symbolic expression would arouse disturbance, stress, or extreme unhappiness. In non-symbolic expression such emotions would be chaotic. In reducing their objects to symbolic form, the emotions are rendered orderly and tolerable. Freud's theory of image as expression of repressed unconscious content attributes a neurotic nature to the artist.

Concerned with the significance of dream and art symbol, and in disagreement with Freud's idea that the unconscious "hides" its contents in ambiguous images, Jung declared symbols to be the result of the psyche's attempt to surface the contents of a collective as well as a personal unconscious, revealing rather than concealing the deeper layers of the mind. Not all symbols in art are the expression of threatening, repressed material. The image has significance on two separate levels, the universal and the particular. The universal or racial unconscious reveals its content through a series of archetypal images, which Jung described. He also disagreed with Freud over the importance of sexually repressed material, favouring an interpretation of art in terms of mythological rather than sexual symbols.

Two schools of thought in psychotherapeutic use of art developed around the opposing views of Freud and Jung. Both Reitman (1950) and Naumburg (1950) drew attention to the tendency of Freudian therapists to project psycho-

sexual content onto the art of patients, while Jungian therapists interpret the same work in terms of archetypal mythological sets. They described the importance of the therapist's expectations in influencing the type of art work produced by patients. Since patients tend to fulfill the expectations of the therapist in their art work, real doubt is cast on the authenticity of art as a spontaneous expression of the psyche (Reitman, 1950). Naumburg concluded that the therapist should avoid the problem by having the patient interpret his own art. It was on the basis of each patient's response to his own symbolic creations that Naumburg established the importance of using spontaneous art productions as a primary mode of therapy (Naumburg, 1950, p. 34).

In addition to her book on schizophrenic art, Naumburg wrote *Psychoneurotic Art: Its Function in Psychotherapy* (1953) and *Dynamically Oriented Art Therapy: Its Principles and Practice* (1966). As a base for her therapeutic approach, Naumburg accepted the Freudian psychoanalytic concepts of the mechanisms of repression, projection, identification, sublimation and condensation. In keeping with the psychoanalytic method, she encouraged the patient to express the images of the unconscious in spontaneous painting, and to use "free-association" in order to understand their content. Naumburg recognized the universal nature of some symbols,

but emphasized the importance of the subjective meaning of the symbol, thereby favouring the Freudian over the Jungian approach to the use of the image in therapy. She considered spontaneous art to be a valuable integrative therapeutic agent in its own right.

Other psychotherapists, such as Ainslie Meares (1958), supported this view, using art therapy where other means had failed. Meares accumulated the paintings and brief comments of a withdrawn, verbally inhibited schizophrenic girl, until he was able to understand some of the symbolic communication offered in her work. He described the importance of the use of symbolic images to the therapeutic outcome. His work is representative of several case studies in which the spontaneous art images of patients were used in psychoanalysis, and the use of art adapted to the needs of the individual.

In 1967 R.W. Pickford observed that the achievement of aesthetic values in art indicates psychic integration and the restoration of a rational mind:

Harmony of design and tone or colouring, coupled with adequate emotional expression, is the essential quality of good art. Taken together, these characteristics may be called qualities of organization. When they are present, the artist has achieved his aim and purpose, to some extent at least, and has expressed his aesthetic feelings convincingly. He may have solved his aesthetic problems, at least in part. In solving these, he solves his life problems at the same time. (p. 177)

The aim of art therapy is to create an integrative relationship between ego, the preconscious, and the unconscious. Through art the patient realizes his unconscious fantasies symbolically and brings them into scope and control of his ego. This is the principal of therapeutic regression to the level of the disturbing infantile conflicts and deprivations, coupled with the re-adjustment and synthesis, which was mentioned by Freud as lying at the root of psychoanalytic therapy (Kris, 1952; Pickford, 1967).

Pickford also drew attention to the time and effort expended in describing inner fantasies. In his art work, the patient is working hard on his own behalf to gain his freedom, and gains confidence through the accumulating evidence of his ability to do so. As he works out an intellectual and emotional understanding of his art it becomes rationally integrated with his conscious mind and morally assimilated. If the patient is able to grasp the significance of the symbols that arise and act upon the insights which they bring, then he will find release from his withdrawal from life. If he cannot assimilate the contents, however, there will be the consequent risk of breakdown.

In a later paper, Pickford (1974) summarized six ways in which art material may serve the ends of psychotherapy:

(1) Spontaneous revelation of his own problems to the person himself; (2) The spontaneous free expression of conflict, its harmonious integration as a work of art followed by the resolution of the conflict in sublimation and restitution; (3) Display of personal conflicts in pictures where they can appeal to society generally and receive acceptance, reducing feelings of isolation and guilt; (4) As communication of distress in an indirect approach to various therapists, searching for the one who understands the messages of the art; (5) As direct approaches to the therapist in concrete objects that can be laid on the table and kept for re-consideration; (6) One's art work may have an influence upon another person as viewer, causing him to reflect on his own condition and his own unrealized wishes and motives, bringing about slow change in his underlying personality pattern.

Pickford's work applied psychoanalytic techniques to art therapy very effectively, but it also pointed out the narrow scope of art and aesthetic theory when it is confined within that therapeutic mode.

Amongst the best of the more recent publications, *Art Therapy With Children*, by Edith Kramer (1971), is notable for the quality of its organization and presentation of both theory and case studies. Her concise observations are worth listing.

Recognizing the freedom of children's art as play, Kramer considered the therapeutic qualities of play to be important to art therapy. When in his art a child creates a symbolic object which engages his wishes and fantasies, he learns to cope with practical problems of organization and expression through involving himself wilfully in a complex function that engages his manual, intellectual and emotional faculties in a supreme effort. She noted that material given form without adherence to prescribed patterns inevitably takes on the image of its maker. Distortions in feelings of identity and personal intactness invariably reveal themselves by distortions and fragmentations of the visual images a child produces. Limited by his pathology, the state of his ego, his manual skill, his "talent", and many other factors, the child does not simply represent his fantasy, but rather expresses his relationship to his fantasy. In his art, the child's confrontation with his pathology and the tension it creates is possible at a time when he is not ready to make similar efforts or take similar risks in other areas of life. Art serves as a model of ego functioning where new attitudes and feelings can be expressed and tried out, even before such changes can take place in daily life. Art creates a realm of symbolic living, which allows experimentation with ideas and feelings, which makes apparent the complexities and contradictions

of human life, which demonstrates man's capacity to transcend turmoil and conflict and create order out of chaos - and which gives pleasure (Kramer, 1971).

In 1973 Fink, Levick and Goldman of the Hanemann Medical College and Hospital in New York described art therapy as a "new discipline", in conjunction with a new graduate program being established for art therapists. The orientation is psychoanalytic with little to offer that has not been well treated in the literature already presented. It is of most interest in rejecting the idea that therapy can be affected in action and nonverbal expression. They considered it separate from occupational therapy and a legitimate ancillary service in mental hospitals. The article reflects the stagnant state of art therapy within the psychoanalytic tradition.

The Introduction of Gestalt Art Therapy

It is with a sense of relief that one recognizes in the work of Mala Betensky (1973) the stirring of a new approach to art therapy focused on communication of what is happening in the present. Betensky emphasized the importance of "awareness" of present emotional states, combined with feeling and thinking that is clearly stated in words. Lack of awareness suggests blocking of sensation and feeling. Awareness can be stimulated through body

movement, graphics, solid forms, and patterned sounds used to express inner experience. After expression has appeared in one of these preverbal forms, it may be accessible for verbal communication. This is particularly true of the graphic arts. A person unable to put his chaotic thoughts in rational order can describe them spatially through spontaneous art. When he expresses himself this way, he looks at the expression as an observer, i.e., he subjects an emotional and unreasoned statement to the ordering systems in visual perception and cognition.

Betensky emphasized the practicality of the dream image and the image in spontaneous art as an expression of what is happening in the present. She described the "aware" person as one who acknowledges and faces his painful situation realistically, not allowing himself to be dominated by fantasy in the resolution of emotional-rational crises. Betensky discussed the extensive family therapy essential to this approach, where she relied heavily upon the art for spatial descriptions of family relationships and conflicts and tension.

Betensky used some of the vocabularies and methods of Gestalt and Existential psychology, and considered the importance of social pressures and families in the therapeutic model she developed. Her work marks a significant broadening of the scope of art therapy beyond the analytic method.

The same year Janie Rhyne (1973) defined the Gestalt approach to art therapy, renaming it 'Gestalt art experience' and directing it toward a population interested in personal growth and the deepening of perceptions, of personal life style, and relationships with others. Rhyne's book presents a collection of techniques to stimulate awareness and communication through the use of both free and directed art exercises. These techniques are designed to stimulate sensory awareness by suggesting where and how awareness may be developed, beginning with the act of painting itself as a tactile sensory-motor experience. Unlike Betensky, she emphasized the importance of fantasy in a world which relies too heavily upon science and logic.

To facilitate interpersonal contact and focus attention on the significance of our personalities and value systems when dealing with social problems, Rhyne created directive group projects such as building a world on the drawing table. She moved beyond a narrow preoccupation with pathology to define a function for art in the development of sensory and emotional awareness, creativity, and social growth.

Growth Of Art Therapy Within The Medical-Psychological Model

Since 1950, the polemic relationship of psychoanalysis to experimental psychology has resulted in the development of a second system of art therapy. Dax (1953) and Reitman (1950), medical doctors drawing from practical experience with art therapy programs in psychiatric hospitals, described a system for art therapy based on medical psychology. Their early research was done before the radical changes in biochemical therapy largely eliminated the classic symptoms of psychoses and the steady deterioration of the psychotic in the mental hospital.

Reitman (1950) challenged the narrowness of Freudian theory and its validity as a base for art therapy, attempting to provide a more cognizant approach which would remove it from the restrictions of the psychoanalytic model. He rejected interpretation of symbols based upon the theory of libido in which the fundamental conflicts of the artist are sexual. The practice of interpreting the patient's symbols to him led Reitman to strong criticism of the use of art in psychoanalysis because of its moral implications and the general inadequacy of the psychoanalytic model in therapy. He recognized the service of the psychoanalyst in showing that art has a dynamic motivation. He noted also that a Freudian formulation may at times be found to give

the most adequate description of a particular psychopathological case. His criticism was not that they state what is untrue, but that they fallaciously extend into general laws what has been demonstrated only in a special instance. Reitman attempted to relate abnormal art to organic source. He regarded psychotic art as a phenomenon of neurophysiological dysfunction related to the brain in somewhat the same way that physiological dysfunctions produce aphasias. He believed one should therefore be able to study the physiological problem through art in the same way that the physiological dysfunction in aphasia is studied through the speech of aphasics.

From his studies of patients with cerebro-vascular accidents, Reitman demonstrated that disturbances in body image could be traced to a lesion in the temporo-parietal section of the cerebral cortex. He noted that lesions of the left parietal region resulted more specifically in such problems as the inability to write and do arithmetic. Through the study of disturbances in body image and other cognitive alterations and their relation to patient art, Reitman concluded that the presence of two modes of psychological existence - categorical or abstract, and situational or concrete - which were often viewed as antagonistic, were more properly described as complementary. He believed this complementary function explained the aesthetic

quality of work done by artists. However, his work remained largely diagnostic. He did not devise a system of art therapy which might develop in his patients this desirable bimodal function which he perceived to be of benefit to artists.

While Reitman recognized the diagnostic value of art, he did not accept art therapy as a separate therapeutic approach. His bias was based on claims of Freudian therapists which he did not accept. Reitman did not believe that the patient regressed and acted out his "autistic fantasies" in artistic creation, recovering his sanity by this means, as psychoanalysts claimed.

Both Reitman (1950) and Dax (1953) were interested in the effect of psychotropic drugs, and conducted experiments with mescaline in an attempt to understand the phenomena of hallucinations in psychoses. They saw a need to classify and differentiate between different types of mental image, considering their physiological sources. Reitman justified his work as a "different viewpoint", the psycho-physiological viewpoint relating all mental manifestations to cerebral function and considering art a manifestation of man's cognitive capacity. The mescaline experiments demonstrated that several of the characteristic schizophrenic patternings in art are physiologically conditioned. He also concluded that body image distortions in the art of

schizophrenics, since they reflect on disturbed categorical (time and space) experiences, suggest alterations in brain function similar to those resulting from certain types of brain injury.

Reitman acknowledged that his work with the cognitive components of psychotic art represents only a fraction of the vast problem of understanding the function of art. In a later work, *Insanity, Art and Culture* (1954) he considered cultural influences, the relationship of the medium to the quality of the expression, "psychic" art, and the art of eccentrics, in determining the diagnostic value of psychotic paintings and whether their symptomatic significance is of universal or of relative character.

Eric Cunningham Dax (1953), to whose work Reitman frequently referred, described the organization of an art therapy program in a psychiatric hospital in his book *Experimental Studies in Psychiatric Art*. He listed a number of practical purposes for an art program: as a useful and satisfying pastime, hobby, or even vocation; as emotional release and aid to diagnosis and treatment; as a monitor of progress; to decrease the time necessary for therapy where the image is more efficient than words to express situations and for understanding of symbolic content of images; to provide a better understanding of the thought processes of psychotics and widen the approach

to the psychotherapy of mental disorders. He described in detail the relationship between the abnormal behaviour of the schizophrenic and the content of his art work, investigating "magic thinking" in the motivation of schizophrenic art. He also experimented with painting to music as a method of achieving emotional release.

Dax considered paintings to be most useful for diagnostic purposes. The same syndromes are seen in painting as in clinical examination, as for instance, mood disturbances in the affective psychoses, the paucity of abstractions in head injuries, and the characteristic disorders of thought in schizophrenics. In neurotics the contents of the conflicts are important. He did not rule out the possibility that art therapy might stand as a discipline in its own right.

In some instances it is found that a patient is able to express himself freely in his paintings and throw much light on the interpretation of the symbolic matter he produces with a minimum amount of assistance from the analyst. The method then becomes a definite variety of psychotherapeutic treatment in its own right, which is capable of far greater use than has so far been realized. (Dax, 1953, p. 93)

In 1965 J.H. Plokker outlined what he considered to be the broadly therapeutic function of art in a general program of psychotherapy. He saw a superficial level of occupational therapy, where art activates, distracts, and

dissipates energy in a normal way. In group therapy he welcomed it as a vehicle for building self-respect and self-confidence. With growing proficiency, the patient creates an interest which is available to him for the rest of his life.

Plokker stated that on an expressive level, the first paintings or drawings of neurotics bring their basic problems to light. As unguided graphic expression continues, the course of improvement or deterioration is mirrored and the prognosis suggested.

The agitated depression, the acutely anxious and the angry can find satisfactory emotional release through the direct muscular action of putting paint to paper, and through the expressive qualities of colour, texture and image. Painting distorted images, crossing or painting out, and caricature are also effective ways of releasing angry energy.


Plokker suggested that some people are more visually and spatially than verbally oriented. The therapist should take advantage of this by encouraging self-expression through art. He cautioned that the schizophrenic should not be subjected to a free method of painting, but should rather be directed toward the outer world. Free, expressive, disconnected affective outbursts can be disintegrative. The schizophrenic frequently creates elaborate systems,

cosmologies, etc., as he tries to create order within his deteriorating personality and changing inner experience, in an attempt to make his world intelligible to himself. If he is allowed to work alone, his autism deepens and his hallucinations increase. He should be encouraged to recreate real form in his art, with individual attention from the therapist and social interaction with other patients to discourage escape into fantasy.

Plokker opposed the idea that there are generally typical characteristics ^{suicidal} to schizophrenic art. He stated that all investigators who have considered their work in a responsible manner come to the conclusion that neither subject nor workmanship, stroke, lineation, composition, or use of colour can be considered pathognomic (p. 128). He found most value not in passions breaking out from the unconscious through art, but in the mastery of these "passions" through imposing order and form upon imagery, in the same way that one might be expected to master irrational thoughts and behaviour.

Like Reitman, Plokker emphasized the importance of non-intervention in the expressive act of painting or the analysis of the image. When the patient is unable to interpret his own work, the interpretation the therapist lays on the art is dangerously decisive. In fact, the personality of the analyst and his method can be so suggestive

that one must seriously consider whether "spontaneous utterances" can be produced by anyone who is in therapy.

He concluded that claims of cure with art therapy should be heard with the greatest reserve: art therapy is an adjunct therapy. 

Growth in the use of art therapy within the medical psychological model has been hampered by the growing pressures for scientifically controlled experiments in proving therapeutic effect. Such scientific models are difficult to create since they involve interpretation of visual-spatial contents in verbal-linear order. Wolfgang Luthe (1976) has created such a model. His work is of particular interest both as an effort to define the aesthetic within a well-conceived experimental design, and as definition of a new direction for art therapy based on current interest in such separate fields as neuropsychology and the study of self-induced altered states of consciousness. Because it is one of the few studies of art carried out with reference to the latest research on right and left hemispheric brain function, which promises to open new avenues of interest in the use of art in therapy, this study will be treated in more detail than those above.

Luthe defined creativity as "the ability and facility to actually produce, make, or express something that, at least in part, originated from oneself." His purpose

was to develop techniques which facilitate creativity not specifically in the visual arts, but generally. He used a method of "artless art" or "no-thought-mess-painting" which he justified on the observations of psychologists, psychotherapists, educators, neurologists, and others interested in creativity. However, unlike other techniques such as "lateral thinking" (DeBono, 1967) which are concerned with problem solving and generation of new ideas through largely verbal and logical-analytical thinking manouvers, the creativity mobilization technique uses a process-oriented, non-verbal, "no thought" approach concerned specifically with neurofunctional, psychophysiological and physiological aspects of the creative process.

The emphasis on a process-oriented non-verbal approach to painting, and the additional insistence on a "no thought" performance, partly derives its rationale from the neurofunctional division of labour between the right and left hemisphere of the brain. It has been shown that the left hemisphere, which ordinarily co-ordinates the voluntary movements of the body, is relatively specialized in work with words, in sequential linear modes of operation, analytical-logical thinking, recall of verbal material, calculating, classifying, reading, writing, naming, explaining, and describing, and seems to provide intellectual forms of insight. Complementary functions of a primarily

non-verbal nature are carried out by the right hemisphere. The neural mechanisms of this right half of the brain control voluntary motor activity of the left side of the body and involve work with spatial forms, visuo-spatial relations, spatial synthesis, analogues, music, melodies, rhythm. It is synthesis-oriented, processes information more diffusely, and operates in holistic (Gestalt), global and relational manners. Systems of the right hemisphere appear to be more insightful, have a rudimentary verbal conceptual scheme, produce visual imagery, elaborate language comprehension, aesthetic experiences, make use of feelings and emotions such as laughing and crying, see things in a broader perspective, take facts provided by the left hemisphere and make them meaningful, or elaborate new combinations for existing information (Luthe, p. 6).

Luthe's method was devised to mobilize the activities of the right hemisphere of the brain (passive concentration) as an antidote to the lopsided training of neural mechanisms in the left hemisphere (active concentration) which our culture promotes. It has been noted that people suffering from mental disorders have unusually slow interchange in the activity cycles of the two brain hemispheres. Since the technical emphasis on right hemispheric nonverbal work in many instances constitutes a reversal of the habitual patterns of left hemispheric work, Luthe believed his program

might also help to indirectly enhance the functional relations between both hemispheres. He based his program on the assumption that an active differentiated and flexible relationship between both hemispheres is a desirable feature of mental and physical health.

Although he did not conclude that creativity is located in the right hemisphere, Luthe believed that elaborations carried out by the right hemisphere provide a variety of functional elements that are indispensable to creativity; that creativity functions of the right hemisphere should be able to make uninhibited use of the functional contents of the left hemisphere.

Luthe listed more than fifty factors which tend to tap the intuitive potential of brain function. He considered the "artless art" of process-oriented, no-thought-mess-painting an attempt to avoid dualistic and product-oriented elements such as forms, words and ideas, providing an opportunity for the inherent natural forces to interact more freely, an idea compatible with Zen.

Analyzing the effects of the process, Luthe described the general therapeutic benefits of the program as desensitization to anti-creative influences and release of emotional tension through muscular action and sound, contributing to such benefits as reductions of depression and primitive defenses. He noted an increase in the ability to tolerate

frustration, to work with others, to improve self-observation and self-concept.

Luthe identified five stages of mental reactivity which were experienced during the no-thought-mess-painting sessions. During stage one, the participants experienced impatience and frustration with the physical process and resisted it in various ways. During stage two, disturbing mental material surfaced to the point of awareness. Stage three was a mentally recuperative, creative period during which pleasant sensations and spontaneous memories were frequently projected into reality, leading into an associated type of enjoyable action. During stage four, the vivid awareness-arousing mental elaborations characteristic of stages two and three had receded, leaving a peaceful state into which brain-disturbing material could erupt and be discharged in a self-regulating manner. In stage five there was a shift to tranquil and deep relaxation in which, Luthe stated, the ability to become timeless, selfless, outside of space, of Society, of the past and future has been self-actualized, a state of mind essential to creativeness as well as Zen (p. 95). The paintings done during these stages frequently evolved from random scribbling to well-integrated abstracts which "convey a natural integration of spatial, dynamic, structural and voluntaristic components".

Luthe's findings indicated that a particular type of painting experience could be therapeutic in its own right, separate from other established therapeutic modes. Because the theoretical base of Luthe's study is experimental, growing out of interest in the specialized functions of right and left hemispheres, it is an attempt to mediate and to integrate the esoteric and the intuitive with the scientific in an understanding of creative brain function. It is faulty in not including a control group. Because of its limited scope it should supplement but not replace current methods and theories of the function of art in therapy.

Summary

During the past century, interest in understanding the art of psychotics resulted in growing recognition of the many ways in which art can be used in the practice of psychotherapy. First appreciated as graphic representation of mental states, description of conflict and autobiography, art was used as a diagnostic aid. Its relationship to the phonetic-ideographic stage of human development was examined on a cultural level, focussing interest on the symbolic quality of images.

An interest in the universal nature of symbol and form led to the development of a number of standardized tests for

differential diagnosis. Concern for aesthetic expression as "a bridge from experience to form and a universal expressive urge" in the 1920's was eclipsed by interest in Freudian dream theory and sublimation of the pathological motivation of the artist. The therapeutic use of art became inseparably related to memory and expression of the unconscious through 'primary process', while contents of the art revealed the types of defensive behaviour mechanisms used by the patient to disguise sexual motives. All art expression was seen as part of a universal system of concealment and pathology. Reacting to the concept of art as pathological concealment of sexual motives, Jung recognized the creative and integrative function of the symbol; that art reveals not only the pathological contents of the personal unconscious, but the integrative forces of the collective unconscious.

Systems of art therapy using spontaneous art work and based on Freud's psychoanalytic model, with some modifications according to the integrative theories of Jung's analytical psychology have been developed since mid-century by Naumburg (1950, 1953, 1966), Meares (1958), Pickford (1967), Kramer (1971), and others.

During this same period medical psychologists Reitman (1950), Dax (1953), and Plokker (1965) attempted a scientific approach to art therapy through the study of

brain disorders, mescaline experiments, injury, and surgery. They attempted to devise a standardized approach to diagnosis through analysis of the content of the art in terms of the neurological disturbances and insufficiencies. At the same time, they recognized and categorized a great many ways in which art served other therapeutic purposes. While they did not deny the usefulness of the psychoanalytic model, they recognized its limitations and the potential for the use of art in therapy well beyond the limited analytic model.

In 1973 Betensky insinuated the influence of Gestalt therapy in her discussion of "awareness" in terms of experiencing the "here and now" through art. In the same year, Ryne defined a system of Gestalt art therapy. She changed the approach from nondirective, spontaneous art work by suggesting specific exercises to facilitate free expression, directing the patient toward specific areas of self awareness. Her work was not confined to individuals with mental problems but offered the Gestalt art experience as a program for general life enrichment.

The latest approach to the problem of the function of art developed within the medical psychological model. Wolfgang Luthe (1976), basing his theory on neuropsychological research, described the use of a completely free style of painting which he credited with enhancement of the integrative function of right and left hemispheres of the brain.

The work represented a step toward integration of the previously conflicting scientific and intuitive approaches to an understanding of the function of art in therapy.

PART II

CHAPTER III

CULTURE AND ART

Baker Brownell (1969) describes two tendencies in art. One is toward folk and regional art, occupational and craft art, a type of nativism which is diffuse and informal. It is largely the art of the amateur, often rural or ethnic, and mystical or unconsciously rhapsodic in character. It is humane.

The other tendency is toward the intellectual and sophisticated, the complex and specialized work of professional artists and critics, marked by novelty, technical perfection, professional execution and rationalistic development. It rarely serves humane and regional interests (Brownell, p. 201).

It is the first tendency which is significant in describing the cultural use of art as it contributes to our understanding of the function of art in therapy.

Culture is a pattern of behaviors, ideas and values shared by a group. Art is the pattern evolved in a complex interplay of personal and social processes of adjustment

(Read, 1967, p. 18). The art of a culture is a vehicle by which ideas and values are passed from one generation to the next; it helps to maintain cultural behavior, ideas and values, and provides a sense of continuity, familiarity and belonging even in the face of change.

Certain aspects of the cultural use of art have therapeutic implications: art as order, identity and record; art as a vehicle for expression, interpretation and communication; art as decoration and enhancement; and art as suggestion and persuasion.

Art does not provide a complete picture of a culture. However, it yields valuable information on traditional roles and communal organization which may constitute the only remaining record of a civilization.

The Cultural Role of Art

Art as Order, Identification and Record

Art is an escape from chaos into order (Read, 1972, pp. 42-43). Order may be defined as the degree and kind of lawfulness governing the relations among the parts of an entity. Such lawfulness, or obedience to controlling principles, derives from the overall theme or structure to which the behavior of all parts must conform (Arnheim, 1966, p. 123). The lawfulness is intrinsic, based on abstract

formal principles drawn from innate human qualities and the experience of life itself.

Possessing this initial relatedness as part of a highly structured and intricately formed physical world, man naturally searches for order and relationship in the chaos of events which encompasses him. He forms dynamic order out of what he experiences, and in so doing gains control of a small part of his world. Whether this ordering is carried out consciously or unconsciously, the control gained is intimately bound up with his instinct of self-preservation (Hayman, 1969). It is from man's natural ability to create order, form and pattern out of the elements of existence that art has developed (Hayman).

Order does not imply rigidity. It lies between the extremes of strict, measurable order of continuous pattern, and a free autonomous order which adjusts only vaguely to the law of the edge as it spreads out over the surface in controlled but by no means logical relationships. Progress requires a fluid slackening and change of direction and pace (Prinzhorn, 1972).

All ordering begins with the individual. Cultural art forms are adopted by a community from the work of individuals and are imitated, re-interpreted and perpetuated by its group members. Each artist describes both an individual and a collective cultural identity in his work.

In accepting and approving a particular style of art to project and perpetuate its self-image, the community's collective self-image can be transformed. However, this is not usually the case. Artists are most frequently rewarded by acceptance of art work which does not radically depart from existing standards. A collective cultural effort becomes evident in common design, shared styles, pattern, etc. The culture thus channels and focuses the creative energy of its members to produce a social organism which appears and acts as a unit. The individual functions with security and confidence within the well-defined social order of the ethnic group, the "cultural collective".

However, no two communities develop the same patterns - designs, dress, decoration, religious ceremonial, dance, and so on. In moving to another group, the sense of acceptance, identity and group support is lost. Old cultural forms can no longer be relied upon in dealing with even the small problems of daily existence. Marginal to a culture which is unfamiliar, one is both physically and psychologically vulnerable. Cultural art forms then become a record of one's past.

Cultural art forms are not records only in an historical sense; they do not solely record personal and group experiences. They contain also lessons in order and survival, aesthetic standards at once unique and universal,

descriptive of evolution and change. And they exist now as free objects and patterns independent of the passage of time, substantial evidence of human achievement.

Art as Expression, Interpretation and Communication

Rudolf Arnheim (1966) defines expression as "the external manifestations of the human personality", and "the outer manifestations of a state of mind" (pp. 51 and 53). Prinzhorn (1972) describes it as the bridge from experience to form. Expression is frequently confused with Expressionism: art which gives outward release to some inner pressure, some internal necessity generated by emotion, feeling or sensation. The work of art becomes a vent or safety valve through which intolerable psychic distress is restored to equilibrium (Read, 1972, pp. 225-226).

Expression is generally considered to be the first step in communication. Expressionism is more often related to neurotic tension; its function is to release cathexis, which does not necessarily lead to communication.

Art expression involves the artist's interpretation of his subject. In art, one does not reproduce the individual, real external object. The artist creates a personal concrete image out of his perception of the object, according to a complex personal system, the product of physiological, sociological and psychological factors which are unique to

him and yet have meaning within the broader social context. He combines what he sees visually, with other sensory perceptions, complex ideas and purely abstract intuitive conceptual elements to produce an art style as unique to him as his thumbprint or signature. The artist is free to view his art, rework it; to change his interpretation. Expression and interpretation are part of a process of visual thinking and problem solving (Arnheim, 1969).

Interpretation occurs not only in the expressive process, but also in the mind of the observer, who experiences the art image in his own unique way, according to a somewhat different set of physiological, sociological and psychological factors. It is never possible to interpret the art work of another person with complete accuracy. Real discrepancies always remain between the way in which the artist and the observer interpret a single work.

The statement that art is a universal language may be less valid than we would like to believe. Interpretation is a subjective process which often leads to error. In observing a given art form we are limited by our understanding of the culture and the degree to which the artist is central or peripheral to that culture. Visual communication through expression in form is clearest when the artist and the viewer share the same values and experiences. One who enters the territory of another individual or cultural group must learn

to read the symbols of the artist, and the society to which he relates.

While whole systems of written communication originated in the use of graphic images to convey messages, the development of the more efficient alphabet system was the result, in part, of the need to improve upon or omit errors of interpretation of image in favour of the more specific relationship between sign and sound.

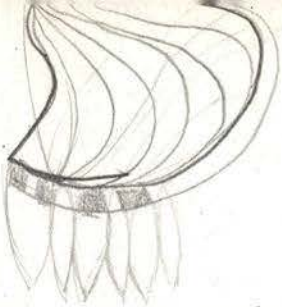
To add to the abiding problem of interpretation, there is the fact that nonverbal communication is an important, insistent and inescapable mode of cultural reinforcement. Symbols of social position and role - fashions in clothing, furnishings, colour, decoration and so on - are visible everywhere in the social environment in quantities that preclude verbal communication. Today, these symbols are subject to rapid and irrational change in a consumer-based economy. It is possible to become as anxious through losing contact with the familiar symbols of our own culture as is the individual facing a different ethnic environment.

Art as Enhancement

The practice of decorating the body and enriching the visual effect of the outer world by adding perceptual elements appears to be universal. This suggests that the urge to seek beauty is basic to man. At least part of our concept

of beauty derives from our appraisal of nature's way of expressing sexual season. Male birds and animals reach a state of full splendor during the mating season, and plants produce flowers to attract insects with their colour and perfume. We add sensory elements to make what we enrich more "attractive". Body enhancement derives most directly from a sexual motive. Beauty of surroundings has a more general sensory appeal.

Colour, lighting, texture, line, form, sound and smells all create moods and contribute to feelings of pleasure, relaxation, excitement, tension, and so on, according to the quality and quantity of the media, the patterns which they create, and the associations which they stimulate. Expensive decoration gives prestige, which is closely related to power: one can buy the suggestion made by costly decoration. Unique decoration suggests individuality and non-conformity. If it is expensive, it may also communicate power and prestige. A person may choose a type of decoration in accordance with the "appearance" he hopes to make and the amount of deceit he believes will be tolerated. It is possible to intuit the way a business operates through the subtleties of its appearance; therefore its image is carefully controlled to provide only the appropriate cues. Beauty then becomes a disguise.



Business has both promoted and exploited man's decorative urges, turning the art of personal and environmental enhancement into a very profitable industry. The natural expression of the decorative urge is distorted to suit a profit motive. The image projected often falsifies the reality it decorates. Our senses are no longer completely reliable in differentiating between the hibiscus and the fly-trap; we must rely on our intellect.

Art as Suggestion - Image "Magic"

Art historians speculate that Old Stone Age man made no clear distinction between image and reality. By making a picture of an animal he may have meant to bring the animal itself within his grasp (Janson, 1962). Primitive cultures appear to use image-magic as a controlling system much as modern man uses science. The magical power of the image lies in the suggestion and in the faith and confidence it elicits (Arieti, 1976, p. 266).

The image performs many religious functions. It may be appealed to directly, or indirectly as a symbol of a higher power, for divine intervention in human affairs. In the practice of Zen, the image provides a focus for heightened attention in meditation. In the Christian church, art teaches a moral lesson. Intended as an object of contemplation, it has often been feared for the power which

man invests in it. This fear was directly expressed in the destruction of church art during the Protestant Reformation. The interdict against art in the Hebrew and Mohammedan religions also derived from fear of the potency of imagery to control that which is depicted (Kris, 1952, p. 48).

The emotional basis for image-magic remains with us. The artist uses the picture to dominate objects, suspend action, and hold reality against the destruction and decay of time (Kris, 1952, p. 50). Through the medium of the portrait both artist and observer hold those they are afraid to lose, and call into comforting presence those who are absent (Janson, 1962). In looking at pictures of special occasions such as weddings or birthdays, feelings and emotions associated with those occasions are revitalized.

As a creator of images, the artist manipulates reality and emotional responses in the observer. By painting over or distorting portraits the artist can punish those who displease him or cause him pain or anguish. The portrait of a political leader posted in a public place elicits conformity to a doctrine not only as propaganda, a symbol of a system of values, but also as a reminder that the leader is watching. Defacing or destroying such portraits, like burning in effigy, is a symbolic expression of defiance, a refusal to submit to a system. As an object of displacement

the image is a much less dangerous focus for anger than a direct attack upon the leader.

In some cultures, officially endorsed caricature provides a mode by which the powerless may criticize real or supposed aspects of a power figure. When the politician's image is distorted in caricature, under the surface humour a sort of image magic is at work. The victim is perceived by the public in the distorted way the artist intends.

Art has the power to change both private and public values. In his essay on art, morals and Western society, H.R. Rookmaaker (1976) discusses the way in which we are desensitized to emotionally threatening issues by exposure to pictures which become continuously more explicit, within the limits society will tolerate, but always pushing those limits. Intolerance of sexually explicit art has been slowly eroded with continuing exposure to both painting and photographic art. In accepting the explicit picture, we are desensitized to the reality, the action.

The most obvious uses of image-magic to manipulate human behavior today is advertising, which seldom convinces, but slowly and subtly influences us. Where manipulation of human behavior through the use of art forms has an economic motive, "art" has become a well developed science.

Therapeutic Implications and Clinical Application

A system for the therapeutic use of art develops naturally from a study of the cultural function of art. It does not contradict the psychotherapeutic model, but does not always include it. This approach to an understanding of the function of art in therapy has the advantage of being practical in the sense that it uses cultural processes with which we are already familiar, and in being relatively free of limiting therapeutic theory and doctrine. The integrative processes it uses are those by which the individual adapts to the social group, at the same time as he expresses his individuality.

Art as Order

Study of the cultural function of the arts indicates that the capacity to create order from visual experience is closely linked to human survival. One who has lost the motivation or the ability to order for himself, or whose ordering faculties are inadequate, survives because of the surrounding social order to which he can turn for support. However, the goal of therapy is to develop whatever potential the individual has, to enable him to actively assume responsibility for himself within his cultural support system.

Psychoses and neuroses are described as psychic "disorders". As the description implies, there exists in such conditions certain problems in ordering internal and external stimuli. In dealing with such disorder, art is a medium which can assist both diagnostically and therapeutically in improving the capacity to order. Schaeffer-Simmern (1950, p. 199) states

The independent process of striving for a definite order of form in the field of visual experience affects the individual as a psycho-physical whole. Such striving helps to shape a more balanced personality by decisively furthering the organization or re-organization, the construction or reconstruction of essential aspects of one's total functioning.

Following this rationale, art is valuable as a paradigm for improving psycho-physical order in the mentally retarded, the inadequate personality, the depressed, the hypomanic, the obsessive-compulsive, the alienated adolescent and the schizophrenic.

Psychic "disorder" is manifest in the art of mentally retarded persons as infantile ordering. Visual-spatial drawing tests are used to help determine the level of mental function. From these tests specific art programs can be developed to aid in fully utilizing the limited capacity of the retarded (Figure 1, p. 60).

An individual diagnosed as an inadequate personality usually possesses a nearly normal intelligence, but he has

problems of organization and integration, and stands confused and helpless before the pressures of daily life. He describes his disorganization in his art, and often discusses his problem with some insight. He benefits from an art program which simplifies and organizes his daily routine. In his therapy he sorts out the confusing elements which must be ordered and removes unnecessary disruptive factors. The new organization is simple and provides the additional support of a daily routine (Figure 2, p. 61).

Depression is graphically visible in two ways - a paucity of colour and form, and a passive approach to order. The depressed person must be motivated to actively participate in his own therapy, and toward increased use of colour and form, each of which directly affects mood. Little is gained from allowing repeated graphic description of his depression; this can only depress him further (Figure 3, a and b, p. 62).

On the other hand, the manic chaos-maker destroys already existing order by responding to an unmanageable profusion of thoughts, feelings and external stimuli at one time. His art contains a confusion of clashing colours and unordered fragments of form which often move off the edge of the drawing. Art materials may stimulate the manic and increase his confusion, in which event their use is contraindicated.

The obsessive-compulsive individual clings to a small, rigid order which is unsuitable to most life situations. A therapeutic art program includes experiment with free use of colour and form. Therapy should be directed toward a wide cultural program including dance, music, literature and sports where he can function more productively while still receiving support from the rules and regulations associated with each (Figure 4, a, b, and c, p. 63).

The rebelling child or adolescent often creates a counter order which defies the one to which he is expected to conform. He is generally anxious to draw this world, and is encouraged to develop it and interpret its meaning and its function in relation to both his own needs and the expectations of his family (Figure 5, p. 64).

The problem of order in schizophrenia is complex and imperfectly understood. However, certain generalizations can be made from clinical experience of schizophrenic art work. Steck (1950) describes the peculiar cosmos created by schizophrenics in their art before the last quarter century of biochemical intervention, as an attempt to re-organize the world, which disease has thrown into chaos, a defense reaction against the overwhelming fear and anguish inspired by invading psychosis. However bizarre this new delusional world may seem with the elaborate theories the schizophrenic creates to explain and to order,

it provides a degree of security within which function - or malfunction - is possible.

With biochemical treatment the schizophrenic can frequently return to a world of rational order. A therapeutic art program should encourage realism and control in the use of colour and form. Continuous contact and interaction with the therapist is necessary to prevent the patient from escaping into fantasy. Visual hallucinations are aggravated by painting and drawing, and art therapy is contraindicated until the unbidden images are controlled (Figure 6, a, p. 65).

With continued psychotic breaks, the structure and order of the art work of the chronic schizophrenic deteriorates until only disorganized fragments remain, and the patient's inability to produce coherent art work increases his distress (Figure 6, b, p. 65).

Identification and Record

Most of us need the security and confidence that comes from a comfortable relationship with a social group in which we are aware of what is expected of us both individually and socially. The individual who does not find acceptance suffers the pain of isolation and the anger of alienation. He may isolate himself because of a poor self-image, or he may be rejected by his peers because they perceive him to be

in some way different from them, perhaps from a lower socio-economic or educational level, or from another ethnic background (Figure 7, p. 66).

The isolated and alienated person benefits from a group art therapy program which explores both self and cultural identities and helps him find both self and group acceptance. Since social relationships are spatial, they are easily described spatially in drawings. Both problem and projected solution can be described concretely in art and examined realistically. Lowenfeld (1970) and Kramer (1971) have described in some detail the use of art therapy for social integration.

A poor self-image is often overcome by the search for roots in a cultural identity, where values and art forms - music, religious symbols and ceremony, literature, dance, etc. - are all explored and accepted by the group. Biases and stereotypes expressed in art help group members acknowledge and come to terms with their own hostile feelings. The first step in the social integration of the isolated group member is the appreciation of his uniqueness and individuality.

After a person has been painting and drawing for some time in a therapy group, he gains confidence to paint pictures of significant incidents and relationships in the

past, and creates a pictorial record of his life, a myth of self. He describes himself to himself in lasting, material form. Experience previously vague and fragmented is given meaningful order.

The artist reveals himself to himself as much in what he chooses to alter or omit, as in the experiences he makes public in his art. He develops a concrete self-concept which is an expression of both his experience and his personality.

Expression

Expressing or giving graphic form to thoughts and feelings has therapeutic potential whether or not it results in communication. The release of cathected energy alone is therapeutic. In unfocussed anxiety states such as agitated depression, expression of the feelings underlying fear usually leads to disclosure of the source of the anxiety in emotionally threatening material which is given symbolic form. The graphic expression often suggests a course of action to relieve the cause of the anxiety, whether it is endocrine imbalance, inadequate or inappropriate life style, sexual tension, and so on (Figure 8, a to i, pp. 67-69).

When one expresses in art what previously has been internal, one can examine what is new, unknown, contradictory or frightening and respond to it rationally. It is possible to deal with a problem once its dimensions are made clear.

Expression is the first step in problem solving through visual thinking.

Interpretation

When choosing, in art, to describe certain aspects of a subject and to suppress another, the artist presents a personal interpretation of his perceptions. A second interpretation is elicited when the artist is encouraged to describe his work. A third interpretation occurs when someone other than the artist looks at the work and finds in it personal meaning, in the context of his own experience. Since interpretation is the product of dynamic thought processes, it provides insight into the cognitive function and the defense mechanisms of the interpreter. The Thematic Apperception, Szondi and Rorschach tests in which participants ascribe meaning to standard images, attempt to determine personal motives from subject interpretation through reference to a list of typical responses. These tests are frequently used in diagnosis.

In view of the highly subjective nature of human experience, one cannot accurately describe another person's use of symbols. Therefore a patient's work should not be interpreted for him. Such practice is likely to be in error, to be dangerously directive and in the end, untherapeutic.

Communication

Art is a valuable supplement to verbal communication in therapy. Our spoken language is comparatively rich in names for things and qualities, but it is poor in words describing processes and relationships (Gombrich, 1972, p. 167). Some relationships are easier to represent in a diagram than in verbal description. These are listed below.

The complex relationship between people and events which must be dealt with in therapy are frequently communicated best in pictures (Figure 9, a and b, p. 70). Images are best used to reproduce other images - memory, dreams, fantasy. Some abstract ideas can be expressed only in symbols; archaic symbols (Jung) cannot be expressed in words. The art image more frequently than words, escapes repression by the censor (Freud) because of its indirect, symbolic nature (Figure 10, a and b, p. 71). The size and placement of images in relation to other pictorial elements communicates its own message. We reject verbal distortions and hyperbole, but accept and recognize the significance of the same process expressed pictorially. Fantastic and unrealistic drawings convey particular meaning difficult to recreate in words.

Ainslie Meares (1957) describes the spoken word as transitory. The only record it leaves is in the memory of

those who hear it, and of all the functions of the mind there is none more subject to psychological distortion than memory. Relatively simple defense mechanisms such as denial and forgetting can distort accurate assessment of verbally expressed conflict. While camouflage or rubbing-out may be defences used by the artist, neither of these is as effective as forgetting the spoken word. The evidence of an attempt to alter or obliterate a drawing remains as a sign of conflict beyond what is directly expressed in the subject of the work.

Images are more firmly fixed in consciousness than words, as are all memories associated with unique and vivid images. A whole system of art therapy designed to improve memory is suggested by the study of classical rhetorical techniques. These techniques stimulate memory through the association of ideas and names with bizarre images.

Because it takes longer to create and arrange the elements in a picture than it does to speak about them, they can be better considered and developed. In dialectic with the image as it is emerging, the artist often finds his own answers to his questions. In free-association with the art, he improves his verbal articulation of sensitive material.

The verbally blocked and those who are wary of words (which can be misinterpreted, misquoted and forgotten) often

gain new confidence in speech used to describe what they have drawn. Art not only supplements but actively improves verbal communication.

Enhancement

The art produced need not be of high aesthetic quality to have a therapeutic effect. However, developing painting and drawing skills, and a sense of aesthetic value is one of the goals of art therapy. This can be achieved through exposure to carefully chosen visual material in reference books, wall hangings, pottery, painting, etc. In improving the aesthetic quality of our surroundings we enhance our lives. Colour, line, form and texture not only reflect, but also affect our mood. Inasmuch as the individual learns how to improve the aesthetic quality of his environment, he contributes directly to his feelings of inner harmony and well-being.

Suggestion - Image Magic

"Image-magic", the potency of the image to alter feelings and actions, is valuable in art therapy. The power of the artist to dominate objects, to evoke emotional presence and to displace destructive physical and emotional energy upon an image-substitute, all have obvious therapeutic implications.

The calculated use of the image to directly alter feelings and actions has developed into the science of advertising. Advertising is a science of persuasion which anticipates the viewer's responses to perceptual stimuli so that he buys the portrayed commodities. The art therapist, often unconsciously, uses similar methods to manipulate behavior - to motivate. A study of the relationship of perception to suggestion as used in advertising casts some light on the function of art in therapy.

The relationship between the image and exorcism is realized when art is used to relieve neurotic sensitivity to emotionally threatening thoughts and feelings. As the neurotic paints his guilt-associated images, they are externalized without the violence which might accompany acting them out. A kind of exorcism or "calling-forth" occurs. This process may also be described as catharsis or desensitization, but each describes only one aspect of what occurs. Neither is an adequate replacement for the metaphor of "calling forth of demons", which is often the subject of such paintings.



Figure 1.

The retarded can frequently describe intuitively in drawings the dynamics of their own behavior. The artist, a retarded, epileptic and violent 25 year old male, described his drawing as "the yellow brick road to my mother's heart", reached by a maze of lines punctuated by multi-coloured spots where movement was stopped or direction changed. He described, in some detail, fights between various foster parents, social workers, etc., at each large coloured spot on the way to the center. An alert nurse recognized in the drawing the dynamics of the artist's behavior on the ward. He progressed hopefully toward his goal of receiving loving attention by creating conflict either through violent outbursts or by setting staff members against one another, behavior learned in childhood. He described his red goal quite realistically as "not worth much. When I get there I have to start all over again". The drawing suggested that the artist had more control over his behavior than he had been credited with, and a change of program was indicated.

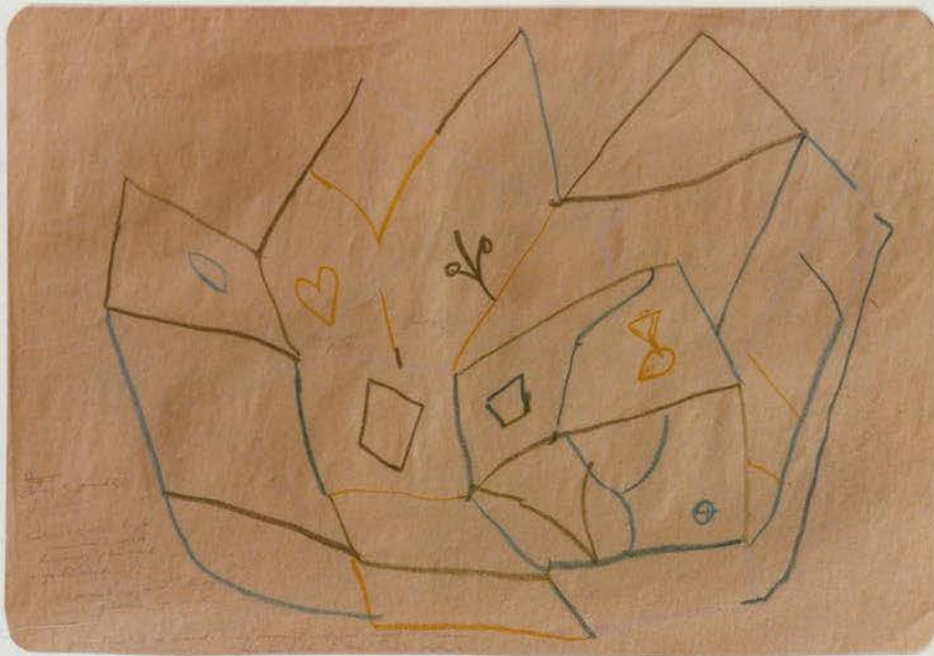


Figure 2.

In this crayon drawing, the artist, a 34 year old mother of three, described herself as a house which had collapsed. Having come from a large and supportive family on the prairies, she found it difficult to organize her own work. This situation was greatly aggravated by her husband who demanded that she drive him to work in the morning, then drop the two older children off at school and take the car back to him at his shop. Not able to return home during the day, she and the youngest child fended for themselves until her husband finished work. After dinner she was expected to do her own work. Her long daily wait resulted in anxiety and depression. Diagnosed as an inadequate personality, she began the necessary reorganization of her daily routine in drawings which presented a clear picture of her needs and gave her confidence that she could control her own work day with a complete change in the previous self-defeating routine.

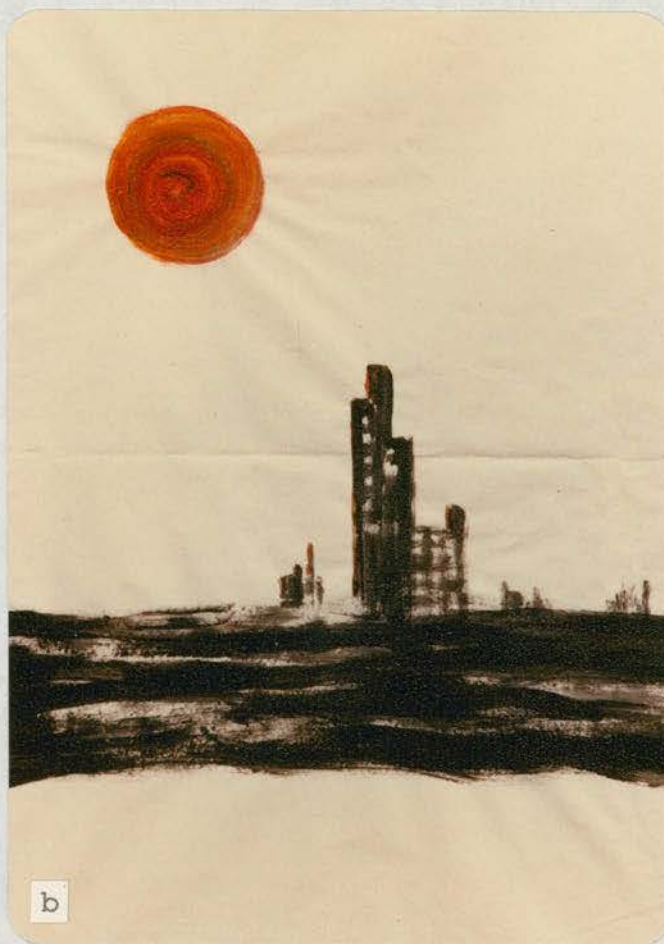


Figure 3, (a) and (b).

Both (a) and (b) are depressed statements. (a) describes suicidal intention requiring emergency intervention. (b) speaks of emptiness and hopelessness.



Figure 4, (a), (b) and (c).

These pictures describe the process of breaking down rigidity in drawing (a) by introducing a free-form doodle, (b), in order to facilitate an expression of free affect in (c), with a corresponding release of physical tension. The artist described in these three drawings a conversation which began formally, as in the first picture, with conventional parallel exchange, It was necessary to take a risk and express some sensitive feelings in less formal constructs, an exploration which resulted in the energetic communication depicted in the third frame.

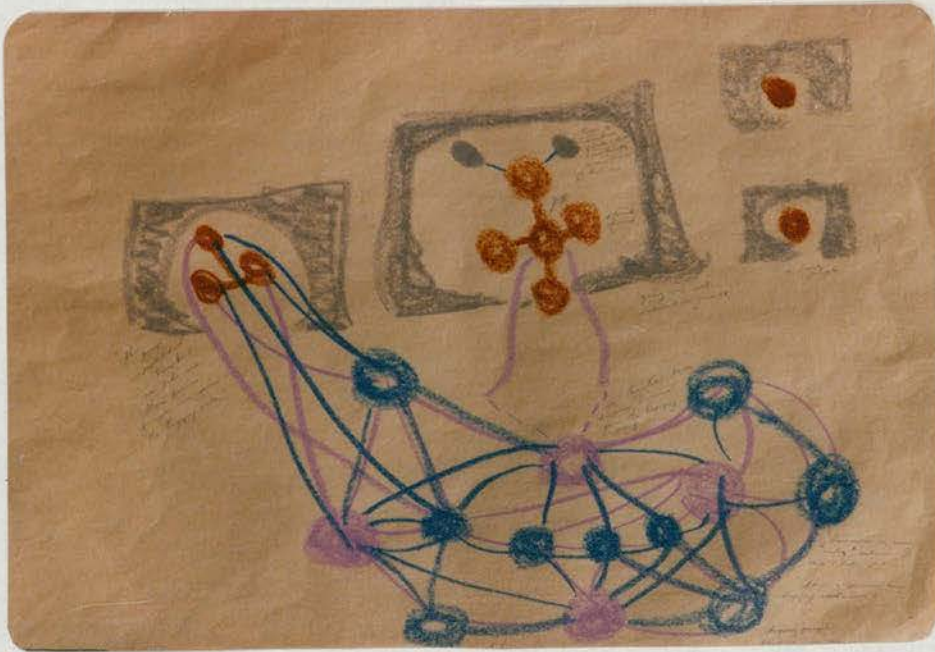


Figure 5.

A depressed and suicidal adolescent described her social problems in this drawing. The brown and grey dots in the gray box represent both the artist and her close group of friends. The pink and blue dots represent socially well adjusted schoolmates, including her sister, whom she admires but cannot join without complying with her parents' wishes. She described through reference to these simple abstract symbols the way in which her own attitude toward parental authority prevented her movement toward real goals.



Figure 6, (a) and (b),

These two paintings represent the work of acute and chronic schizophrenics. In drawing (a), a self portrait, the intrusive unbidden images of birds became hallucinations at the onset of an acute psychotic episode. In (b) the artist, who had been in hospital for several years, attempted to revive her interest in painting, which she had previously enjoyed. Diagnosed as an epileptic, potentially violent, and a chronic schizophrenic, she painted only formless streaks of black and white in three painting sessions. To this daubing she ascribed symbolic content which contained veiled threats of violence. This, her final attempt to regain her capacity to paint, began as the small black outline of a child. She covered this over in black, stating that she had been responsible for the death in infancy of her only child. Threatened by the compelling nature of the image and her own inability to work creatively at will, she withdrew from the art therapy program.

In both instances, art therapy was contraindicated because it increased the patients' agitation and was non-therapeutic.

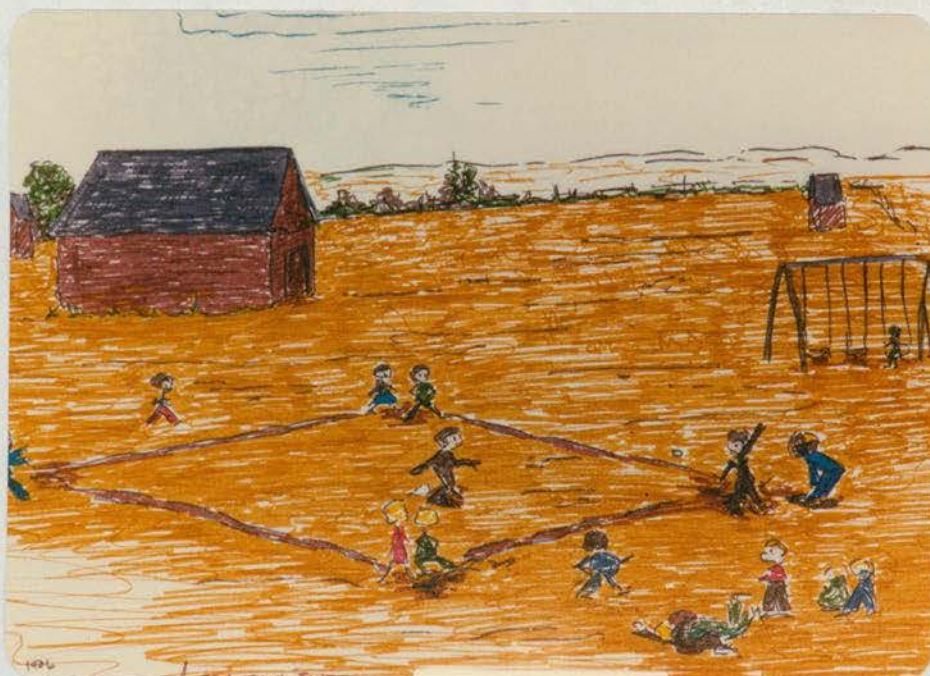


Figure 7.

Drawings from childhood memories frequently uncover the source and the dynamics of present behavior. In this felt-pen picture of a summer game, the artist recognized her own rejection by peers in the small figure sitting on the swing. She was surprised to have to acknowledge the ferocity of her reaction to this rejection in the green-clothed figure pouncing another child in the lower right-hand corner of the picture. The drawing provided useful information on other complex relationships with peers involved in the game.

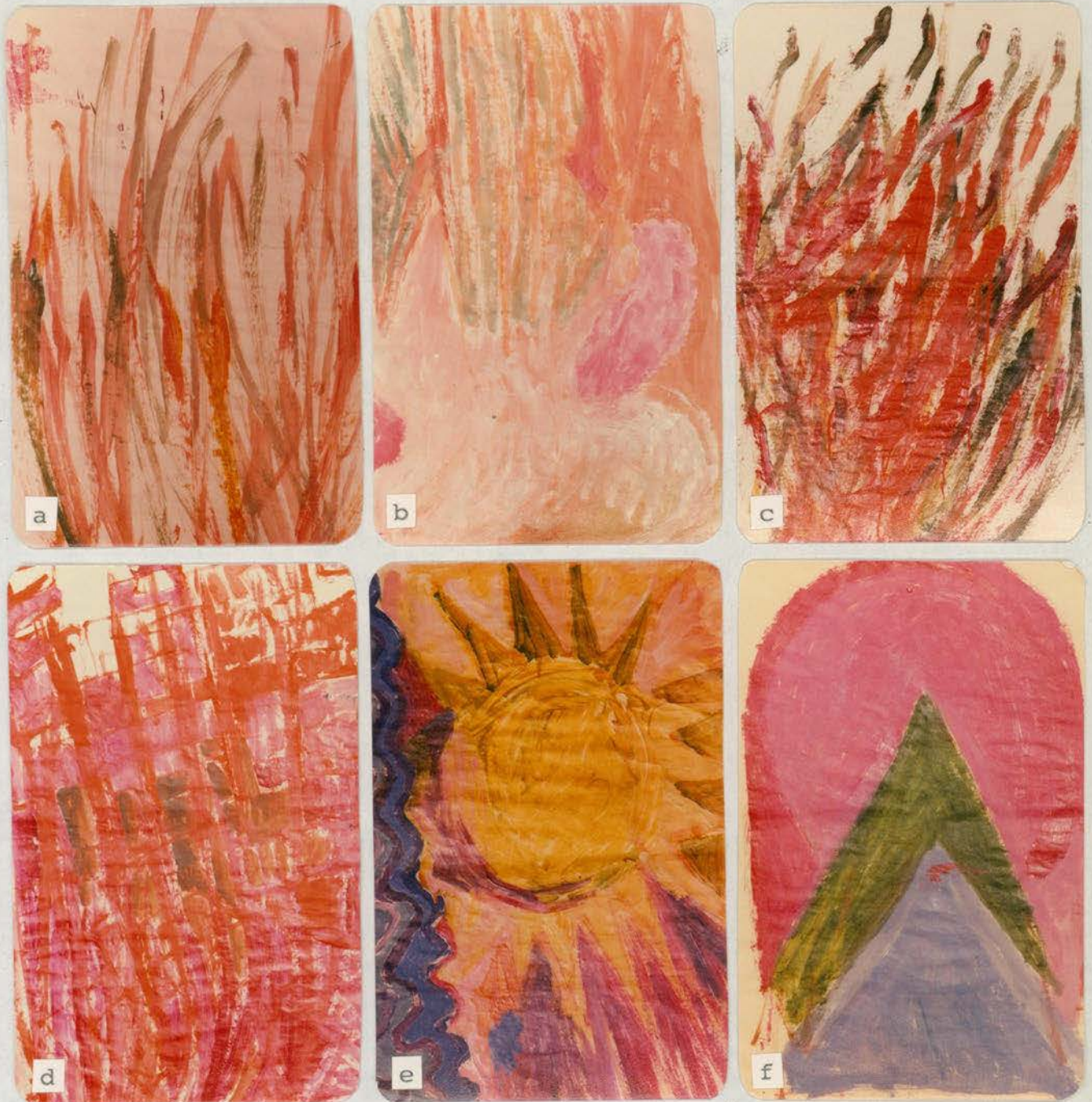


Figure 8, (a) to (f).

A woman in her late forties, experiencing unfocused anxiety, began direct kinaesthetic expression of feelings in quickly executed acrylic drawings, choosing colours appropriate to her mood. In (b), an unsuccessful attempt to soften the colours she had used in (a), and to bring form and organization to her work, resulted in a primary process image which she frequently painted, and which increased her anxiety. In (c), she released her anger directly on the paper. In the fourth drawing, (d), she still expressed her rage directly in the colour and brush stroke, but brought control and some form to the work.

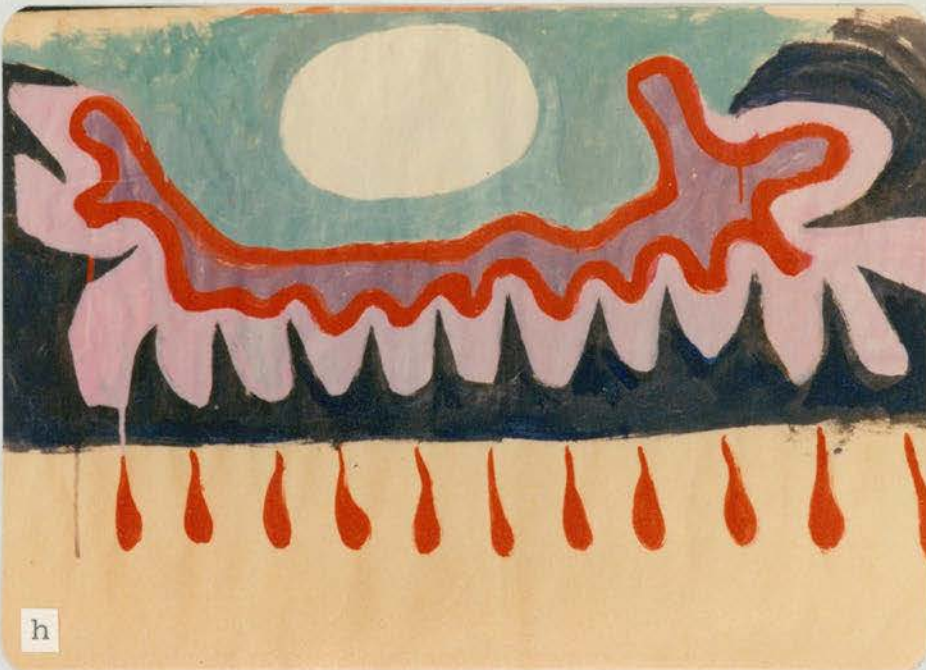
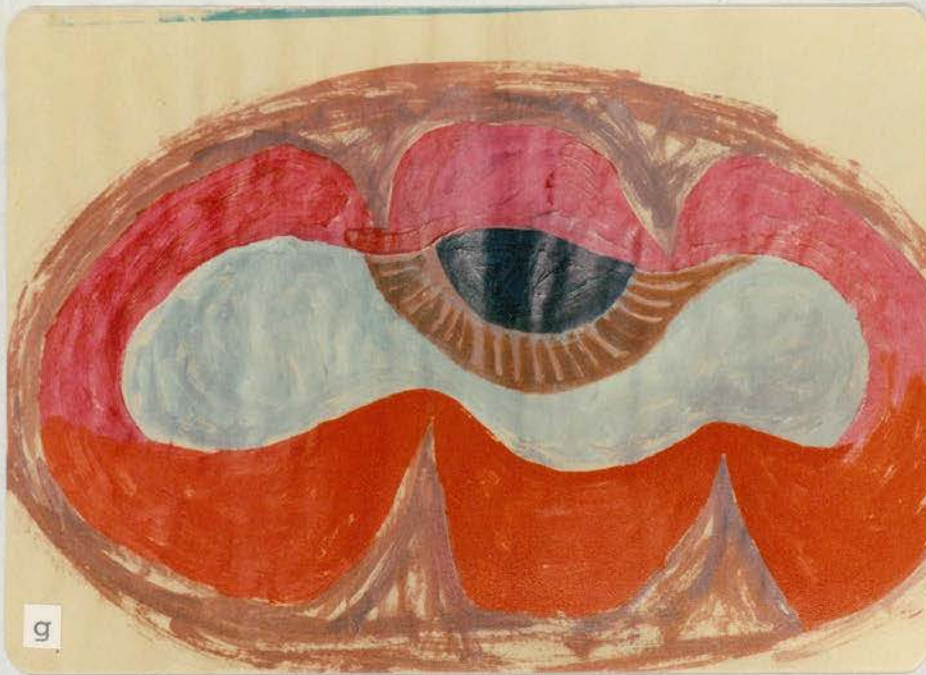


Figure 8, (continued).

This led to the vibrant use of colour and form in (e). The artist then continued to explore the underlying motivation for her agitation through drawings (f), (g) and (h), using the eye motif which appeared frequently in her work. With the final painting (i), she began verbal exploration of her problem, showing insight, understanding, and acceptance of those elements beyond her control.



Figure 8, (continued).

Each picture contained symbols which she understood, and which were related to her past experience.

These eight paintings, created in sequence on the same day, represent the ordering and integration of the feelings underlying her anxiety. Through observing the cyclic occurrence of these episodes during therapy, it was possible to pinpoint the periods of anxiety and relate them to hormonal change. She was referred to her gynecologist for medical aid to relieve some of her physiological symptoms.

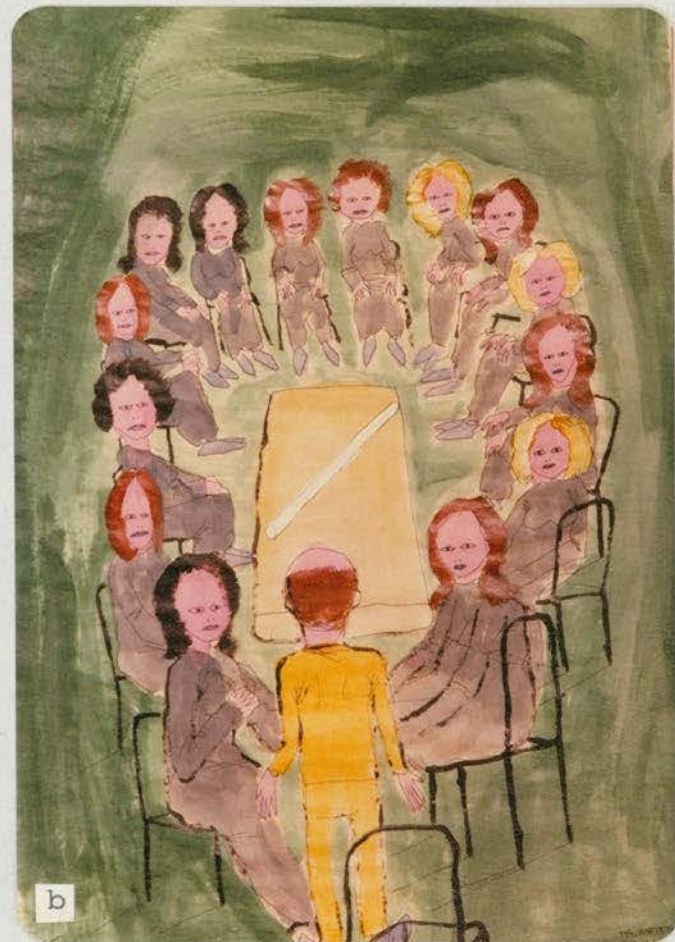


Figure 9, (a) and (b).

Each of these drawings communicates through thought image, colour, position, and facial expression, aspects of the artist's relationship to others in the group. (a) describes the family dynamics which fostered a neurotic sexual problem. (b) is a good monitor of the patient's reaction to group, and his progress in therapy.



Figure 10, (a) and (b).

A Gestalt exercise was used to stimulate this diagnostic pair of drawings. The artist was frightened by (a), and went on to draw (b). He described himself as the small blue dot on the upper left hand margin of the picture. The gully below, into which he felt himself to be falling, is both hell and insanity. After drawing the second picture, he was able to describe the source of the anxiety elicited by (a), his homicidal impulses.

PART III

CHAPTER IV

PSYCHOANALYSIS AND ART

Psychoanalysis is a body of doctrine set forth by Sigmund Freud between 1890 and 1939, with modifications by his close disciples. The doctrine is based on well developed concepts of unconscious motivation, conflict and symbolism (English and English, 1958, p. 417). Freud defined psychoanalysis as a scientific discipline consisting of a method of research, the object of which is to bring to light the unconscious meaning of words, actions, and mental images; of a psychotherapeutic method based on this research and employing specific means of intervention such as the interpretation of secret wishes and the resistance which seeks to prevent their free expression; and of a system of psychological and psychopathological theories constructed on the data supplied by the method of interpretation, or emerging during the treatment of patients (Eysenck, Arnold and Meili, 1972).

Psychoanalytically oriented art therapy draws from three broad areas of Freudian theory: dream analysis, based

on the concept of unconscious repression and other ego defense mechanisms; the development of character structure through oral, anal and phallic stages to complete psychsexual organization; and Freudian psychology in which the personality is described in terms of id, ego, and superego.

Freudian Dream Theory

Freud's aesthetic theories and his analysis of art center on the psychic processes, with most of his insights grounded in the concepts he worked out in his writings on the significance of dreams. Like dreams, creative art follows paths which it finds already laid down in the unconscious, in hiding or disguising repressed material (Figure 11, p. 85).

Painful experiences are actively or automatically thrust out of consciousness into the unconscious, where they remain forgotten but still active (repressed), determining indirectly present behavior and experience as well as dream content. A dynamic struggle arises between the forces of the repressed but still active material in the unconscious and the controlling conscious. Material from the unconscious erupts in the form of images through what Freud calls "primary process", during periods of relaxation of conscious control, as in daydreaming, fantasy, and most particularly, dreaming. He argues that the images of dreams, daydreams,

fantasy, hallucination and the imagination are produced spontaneously from the id through primary process, the id being true psychic primary subjective reality, the unconscious. These images are unmodified by values, ethics, morality, experience or laws of reason and logic in providing temporary satisfaction of instinctual needs.

Diverse terminologies have been used by psychotherapists to describe primary process - primitive, immature, obsolete, archaic, dedifferentiated, abnormal, defective, first-signalling, concrete, mythic (Arieti, 1976, p. 66). Ehrenzweig describes it as "gestalt-free cognition" (1965).

The "secondary process" occurs as imagery from primary process undergoes intellectual modification; it becomes functionally identified with a goal so that instinctual needs may be fulfilled in reality. In primary process, imagery, as hallucinations and disturbing dreams, is not distinguished from reality and is therefore experienced as chaotic, incomprehensible reality with accompanying disorientation, fear and anxiety. During the secondary process the ego minimizes this fear by channelling the images into realistic, adaptive, rational thought patterns. In psychoanalysis the dream image, which is the mode of communication between the repressed unconscious and the conscious psyche, appears as a riddle of symbols; its meaning

may become distorted by the action of a personal "censor" which operates according to certain predictable laws. The concepts of "censor" and "repression" constitute the functional centre of Freudian dream analysis.

The creation of the dream symbol is a fundamental activity of the human mind. As described by Freud, the symbol is characteristically sensorial and concrete, in some respect resembles what it symbolizes, and represents a primitive mode of thought based on associations. Its dynamic complexity lies in its having two or more meanings and in its representing ideas that are hidden or secret. The dream symbol provides material upon which the distorting psychic process of the personal censor may act. The censor is the selective agency whereby dangerous or impulsive desires are blocked from consciousness, so as to minimize anxiety and pain. The predictable laws of distortion through which it operates include condensation, by which a number of rich associations underly meagre and patchy dream images; displacement, which disguises the essential content of dream thoughts by displacing emphasis from the important to the trivial or irrelevant, or the abstract idea to the concrete image; identification and projection, by which the dreamer disguises himself in the role of another person or thing, or ascribes his own motives and feelings to another; and secondary revision, critical appraisal of

the surprising, annoying or repelling dream material by the censor on the verge of waking. During the process of secondary revision the censor recognizes the whole construct as "only a dream", and after waking, adds and interpolates in order to fill in lapses in rational segments of dream sequence (Spector, 1973, p. 92).

This process, secondary revision, occurring in or near the waking state but relating to the content of the dream and the unconscious, provides the essential link between functional dream process and fantasy, daydream and spontaneous art expression.

Freud began solving the rhexus of symbols by free-association; he asked the subject to react instantly to the stimulus of his own images by saying what popped into his mind; he thus hoped to minimize the effects of deliberate mental intervention. In this way he uncovered the background thoughts to each part of the dream. He stated that the subject to which the associations lead is always the case history which underlies the neurosis (Freud, 1953). If a pathological idea can be traced to the elements in the patient's life from which it originated, it simultaneously crumbles away and the patient is freed from it.

Dream Theory and the Function of
Art in Therapy

According to Freudian theory, dream and art symbols - primary process images - have meaning on two levels, the subjective and the objective. Certain symbols which are private expressions of inner experience in the individual are common to humans generally. The therapist looks at the patient's art symbols and makes certain universal assumptions about the nature of a neurosis inasmuch as it can be interpreted in terms of universal symbols. These must be affirmed or altered in relation to a thorough understanding of the patient's private system of symbols, which may vary a good deal from the objective meaning. The subjective system unfolds as the patient continues his drawing and relates verbally to what he draws.

A strong rationalizing force intervenes between the primary and secondary process (Figure 12, a and b, p. 86). In drawing, the process of secondary elaboration is already in progress and the art more under the conscious control of the personality which wills, shapes, integrates and chooses its own system of symbols to describe its experience (Figure 12, c, p. 87). The art work stimulates and facilitates verbal expression through free-association. Communication, the process of presenting the patient to both the therapist and himself through the medium of images

and words used to describe them, is the immediate goal of art therapy.

Freudian Character Structure

Freud considered character structure to be dependent upon early childhood experience during critical periods of libido development from the pre-genital phase to complete psychosexual organization. He divided the development of the libido (the energy of all life instincts) into oral, anal and genital stages. The principle zones of mouth, anus, and genitals - associated with satisfaction of vital needs - are the first important sources of both irritating and pleasurable excitations, and they yield the first important experiences of pain and pleasure. Complete psychosexual development depends upon learning adequate ways of discharging tensions arising in each of these vital areas.

For example, pleasurable oral sensations are associated with tactile stimulation of the lips and oral cavity by contact with and incorporation of objects. When the incorporation is difficult, or does not give pleasure, biting, spitting out, and closing the mouth are defences against irritating objects. Each of these modes is an original learned prototype for certain personality traits, and serves as a model for later adaptation to painful or disturbing experiences as learned oral incorporation or

rejection is displaced or transferred to other similar situations. According to Freud, frustration of oral gratification may result in fixation upon one of the prototypic oral modes, which develops into a whole network of interests, attitudes and behaviors. A predominantly incorporative orientation results in a tendency to take things not only through the mouth but also through the sense organs, and the search for abstract and symbolic things such as knowledge, love, money, power and material possessions with an insatiable appetite as a substitute gratification of the need for food from a loving mother (Hall, 1955).

The individual generalizing these early experiences into current relationships is said to be using "transference" behavior. Through observing the patient's attitudes and actions toward him - possibly an affective attitude previously developed with a parent - the therapist determines the character structure and the pathology of interaction growing out of early experience. Use of the transference relationship is central to the use of Freud's theory of character development analytic therapy.

Character Structure and Art Psychotherapy

Naumberg (1956) stated that the transference relationship is considerably modified in art psychotherapy by the introduction of spontaneous art images which describe either

directly or symbolically the nature of the patient's fixation on unfulfilled needs (character structure) at the same time that he acts out these needs in the way he relates to the therapist. For example, foetal images may indicate dependency needs and the desire to be incorporated again into the mother, to receive shelter and love; apples, tomatoes, etc., as symbols of the breast may indicate inadequate nurturing which the patient is seeking in his interaction with others. By assisting the patient to understand his own symbols as they are related to his transference behavior, the therapeutic process can be shortened considerably and dependence upon the therapist greatly reduced.

The Freudian theory of character structure, developed further by Wilhelm Reich, Alexander Lowen and others, forms the basis of bioenergetic psychotherapy; this deals directly with constellated body energy in order to release it for use by the neurotic. An interesting outgrowth of the psychoanalytic model for art therapy is the recent use of spontaneous painting as an adjunct to bioenergetic therapy. Primary process images describe the energy blocks and often the historical material necessary to determine character structure (Figure 13, a to f, pp. 88 to 90). The action of painting itself facilitates the release of energy cathected in the body.

Freudian Theory of Psychic Organization, and Sublimation

In developing his theory of the id, ego and superego, Freud stated that man has lost his primitive instinctive inhibitory mechanisms and so is never unconditionally free to obey his instinctive drives or be guided by primitive emotions. With the evolution of intelligence man has forfeited the instinctive checks and safeguards to behavior which exist in animals. His survival now depends on his continuous realistic appraisal of and adjustment to each new situation as it arises. However, he still draws his energy and pleasure from instinctive drives and emotions, facing the hazards of existence without the animals's natural controls and guides. According to Freud, this dilemma has resulted in a fundamental separation of man's psychic organization. The psyche has become divided into the id, which is the original primitive system, and the more recently evolved ego, an organizing force which develops new in each individual, an indispensable tool of survival to which are ascribed all higher mental functions. The ego has the capacity to perceive and manipulate reality, to postpone gratification, and to maintain the inner unity of the personality. In this last evolutionary stage, the id's impulse can obtain gratification only through the efforts of the ego.

Through man's continuous experience with the reality of social demands and threatening situations, he develops a regulatory system which strives to attain an inhibitory regulatory force such as that governing the social behavior of other species. While this regulatory force, the super-ego, is never as efficient as the natural regulatory force of other species, it fulfills some of the same functions, making individual behavior more predictable, and providing some continuity to social organization. At the same time, its relative values allow for social flexibility, evolution and change.

In its difficult task of controlling impulses, choosing between conflicting values, avoiding anxiety, and obtaining gratification of drives, the ego uses a complex of defense mechanisms, some of which have been mentioned earlier in discussing dream theory. One of the ego's most efficient means of dealing with dangers threatening from the drives, and of making constructive use of their particularly destructive power, is sublimation.

In the process of sublimation, the energy rising from primitive drives is freed for action, deflected from its original goals and displaced onto achievements which are highly valued by the ego, and in most instances, socially productive. Because ego strength and autonomy increase in the process, it may be assumed that a shift of energy from

id to ego occurs, with a resulting synthesis of aggression and libidinal energy to produce genuine pleasure in the substitute activity, as well as partial gratification of the original primitive drive. For example, Freud stated that the artist who sublimates his primitive sexual drives in genuine achievement in his creative art, wins the love and admiration of women, and thus a measure of sexual gratification.

Freudian theory of psychic organization and the process of sublimation provide another approach to art psychotherapy. Here, with emphasis placed on the quality of the art produced, art is used as a substitute goal for impulsive instinctive behavior in order to achieve harmonious function of the id, ego and superego, and an adequate discharge of psychic tensions.

Freud postulated that the artist transforms primitive impulses into symbols, replacing actual gratification of these impulses by sublimating the instinctive energies into language, art and ritual, valued for the aesthetic quality of the art produced. It follows that, in contrast to the spontaneous art of the dream and character structure theories, art therapy which involves sublimation places a higher value in art education and improving the quality of the work produced by the patient (Kramer, 1971, p. 67ff).

Kramer describes the value of skill and craft as it is related to sublimation. Unlike simple displacement (i.e. kicking a chair instead of the person one is angry with) sublimation changes the nature of the object upon which the energy has been displaced, in the interest of creating something of value with which its creator can identify, and thus gain ego strength. The very plastic nature of art materials makes painting a particularly suitable vehicle for sublimation. At the same time as images from the id are projected through primary process in painting a picture, the shaping, forming ego organizes the material in order to achieve harmony and balance amongst its conflicting structural elements; thus line, colour, form and texture necessary to good art, mirror a complex balance of inner psychic forces. With continued practice, organization becomes easier to achieve and more aesthetically pleasing, and the mechanism of sublimation becomes more effective in channelling primitive energy into ego-strengthening art work.

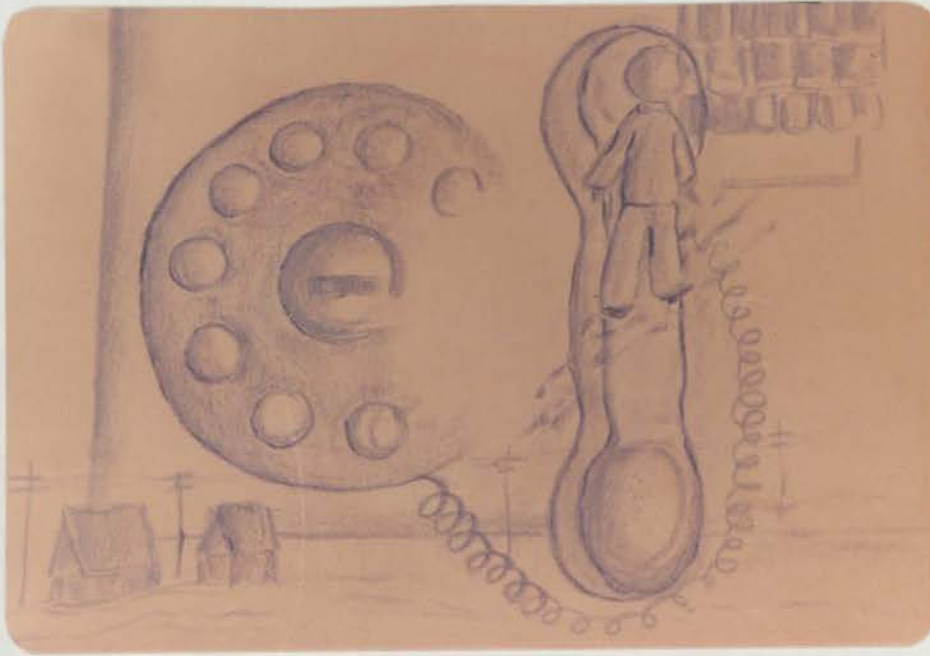


Figure 11.

Freud recognized that dreams are frequently triggered by physiological sensations. The content of such dreams is frequently associated with repressed material, threatening experiences.

In this drawing the artist described a frequent dream - a telephone call to report some urgent situation, usually a fire. The telephone was always out of order, or out of reach, and the call could not be completed. Although the artist was aware that this dream had a physiological beginning in an incomplete orgasm, it was not until the background was sketched in the drawing that she recognized the anxiety associated with the dream arose from early guilt related to masturbation. After the drawing was made, the dream did not recur.

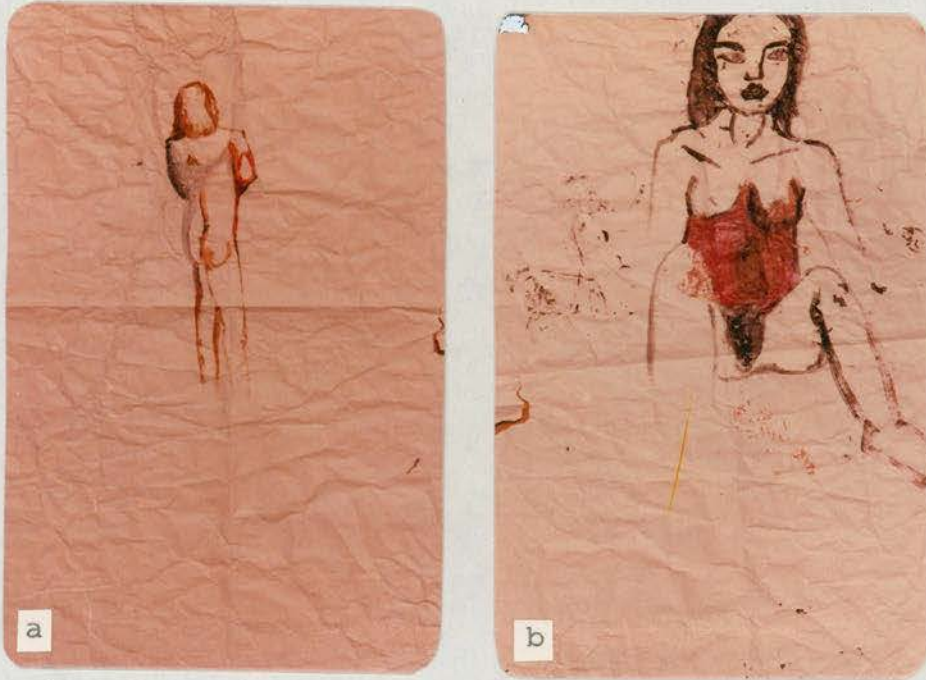


Figure 12, (a) to (c).

The first two drawings, (a) and (b), are primary process images which the artist painted during a period of high anxiety. They occupy opposite sides of the same sheet of paper, which the artist then crumpled and threw in the waste basket.



Figure 12, continued.

The next painting, (c), is the secondary elaboration of the primary process images. The content is interesting from a Freudian viewpoint. Its archetypal mythological figures invite Jungian analysis. The Gestalt therapist could ask the artist to hold a dialogue with the figures in the drawing and learn a good deal about his patient. However, in this case, the unstable mental state of the artist at this time suggested that the integration of the subject matter in the third picture marked sufficient progress. He was not pressed to relate to his work or to develop the images further.



Figure 13, (a) to (f).

The artist described and integrated feelings associated with her mother in this series of portraits. The first three pictures depict her slowly improving self concept. She was anxious to discuss at length the symbolic content of her work. The six paintings in this series were chosen from work done in group therapy which continued over a period of nine months. They show the development and control of realistic images from fantasy images.

The artist was encouraged to paint pictures which were realistic rather than disintegrative and formless. Interaction with both the therapist and the other patients in the therapy group



Figure 13, continued.

helped to prevent her from being overwhelmed by the threatening content of some of the images. In (d) she described a complex emotional relationship with her mother, and her need to escape it, in the flow of water from her mother's fanged mouth. While in hospital the artist had spent a great deal of time in the bathtub where she sought warmth and safety from anxiety.



Figure 13, continued.

Stating her wish and her fear of being totally dependent on her mother were related to the images of mother and water, she set out in (e) to explore her relationship with her mother by painting a picture of herself within her mother. She surprised herself by reversing the identity of the images. Completing the picture with mother as the smaller, contained figure, she accepted her own strength and autonomy. The small picture of mother became "Those elements of mother which are in me", largely fear and guilt.

The final painting, (f), represents her new self concept as the now happy child (on the left) is freed of the guilt and fear associated with the mother (center).

CHAPTER V

ANALYTICAL PSYCHOLOGY AND THE FUNCTION OF ART: C.G. JUNG

Jung's Disagreement With Freud

Jung did not agree with Freud that all images of primary process are the product of unconscious, repressed personal experience, a pathological process in which painful material is disguised in dream symbols. He considered Freud's dream theory one-sided; because it generalizes from facts that are relevant only to neurotic states of mind, he concluded its validity is confined to these states. Images of dreams may be understood also as an expression of an intuitive perception which, in forming, can as yet neither be apprehended better, nor expressed differently. Thoughts, judgements, views, directions and tendencies do not remain hidden as Freud assumed, but instead seek to be realized. Jung preferred to regard man as basically balanced, potentially healthy of mind, and hoped to "free the sick man from the point of view which colours every page Freud has written" (Jung, 1933, p. 117). He described a system for achieving psychic integration in which he replaced Freud's pathological system with the concept that the healthy psyche is the median between the two extremes of conscious and unconscious life.

Harmony between these extremes is achieved through the mediation of the symbolic image (Philipson, 1963, pp. 9-11). He rejected Freud's libidinal theories, accusing Freud of analyzing in detail his own neuroses and attributing them to everyone.

In rejecting Freud's libidinal theories, Jung rejected also Freud's systems of character structure and ego psychology. He did, however, accept the importance of the transference relationship (Jung, 1954).

Jung showed little patience with Freud's theory of sublimation. Apparently choosing to use the alchemical definition of sublimation, he accused Freud of inventing the idea to save us from the imaginary claws of the unconscious. He argued that what is real, what really exists, cannot be sublimated, "and if anything is apparently sublimated it never was what a false interpretation took it to be" (Jung, 1974, p. 100). Jung considered all religious as well as all cultural expressions such as art, to be an authentic part of psychic existence, which renders void the concept of sublimation (Jung, 1958).

Jung believed that the figurative language of dreams - parable and simile - which is also characteristic of primitive languages, is a survival of an archaic mode of thought in the phylogenetic development of the human mind (Jung, 1974, p. 34). He did not deny that Freud's dream

theory was important, or that it was useful to those experiencing Freud's particular neurotic problems. However, his own efforts were dedicated to discovering how the images of dream and fantasy might suggest possible direction for personality development. He speculated that these germs of thought may occur during dreams of the past or in dreams of present life, such as one's marriage or social life, under pressure of normative change.

Jung described also a type of dream to which no associations, past or present, are obvious. This dream may be recognized as an expression of undifferentiated psychic activity, the product of man's phylogenetic expressive mode. He called these dream images "archetypes of the collective unconscious". They function as "symbols of transformation".

Art and Analytical Psychology

Although he speculated extensively on the nature of the psyche, Jung was unwilling to make statements about what is "true" or "correct". He emphasized instead that a person should continually struggle to achieve self expression, "an open avowal and detailed presentation of everything subjectively noted" (Jung, 1933, p. 116). To help his patients achieve this self-expression, Jung encouraged them to draw and paint, for what they paint, according to Jungian theory, are the archetypal fantasies which

activate them (Jung, 1933, pp. 69-72).

Active Imagination and the Symbols of Transformation

Jung developed a technique for stimulating fantasy images which he called "active imagination", during which the patient relaxes and freely fantasizes, watching the images which appear. Where consciousness exerts too strong an influence, fantasy may be difficult. Oftentimes it must be left to the hands themselves to model or draw figures which the conscious mind has not organized (Jung, 1958, p. 314).

Jung divided art images into two categories: psychological art, which deals with the conscious experience of life in the outer world, and visionary art with images that often come unbidden and are not under the control of the ego. Jung believed active imagination more likely to bring forth archetypal visionary images than memory images. These archetypal images express symbolically situations important to a person's growth. When the archetype is brought to awareness and the patient experiences corresponding emotions, there is a sense of growth and fulfillment. The image which brings about the psychic change is called the symbol of transformation.

Jung cautions that this technique, which encourages release from the controls of consciousness, is poison for the person who has already been overwhelmed by "things that

just happen" (Jung, 1958, p. 314). However, for others he claimed great therapeutic benefit from this process. The patient sees himself in a new context, for his ego now appears as a subject receptive to the life-forces within, rather than as a sterile and fearful object.

Jung's concept of "centering" develops from the use of art in therapy. He states that the therapeutic benefit

. . . seems to me to be a question of some kind of centering process, for many pictures which patients feel to be decisive point in this direction. It is a process which brings into being a new center of equilibrium, and it is as if the ego turned in an orbit round it. (Jung, 1933, p. 72)

The Mandala

Jung spent most of the latter part of his life studying the symbols of transformation which the psyche itself produces to give expression to the experience of its own potential wholeness. However, he was particularly pre-occupied with the mandala.

The mandala is a cryptogram which portrays the state of the self and reflects its constant change. "Mandala" is the Sanskrit word for "magic circle". Its symbolism includes all concentrically arranged figures, all radical or spherical arrangements, and all circles and squares with a central point. It is one of the oldest religious symbols and is found throughout the world. Ritualistically it is

used in Yoga as an aid to contemplation, and in Christianity it is a symbol of the nature of the deity for the purpose of adoration (Jung, 1938). Jung observed that the mandala appeared very often in the art of his patients.

Like most of Jung's ideas, his description of the function of the mandala is best presented in his own words. He states that the mandala symbol is not only a means of expression, but works an effect. It reacts upon its maker, serving the purpose of drawing a "magical furrow" around "the sound precinct of the innermost personality in order to prevent 'flowing out', or to guard by apotropaeic means against deflections through external influences" (Jung, 1958, p. 321).

As the patient labours over creation of a mandala or any other archetypal image, he discovers its emotional and intellectual meaning; he consciously makes intelligible, morally assimilates and integrates the content. In this way, the symbol of transformation brings to expression that part of the psyche which reaches back into the primitive past and helps to reconcile it with present-day consciousness, "thus mitigating its disturbing effects upon the latter" (Jung, 1933, p. 72).

Jung preferred to ignore the quality of the art his patients produced, treating it as artistically worthless, even though he admitted some of it might measure creditably

according to the tests of serious art. He considers it essential that no artistic value be allowed his patient's work, since imagining themselves as artists would jeopardize the good effects of the therapeutic exercise. "It is not a question of the beautiful, but merely the trouble one takes with the picture" (Jung, 1933, p. 68). Struggling for hours with brush and colours to actively reproduce an enigmatic dream or fantasy, to give form to psychic images, enforces a study of the fantasy in all its parts; in this way its effects can be completely experienced. The patient sees his ego appear as an object activated by his own energy. He also sees himself in a new sense, subject to a measure of control in the form which he gives his art work. Soon he is no longer dependent on his doctor's knowledge, but can give his inner state material form and make himself creatively independent in his self-growth.

CHAPTER VI

ANALYTIC THEORY AND ART EDUCATION

Sir Herbert Read: An Aesthetic Theory

Sir Herbert Read carried Jung's theories still further, proposing a system of education through art which aims to preserve the natural intensity of all modes of perception; which co-ordinates the various modes of perception and sensation with one another in relation to the environment; and which facilitates the expression of thought, feeling, and otherwise incommunicable mental experience in concrete form (Read, 1945, pp. 8 and 9). Read's theories are a complex synthesis; they integrate Romantic idealism, Freud's theory of the unconscious, and Jung's concepts of universal archetypes - the primordial image, and personality "types". Although first formulated over twenty-five years ago, Read's theory still exercises an important influence on both art education and the expressive therapies.

Read assumes the existence of an original societal consciousness which gives unity to the animal world and to primitive human communities (Read, 1945, p. 3). Individual self-consciousness may disrupt this primal societal consciousness. Read proposes that it can be regained in

two ways: first by attending to the world of natural form, which contains all possible patterns for the organization of its chaotic elements, and second, by developing the modes of perception and expression which are essential to man's ability to recognize and organize natural pattern.

Read reasons that all aesthetic values have their models in natural form.

On the most primitive level of our conscious being, we seek conformity with the organic laws of nature and the cosmic laws of matter. We achieve mutual relatedness and collective unity in so far as the contents of the individual unconscious are allowed to arrange themselves according to the pattern of the universal archetypes, the primordial images which are also aesthetic in form or quality. (Read, 1945, p. 195)

Read assumes that since we apprehend the natural world through our senses, our consciousness and ultimately our intelligence and judgement are the product of the quality of our sensory experience. We must provide ourselves with a concrete sensuous awareness of the harmony and rhythm of the natural world in order that we may develop an "instinct of relationship" to nature. It is only through bringing the senses into harmonious and habitual relationship with the external world that an integrated personality is achieved (Read, 1945).

Natural form follows mathematical or mechanical principles which obey a definite number of comparatively

simple laws. The aesthetically pleasing form is that which intuitively or deliberately copies the internal structure of the natural form. Read cites some of these natural phenomena: the structure of galaxies in space; microscopic cells and molecules of matter; the growth of crystals, vegetation, shells, bones and flesh; the construction of the honeycomb. However, he does not attempt to outline a specific method for the study of "the pattern of universal archetypes" in nature whereby we can understand our "instinct of relationships" to nature.

N.C. Hale (1972) accepting an aesthetic theory similar to Read's describes the practical function of art in helping us to understand our relationship to nature through a systematic study of form in the natural world. He demonstrates the relationship of the abstract element of art as we know it to sensory experience of nature, and in so doing provides a system whereby we may develop an "harmonious and habitual relationship" with the external world.

The Abstract Elements in Art

Abstraction in art means the act of drawing out the essential qualities of something, its line, form, pattern, as units of an expressive vocabulary without words. The same vocabulary of abstract elements is used for realism, and for the expression of inner vision, feelings and


emotions in art.

Hale divides the elements of art into categories, ways of classifying that which exists in nature, in order to transmit to the picture surface what we see or feel. The categories of abstractions which he chooses are line, form-shape-mass, pattern, scale-proportion-size, analysis-dissection, lightness-darkness, and colour. These elements are not separate from one another even though they may be discussed in sequence.

Line


The basic expressive unit of the language of art is line. The use of line to describe inner experience has been greatly reduced with the mechanical age. Handwriting and drawing have been largely replaced by mechanical type and photography (Hale, p. 17).

In art, line describes the shape of form. The stick figure is the beginning of the abstract analysis of the structure of form in the human body, the upward thrust of the boney structure that counters the downward pull of gravity; and its direction of movement. All the abstract elements of art which we recognize today are refinements of the basic stick figure drawing, developed over thousands of years. The use of line in this structural manner is central to our reasoning-delineation as a tool of logic.



Line, which is apprehended through the senses of touch and sight, describes direction (curved or straight), continuity (broken or whole) and weight (thick, thin, light, dark). All drawings are based on these orders of line. Each line drawn is an expression of energy utilized in movement and realized in form. It is understood in terms of our experience of the relationship between energy, movement and form. For example, the earth's magnetic field and gravitational pull may be represented by horizontal lines. A line drawn upward at a ninety degree angle from a horizontal line is experienced as balanced and stable, a form experiencing an equal pull of gravity on both surfaces of its plane. Combinations of lines may be used to describe complicated systems of balance, stability and control; we sense their security of position. Similarly they may describe imbalance, tipping, falling, suggesting uncertainty, insecurity, disorder and anxiety linked to our experience of falling, dropping, shattering, etc.

When lines describing form are light, dark or heavy, they give lightness or weight to the form. We sense the light line form as more active than the heavy one, associating it with muscular experience of body weight, active and passive body states, atmosphere and earth, light and shadow, brilliance and dullness, and so on.



Lines dividing forms suggest position. These positions may have strong emotional connotations. That which lies "under" may be protected, submissive, crushed, smothered, hiding; that which is "over" exposed, dominant, smothering, revealing. The line which divides form from top to bottom makes a "beside" statement of inequality, companionship, competition, separation. Lines so placed to make a statement of distance or depth may stir memories of loss, isolation, hopelessness, safety.

A line which "contains" something, may describe passive conformity - "holding" as liquid is contained in a bowl; or it may actively hold, as in a door, a cage or a cell, suggesting confinement, control, and even panic and despair.

The direction of a line suggests movement, up or down, away from or toward, starting, stopping, interweaving, whirling, radiating, branching, compressing, distending, shattering, smooth or bumpy. Its rhythms may be steady, monotonous, exciting, nervous, erratic.

Each mode of delineation is "known" as physical and emotional experience. As such it is part of an abstract expressive language.

Form, Shape and Mass

Form describes an entity that has a meaningful structure, that stands by itself and may be repeated. A form (for

example, a bird) may be given different shapes which resemble a recognizable general structure. Not only its shape but also its mass, or accumulation of substance gives the basic form unique qualities.

Hale (1972, p. 62) divides natural form into seven categories: energy forms, atmospheric forms, water forms, solid forms, plant forms, organic or animal forms, and the forms of disintegration, decay and death.

I. Energy Forms

Because of its invisibility, energy is an intangible quality difficult to capture in art. It is the feeling of force behind all types of movement and change - wind, storm, birth, growth. Occasionally we see it in the phenomenon of lightning. However, it is through science that we have come to know something about the shape of energy fields. Through the telescope we see swirling galaxies, cosmic clouds and stellar radiation. Space photography reveals the earth's vast weather patterns which conform to its gravitational planes and magnetic field. Using the common magnet as a model, we can investigate the principles behind these larger systems.

The magnetic field contains most of the basic geometric forms used in art: an axis, triangular shapes, cones, circle and ellipse, longitudinal lines, dividing planes, etc. In addition it has some of the basic characteristics

of living form: head-to-tail directional organization, a fibrous structure, internal loopings, a life span, pull and resistance. A surprising number of plants have the same shape as the earth's magnetic field: the fruit of the pumpkin, the tangerine, and the onion duplicate the earth's magnetic fields. The apple, halved along its axis, can be compared with the side view of the magnetic field, and the orange, cut along its equatorial plane, shows a relationship to the radiating lines seen at the poles (Hale, pp. 120-122). The plant pattern of dicotyledons relates closely to the magnetic field (Hale, p. 117).

2. Areal and Atmospheric Forms

Areal and atmospheric forms are invisible until vapours or dust, smoke or heat reveal them to us. The direction and strength of air currents are experienced directly by anyone standing in the wind and indirectly by observing the movement of trees and grass in "waves".

Clouds are borderline forms between the invisible forms of energy and the visible forms of matter. The shape of the earth's layered atmospheric field is the shape of the magnetic field; it shows the layering that parallels the earth's surface as the "ceiling" height of cloud formations; the undersides and upper borders of clouds are flat on a calm day. We often observe the fibrous lines of the magnetic field in a linear direction that strongly repeats

itself in north-south alignment of clouds. Sometimes this series of north-south cloud lines is very clear and straight. As weather moves from west to east, the cloud formations cross the north-south lines of the magnetic field at right angles so there is actually an invisible gridwork of forces in the atmosphere that governs cloud formations (Hale, p. 66).

Another weather pattern, a great cyclonic pattern of cloud formations that occurs in both the Southern and Northern hemispheres, an exact duplication of the two - armed, spinning galactic form, has been photographed from outer space during space missions. This form is a natural outgrowth of the energy stream of the planet's orbit which moves from west to east and crosses the north-south structure of the magnetic field at right angles. The orbital force moves the atmosphere along, while the longitudinal structure of the magnetic field tends to hold it in one place, which helps create a spinning movement toward the poles (Hale, p. 66).

Wind patterns and cloud patterns are interacting. Smoke and steam, which rise in swirls on warm air currents in calm air, also react to wind patterns, and provide models for cloud formation. Clouds are classified in four categories according to four basic forms which they assume. Fluffy clouds that rise from a flat base are called

cumulus clouds; those that form in flat layers are called *stratus* clouds; towering rain clouds are *nimbus* clouds; when these forms combine, they may be described as cirro-stratus, etc.

Energy and cloud patterns in the atmosphere have strong emotional connotations. Fluffy white clouds on a summer day, violent storms after a hot afternoon, tornado and cyclone formations, lightning, grey overcast days, all are part of our direct physical experience of bliss, danger, boredom, or depression which we associate with areal and atmospheric forms and the quality of energy they contain.

3. Water Forms

Like cloud and smoke, water forms are transitory. However, their patterns tend to repeat themselves with more regularity since their forms are governed by a few simple laws of liquid dynamics as the water flows over stable solid forms. Like energy and areal forms, water contains wave and spinning wave lines, galactic form, vortices, radiating lines and circles, or it may be perfectly flat with a mirror-like surface. Froth and bubbles, and ice crystals are also water forms. The bubble is a perfect sphere. Bubbles pressed together form hexagonal boundaries. Ice crystals mimic the radiating forms of energy fields.

Water forms have two aspects, threatening and benign. They may be sparkling, fresh, lively, racing, tumbling,

bubbling, or flooding, enveloping, drowning.

4. Solid Earth Forms

Solid form in minerals and rock which emerges from the liquid state, duplicates the forms of energy in atmosphere and water. In addition to these lines of movement, solid form in rock and minerals is crystalline. The form of the crystals, however small, influences the over-all shape of the rock or boulder, its strength, lines of stress and the nature of its broken surfaces (Hale, p. 106).

Crystal shapes are the nearest in nature to pure geometry; cubes, tetrahedrons, prisms, and other many-sided shapes that are constructed of symmetrical planes. It is not surprising that seen through an electron microscope, the atomic structure of mineral crystals mimic the radiating line form of the energy field.

In a vocabulary of abstract art forms, freshly broken rock and large rock thrusts suggest the violent activities of man and nature. Weathering and rounding makes rock forms more appealing and benign with the passage of time. Crystals and atoms are closely related to energy forms and geometrical patterns we regard as pure design.

5. Plant Forms

Although plants use the whole range of line and wave forms, the abstraction of growth and energy in plant patterns is best expressed by the form of the magnetic field. Many

plants duplicate this form perfectly in their over-all shape above and below the ground, and in their fruit. In others the form is modified by stressing a wave-line in their central core (vine) or a spiral around the core (pine cone, sunflower, seed head) (Hale, p. 113).

6. Organic Animal Forms

Humans understand the forms and movements in the world outside of themselves because these forms and movements are duplicated within the human organism. The well developed fields of biology, zoology and botany provide information on form, shape and its relation to energy and function. It is sufficient to mention here that all forms of life are variations on the forms of energy fields which we have come to understand through mathematics and science.

Plant and animal forms are closely related to us in form and function: therefore we believe that we show also the traits, characteristics and feelings of plants and animals. As a result we have developed an extensive symbolic vocabulary in art consisting of plant and animal forms which we use to describe or disguise our own thoughts and feelings.

7. The Forms of Disintegration, Decay and Death

Hale (p. 134) describes three types of decline in form: disintegration, decay and death. Atmospheric forms naturally disintegrate by dissipating and dispersing.

Where fertile plains turn into deserts a slower disintegration occurs with the dispersal of plant and animal life from that area.

Decay suggests overgrowth and stagnation, sluggishness and turpor in earth forms softened and swollen by water to produce fetid rot. Like the disintegrative change on the desert, decay is the result of biospheric imbalance, and interrupts the cyclic pattern of life.

The forms of a healthy environment are never stagnant, never fixed in attitude. They respond with life cycles in harmony with season and maturity - birth and death. When the artist emphasizes the forms of disintegration and decay in describing death, he may be making an emotional or social statement.

Pattern

Pattern is the relationship amongst forms in nature (Hale, p. 163). Several waves breaking in succession on a beach follow a distinct pattern of movement based on the repetition of a particular wave form; a sequence of movement in response to the earth and the atmosphere. Similarly we witness the pattern of growth in a plant from seed to maturity; the pattern of distribution of a number of plants over a rough terrain; the flight pattern of migrating geese; and so on.

Patterns of organization in the human form comprise an important part of the expressive vocabulary of the artist. Facial features may be organized to express thought and reflection; a hand may be closed in a fist. The drawing of a body may express the expansion of pleasure and relaxation or the contraction of fear and anxiety with head, neck, arms and legs set in patterns which reflect tension.

Scale Proportion and Size

Scale, proportion, size, space and perspective are understood by all people on an unconscious level. In perceiving things with our eyes we scan and focus on many different aspects of that object, and the information is stored not only in our visual memory, but in the way the visual experience affects our other sensations and feelings. A "sense of proportion" originates in innate bodily feelings of length, distances, shapes and spaces. These feelings develop from experience with body pressures, weight, resistance; from pain and discomfort when in contact with objects; from our experience of balance and motion in play, dance and sports; from the comparative length of our arms, legs, torso; from our comparative sizes as children and adults and so on.

Distorted proportion and space relationships create a world of unreality that resembles a nightmare or hallucination. Where such distortion occurs either intentionally or accidentally in art, our inner sense of the rightness of things gives way to an interest in what may be the significance of such disproportion to the artist, or to anxiety at our inability to organize the composition into a meaningful whole. We often remain unconscious of this origin of our uneasiness. By creating an expressive vocabulary the artist learns to manipulate spatial relationships in art, and emotional response in the viewer.

Analysis and Dissection

Hale does not devote a special chapter in his book to analysis and dissection. The whole text is involved with analysis and dissection of visual experience recorded in drawing.

Lightness and Darkness

We derive our basic understanding of light and darkness from our changing relationship to the world in waking and sleeping. Darkness is related to night, sleep, the unknown, the irrational, the primitive unconscious freed during periods of rest and relaxation. Light is related to day, wakefulness, reality and rationality and

the active conscious mind, knowing and understanding.

Sunlight is one of the most expressive forces in art. When its quality is altered by weather or season, colours change, and the clarity of images and forms varies, so does the emotional tone or "atmosphere" of a setting.

Moonlight creates bright, cold surfaces and dark shadows. It can evoke feelings of loneliness, yearning, exhilaration, or fear and terror of danger. Firelight, with its heat to warm and cook, evokes expansive, comfortable sociability. Candlelight is soft, flowing and intimate. Electric light has no associations to seasons, time of day or any of the profound functions of nature (except possibly lightning flashes in a storm). It merely illuminates, altering some of our physiological and psychological relationships to day and night, waking and sleeping. The advantages of electric light are its availability and the variety of special effects that can be obtained with it.

We seldom think of light in terms of phosphorescent plants and animals, or the aurora borealis which occurs with disturbances in the earth's magnetic field. However, those who have experienced these phenomena frequently retain vivid mental images and feelings about the qualities of these two types of illumination.

Total darkness exists only when space is enclosed by matter (as in a cave). When we close our eyes we still see

points and patterns of light which may be "after-image", or the visible evidence of our own energy fields.

Whatever the source of light, we tend to treat it as an invisible medium that has different effects on the forms on which it falls. In using light as part of our expressive vocabulary, we must develop a working knowledge of the particular light which illuminates the subject - its brilliance (contrast with the darkness surrounding it); its intensity (the amount of energy released by the light source); the proximity and size of the light source and its line of radiation; the line of reflected light; the form and intensity of shadows cast.

Colour

Colour is the reaction of the form of an object to the rays of light by means of which we perceive it and, as such, cannot be separated from form. Science has failed in its attempts to understand the working emotional relationship which we have with colour. Colour does not seem to be just a surface expression but is related to the artist's inner processes, both physiological and psychological. Like our distortion of day and night cycles with artificial light, the meaning of naturally perceived colour has been distorted by the use of colours and dyes in commercial products in ways that do not have any bearing on the product's

real value or meaning. Colour is too frequently used just to attract our attention (Hale, p. 276).

Like our sensitivity to light and sound, our colour sensitivity is an organic capability which can be strained and deadened like any other physical capacity. All the colour we see is inner biological colour, whether induced by dreams, inner visions, or external light rays. The dynamics of colour in dream and fantasy is not understood.

Each of us has a colour harmonic scale that reflects our character and moods. We may be aware or unaware of this scale, which emerges from the subconscious part of our personality. This value scale is the result of our experience of colour in the external world, the temperature quality of hues, the emotional quality of tints and shades, cultural colour symbolism and certain unique experiences with colour.

Colours are generally grouped as "warm" and "cool". Lightness of tint is related to sunlight, day, the sun and vision, while dark shades belong to the obscured and vague unknown. Western cultural tradition often associates black with formal gatherings and funerals; white with weddings; pink with girls, blue with boys; scarlet with the church, purple with royalty, and so on. Other cultures possess their own traditional colour systems. Natural associations suggest brown as rustic; green as arboreal; red, yellow and

orange as autumn, fire and sun; blue as space, sky, ocean and river.

Beyond these social and natural colour conventions lie personal colour associations. Colour is highly subjective in its meaning and its visceral effect when it is associated with vivid emotional experience. If the experience has been unpleasant we tend to forget the incident; however, our reaction to the colour remains unchanged. For example, a green room in which a relative died may be recalled only as a strong feeling of anxiety or nausea when at a later period one enters a green room; or the relation may be recalled by avoiding use of that shade of green whenever possible.

Human Modes of Perception and Expression

Given the abstract expressive elements of art, no two individuals will express themselves in the same way. Read (1945) believes this uniqueness of expression must be preserved and developed without outside interference; on no account should one attempt to imitate another person's art. Allowed complete freedom to use art materials according to our own fancy, we develop an expressive style in accordance with our way of perceiving the world. When we project our inner imagery into a drawing, our psychic contents emerge as external reality. By understanding the

dynamics of our mode of expression, we gain valuable insight into our personality structure or "type".

When we reproduce only what we see in nature, the result is cold formality, the perceptual attitude toward the subject. When we project our own psychic contents, the concepts we have formed from our visual and emotional experience, we exhibit the conceptual attitude toward the subject. Read compares the perceptual attitude to Jung's theory of extraversion, and the conceptual attitude to introversion. All art may be described in terms of these two broad categories of looking outward to objective reality and inward to one's subjective responses. Each art work contains elements of both modes of expression.

Read relates the degree of extraversion or introversion in art directly to the personality structure of the artist - his personality type; in this he follows Jung's system of analysis. Both introvert and extravert may fall into one of four categories: thinking, sensation, feeling and intuition. Each of these expressive modes may appear in the work of a single artist, but one usually dominates. The artist is then described as the "thinking type", the "intuitive type", and so on. When one type of creative expression dominates, it is revealed in the art and suggests a direction for therapy. Where all four modes of expression are freely used, the individual is approaching what Jung

calls "individuation", the goal of self-growth.

The "thinking" type attempts an exact recording of the material perceived. His artistic style is realism or naturalism, and is recognized as extraverted or introverted according to the extent to which he projects cold formalism, or the organic qualities of his subject.

The "sensation" type describes the sensible qualities of things, the effects of sunlight, the roundness or sharpness, the warmth or coldness. The style of art closest to that of the sensation type is impressionism and is extroverted or introverted according to the degree to which the artist mimics natural lights and the perceived nature of things as opposed to projections of his own concepts of the light, warmth, etc. in his subject. Monet's study of *Rouen Cathedral, The Portal in Full Sunlight*, is an example of art belonging to the extroverted-sensation type. Van Gogh's *The Siesta After Millet*, is an example of the introverted sensation type.

The "feeling" type aims to represent feelings of anger, fear, love, hate, joy, grief, shame, pride, and all the infinitely subtle grades of moral and intellectual emotion. Romantic, fantastic or imaginative art may embody the primary emotion. However, only an idealist or super-realist such as Raphael or Michelangelo can successfully portray feelings of sublimity, immortality, divinity, etc.

The "intuitive" type demonstrates in his art the apprehension of abstract qualities and relationships. Avoiding all imitative elements, the artist responds to purely formed relationships of space, mass, colour, sound, etc. through the effective juxtaposition of surface, solid forms, colours, tones. Intuitive art is described as abstract, constructive and absolute. It is the type most frequently represented in music and literature.

Read believes the goal of education through art is the achievement of a true eclecticism; his ideal is an individual who manifests in both his creative art and daily life each of the perceptive and expressive modes - thinking, feeling, sensation and intuition (Read, 1945, pp. 84-86). This eclecticism, gained from a well conceived system of art education, represents integration of the various elements of the personality, "unity of consciousness" and hence full self-realization.

PART IV

CHAPTER VII

EXISTENTIAL PSYCHOLOGY AND
THE FUNCTION OF ART IN THERAPY

Existential psychology is not a system of therapy, it is a philosophical therapeutic attitude which has influenced the present trend toward active, present-centered psychotherapy (May, 1969, p. vi). It has been described as a corrective to orthodox psychoanalysis. It contains no paternalistic patient-therapist relationship; its attitude toward growth and action applies to everyone; its therapeutic implications need no explication on a particularly therapeutic basis.

Although existential psychology offers no theoretical system of art therapy, its treatment of aesthetics and its emphasis on present-centered action suggests a therapeutic attitude of considerable value in the practice of art therapy.

The main tenets of the existential approach to therapy are outlined in the next sections; they are followed by discussion of the existential view of art and creativity as it relates to the therapeutic function of art.

Existential Psychology: Towards A Definition

Action

Reality exists only as man produces it in action. Man knows by doing. He creates meaning out of his life and influences his own evolution by an act of will. He finds his identity in his activities. Man is his choices, his action.

Existence and Essence

Western science is essentialist in character, separating reality into discrete parts (such as the forces, drives, and conditioned reflexes of psychology) and formulating abstract laws for these parts. The existentialist holds that one cannot adequately describe a human being in these essentialist terms. The validity of conditioning, the formulation of drives, and the study of discrete mechanisms are not denied, but understanding complex living human beings does not derive solely from these bases. The more one formulates forces and drives, the more one talks about abstractions and not about the living human being, who always experiences the 'force' or 'drive' in his own unique way. The essentialist understands a person in terms of his behavior; the existentialist believes that mechanism has meaning only in terms of the person - existence precedes essence.

Being and Becoming

Existential psychology emphasizes the reality of the immediate experience in the present moment, the dynamic process of the complex human organism 'being' and 'becoming' through its relation to the universe. The individual's 'being', his awareness of himself, is a basic antecedent to his way of 'becoming'. 'Being' is a person's definition of himself in 'becoming', his continuous process of interaction with his universe, through which he comes to know himself.

Freedom

Man is not controlled by his environment as some behaviorists hold; although he is not free from conditions, he decides his own existence by the stand he takes against these conditions. He has the ability to transcend his immediate situation, and by his ability to think abstractly he can project a concept of what he can be. He is responsible for his own actions in a chaotic and nihilistic world (May, 1969).

Freedom is not a matter of choice. Existential psychology transforms a negative inevitability into a positive assent; it does not describe 'freedom from' but 'freedom to'. Even when life is reduced to its bare essentials (as in a

prison camp) and when action seems drained of meaning, there still exists the basic freedom to choose the attitude one takes toward one's external circumstances (May, 1969).

Awareness

Mankind's distinctive characteristic is the ability to influence human evolution through human "awareness", a concept here more concerned with philosophy than with body sensations. "Awareness" in the primitive context of animal existence is vigilance, the knowledge of external dangers and threats, which in humans becomes anxiety. Its cognates are "beware" and "wary". May (1969, p. 77) defines uniquely human awareness as self-consciousness, "my capacity to know myself as the one being threatened, my experience of myself as the subject who has a world". In therapy the patient may be aware that something is threatening his world; it is the work of the therapist to help him transmute this awareness into consciousness. This gives him the possibility of doing something about his existential reality. The patient must then choose to act, or not to act, to change or not to change his way of being and becoming in the world.

Anxiety and Dread

Anxiety is the human state of struggling against whatever threatens to destroy his being. Part of the struggle is always against something outside of himself; part is conflict within the person as he confronts the choice of whether and how far he will stand against his own being, his own potentialities (May, 1969).

Since man is called upon to move continuously into the unknown, he must face the anxiety which comes from the phenomenon of complete novelty. To face novelty, pure possibility where anything is possible, is to face both the dreadful and the pleasing. One who has faced the chaos and nihilism of the unknown knows that he can demand nothing of life, and that terror and destruction are always present and threatening him. What alarms one minute may become acceptable the next. Such a person appreciates reality, remembering even when the reality is painful that it is much lighter than the problem was (Kierkegaard, 1944).

Courage

Personal courage is the capacity to move into nothingness in spite of despair. This movement is not haphazard, stubborn, or senseless, but an expression of feelings, ideas, and

identity in decisions to act. The multitude of decisions an individual acts upon gives him his sense of self-worth. Social courage is the courage to relate to other human beings, facing the increasing demand for openness to existence in relationships, which is accompanied by anxiety of the unknown (May, 1969).

Existentialism and the Therapeutic Function of Art

The existentialist aesthetic attitude "corrects" the psychoanalytic attitude toward art. The existentialist does not accept that art is a manifestation of a repressed sexual life; art is a way of appropriating the world in addition to the libidinal way. The artist appropriates this world through reference to the unconscious, which the existentialist defines as those potentialities for knowing and experiencing that the individual has not actualized, but which may be brought to consciousness as image (May, 1975).

Existence and Essence

In existential therapy, art imagery is not analyzed but is approached phenomenologically free from controlling presuppositions, theories, and dogma of formal systems. Technical and diagnostic knowledge are important, but they must not be a substitute for immediate encounter and direct communication with the individual.

The dream or the art object is neither symptom nor object of the irrational mind, but a spontaneous suggestion for existence-in-the-world (Fallico, 1962, pp. 34-35). Dreams and art are viewed as pure spontaneity, in which things do not have to appear or to happen as the theoretical and practical consciousness requires. Time and spatial orderings are determined by spontaneous feeling and imagination alone. In the aesthetic or dreaming consciousness, spontaneity is given form and existence freed from neurotic block or controlling rationale.

Being, Becoming and Creativity

The aesthetic and spontaneous is prior both to the practical and intellectual; that is to say, is an immanent pre-condition to existential activity. Without pre-reflective spontaneous images, men and cultures lose faith and courage to be, even where existence appears to have reached a peak in the reflective and practical dimensions. Rational, technological and political progress without parallel support of spontaneous feeling and imagination, constitute a monstrosity. It appears that the whole character of reality is sustained by the act of feeling and making sensory images, without which thought loses content and substance, and action, its aim (Fallico, p. 63).

Similarly, in art, lines, shapes, textures, colours, patterns, mass and movement become the language whereby the originator speaks spontaneously of his essential being; the vocabulary of elemental felt-images in which feeling and image pass from "an obscure, unself-possessed, existentially dumb and un-named state to one in which the existent can speak and disclose his feelings to himself. The relation is one of conquest, of resolution of the inert and voiceless into the articulate work of the subject" (Fallico, p. 43).

The creation of a work of art consists of a union of feeling and image with a sense of self-identity. Each takes on the character of the other part without losing its own. In expressive image, feeling achieves actual self-presence for the artist, and image achieves inward subjective content. The artist looks upon his own work and discovers himself as a spontaneity. The unity of an aesthetic object is an outward manifestation of the unification of the subject himself, insofar as he achieves self-liberation and self-consciousness of being in honestly confessing and naming his own feelings to himself (Fallico, p. 29).

Although creative insights appear to break through in moments of relaxation, they do not arise haphazardly. The artist's receptivity is not passive but alive and open to hear what being may speak. Insights occur in areas where the individual is intensely committed, and on which he

concentrates in his waking conscious experience (May, 1975, pp. 80-81).

The self grows through its use of forms, metaphors, myths, dreams, fantasies - all psychic content which as models give it direction in its self-creation (May, 1975, p. 99). Through these images we see ourselves in the future and direct ourselves in one direction or another, as Sartre suggests, inventing ourselves in the multitude of our choices (Figure 14, a and b, pp. 135-136).

As the creative process reaches the level of consciousness, it is characterized by an intensity of awareness accompanied by neurological changes, activation of the sympathetic nervous system. Feelings of joy and exhilaration accompany the creation of order and form out of chaos (May, 1975, pp. 44-45).

Awareness, Anxiety and Self-Consciousness

Facing the microcosm of chaos and existence as an empty canvas, the artist experiences anxiety as the possibility of failure, which may immobilize him; as pure novelty which he cannot anticipate; as his own resistance to his own being, his potentialities for creating new form out of the formless threat from which they emerge. He fears pure spontaneity, where form and limits are not recognized, since in reality

loss of form means loss of the boundaries through which he orients himself in his world. In its extremes such formlessness may be experienced as psychosis, "possession" by the daemonic (May, 1975).

Peace of mind comes through confronting the daemonic, the ever-threatening unknown, and giving it form (the meaningful structure of reality as image). In art the dreaded daemon is confronted and named; the formless is given tangible form. Out in the open, the daemonic can be directly confronted, seen in its proper finite size and proportion, which are always less than the possibility (Figure 15, p. 137).

The "Absurd"

The apparently meaningless and haphazard events and attitudes of daily life which defy any underlying divine purpose to existence, the "absurd", is accepted in art because here it poses nothing that one must act upon or coherently conceptualize. Art has the power to show with some clarity what things and men can be, or what they have become, without intent to do anything else. The sculptural image of a Picasso figure, a griffin, or a unicorn is experienced as a composition of familiar elements - head, body, legs, etc. - put together in a way which is relevant to a world of experience, thought and action. The "absurd" is, then, possible as a felt and imaged

possibility, and so has a real place in the world as an expressive image (Figure 16, p. 138) (Fallico, 1962).

Action

Art is action. Brownell (1969) describes action as a concrete expression of energy, a rhythmic order of movement in tensions and relaxations. The value of creative art may be intrinsic in the doing, or it may be in what is accomplished beyond the activity, the product. Ideally both should be integrated (p. 8). Expressive activity gives form and articulate being to an unrealized situation implicit in the person who acts (pp. 24-25). Art is the formal elaboration of activity, complete in its own pattern; the direct, concrete and primitive presence of activity (p. 29).

Action in art occurs on two levels: living action, rhythmic and muscular in nature, which the artist combines with the art materials to produce a picture; and symbolic action which allows action in reference to things not present.

On the first level, the artist's attentive activity during which he transforms his natural rhythms and emotions into image, is more important to him than the completed work and communication with others through the work. On the second, or symbolic level, art in its nature and process

tends to replace gratifications from concrete actions with abstractions, essences and universals that are easily manipulated; an economy of action. Art "invents the future through the instrumentality of symbols" (Brownell, p. 216), and allows humans to rehearse the future, to make preparations and set goals for future actions and gratification. Art is an experimental preliminary to overt action in which man can make his mistakes in private. As a substitute for experience free of the penalties for the destructiveness, existence, and general menace of the real, the symbolic art experience often allows a wider scope of emotional experience than the real, expanding the range and power of the individual. There is no external resistance to, and no judgement of, the action. The artist has an enormous range of experience without the corresponding cost in errors and punishments which real life experience might entail.

A small activity, the symbol, stands for a whole field of activity; pure possibility of existence. Where the symbol has no observable referent in real life - for example, metaphysical experience (the cross) or political zeal (the swastika) - it becomes the focus of intense expression, and the incentive to action not only for the artist, but for the group from which he speaks.

Attitudes Toward Change and the Aesthetic Experience

The individual can be shown, or show himself, some thing or some course of action without necessarily having to become stirred or moved in his will to act in any way. Or he may be deeply affected by what is shown. Fallico divides man's attitudes toward change into four broad types. For the first three types it is more than likely that involvement with art experience as a vehicle for change (which Fallico calls the "aesthetic enactment") will be abortive, and its effects on the enactor will do more harm than good.

The first is the individual who is secretly or openly running in panic from what he has been and what he has done, without direction or knowledge of what he wants to be or do. This type of individual responds to the artistic vision as to a refuge from his flight, postponing thereby the day of existential decision, and taking its invitation to be his-own-spontaneous-self as an invitation to pseudo-bohemian irresponsibility in living.

The second individual has, by devious ways, convinced himself that he can find his meaning in the repetition of his former or present roles, resisting to the death any change. This second type will be filled with resentment and revolt at the sight of the possibility of being which appears to question his own entrenched position.

The third type has succeeded in entering a state of self-oblivion or insensitivity, remaining immobilized in indifference and passivity, suffering only the imposition of external changes which he has not initiated. For this person, art acts as an opiate to keep his present state of sleep undisturbed.

The fourth type, realizing that there is no fulfillment past or present in his life, opens himself to the envisionment of new possibilities. For this individual, the aesthetic enactment can be self-liberating and constructive in its renovating effects (Fallico, pp. 131-133).

An Aesthetic Attitude Toward Life

An aesthetic attitude toward life is the arch-enemy of the impersonal, the levelling, the non-purposive, "a deep-rooted will to resist the nihilism which stealthily destroys the very soul of modern man" (Fallico, p. 83). Through the aesthetic dramatization of life, things ordinary, extraordinary, joyous or tragic take on a depth of meaning which lifts them out of the accidental and mechanically impersonal - the rat-maze statistic - to a personal, purposive, human significance in life. For the artist even death and defeat can take on heroic and epic proportions which justify and dignify them. The aesthetic consciousness and its object are the renewers and restorers of our strength

and courage to be and to create values (Fallico, p. 39).

Existentialism And Gestalt Therapy

The "philosophical therapeutic attitude" of existential psychology described above is given practical application, undergoing changes and modifications, as Fritz Perls incorporates it into his system of Gestalt Therapy. While no attempt will be made to compare the use of existentialism within these two therapeutic modes, the similarities and differences will be obvious as Perls' use of existential philosophy appears in the next chapter of this paper: "Gestalt Therapy and Art".



Figure 14. (a), and (b).

Man creates himself through his choices. In creating a fantasy (a) from a photograph of a child on a swing, the artist unintentionally described the "high" he sought in taking street drugs. His frequent



Figure 14, continued.
schizophrenic episodes were precipitated by street drugs. In (b) he described his psychosis. He becomes a head in a shell, surrounded by frightening hallucinatory images, and a body outside of the shell acting irresponsibly or "headlessly".



Figure 15.

The artist, a suicidal alcoholic, faced the daemonic in this rough clay model of the limits of her own physical and mental dissolution. With this self portrait she began a slow climb, punctuated by many setbacks, toward a completely different life-style.



Figure 16.

The artist found some comfort and a good deal of satisfaction in this description of the "absurd" relationship of her three daughters to their children.

CHAPTER VIII

GESTALT THERAPY AND ART

Gestalt Therapy

Gestalt Therapy, the creation of Fritz Perls, is a loosely described, open-ended eclectic system which borrows from Freudian Psychoanalysis, Gestalt Psychology, Reichian Character Analysis, Existential Psychology and Eastern religion (Smith, 1976, pp. 3-4). Although Gestalt Therapy does not include a system of art therapy as such, Perls' method suggests a therapy mode which may be classified as Gestalt (Janie Rhyne, 1973).

Perls believes that the dynamic structure of experience, not its use as a clue to some unconscious unknown or symptom, is the important issue in therapy. Phenomena which appear as unitary wholes must have their wholeness respected and can be analytically broken into bits only at the price of annihilating what one intends to study (Perls, Hefferline and Goodman, 1951). He considers Freud's historically oriented thinking obsolete, and his use of linear-association psychology inadequate as a basis for what is obviously a system of spatial relationships (Perls, 1969). He concen-

trates on the structure of the actual situation, an irreducible unity of interacting socio-cultural, physical and psychological factors, using the patient's capacity for creative expression to re-integrate what he perceives to be dissociated parts.

The Field Theory of Gestalt Psychology

In the early twentieth century, academic psychology split into two schools, the behaviorists (nomothetic-experimental) and the Gestaltists (ideographic, phenomenological). Gestalt psychology views learning as a perceptual experience involving the appropriate structuring of the perceptual field. In a learning situation, ambiguities give rise to tension, which is resolved with the completion of "gestalt" or meaningful configuration. The gestalt emerges as a whole, inherent in no single part, but perceived when the parts come together.

We impose simple order and unity on our perceptions. As we collect visual fragments and assemble them into the object seen, our visual field becomes structured in terms of the object seen and the background of secondary fragments which do not become part of the object seen. The object or 'figure' is the focus of interest, and the 'ground' its setting or context. In the well-formed figure or gestalt, figure and ground become sharply differentiated. There is no

longer a cluttered field, a chaos of fragments competing for dominance, but rather one thing that draws our attention. Our perceptual activity becomes selective as we become concerned with this particular thing. As our interest is satisfied, our attention shifts. The interplay between figure and ground is dynamic, for the same ground may, with differing interests and shifts of attention, give rise to different figures (Perls, Hefferline and Goodman, 1951, p. 25).

A good form or gestalt persists and tends to recur in the same, or a like situation. An incomplete gestalt tends towards completion or closure by completing itself as a good form; that is, there is an 'intention' towards a good gestalt which occurs through perceptual changes to produce symmetry and good distribution of fragments, sharpening or accentuating of the essential figure elements, making the figure clear and simple.

Gestalt Theory As An Holistic Organismic Concept

The term "holism" was coined by Field Marshall Smuts in *Holism and Evolution* (1926) for the concept that structures have a meaning different from the sum of the parts. Meaning or function of the whole structure can be changed by altering a single part. One must watch the whole field in which a phenomenon is embedded in order to avoid

misunderstanding. For example, the same word in different contexts, may have a different meaning in each context (Perls, 1969). Perls combined the concept of holism with Gestalt psychology to provide an holistic view of function in the human organism.

There is a parallel between the organization of our visual field and our broader field of total experience. The phenomenal world is organized into figure and ground according to the sensory and motor experience of the individual. Man has a hierarchy of needs continually developing, organizing the figures of experience, and disappearing. The figure-ground function which is strongest at any given time will temporarily take over the control of the total organism. This is Perls' basic law of organismic regulation (Smith, 1976, p. 52).

Good gestalts must appear one after the other, continuously, so that our needs can be recognized and satisfied without interruption in the process of biological survival in the environment. When the function of a gestalt is interrupted, it remains incomplete and is forced into the background, suspended energy unresolved and uneasy, often distracting the individual from the business at hand. Interferences with the progression of gestalts result from poor perceptual contact with the external world and with the body itself; from blocking of the open expression of

needs; from repression of needs and impulses.

The formation and completion of clear and comprehensive gestalts is necessary for health and growth. The healthy figure-ground relationship is associated with attention, concentration, interest, concern, completed tasks and self-actualization. An incomplete gestalt represents an unfinished situation that clamours for attention. It is associated with confusion, boredom, compulsion, fixation, anxiety, amnesia, stagnation and indecision (Perls et al, 1951, p. ix).

Perls calls the sense of unitary function of self with environment as 'contact'. The process of contacting is the forming and sharpening of the figure/ground contrast, the work of spontaneous attention and mounting excitement - ultimate reality. He states that the achievement of a strong gestalt is itself a 'cure', for the figure of contact is not a sign of, but is itself the creative integration of experience (Perls et al, 1951, p. 232).

Awareness

In order to be relatively tension-free, man needs to develop the capacity to make himself aware at any time of his figure-ground function in his environment. The term "awareness" as used in Gestalt Therapy refers to non-directive attention to the aspects of present experience (Fagan and Shepherd, 1970).

Perls writes "To me, nothing exists except the now. Now=experience=awareness=reality. The past is no more and the future not yet. Only the now exists" (Fagan and Shepherd, p. 14).

In considering awareness, gestalt therapy establishes categories of cumulative and ingredient experience. Cumulative experience is a composite form (for example, "I swim"); a total and united event which is of central relevance to the individual. Ingredient experience in this example consists of the muscular movement, breath, sensation of water temperature, resistance, wetness, thought patterns and so on, each of which has an effect on the nature and quality of the cumulative experience.

Such ingredient experience frequently goes unattended. If one lacks sensory memory, the capacity for vivid sensory recall at will, this is probably because ingredient experience has been unconscious, and the cumulative experience has been contacted only to the extent necessary to activate previously acquired patterns of action. The world has not been genuinely experienced.

The method of Perls' therapy is "to train the ego, the various identifications and alienations, by experiments of deliberate awareness of one's various functions, until the sense is spontaneously revived that it is I who am thinking, perceiving, feeling and doing this" (P.H.G., p. 235).

Once the patient is 'aware' of the faulty figure/ground relationship, he can choose either to correct it, or to remain in the neurotic state.

Creative Indifference

Perls uses Friedlander's concept of "creative indifference" to explain the importance of differential thinking in his therapeutic system. Every event is related to a zero point from which differentiation into opposites takes place. Opposites within the same context are more closely related to each other than either one is to any other concept. By remaining alert in the center, we can acquire the creative ability to see both sides of an occurrence and complete an incomplete half. The two branches of a differentiation develop simultaneously and equally. 'Creative indifference' is an attitude of interest extending towards both sides of the differentiation, giving it wholeness and balance (Perls, 1969). For example, conscious and unconscious are complementary. The more one-sided emphasis one finds in a conscious attitude, the greater is its polar unconscious compensation. A fanatic emphasis on peace and tranquility implies the existence of strong unconscious hostile feelings. Bringing to consciousness the opposing attitudes deepens the conscious position by giving it a wider perspective in relation to conflict and change as the full basis of

experience (Smith, 1976).

Perls' "Dreamwork"

Perls describes the dream as "possibly the most spontaneous expression of the human being, a piece of art that we chisel out of our lives" (Fagan and Shepherd, 1970, p. 27). It is an existential message to oneself. Every aspect of the dream is a part of the dreamer, a part which is to some extent disowned and projected onto other objects. In his early work Perls approached the dream by having the patient retell the content over and over again from the standpoint of each image. He later gave up this process in favor of a search for projection and avoidances. He then regarded the dream as a way of uncovering avoidances and projection; he arrived at the nature of the avoidance by determining the moment the patient interrupted the dream and awakened instead of continuing it.

Creative Integration

The process of creative adjustment, a new configuration coming into being, involves both aggression and destruction as the old achieved habit of the contacting organism disintegrates. This destruction may arouse fear, anxiety and resistance, particularly in people who are neurotically inflexible. However, the solution to the problem is achieved

when the disturbing energy flows into the new figure. Frequently one is faced with the choice between two conflicting solutions to the same problem. The satisfactory creative solution must be formed on a higher level in which the new pattern emerges from a background which includes the two conflicting solutions (Perls et al, 1951, pp. 393-394).

Perls stresses the necessity for leaving the security of the present familiar position to face the risk of the unknown, the process involved in the formation of any new configuration. The secure state is without interest and energy, it is not real. There is no indifferent, neutral reality.

Gestalt Therapy and Art

Perls mentions art only briefly in his written work on Gestalt Therapy. He questions the psychoanalytic view of creative art as the product of the id, stating that the psychoanalytic view of the creative process can make no sense of a "contact" which is exciting and which changes the reality. He agrees that the imaginative artist alleviates his problem by projecting into his work (Perls et al, 1951, p. 212). However, the work of art is never merely a rearrangement of the unfinished situations of the human organism, but a configuration containing new material from the environment

and therefore different from what can be remembered. The assimilation of past history with novelty occurs in the present moment, as the artist, with mounting excitement arising out of his interest in a new developing theme, reaches for an as yet unknown solution. The working up of the real surface, the transformation of the apparent or inchoate theme in the material medium is the creativity. The artist is not unaware of what he is doing, although he may be able to verbalize or theorize properly only after the work is complete (Perls et al, 1951, p. 396).

Perls criticizes the psychoanalytic model further for its inconsistency in describing the childlike, creative spontaneity of the artist as central to health, and at the same time treating the artist as exceptionally neurotic. He favors the concept that art is related to play. The artist is in a kind of middle mode, neither active nor passive, but accepting the conditions, attending to the project, and growing toward a solution in a childlike, free and aimless manner which allows the energy to flow spontaneously (Ibid., pp. 245-246). The middle mode from which the creative solution grows is the position of "creative indifference" described by Freidlander.

Perls Extended

Other aspects of Gestalt Therapy lend themselves to a system of art therapy: art used to enhance the formation and destruction of figure/field; to explore possibility from the position of creative indifference; to facilitate the development of "awareness"; to stimulate and to utilize fantasy therapeutically; to solve problems, examining conflicting goals and alternate solutions. In addition to these topics, which will be dealt with below, the Gestalt theory of expression is useful in understanding the expressive qualities of line, colour and form. It will not be outlined here.

Figure/Field Formation and Destruction

Whether or not he begins working with a particular form or simply an array of "doodles" which express his current mood, the artist projects his inner thoughts and feelings upon his art work. He strives to change the undifferentiated elements of the drawing into a figure/ground which will satisfy his expressive need. He then explores what he has revealed to himself in the possible relationships of thoughts and feelings to the image (figure/ground arrangements) he has created, in Perls' language "getting in touch with himself". In this way, "unfinished business" (incomplete

gestalts) which has resulted in anxiety, obsession, confusion, etc., can be described, identified, and closure reached.

The artist may search for an image or form which is not ambiguous; a neat, compact gestalt of logical material which satisfies the gestalt needs of conscious vision. Or he may create what Anton Ehrenzweig (1973, p. 64) describes as a "fertile motif", incomplete and vague, "the imprint of the undifferentiated vision that created it in the first place". Its open, imperfect structure is unclear. Figure and ground may change several times as one looks at the picture. The gestalt arising out of this second type of painting is highly subjective. It offers insight into one's habitual methods of achieving closure, and of dealing with energy arrested in the incomplete gestalt. The first type of art work is useful where conscious control of thought processes is indicated, as in psychoses. The second type of image is useful where destruction of obsessive and neurotically blocked closure is necessary to enhance creative integration of psychic material.

Exploring Possibility From a Position of Creative Indifference

The artist learns to keep his intentions flexible. The unpredictable incident in life, as in art, disrupts the planning of the rigid personality. An excessive wish for

control blinds the artist's sensitivities to subtle variations. The flexible artist welcomes and takes advantage of the accident. He is watchful and able to react immediately to innumerable variables which will enforce subtle changes in plan as new shapes grow and interact around his brush (Ehrenzweig, 1973, pp. 72-78).

The rigid mind which tends to repeat the same closure frequently repeats the art image in the same way. It reveals through its work, its one-sidedness. The artist learns to break down his conscious, rigid images, changing figure/ground relationships, gaining a degree of flexibility in his own environmental contacts as he does so.

Most people are capable of seeing that the pattern of their art forms symbolize the pattern of their attitudes and behavior in living. Seeing a clear gestalt of personality emerge through one's art work can lead to both self-acceptance and creative change, a growing sense of responsibility and autonomy.

Awareness

Art can serve to enhance awareness in several ways: through sharpening visual perception and attention to detail in the environment; as a means of directing attention to 'ingredient' experience; as a key to inner experience; and as a way of being "in the present", alert to the gestalt

developing in the art work.

When one attempts to draw for the first time familiar objects such as trees, or even one's own home, details such as branch patterns, leaf shapes, door and window frames present problems. It is usually necessary to take another look, to examine the objects and visualize them internally in order to know them well enough to draw them with a degree of accuracy. The beginning artist soon finds his visual perception sharpened. Colour, light, shadow, form and texture become more important to him; he is motivated to observe more closely. Then he becomes quite suddenly aware of a greater sensitivity to colour and shape; colours appear more vivid, contrasts more marked, and the outline of shapes more sharply defined. The field of vision and experience shifts and widens.

The artist can be made aware of his ingredient experience. The first ingredient experience is the emotional response to facing a strange task with unfamiliar tools and few skills. High expectations, ego involvement, and feelings of inadequacy or helplessness in this situation often generate enough anxiety to block adult participation in art activities unless the individual is made "aware" of the experiences which interfere with his action. Such blocking serves a useful purpose if one examines his avoidance pattern, and consciously alters it.

Attentiveness to other types of ingredient experience, such as tactile sensation, kinaesthetic balance and rhythm in brush strokes, smell of materials, and so on, adds to the pleasure of the art experience and increases the expressive quality of the work. Such attentiveness contributes to the general pattern of spontaneous awareness and heightened interest in the artist.

In the present handling of the art medium, the artist is vitally involved in reality. He projects and scans in his dialogue with the drawing, developing a passive watchfulness over the emerging pattern in the scattered and fragmented structure of the growing work. He is intensely involved in and attentive to the present.

Fantasy

Fantasy is the generative power to develop a repertoire of alertness and preparation; it enters into all preparatory activities (Polster and Polster, 1973). Through exploring possibilities in fantasy the mind expands its area of consciousness; it gains confidence by rehearsing action to be taken. Action which grows out of the sensitive exploration of possibilities and alternatives is rooted in understanding rather than whimsy. Both spontaneous and directed fantasy are useful in a gestalt system of art therapy.

Spontaneous fantasy and daydream explored in art provide a type of gratification of both conscious and unconscious needs (closure of incomplete gestalts). By attending to their content the nature of repressed feelings may be uncovered. For example, a violent fantasy involving an acquaintance may indicate a passive attitude in the artist which prevents him from dealing appropriately with his feelings of aggression. When the direct expression of aggression is frequently a forbidden or frightening experience, painting a picture is a good substitute for external reality. In the adolescent, emerging sexual feelings can be fantasized and their figure/field relationship explored within the safety of the art medium.

If a fantasy involves not repression, but the unavailability of persons involved in an unfinished situation, directed fantasy in an art image may be used to recreate reality and achieve closure. One may have unfinished gestalts involving old lovers, dead relatives, childhood friends no longer available in terms of time and space, or in people with whom direct encounter is inappropriate. Approaching the situation in the relative safety of art, one can accept one's past failure in a social relationship, or injustice and pain, without the defensiveness arising from the fear of gossip, guilt and blame, free of obsessive, anxious verbal rehearsal and old strategies for attempting

closure which previously buried the issue.

Perls' view that everything in the dream or fantasy is a projection of the personality may be used in directed fantasy. The artist is asked to consider each image and colour as separate aspects of 'self' to be dramatized and accepted as valid and real. The completed picture becomes the focus for the artist's fantasy. As he acknowledges its many aspects as projections of his personality, he begins to understand the complexity of his motives and actions.

Problem Solving

Closely related to fantasy, problem solving involves the search for new patterns or gestalts in concrete practical situations. The techniques for problem solving through the flexible use of image are well outlined in the works of Rudolf Arnheim (1969), Edward de Bono (1967), and Robert H. McKim (1972). They will not be described here. These authors put gestalt theories of perception to practical use. McKim's work includes idea sketching, practice in imagining and sharpening visual perception. His book is designed to improve the ability to perceive accurately and to think creatively.

PART V

CHAPTER IX

A NOMOTHETIC-EXPERIMENTAL APPROACH TO THE FUNCTION OF ART
IN THERAPY

Experimental Psychology, Behavioral Therapy and Art

Experimental Psychology, or psychobiology, attempts to apply the methods of empirical science to the investigation of human and animal behavior, and to establish relationships amongst observable conditions that can influence behavior (Berlyne, 1974, p. 4). Behavioral Therapy applies experimentally established principles to overcoming persistent, unadaptive habits; it scans the whole range of the behavioral sciences to obtain relevant principles (Wolpe, 1973).

Experimental psychologists studying art and aesthetics face the difficult problem of analyzing the unnamable qualities of art and the spatial gestalts of image in the linear order of analytic language. In their writing they define statistical norms and preferences, relate particular configurations to general categories, and build conceptual

models which reflect the essentials of what they attempt to understand about given phenomena. Their work does not contribute a great deal to an understanding of the function of art; science has not yet succeeded in casting perceived qualities into descriptive categories or codes for exactly defining aesthetic complexities. However, such analysis sharpens the vision for the task of penetrating the problems of art "to the limits of the ultimately impenetrable" (Arnheim, 1974, p. 3).

H.J. Eysenck (1966) studies verbal and physiological reaction to art by measuring the heartbeat, pulse rate, skin temperature and the electric conductivity of the skin. He arrives at an "average" aesthetic response which he admits is "over-simplified". However, the "facts" he uncovers "all point with remarkable unanimity to a theory of aesthetics that is firmly anchored in biology and derives judgements of 'beauty' from inherited properties of the nervous system" (p. 324).

Nor do Berlyne's (1974) studies of forms of behavior that center around works of art and other aesthetic phenomena, solve the problem of studying art with the methods of science. In an earlier work (1971) Berlyne concentrates on the deficiencies of the phenomenological approach to art, but in the end accepts the inadequacies of the scientific method as well. He decides that art and

science are logically incompatible; he concludes with the statement that

there can be grave dangers in mistaking what art is doing, and, particularly, in confusing what art is doing with what science is doing, or vice versa. But so long as art and science refrain from usurping each other's functions, they have their mutually supportive and equally indispensable ways of helping us to understand the world and to change it for the better. (p. 296)

On the other hand, Behavioral Therapy offers a useful technique which can be incorporated in a system of art therapy because it utilizes mental images. This method, systematic desensitization, developed by Joseph Wolpe (1973, p. 95) from clinical experience over the past thirty years, is designed to overcome emotional habits step by step.

Systematic Desensitization

Systematic desensitization is a method for breaking down neurotic anxiety response habits. The patient learns techniques for deep muscle relaxation which inhibit anxiety. He is then exposed for a few seconds to a weak anxiety arousing stimulus. If the exposure is repeated several times, the stimulus progressively loses its ability to evoke anxiety. Successively stronger stimuli are introduced in the same way, until the individual is able to tolerate strong stimuli.

This technique, and variations on it, can be of use in

art therapy where an hierarchy of art images of increasing strength may be used to provide anxiety arousing agents.

Neuropsychology and Art

The final phase in investigating the function of art in therapy, the neuropsychological model, centers on research into the specialized bimodal function of the human brain. Since scientific exploration of the function of art in terms of the complementary modes of data processing in the brain's right and left hemispheres has scarcely begun, and is presently limited to patients undergoing commissurotomy or suffering from brain lesions, few definitive conclusions have yet been reached.

There follows a simplified description of bimodal function in the human brain as it is related to the development of a neuropsychologically oriented mode of art therapy.

Discussion of the topic must proceed cautiously. Current research is inconclusive. Galen (in Ornstein, 1974) warns that the idea of dual function of the brain can be applied over-enthusiastically as the mechanism underlying everyone's favorite pair of polar opposites: scientist-artist; conscious-unconscious; obsessive-hysteric, and so on. Such over-simplification will be avoided in favor of some suggestions for further research.

Right and Left Hemispheric Function in the Human Brain

Man is believed to be biologically equipped to process information in two distinct and complementary modes. Recent research on the specialized function of the right and left hemispheres of the brain provides evidence that each hemisphere has a different cognitive style for processing information; the left uses an analytic, logical mode closely associated with language; the right uses an holistic spatial mode which utilizes images (Gazzaniga, 1970; Ornstein, 1972, 1973 and 1974; Dimond and Beaumont, 1974).

The left hemisphere controls the function of the right side of the body in right hand dominant individuals. It codes sensory input in terms of linguistic descriptions, analyzes phonologically over time, notes conceptual similarities, to the apparent exclusion of visual similarities, and perceives detailed features.

The right hemisphere controls the left side of the body in right hand dominant individuals. It codes sensory input in terms of visual and spatial images, and has a gestalt recognizing faculty which synthesizes over space. The right hemisphere notes visual similarities, form, direction of motion, orientation of lines and arrows, two dimensional objects in space, and organizes binocular depth perception.

The right hemisphere is also dominant in coding in images and non-nameable sensory stimuli.

Brain function appears to alternate between these two modes. In normal people the two hemispheres seem to be sequentially and not simultaneously aroused (Dimond and Beaumont, 1974, p. 150). Electroencephalogram readings show a switch in the activity of the hemispheres from one to the other about once a minute in the normal brain. Schizophrenics have shown themselves to be more active in their right hemisphere (Jaynes, 1977, p. 429).

M. Gazzaniga (Dimond and Beaumont, pp. 376-377) suggests that in small children, coding of language and perceptions of all kinds occurs in both hemispheres, possibly with little interhemispheric communication. With maturation the left hemisphere establishes its dominance over language and analytical processes, and the direct use of the image in cognition appears to decrease. With the development of left lateralization in the language centers, an inhibitory mechanism apparently develops in favor of the dominant left hemisphere language processing system, which limits the cognitive decision capability of the right hemisphere. Gazzaniga speculates further that it is possible to overtrain the subject to use one cognitive style and limit the use of the other (p. 377).

Psychobiological Implications of Bilateral Assymetry
For an Art Therapy Mode

a. Brain Damage

Experimental studies of both normal and brain damaged individuals suggest that perceptual image and spatial manipulation of objects are useful in the assessment of brain function. J. Levy (Dimond and Beaumont, p. 155) discusses studies in which concrete images were used to teach brain damaged individuals the names associated with particular faces. In the same book, J. Seamon cites some examples of the therapeutic use of image. Language learning with global aphasic patients met with some success when visual images were used in place of verbal referents. Memory retention in patients with Korsakoff syndrome showed some improvement when patients were instructed to use an imagery coding strategy (Dimond and Beaumont, 1974, p. 200). Such research indicates that some rehabilitative progress may be possible through fully utilizing the visual processing system.

The role of a carefully structured art program in the retraining of organically affected and psychotic patients who have suffered deterioration in brain function has not been adequately investigated. Within the context of present interest in bimodal brain function, the use of a mnemonic system of art therapy receives support. Patients who

might benefit from such programs include the retarded; epileptics; those with known left hemispheric lesions; those who appear to have developed one mode of brain function at the expense of the other; those who have sustained a degree of generalized brain deterioration from repeated psychotic episodes and/or electroshock therapy.

b. Psychosis

Many examples of schizophrenic art available in clinical practice and in literature on art and psychiatry indicate that it is possible to recognize certain syndromes through examining the graphic work of patients. The organization and content of the art suggests some sort of irregularity in the relationship of image and logical-analytic modes of brain function. The quality of bi-modal brain function in psychiatric illness could be investigated within a carefully structured art therapy program. This would represent a continuation of the work of medical psychologists mentioned in the review of literature.

c. Fatigue and Brain Function

The sensory information processing systems of the brain are subject to fatigue, as is all neurological function. Dimond and Beaumont (1972) investigated the transference and generalization of fatigue from one processing system to another within the brain. They concluded that fatigue in a specific area of function does not affect the

brain as a whole. Fatigue occurs in separate hemispheres in the brain and does not extend to the body. It is not offset by distribution between the hemispheres, nor spread from the perceptual system engaged to other systems (Dimond and Beaumont, 1972, p. 64).

"Blocks to function" occur with repetition of a particular stimulus input. Obsessive thoughts, guilt, or attempts to rationalize actions or events could cause such fatigue and constitute blocks to effective brain function. Galen speculates that the verbal analytic temporal mode may be concerned with the outcome and sequences of actions, focusing on the future, or the past (Lee, Ornstein et al, 1974, p. 29). If this is so, anxiety neuroses deriving from anxiety over the past or fear of the future could cause an overloaded, stressed, verbal analytic mode within the brain. Since fatigue is not generalized from one system to another, introducing an activity such as a particular type of art work would theoretically at least, switch the activity from the overloaded left hemisphere to the right spatial-image mode, relieve the fatigue and produce a general tranquilizing effect. The tranquilizing effect of certain types of art work for patients experiencing high levels of anxiety can be demonstrated clinically (Figure 17, p. 167).

d. Psychoanalytic Theory Re-examined

Freud's theory of primary and secondary process receives some support from current research on bimodal brain function. Bogen (Ornstein, 1972) suggests that the concept of primary and secondary process is a reflection of the dual function of the brain. Freud and his followers consider primary process thought to be concrete rather than verbal, carried out through the use of images. Secondary process is described as thinking which develops with the growth of language.

John G. Seamon (Dimond and Beaumont, 1974, p. 201), discussing verbal and visual encoding and retrieval systems finds support in recent research for the view that early childhood experiences are frequently unrecallable because childhood memory schemata are visual. Only later with maturation do visual images become re-encoded in the verbal hemisphere. Early childhood experiences therefore may remain in the sensory visual-spatial right hemispheric encoding system. It is possible that, after a long delay, information cannot be recoded from visual to verbal processing systems. Therefore, early childhood memories in particular may be available only through sensory-image memory within the right hemispheric encoding system. Such images may be inaccessible to the verbal system until they are somehow consciously revisualized in some sort of memory image (such as dream

or spontaneous art) and recoded through the analytic verbal function of the left hemisphere.

This separation of early childhood memories from the verbal system is significant as it relates to the Freudian psychoanalytic art therapy model. "Painting out" dreams and other sensory primary process images of early childhood experience and then relating to them verbally (secondary process) may result in the recoding of these old right-hemispheric memories within the verbal-analytical system, an operation described as "integration" within both the psychoanalytic and neuropsychological models.

It may be proposed that subliminal or psychologically threatening and overloading sensory input may, through some controlling neurological safety mechanism, be kept "repressed" within the non-analytical right hemispheric encoding system, inaccessible to the verbal-analytical left mode until it reappears in the form of dreams or spontaneous art images. Once released as image, the "repressed" material is made available to the analytical verbal mode where it is recoded in terms of rational experience, or "reasoned" into a less threatening psychological context - integrated with the conscious.

PART VI

CHAPTER X

A COGNITIVE APPROACH TO THE DYNAMICS OF IMAGE

Cognition involves perceiving, remembering, conceiving, judging and reasoning. Studies of the psychobiology of art which provide insight into the therapeutic function of art rely largely upon introspective reports and a cognitive approach to research. The most useful of these cognitive studies are concerned with the dynamics of mental image formation. The psychobiology of art is closely related to the dynamic process of image formation.

The term "mental image" has been vaguely described as one entity through usage in the previous therapeutic models. The term "art image" suffers the same oversimplification. An attempt will be made to clarify this relationship. Because the mental image derives not only from visual, but also from spatial and verbal experience, a theory of three types of thought representation evolving from these three types of experience will be provided at the beginning of this study of images.

The Modes of Representation of Thought

M. Horowitz (1970) proposes that there are three modes of thought, which he labels enactive, image and lexical. These correspond to three stages of human development in the processing of information (p. 71ff). Horowitz's theories are in harmony with theories of bimodal brain function described in Chapter IX of this thesis.

a. Enactive Thought

Enactive thought develops from memory of one's own motor action and from mimicry responses to the motor action of another person. This type of thought is present very early in childhood and continues through adult life. The infant modifies his early reflexive action by interaction with the environment. With each stimulus, several motor responses are activated, and trial action of each of these responses until the appropriate one is chosen, constitutes enactive thought.

b. Image Thought

Image thought develops largely from visual sensory perception which produces the memory image. It is modified by other types of sensory stimuli which accompany visual perception - touch, smell and sound. Perceptual experience is usually associated with an emotional tone which categorizes the image as painful, pleasant, frightening, etc.

Image formation and emotion are thus closely linked. The memory image can express and evoke emotion; in avoiding danger, one feels fearful and creates a vivid image of the dangerous situation. Images may recur in response to intense and unresolved feeling states. Because of its emotion-evoking ability, image formation can be used purposefully to transform emotions, as in Wolpe's systematic desensitization.

Images are present in both primary and secondary process thought. Secondary process thought images represent conceptual problems, and help solve personal and social adjustment problems (Horowitz, 1970, p. 74).

c. Lexical Thought

Lexical thought develops with language, allowing progression to new levels of conceptualization and reasoning. Cognitive theorists regard lexical thought as the most rational, secure, and conceptually clear form of thinking. This is in agreement with Freud's statement that the most rational thought is achieved when ideas and emotions become labeled with words.

These three modes of thought are not clearly separated. Enactions blur into imagery in the form of kinaesthetic and somaesthetic images. Image and enactions blend with words in metaphor, simile, and auditory or visual images created by the words themselves.

Perceptions change from image to the other modes of thought. The visual experience is retained for a short time in the form of image, allowing time for emotional response and conceptual appraisal. It is then automatically reduced in sensory vividness and transformed into other forms of representation - usually words - and integrated with other records of experience.

Types of Mental Image

The term "mental image" denotes mental contents which have a visual sensory quality. Detailed introspective accounts, upon which the studies of the mental image are based, describe how the image enters consciousness, its duration, its emotional content, its relationship to real events and objects, the effects of efforts to change or dispel it, and its relative position in a series of images.

Different studies of the dynamics of the mental image use different descriptive systems for organization and classification. Reference is made here to the recent work of M. Horowitz in his book *Image Formation and Cognition* (1970).

Horowitz classifies mental images into four categories according to their vividness, the context of the images, their interaction with perception and their content.

a. Vividness

The more vivid the experience of the image the more likely it is to be localized as external and appraised as real. (1) The hallucination, an internal image that seems as real and external as the perception of an object, is most vivid. It occurs in any sensory modality and in any state of consciousness, including full wakefulness. (2) The pseudo hallucination is intense and compelling and seems to occur contrary to action of the will, but does not possess a sense of reality. While the individual does not believe in the reality of the pseudo hallucination, he reacts to it emotionally as if it were real, often experiencing real terror. (3) The thought-image, which is localized internally, ranges in vividness from weak to clear. Although not necessarily controlled by the will, it can usually be altered at will. (4) The unconscious image, a descriptive concept from psychoanalytic theory, is repressed and possesses no form until it is allowed past the censor.

b. Context

The context in which one experiences an image is important to a study of the psychodynamics of image formation. (1) Hypnagogic and hypnopompic images are nonvolitional and vivid, occurring on sleeping and waking respectively. (2) Dream images are visual-seeming experiences which occur several times a night at a particular stage of the sleep cycle.

The nightmare is a dream which has frightening visual images, often associated with feelings of paralysis or smothering. (3) Psychedelic images and flashbacks are produced by hallucinatory drugs, often beginning with unusual perceptions such as fluorescent colours or scintillating effects, and progressing to intense visual thought images, illusions, pseudo hallucinations, or true hallucination. Similar phenomena are reported during delirium caused by fever, starvation, or trances.

(4) Dream scintillations, or rapid flickering images following strenuous physical activity may be due to a minor variant of temporal lobe epilepsy.

c. Interaction With Perception

It is important to know how close a subjective experience of image resembles the object perceived, and the possible motives for image distortion. (1) An illusion occurs when a perceiver transforms stimuli until they resemble something other than the external object. A learned schemata is wrongly applied to vague visual stimuli, and a bush at dusk may be interpreted as an animal.

(2) Perceptual distortions such as buildings that tilt, "seeing double", and patchwork arrangement of the visual field, may occur during auras in persons with epilepsy or migraine headache, drug intoxication and flashbacks, in states of fatigue, or developing psychotic episode. They may advance

to become hallucinations. (3) Synesthesias are images which are translated from one sensory field to another; changing sounds become changing colours. (4) Deja-vu, the experience of a new perception as one already familiar, occurs in wakefulness during stress, drug experiences, and auras of epileptic seizures. It may be accompanied by depersonalization, the dislocation of the concept of personal identity from the physical self. (5) Negative hallucinations, blocking out something that is well within the visual field, a state of perceptual inhibition and a phenomenon of hysterical neurosis, can also be induced under hypnosis. (6) After-images persist after the removal of the external signal. These can be induced by staring at bright colours and then shifting the gaze to a light coloured surface. A particular organic lesion of the brain may result in paliopsia, an after-image that resembles the shifting frames of a slow-moving motion picture.

d. Content

Certain types of images are of significance for their content. They may have a wide range in vividness and context, and they may result from perceptual interaction. (1) The memory image is a reconstruction or resurrection of a past perception. When it is especially vivid, it is called an eidetic image, the "photographic memory" common amongst young children. (2) The fantasy image is comprised of

content that has never been perceived with that particular organization. Its component parts are derived from past perceptions which are recombined in novel form. The imaginary image frequently becomes confused with the memory image. (3) Entoptic images, the lights and patterns experienced on closing the eyes, arise from stimulation of optic structures within the eye, or in some part of the optic neural circuits of optic brain centers. They are particularly vivid after the eyes are rubbed. Blood vessels in the eye may themselves be observed when the eye is closed against bright light, such as the sun. (4) Body image is "a hypothetical construct of usually unconscious images that operates as a specialized internal analog data center for information about the body and its environment" (Horowitz, p. 24). It includes information about shape, appearance, position and organization of the body and its immediate surroundings. The body image constantly changes with current perception, memory, emotions, drives, thoughts and actions. Certain aspects of the body image are conscious, and others are unconscious. The phantom limb phenomenon is an experience of body image in which one retains the sensation of still having a limb which has been previously amputated. (5) The autoscopic phenomenon, visualization of oneself as if from a point outside the body, may occur with fatigue, anxiety, toxic

states, or organic pathology of the brain. (6) The paranormal hallucination or vision involves religious, mystic, extraterrestrial or supernatural images associated with "belief" or doctrine. (7) The imaginary companions of children are often described with detail and clarity, and may achieve great vividness with the child actually "seeing" (hallucinating) the image of person or situation. (8) The last type of image listed here is the number, or diagram form, ideosyncratic visuo-spatial patterns used to work out mathematical problems or remember isolated dates or facts.

Horowitz's list is not exhaustive. It is followed by a discussion of factors which increase image formation.

Increased Image Formation

Any situation that induces an altered state of consciousness is defined by the contents and organization of the conscious experience, and the precursors and residues of the awareness of these contents. Allowing for personal differences and the subjective nature of reports, Horowitz concludes that images begin to become more frequent, more vivid and free of direction from the will and the censor as a person becomes less wakeful, less reality oriented, and less committed to reason and problem-solving thought. Images become progressively less determined by

external stimuli and self direction, more simple, primitive and wish or fear controlled. Visual experiences which arise from processes within the eye itself (entoptic phenomena) are elaborated into fantasy and may end in hallucination.

Some individuals characteristically experience image formation more frequently than others, possibly due to predisposing constitutional factors which heighten image vividness or reduce control and regulation of image formation. The effect of environment is unclear. However, image formation appears to be influenced by perceptual stimulus available; by gratification of infant needs through internal images as a substitute for direct satisfaction (Freud); and by the capacity and opportunity to acquire language as a substitute for images. Horowitz emphasizes the importance of cultural factors. He notes contemporary society's trend, under the influence of mass communication media, from word to image orientation.

Psychopathology and Image Formation

Horowitz further separates images into categories of voluntary, spontaneous and unbidden, depending on the degree they are subject to conscious control. Voluntary images are deliberate: for example, the recollection of where a car is parked. Spontaneous images emerge without conscious effort from stream of thought, and are not intrusive, although

they may occasionally stimulate distressing emotional content through memory or association. Unbidden images intrude into awareness, and range in quality from the dim and quasi-sensory to the hallucinatory. Pleasurable or painful, they may be associated with ecstasy, anxiety, fright, or panic at loss of control.

Loss of control over image formation, the intrusion into awareness of unwelcome mental images, may reveal a psychopathic condition. These symptoms are more serious when accompanied by loss of the capacity for reality testing, and of the ability to differentiate internal image formation from visual perception (p. 111).

Types of Art Image

Graphic images, like mental images, can be described in several ways: according to the quality of conscious control over style and content; with respect to the content and the context of the imagery; and with appropriate concern for the type of mental images which they represent and from which they appear to have developed. Although little is known about the neurological processes involved in drawing and painting, there are certainly similarities and variations in both the neurological function and the phenomenal experience associated with each type of art work listed below. It is apparent that if the function of art is to be properly

understood, the variety of mental image from which the art image develops must receive detailed consideration.

An attempt is made below to classify the various types of graphic image according to quality of conscious control, content and context of imagery, and the appropriate mental image represented. The term "drawing" is used to describe graphic images produced with pencil, pen, crayon, paintbrush, etc. The one who "draws" is called the "artist".

a. Automatic Drawing

Automatic drawing is that type of graphic representation which is carried out in an altered state of consciousness in which the artist experiences involuntary image formation and/or delusional thoughts, and in which there is little environmental or verbal contact. In cases where the artist is pathologically withdrawn from reality, mute, delusional, or wholly or partially incoherent of speech, as in certain acute schizophrenic syndromes, the drawing opens a window into the artist's isolated, disordered world. Obsessive thought and delusional and/or hallucinatory mental images are reflected in repetitive symbolic themes and images, obsessive attention to detail, elaborate decoration, and bizarre content. The latter is sometimes surrounded by irrational written explanations of its "meaning". The artist often depicts complex cosmic, political or religious structures through the mechanisms of condensation and

symbolization. The drawings are frequently framed or boxed in heavy lines to give them a sense of containment and control (Figure 18, p. 192). They represent an attempt to bring a sort of ordered disorder to the artist's chaotic, delusional or hallucinatory thoughts. Horowitz (1970) describes a similar process in hallucination, and the loss of reality testing capacity. The artist's ego apparently maintains an observing function and reacts to its own experience as if to something irrational. The drawing represents a "type of reconciliation" with the ego's previous orientation "by use of a variety of theories". When this reconciliation has occurred, the patient no longer regards the bizarre ideas, rationalized in the drawing as "crazy" (p. 119). Any criticism of the drawing's content is apt to be met with hostility and denial as the artist strives to preserve his sense of order.

Horowitz describes the psychodynamics behind three types of involuntary images which may appear in drawings with or without therapeutic benefit to the artist. The first type of involuntary image results from trauma; the second represents the eruptive expression of usually repressed ideas and feelings, the third becomes the means for transformation of feeling states (Horowitz, pp. 119-125).

When a harrowing experience exceeds a person's capacity to master the resulting excitement and emotion, a temporary

protective mechanism shuts the experience out of awareness. The residual effect is memory traces which are extremely vivid and emotionally charged. These memory images later erupt, repeating themselves for the purpose of "working through" from image to lexical thought, from trauma to acceptance. The involuntary image reproduced in drawings hastens the process of acceptance.

Eruptive expression of usually repressed ideas and feelings projected as obsessive images into art work reveals the nature of drives and thoughts blocked out of consciousness. Horowitz warns that images which are hidden are inhibited for a reason. Therapeutic errors occur when they are uncovered before the reasons for avoidance are somehow rendered less compelling. The eruption of such images may or may not be therapeutic (p. 312).

Involuntary intrusive images may occur so as to hide a more threatening feeling state than the one the image represents. For example, compulsive drawings of images which arouse fear, disgust or shame may serve to reduce homosexual or exhibitionistic wishes, or to transform hatred and homicidal urges to fear. Through generating such fear, the artist reduces both guilt and hate. Little is to be gained by providing insight into this transformation until the hidden motive becomes less threatening (Horowitz, p. 137ff).

b. Spontaneous Drawing

Spontaneous drawing occurs when the artist is relaxed and in a receptive state. He begins drawing with no pre-planned subject or mental images to reproduce and lets the developing form suggest direction (Figure 19 a to d, pp. 193 to 194). While in this receptive state Jung's patients produced their mandala images and Freud's the images which he called "primary process", unconscious material disguised in symbols. According to Horowitz's theory of the three modes of thought representation, as these unconscious mental images undergo transformation to art images and are made available for rational appraisal, they are recoded in more stable lexical thought.

Spontaneous art is subject to fluctuating degrees of attention, direction and secondary elaboration as the work progresses. Viewing his work when it is completed the artist can, if he wishes, find significant meaning in his drawing through association with past and present experience, and present feelings and emotions. Emotionally charged images appear to be more accessible through spontaneous drawing than through any other type of art image.

c. Expressive Drawing

Expressive drawing includes all art which gives visual form to emotional psychic content. It ranges between two extremes. On the one hand enactive thought is directly

projected onto the drawing surface through kinesthetic movement, with a minimum of control, forethought or form (Figure 20, p. 195). At the other extreme the calculated manipulation of memory images, colour, line, form and texture produce a fantasy image which makes a particular emotional statement (Figure 21, a to c, pp. 196 to 197). Expression through kinaesthetic movement projected directly into the drawing is cathartic, direct release of muscular energy in the act of drawing. More complex expressive fantasy images use symbolic material, spatial "gestalts", and feeling content which cannot be described verbally. While it does not provide for direct discharge of muscular tension, this more complex drawing provides substitute gratification of emotional needs, and a measure of organization and control over emotionally charged thought content.

d. Fantasy Drawings

Fantasy drawings are reproductions of fantasy images, and, as such, vary in degree of clarity and conscious control. Most drawings are in part fantasy. The productive visual thinker controls his fantasy, manipulates and transforms it. The worrier is the passive victim of negative fantasy images which he cannot stop or direct (McKim, 1972, p. 99). The escape-artist creates fantasy images with such ease and intensity that they may seem more real than

actual perception. They may, in fact, interfere with reality testing and deteriorate to hallucinations. The schizophrenic is frequently unable to separate fantasy from reality. As he draws his fantasy images, the artist reveals the role fantasy plays in his thought processes.

Fantasy drawing can provide a safe outlet for impulses that might be dangerous if discharged in real action; they also offer partial gratification of sexual and aggressive urges. Unpleasant fantasy drawings can motivate avoidance and are used in therapy for this purpose. Pleasant fantasy drawings can decrease longing and feelings of isolation and exclusion. Directed fantasy, "step by step achievement" (McKim, p. 101) in which the therapist intervenes with suggestions, may be used to guide the artist to draw, control, and modify his frightening fantasy experiences, integrating frightening experience with reality through conceptual thinking. Horowitz (1970) sees this "thinking through" of emotionally tense topics which previously the individual has avoided, as one of the benefits of Wolpe's systematic desensitization technique. This technique also covertly teaches the subject that he can start or stop fantasy images that previously were experienced as a lapse of control (Horowitz, p. 307).

e. Dreams

The dream image, unless particularly vivid, usually undergoes secondary elaboration as it is drawn. Within the psychoanalytic model it is considered the purest primary process image (Figure 22, p. 198). Its symbolic content, the key to disruptive unconscious conflict is analyzed in Freudian therapy through free-association. The analysis reveals defence mechanisms which can be modified. In contrast, Gestalt therapists require the artist to act and speak as if he is each part of the image content; this is in the hope of propelling him toward clear expression of feelings and ideas. Each mode presupposes complex motives underlying the dream.

Physiological changes which occur within the body during sleep often appear to trigger particular types of dreams. Persistent elaborate dream images may arise from increased sexual tensions, irregular respiratory patterns, aches, pains and other physical sensations which do not awaken the sleeper, but stimulate vivid dreams. The process of reproducing the dream as a drawing often reveals the underlying physiological origins.

f. Drawings of Entoptic Experiences

The entoptic image may or may not be experienced as an hallucination (Figure 23, a and b, p. 199). The essentially biological source of the image can be revealed through

drawings of the visual experience. Organic brain disease and epilepsy both produce characteristic patterns - parallel or zig-zag lines, pinwheels, sparks, patchwork perception, etc. - visual disturbances which are helpful in the diagnosis of physiological changes within the eye and the brain. Psychedelic drawings reflect the experience of entoptic images and perception distorted by biochemical pollution of the brain with toxins or drugs (Figure 24, a and b, p. 200).

g. Perceptual Drawing

Perceptual drawings range from reproductions of what one sees, through visual representations of shapes and surfaces, spatial and depth perception learned through touch, to synaesthetic drawings - the interpretation of sounds and smells as visual images possessing colour and form. Reproduction of visual image such as landscape, still-life and life-drawing demonstrates and enhances the artist's ability to be observant, to attend to detail, to co-ordinate muscular movement with expression in image, to interpret the subject, and to test reality. As drawing reveals these abilities, it is diagnostic; as it improves them, it is therapeutic. High realism suggests an unusually high level of visual acuity, concentration and co-ordination.

Spatial and textural relationships, and qualities perceived through touch can be reproduced through drawing and sculpture. Similarly, auditory musical perception can be described in drawing. The individual who habitually uses music for emotional release may have difficulty expressing himself satisfactorily in drawing. This block may be overcome by suggesting that he draw his musical experience (Figure 25, a and b, pp. 201 to 202).

h. Historical Drawing

Drawing memory images from one's past does not require that one be either photographically accurate or aesthetically pleasing. Distortions and elaborations provide the artist with insight into old unresolved thoughts and feelings associated with memory images. These drawings constitute a serial pictorial biography which offers both artist and therapist a new, concrete view of earlier personal experience, adjustment mechanisms, role concepts and social attitudes. Old memories which have not previously reached conscious lexical thought can be examined as art image, verbalized and integrated. As sensitive experiences from the past are transformed into drawings, discussed and accepted, the artist's sense of identity and self-worth is enhanced.

i. Caricature

Caricature is achieved by gross exaggeration of some perceived personal quality or qualities, in a portrait. It is generally the projection of emotionally charged thoughts, or feelings such as anger, frustration or resentment upon a personal image clearly recognizable as the object of the artist's ill intention. Perceptual and fantasy images intermingle as the artist demonstrates his own power to diminish at will an adversary's image and good reputation. Emphasizing weaknesses and ridiculing strengths in concrete image, the artist reduces the threatening qualities of an opponent by wilfully distorting his own perception. Caricature provides cathartic release of pent-up hostility and offers insight into the underlying pressures which give rise to these feelings.

j. Copying

Careful copying of photographs involves and helps to develop acute visual perception, manual skill, and the ability to take infinite pains with a task. At the same time it requires little creative or expressive effort or ability in the artist. Such drawing must be evaluated in the light of its context. It may describe a rigid personality; or the copiest may simply lack the confidence to test his ability to abstract and create. On the other hand, the artist may fear loss of control over thought and image which

free use of stimulating colour and line can precipitate in individuals whose image control threshold is low, or whose reality testing capacity is weak. Those who copy are rarely threatened by the images they choose to duplicate; the work requires no interpretation as the product of an inner psychic process.

Proportion and perspective, the elements of balance, colour harmony, etc. can be learned through copying works of art. This has been the traditional mode of training professional artists in draughtsmanship and sensibility.

k. Scientific Drawing

The ability to analyze, abstract and project objectively what is perceived, is necessary for scientific drawings in such fields as physics, anatomy, biology, etc. This type of drawing can be therapeutic in as much as it develops these qualities in the artist.

l. Illustrations

Illustrations may require scientific accuracy, or they may represent internal fantasy images stimulated by language - metaphor, simile, and descriptive passages in prose and poetry. Where the image is a subjective response to description it is abstracted from fragments of memory images elicited by words - nouns, verbs and adjectives. Certain words may suggest visual stereotypes, or they may facilitate thought by transforming rational lexical thought into image thought.

All drawing is in some way an "illustration" of some inner or outer circumstance.

m. Idea Sketching and Problem Solving

In exploring the imagination for a problem's solution, fleeting mental images are rarely well formed and are easily lost to awareness. If the emerging image is sketched roughly it can be re-evaluated, reformulated and nurtured into a more detailed image, re-evaluated, and so on (McKim, 1972, p. 116).

The working-through of ideas to creative conclusions is crucial to therapy. "Working-through" occurs in most types of creative drawing. It consists first of repeatedly reviewing active ideas and feelings; and second, of translating expression of these contents into various modes of representation and meaning. The contents are related to memories, self-image, concepts of other persons, fantasy of the past, present and future. These various cognitive structures are then revised and aligned with active ideas and feelings (Horowitz, p. 311).

The preceding discussion of the art image is open to expansion and alteration. It represents only an attempt to relate the graphic image to a cognitive study of the mental image in a therapeutic mode. As the neurological processes involved in enactive, image, and lexical thought become progressively clearer through continuing research into the

bimodal function of the brain, the importance of drawing as an aid to both creative growth and psychotherapy becomes increasingly apparent.



Figure 18.

In this picture a delusional artist experiencing an acute drug induced paranoid psychosis described herself as a headless mermaid in a cosmos symbolized by the surrounding forms. Her role as whore-goddess was rationalized within this structure.



Figure 19, (a) and (b).

In these drawings the artist explored feelings and then considered what each meant to her, in order to gain a balanced view of a highly emotional experience. They are spontaneous drawings developed from random lines in a relaxed, receptive state some weeks after the incident which they describe. Drawing (a) represents the artist's expectation of an Encounter group- warmth, interesting activity, energetic interaction. The second, (b), shows her reaction to the leaders' manipulation of the group. Ego defences were stripped and the meeting assumed a Dionesian flavor; emotions were aroused in order to break down conventional controls. For many participants the experience was not therapeutic. The artist identified with each element in the drawing, particularly with the eye in the center, becoming first the critical observer and then the outspoken critic of the leadership. She was decapitated by the group (lower right hand corner).

The problem of the abuse of power by the leaders of groups and the traumatic effects on participants required further investigation.



Figure 19, continued.

In (c) the artist examined the other extreme, the group controlled by a system of rules, which provides harmonious interaction but allows the individual little freedom. The trees in (d) suggest the more natural qualities of a good therapy group. The artist, who was at that time organizing an art therapy group, used this picture as a metaphor for the type of interaction to be stimulated amongst the participants.



Figure 20, (a) and (b).

Drawing (a) represents the first communication of a new patient who refused to speak but who accepted the invitation to use art materials in a simple exercise suggested by Stevens (1971, p. 248), a Gestalt therapist. In this mandala, the circle, the quaternus and the symmetry appear to be used in an attempt to allay the expression of suppressed rage, the emotion suggested by the colour and force used in the drawing. This indeed proved to be the case. While drawing (b), the patient broke into open expression of anger and began feeling-release therapy.

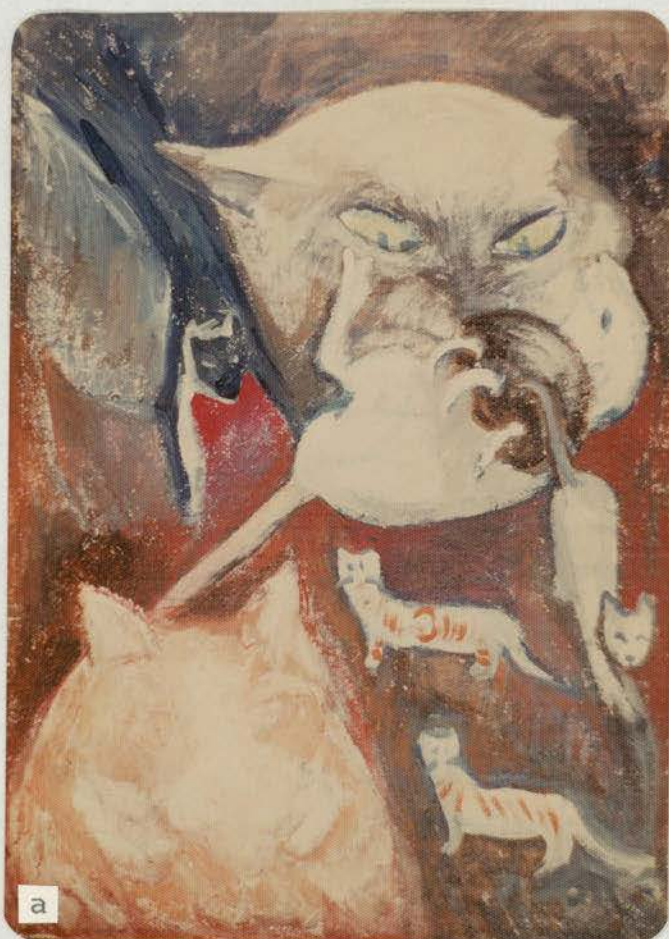


Figure 21, (a) to (c).

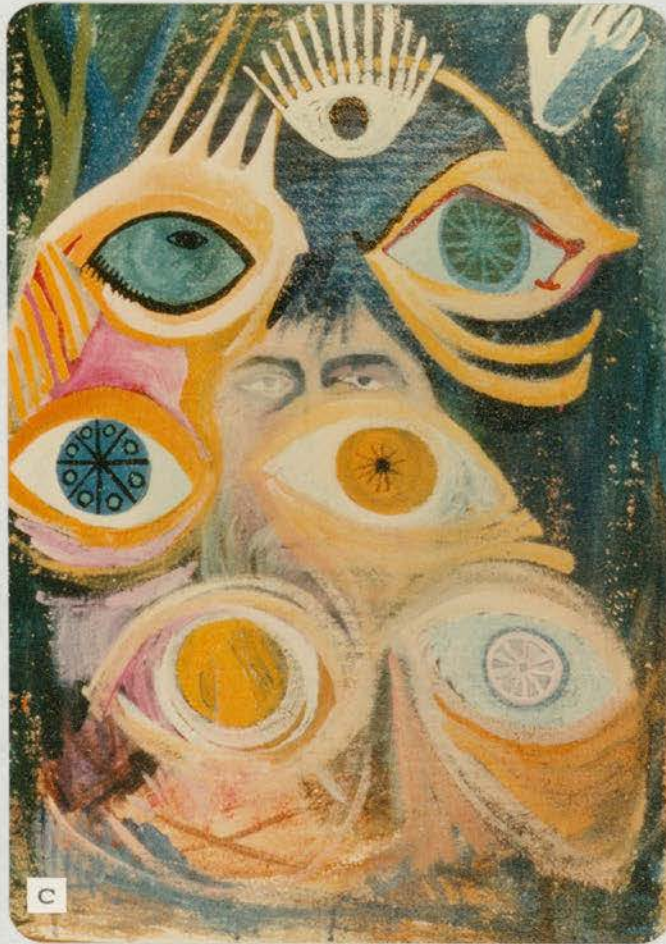


Figure 21, continued.

The artist explored self-image through paintings which acknowledge in (a) acceptable and unacceptable moods and emotions; (b) distorted body image; and (c) acute depression.



Figure 22.

In this painting the artist described a dream experience which developed into a dream-hallucination after the ingestion of psychotropic drugs. Expressive of fear and guilt associated with drug abuse, this picture is of interest for the sexual content of the imagery in the psychoanalytic therapeutic mode.



Figure 23, (a) and (b).

These drawings describe entoptic images. In (a) the artist, a depressed adolescent, complied with a request to draw the shapes and lights that she experienced in her visual field. In (b) the artist, suffering a drug induced psychosis, drew the same type of images, which had become disturbing hallucinations. The drawing increased the severity of the intrusion of unbidden images.



Figure 24, (a) and (b).

A Gestalt exercise (Stevens, 1971) revealed in (a) the use of colour to stimulate pleasant visual pseudo-hallucinations. However, the artist, who had not admitted to drug abuse, became very disturbed when he was not able to control their quality. The feeling of fear experienced with the creation of (b) was very strong, even though the artist recognized that it resulted from his experience with psychotropic drugs. In this case the art proved diagnostic in demonstrating the probable importance of drug abuse to this psychosis.



Figure 25, (a) and (b).

These drawings are examples of synaesthesia. In (a) sound is transformed into visual image. Colour and movement reflect the artist's reaction to the rhythm, harmonies and tone of the music.



Figure 25, continued.

Drawing (b) represents a breakthrough in creative expression. The artist previously used music as an emotional outlet, and found it difficult to express the same feelings in art. This was overcome by drawing the musical phrases which would have been used to express a particular mood had a piano been available. Most of the artist's subsequent drawings were of feelings transformed from musical to graphic expression. In therapy, a patient who has learned another mode of creative expression can learn to express himself in art by the same process, transforming the initial type of expression into visual images.



Figure 26, (a) to (s),



Figure 26, continued.



Figure 26, continued.



Figure 26, continued.



Figure 26, continued.

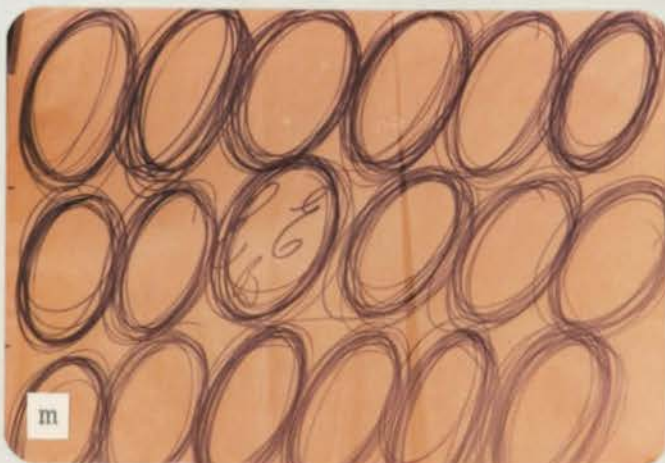


Figure 26, continued.



Figure 26, continued.

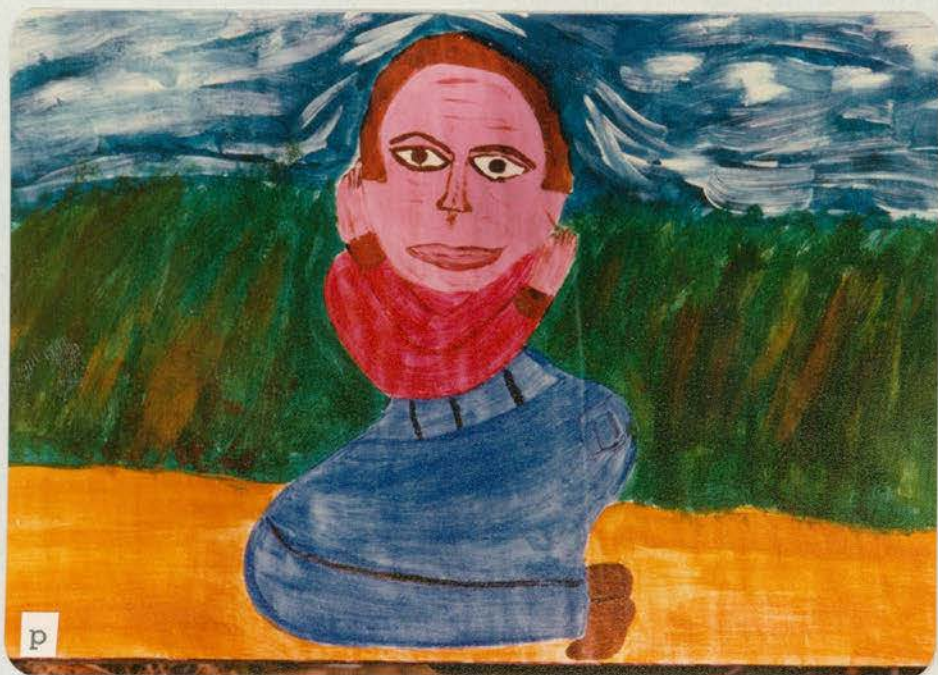


Figure 26, continued.



Figure 26, continued.

PART VII

CHAPTER XI

AN ECLECTIC APPROACH TO ART THERAPY: A CASE STUDY

The advantage of an eclectic art therapy model is demonstrated in the following case history.

The patient, Rick, an athletic, attractive and pleasant twenty-eight year old R.C.M.P. constable, was referred to art therapy by his psychiatrist. He had developed a slight tremor in his hands after a serious illness a few years before. He believed this tremor to be so noticeable and found it so unacceptable that he was overcome with anxiety when required to sign his name. He avoided company where it was necessary to hold a cup, because his hand shook. Neurological tests were negative. The anxiety resulted in loss of time from work, but did not effect the quality of his performance while at work; Rick functioned particularly well in crises. He was highly motivated to overcome his neurotic problems.

Rick participated in a private therapy program which extended from two to four hours weekly as indicated by his changing needs. He was encouraged to drop in without previous appointment when his anxiety was difficult to

control. Sessions included both painting and counselling. After the first year he was slowly introduced to group therapy for short periods of time, as tolerated. In all, he produced over 150 paintings.

Rick's case study will describe several therapeutic processes occurring simultaneously; an attempt will be made to relate these processes to the various therapeutic modes described above. Only those aspects of his case history which relate directly to the paintings presented here, will be included in the study. The paintings will appear in order, at the end of the chapter.

Paintings (a) to (e) may be described, according to the psychoanalytic model, as primary process images which form a bridge from the unconscious to the conscious mind. They also represent an emerging gestalt; facing "dread" and describing its dimensions in order to take action against the existential anxiety the artist acknowledges; and problem solving, in the language of the experimentalists. Expression occurs through the use of natural colours and shapes which the artist relates to weight, pressure, and tension, rather than through a realistic depiction of his body at the time he experienced the acute anxiety. In this way he isolates the dominant emotional problems free from the technical problems and confusing detail of realism. According to Jung's theory of types, he presents a sensation-feeling dominant

image for appraisal by the rational-thinking function. As he relates to the pictures verbally, he recodes image into less threatening lexical thought, in the manner Horowitz describes.

The first frame, (a), was painted in the third week of therapy. Rick became increasingly anxious as he painted. He was unable to associate any life experience with this picture at that time. Several sessions later, similar images appeared in (b). The same anxiety occurred; this time associated with feelings of pressure and anxiety experienced on awakening, which he tried to avoid by remaining in bed. He described his head as being caught in a vice, immobilizing him. In (c) he modified his image, placing less blame on external pressures, and accepting the responsibility for taking action against the block through generally increasing his program of physical activity. At the end of the third month he painted (d), and described himself as being "Joe Cool" while his wife and mother-in-law carried on a daily battle. He had, until now, described his home as free from problems. With the decision to actively change this intolerable situation by removing his mother-in-law, a dependent and manipulative individual, Rick experienced an initial drop in the level of his anxiety, but later acknowledged that this was destroying his picture of himself as a kind, loving and tolerant

person. However, once the move was complete, he became depressed and suicidal, painting (e). At this time the reasons for Rick's denial of the problems at home were uncovered, as he related his suicidal feelings to his fear of being like his mother.

Rick was the youngest of six children. His mother had been admitted to a chronic psychiatric hospital when he was two years old, and his father had placed him in an orphanage at that time. He had remained there even though both parents were alive until he finished high school sixteen years later. On those occasions when he was allowed to return home after his mother's discharge from hospital, he suffered physical abuse, and visits were discontinued. His mother had a lobectomy to control her violent behavior. Rick's fear of his own violence and of insanity were dealt with through a supportive program of counselling and physical activity, including bioenergetics.

Drawings (f) to (i) are of use in the analytic mode in uncovering the traumatic experiences of Rick's childhood. They also resulted in the development of a sense of self worth, growth and identity as he created a personal myth from his memories. The intensity of feelings associated with these incidents decreased. Painting (f) is of particular importance. The last time he saw his father Rick had run along the beach toward him and thrown his

arms around his father's legs. His "Hi, dad!" drew the response, "And who are you?", from his father. As the spontaneous painting suggests, Rick's arms were symbolically cut off by the experience.

In (g) Rick described a frequent theme throughout this group of historical drawings: his uncontrolled temper and the isolation and punishment he received for his destructive behavior. Here, again, he expressed his own anxiety associated with his mother's uncontrolled behavior and her subsequent fate.

The next drawing, (h), is associated with strong guilt feelings which probably had remained unresolved throughout his childhood. In order to be initiated into a club organized by the owner of the white teepee, Rick was required to light a fire on the orphanage grounds. This fire got out of control and burned up the white teepee. Rick retreated to the safety of a special rock on the orphanage grounds.

The last of this series shown here, (i), shows Rick's feelings of rejection and loneliness as an unadoptable child rejected by his parents. He returns to the door of the orphanage after having watched visitors come and go on Sundays.

The expressive style of this group of paintings is primitive realism, uncluttered by unnecessary detail.

Realism was necessary in dealing with his own self image and his position relative to others in each social situation.

Paintings (j) to (m) are part of a series of paintings designed to desensitize Rick to writing, through drawing. He was encouraged, after his first experiments with paint, to use kinaesthetic caligraphic brush strokes to release his energy directly onto the paper, choosing colours appropriate to his feelings (j). Later, he began drawing the letters of the alphabet (k), treating them as pictures. Next, he painted names of people he admired on a large paper with big brushes (l). He then did formal shapes, as in (m), using a felt pen. This was followed by progressively more specific attempts to write the alphabet, until he was able to tolerate with sufficiently reduced anxiety having someone touch his shoulder while he wrote. Although he used the relaxation techniques prescribed, he had to be reminded to reduce his anxiety this way. This program would not likely have succeeded alone. One of the biggest problems with Rick's writing was his inability to accept what he wrote, even though he was a fairly good writer. It was necessary for him to be desensitized also to the anxiety resulting from social interaction. This was achieved by having him participate in a number of therapy groups which provided increasing interaction and confrontation as he was able to tolerate it.

The next series, (n) to (q), describe ego development, integration, or the emergence of a strong gestalt of self, the goal of each therapeutic model.

In a series of self portraits, Rick described his progress in therapy. In (n) he is a foetal image on "Rick's rock", a refuge on the orphanage grounds. In (o), his armlessness is associated with his rejection by his father (f) which was at the root of his inability to sign his name. Drawing (p) echoes his experience and subsequent fear of rejection in reaching out to others, but in it he acknowledges the return of feeling and usefulness to his arms at this time. The final painting, (q) shows his improved self image and freedom from defensiveness and anxiety near the completion of therapy.

Drawings (r) and (s) are evidence of sublimation, aesthetic growth and technical competence. Landscape (r), painted at the beginning, and (s) near the end of Rick's therapy sessions, demonstrate his aesthetic growth, the development of his primitive and powerful personal style which contributed to his confidence in the use of his hands. In the mountain scene, Rick used the same colours and essentially the same forms - rocks, wedges, and weights - as those used earlier to describe his anxiety, (a) to (e). This is a metaphor or dramatization of the way he achieves creative growth in his daily life through continuously confronting existential anxiety.

CHAPTER XII

SUMMARY AND CONCLUSIONS

The literature on art therapy contains a wide variety of information, from the intelligent and useful to the ill-conceived and untherapeutic. It is essential that the student examine carefully the theory on which systems of art therapy are based in order to deal with problems of over-simplification, pseudo-science and dishonesty which appear too often in both art therapy literature and workshop. When the reputable literature is examined within the enlarged theoretical background of the preceding study, the disparity between the psychoanalytical and the medical-psychological modes is resolved. Each may be viewed as part of a larger emerging rationale for the therapeutic use of art, its particular language and form elaborating the detail and extending the borders of a new whole.

A study of culture and art reveals a natural, fundamental structure within which art has developed spontaneously to order and enrich daily life. Cultural patterns for the use of art provide a paradigm for the basic structure of a system of art therapy. In its broadest sense, the cultural model may be said to envelop the therapeutic models as

secondary elements within the cultural whole. Its approach is creative and integrative, and it is not based on a pathological view of the artist.

The cultural use of art demonstrates the relationship between "order" and "integration", and emphasizes the importance of art in providing a sense of continuity and history. It reaches beyond present therapeutic concern with expression, interpretation and communication to include the problem of the magical quality of the image, the relationship of decoration to power and influence, and the use of the image to manipulate social behavior.

The potency of the image must be acknowledged as the therapist defines his own role. Through its extraordinary power the therapist can assume a godlike position, manipulate his patients and inflate his own ego. The patient gives the therapist this power by asking "What does my painting mean?". Only the patient's own interpretation of his work is valid and therapeutic. However tempting it might be to make such an interpretation, the therapist is morally obliged to reject the power which the patient unthinkingly surrenders to him.

To the basic cultural rationale for the therapeutic use of art, the special detail, techniques and systems of the specifically therapeutic secondary modes may be added. Psychoanalytic and analytic art therapy, each with its own

unique viewpoint and vocabulary, describe an introspective search for inner order which fits harmoniously into the larger ordering cultural mode. Certain aspects of these systems are now validated by another (previously opposing) subsystem, neuropsychology. However, because of the present popularity of the esoteric and the mystical, Freudian and Jungian theory is frequently uncritically and irresponsibly used, with extravagant therapeutic claims and abuses. A cognitive study of the image reveals the danger of describing every free painting as "primary process"; clinical experience shows that the significant primary process image can generally be appreciated only in the context of a series of drawings, viewed over a period of time. The mandala has become so popularized it can rarely be considered a spontaneous image when it appears in an art therapy session. Some go so far as to assign mandala drawing as an exercise, distorting Jung's theories unrecognizably.

Sir Herbert Read attempts to link the psychoanalytic and analytic subsystems to a formula for the educational use of art which transcends the pathological. He simplifies the complex relationship of expression to personality, developing Jung's theory of types into a practical exercise in art education. While his work is useful, it must be appreciated as another partially successful attempt to create meaning and working order from a confusion

of observations and abstractions concerning the relationship of aesthetics and psychology. Hale enlarges on Read's simple aesthetic theory of expression by directly appraising nature for universal expressive elements.

The study of Existential Psychology introduces another vocabulary and a philosophical rationale for the therapeutic use of art. The aspect of the normal is enlarged to include the absurd; the frequently crippling paternalistic therapist-patient relationship is removed. Emphasizing the importance of action (as opposed to analytic rumination) against anxiety (dread), it places the responsibility for change with the individual rather than the therapist or the therapeutic system.

In describing typical attitudes toward aesthetic experience and change, Fallico introduces a new topic of importance to the art therapist - concern for the attitude of the artist toward growth and change. The therapist must take this attitude into consideration in adapting the therapy program to the artist's needs; otherwise the program will fail.

After examining the intricacies of psychoanalytic, analytic and existential therapies, the student finds Perls' eclectic Gestalt Therapy less a hotchpotch of ideas and more an exciting extension of existing theory into a practical program of action. Confident in the theoretical background



from which he operates, Perls moves toward exploration of the dynamic structure of experience itself. The field theory of gestalt psychology provides a new spatial view of behavior which is more useful than the verbal-analytic approach in the treatment of the art image. Perls' most important contribution to art therapy lies in his direct approach to experience - awareness, creative indifference, ingredient experience, and the relationship of the good gestalt to health. The "gestalt" art therapy techniques developed by the followers of Perls - Rhyne and Stevens - are of diagnostic value in clinical work, and are useful in facilitating graphic expression. These techniques, both directive and non-directive, often produce sensational results, and so are open to abuse. "Gestalt" exercises are untherapeutic when used indiscriminately.

The contribution of experimental psychology and neuropsychology to an understanding of the function of art has been limited by both the problem of subjecting the visual spatial to verbal linear analysis, and to an apparent lack of scientific interest in the neurological processes involved in drawing and painting. However, the study of bimodal brain function now suggests a vital role for the arts inasmuch as they are necessary to the creative process, and to the very existence and development of science itself.

Study of fatigue and brain function, and the development of one hemispheric mode at the expense of the other, may cast some light on Luthe's claims for the therapeutic benefits derived from "no thought mess painting". Judgement of the validity of his claims must wait until there has been more research on the neurophysiology of the particular painting process which he recommends.

Research into the right and left hemispheric modes of function reinforce the psychoanalytic theories of primary and secondary process.

In his cognitive study of the dynamics of the image, Horowitz introduces a thoughtful approach to the complex problem of the origin and variety of mental images. Earlier generalization of the art image as primary process thought or kinesthetic expression is shown to be an oversimplification. With his attempt to simplify and organize thought processes into enactive, image and lexical stages, Horowitz integrates aspects of psychoanalytic with neuropsychological theory, providing further credibility for the inclusion of Freudian theory in a broad art therapy model.

The art therapy programs which now exist are too often limited by the tendency of the therapist to follow a particular theoretical rationale and mechanical method, to the exclusion of others which might be better adapted to the subjective needs of the patient. It is not enough that the

patient draws; the therapist must have a wide repertoire of techniques and theoretical constructs from which to appraise each drawing in its context. The art therapist must be both informed and alert to the creative use to which each drawing can be put in advancing therapy.

SUGGESTIONS FOR FURTHER STUDY

The preceding study indicates the need for further investigation of several aspects of the function of art in therapy.

1. The cultural model must be fully explored as the best base for a system of art therapy. Special attention should be given to such areas as the use of art as suggestion; the large body of information on advertising should be evaluated by the art therapist for its contribution to an art therapy mode.

2. Exploration of the use of painting and drawing programs as a mode of communication with autistic children, and for retraining for adults and children with known organic lesions of the dominant verbal hemisphere is indicated. In addition to the benefits to be derived by the patient, diagnostic information of general use in psychotherapy could be obtained from such a study.

3. The development of a mnemonic system for retrieval of maximum function in the deteriorating brain during Korsakoff's Syndrome, chronic psychoses, and after frequent, prolonged use of electroshock therapy is indicated by recent neurological research.

4. A neurophysiological investigation of the relationship of certain types of painting activity to rest and fatigue

in the brain is indicated. Such a study would determine the tranquilizing potential of certain carefully constructed art therapy programs using these painting techniques.

5. The detailed cognitive study of mental image and art image, and their relationship to one another, must be continued.

6. Techniques for using the art image directly as a problem solving device, as outlined by Arnheim, deBono, McKim, and others, should be examined and adapted to use in art therapy.

REFERENCES

- Anastasi, A. and Foley, J.P. A survey of the literature on artistic behavior in the abnormal. I. Historical and theoretical background. *Journal of Genetic Psychology*, 1941, 25, 111-142.
- Anastasi, A. and Foley, J.P. A survey of the literature on artistic behavior of the abnormal. Part II. Approaches and interrelationships. *Annals of the New York Academy of Science*, 1941, 42, p. 106.
- Anastasi, A. and Foley, J.P. A survey of the literature on artistic behavior in the abnormal. III. Spontaneous productions. *Psychology Monograph*, 1940, 52 (6), 1-71.
- Anastasi, A. and Foley, J.P. A survey on artistic behavior in the abnormal. IV. Experimental investigations. *Journal of genetic psychology*, 1941, 25, 187-237.
- Arieti, S. *Creativity*. New York: Basic Books, 1976.
- Arnheim, R. *Toward a psychology of art*. Berkeley: University of California Press, 1966.
- Arnheim, R. *Visual thinking*. Berkeley: University of California Press, 1969.
- Arnheim, R. *Art and visual perception*. Berkeley: University of California Press, 1974.
- Berlyne, D.E. *Aesthetics and psychobiology*. New York: Appleton-Century-Crofts, 1971.
- Berlyne, D.E. (Ed.). *Studies in new experimental aesthetics*. Washington, D.C.: Hemisphere Pub. Co., 1974.
- Betensky, M. *Self discovery through self expression: use of art in psychotherapy with children and adolescents*. Springfield: Charles C. Thomas, 1973.
- Dax, E.C. *Experimental studies in psychiatric art*. London: Faber and Faber, 1953.

- Brownell, B. *Art is action*. Freeport, N.Y.: Books for Libraries Press, 1969.
- de Bono, E. *The use of lateral thinking*. Middlesex, England: Penguin Books, 1967.
- Dimond, S.J. *The double brain*. Edinburgh: Churchill Livingstone, 1972.
- Dimond, S.J. and Beaumont, G.S. *Hemispheric function in the human brain*. London: Paul Elek, 1974.
- Ehrenzweig, A. *The Psychoanalysis of artistic vision and hearing*. New York: George Braziller, 1965.
- Ehrenzweig, A. *The hidden order of art*. Frogmore, St. Albans: Granada Pub. Ltd. 1970.
- English, H.B. and English, A.C. *A comprehensive dictionary of psychological and psychoanalytical terms*. New York: Longman's Green, 1958.
- Eysenck, H.J. *Sense and nonsense in psychology*. Middlesex: Penguin Books, 1966.
- Eysenck, H.J., Arnold, W. and Meili, R. *Encyclopedia of psychology*. London: Search Press, Vol. III, 1972.
- Fagan, J. and Shepherd, I.L. *Gestalt therapy now*. New York: Harper and Row, 1970.
- Fallico, A.B. *Art and existentialism*. Englewood Cliff, New Jersey: Prentice-Hall, 1962.
- Fink, P., Levick, M.F., and Goldman, M.J. Art therapy: A diagnostic and therapeutic tool. *International Journal of Psychiatry*. 1973, 11, (1), pp. 104-118.
- Freud, S. *The complete psychological works*. London: Hogarth Press, 1953.
- Gazzaniga, M. *The bisected brain*. New York: Appleton-Century-Crofts, 1970.
- Gazzaniga, M. Cerebral dominance viewed as a decision system. In S.J. Dimond and J.G. Beaumont, (Eds.). *Hemispheric function in the human brain*. London: Paul Elek, 1974.

- Gombrich, E.N. *Symbolic images*. London: Phaedon Press, 1972.
- Hale, N.C. *Abstraction in art and nature*. New York: Watson-Guptill, 1972.
- Hall, C.S. *A primer of Freudian psychology*. New York: The New American Library, 1955.
- Hayman, D. (Ed.). *The arts and man*. The United Nations Press, 1969.
- Horowitz, M. *Image formation and cognition*. New York: Appleton-Century-Crofts, 1970.
- Janson, H.W. *History of art*. New York: Harry N. Abrams, 1962.
- Jaynes, J. *The origin of consciousness in the breakdown of the bicameral mind*. Boston: Houghton-Mifflin, 1977.
- Jung, C.G. *Modern man in search of his soul*. New York: Harcourt, Brace and World, Inc., 1933.
- Jung, C.G. *Psychology and religion*. New Haven, Yale University Press, 1938.
- Jung, C.G. *The psychology of transference*. Princeton University Press, 1954.
- Jung, C.G. *Psyche and symbol*. New York: Anchor Books, 1958.
- Jung, C.G. *Dreams*. Princeton University Press, 1974.
- Kierkegaard, S. *The concept of dread*. Tr. Walter Lowrie. Princeton University Press, 1944.
- Kramer, E. *Art as therapy with children*. New York: Schoecken Books, 1971.
- Kris, E. *Psychoanalytic explorations in art*. New York: International University Press, 1952.
- Lee, P.E., Ornstein, R.E., Galin, D. and Tart, C.E. *Symposium on consciousness*. Middlesex: Penguin Books, 1977.

- Levy, J. Psychobiological implications of bilateral asymmetry. In S.J. Dimond and J.G. Beaumont (Eds.). *Hemispheric function in the human brain*. London: Paul Elek, 1974.
- Lowenfeld, V. and Brittain, W. Lambert. *Creative and mental growth*. New York: MacMillan, 1975.
- Luthe, W. *Creativity mobilization technique*. New York: Grune and Stratton, 1976.
- Maslow, A.H. *The psychology of science*. Chicago: Henry Regnery, 1966.
- May, R. (Ed.). *Existential psychology*. New York: Random House, 1969.
- May, R. *The courage to create*. New York: W.W. Norton, 1975.
- Mckim, Robert H. *Experiences in visual thinking*. Belmont, California: Wadsworth Pub. Co., 1972.
- Meares, A. *Hypnography*. Springfield: Charles C. Thomas, 1957.
- Meares, A. *The door of serenity*. Springfield: Charles C. Thomas, 1958.
- Naumburg, M. *Schizophrenic art: its meaning in psychotherapy*. New York: Grune and Stratton, 1950.
- Naumburg, Margaret. *Psychoneurotic art: its function in psychotherapy*. New York: Grune and Stratton, 1953.
- Naumburg, M. *Dynamically oriented art therapy: its principles and practice*. New York: Grune and Stratton, 1966.
- Naumburg, M. *An introduction to art therapy: studies of the "free" art expression of behavior problem children and adolescents as a means of diagnosis and therapy*. New York: Teachers' College Press, 1973.
- Ornstein, R.E. *The psychology of consciousness*. San Francisco: W.H. Freeman, 1972.
- Ornstein, R.E. (Ed.). *The nature of human consciousness*. San Francisco: W.H. Freeman, 1973.
- Perls, F., Hefferline, R.E., and Goodman, P. *Gestalt therapy*. New York: Dell Pub. Co., 1951.

- Perls, F.S. *Ego, hunger and aggression*. New York: Random House, 1969.
- Philipson, M. *Outline of Jungian aesthetics*. Northwestern University Press, 1963.
- Pickford, R.W. *Studies in psychiatric art*. Springfield: Charles C. Thomas, 1967.
- Pickford, R.W. Aspects of art therapy. *British Journal of Projective Psychology and Personality Study*, June, 1974, 19 (1), pp. 16-20.
- Plokker, J.H. *Artistic self-expression in mental disease: the shattered image of schizophrenics*. London: 1964.
- Plokker, J.H. *Art from the mentally disturbed*. Boston: Little, Brown and Co., 1965.
- Polster, Erving, and Polster, Miriam. *Gestalt therapy integrated: contours of theory and practice*. New York: Brunner/Mazel, 1973.
- Prinzhorn, H. *Artistry of the mentally ill*. New York: Springer-Verlag, 1972.
- Read, H. *Education through art*. New York: Pantheon Books, 1945.
- Read, H. *Art and alienation*. London: Thames and Hudson, 1967.
- Read, H. *Education through art*. London: Faber and Faber, 1969.
- Read, H. *The meaning of art*. London: Faber and Faber, 1972.
- Reitman, F. *Psychotic art*. London: Routledge and Kegan Paul, 1950.
- Reitman, F. *Insanity, art and culture*. Bristol: John Wright and Sons Ltd., 1954.
- Rhyne, J. *The gestalt art experience*. Monterey, California: Brooks/Cole, 1973.
- Rookmaaker, H.R. Art, morals and western society. In D.R. Brothwell, (Ed.). *Beyond aesthetics*. London: Thames and Hudson, 1976.

- Schaeffer-Simmern, H. *The unfolding of artistic activity*. Berkeley: University of California Press, 1950.
- Schmidt, G., Steck, H. and Bader, A. *Though this be madness*. London: Thames and Hudson, 1961.
- Seamon, J.G. Coding and retrieval processes and the hemispheres of the brain. In S.J. Dimond, and J.G. Beaumont, (Eds.). *Hemispheric function in the human brain*. London: Paul Elek, 1974.
- Smith, W.L. *The growing edge of gestalt therapy*. New York: Brunner/Mazel, 1976.
- Smuts, J.C. *Holism and evolution*. MacMillan and Co., London, 1936.
- Spector, Jock J. *The aesthetics of Freud*. New York: Praeger, 1973.
- Stevens, John O. *Awareness: exploring, experimenting, experiencing*. Moab, Utah: Rea People Press, 1971.
- Whitmont, E.C., and Kaufman, Y. Analytical psychology and gestalt therapy. In E.W.L. Smith, (Ed.). *The growing edge of gestalt therapy*. New York: Brunner/Mazel.
- Wolpe, J. *The practice of behavior therapy*. New York: Pergamon Press, 1973.

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