Art for women’s sake: Understanding feminist art therapy as didactic practice re-orientation

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Abstract
Catalysed through the coming together of feminist theories that debate ‘the politics of difference’ and through a reflection on the practices of art psychotherapy, this paper seeks to illuminate the progressive and empowering nature that creative applications have for better mental health. It also seeks to critically expose and evaluate some of the marginalisation work that is also done within art psychotherapy practices, ultimately proposing a developmental practice activity and resource hub that will raise awareness, challenge traditional ways of thinking and doing, and provide a foundation for more inclusive practices. This paper’s introduction is followed by a contextualisation of art therapy and third wave feminisms, with suggestions of how those can work together towards better praxis. The main discussion is the presentation of a newly developed practitioner activity and resource hub that art therapists can use to evaluate their current and ongoing practice towards one of greater inclusivity and better reflexivity. Finally, in conclusion there will be a drawing together of what has been possible in feminist art psychotherapy, what remains possible, and with further alliances what more could yet be possible.

A video that accompanies this paper is available from: www.youtube.com/watch?v=fLLXVGiZQcU.

Implications for practice:
• Supporting the growth of critically aware patients will enable service users to recognise the implications of difficulties in society at large influencing their wellbeing
• More ‘critical patient’ therapy is likely to work more quickly, be more effective, and continually challenge the direction of practice development
• The production and exhibition of more critically based art by service users will be a platform from where the voices of the socially marginalised can be meritoriously heard and listened to
• Critical reflexivity within the profession opens up possibilities for changing the current make-up of practitioner demographics

Keywords: Art psychotherapy, feminist, intersectionality, critical praxis

Introduction
The question of ‘l’art pour l’art’ or ‘art for art’s sake’ and deliberation over the autotelic/aesthetic nature of art deliberation have been going on since Victorian times when John Ruskin, the prominent Victorian social thinker and art critic, espoused that social context was integral to art. Notwithstanding the backlash against his thinking at the time of its origination, it reverberates strongly in the contemporary era (Villada, 1998). However strong the conviction to embrace art as socially and politically informed, the extent to which there is a going beyond ‘art for art’s sake’ is still up for debate.
Using art-based materials as a form of communication and expression, art therapy is a form of psychotherapy that seeks to enable service users through the creation of a safe space in which they can grow and develop on a personal level and work towards creating positive change in their lives (BAAT, 2013). Feminist art psychotherapy has been about raising awareness of the oppression of women in society and the practice of forging social justice for women through a recognition of the connectedness between the personal, social, and political consciousnesses. However, these ideals have largely been located as advocating the middle class white Western second wave feminist movement of the 1960s and 70s (Sajnani, 2012). Since this time feminists working in the area of critical race theories have been pivotal in exposing the racist tendencies endemic in the second wave feminist movement. Their challenges have led to an understanding of feminism being about the intersectionality of social divisions grounded by relationships of power (hooks, 1984; Lorde, 1984; Spivak, 1985; Anzaldúa, 1987; Minh-ha, 1989; Mohanty, 1991; Yuval-Davis, 2006). While some work has been done to re-orientate arts-based psychotherapies in more critical reflection, this is sparse and lacks the momentum of third wave feminisms that seek to broaden the feminist struggle.

This paper seeks to suggest how art therapy and current feminist theory can be collaborators towards social change and social justice, and from there to make practical recommendations for practice development. Our hope is that the practice activity and resources we have developed will inspire and enable art therapists to de-emphasise the more personal focus of their work in order to give prominence to the political aspects, thereby engaging in a more politically edified practice as a way of transforming lives and affecting social change. And it is not just women who need to be engaged in such approaches. As hooks (2003) points out, it is important that marginalised men have a voice and are heard, and that all men take a critical look at aspects of their lives so that they can engage with their own accountability. (Gloria Jean Watkins writes under the pseudonym bell hooks, intentionally written in lower case to signify the importance of her work over her name.)

The practice experience of facilitating an art therapy workshop, attended by a group of young women from diverse social and ethnic backgrounds, served to inspire the writing of this paper and the development of the evaluation activity and resource hub. No research was carried out with regard to the workshop. It is the experience of facilitating it, alongside the professional conversations and collaborative action between an art therapy practitioner and a feminist researcher and theorist, which have been the impetus for the practice reflexivity that informs this paper and the practice development proposed within it. The overall aim was to enable young women, over the course of the workshop and through the use of art, to explore difficult or painful feelings, and to offer them the opportunity to communicate their unconscious processes, experiences, thoughts and feelings, non-verbally and verbally. In addition, and specifically because art was involved, the workshop offered strategies in support of overcoming problems and difficulties for those who struggled to express themselves verbally, suffered with low self-esteem, lacked confidence or were emotionally vulnerable. The workshop also gave participants the opportunity for development on a personal level through self-awareness raising around issues including self-governance, self-respect and self-confidence. Ultimately, suggestions for continued and improved wellbeing evolved from the workshop, for individuals and collectively, using the emerging themes of loss, trauma, low self-esteem, connecting to withdrawn others, low mood often involving feelings of sadness and anger, and bullying and abuse including domestic and racial abuse.

This workshop also underlined the limitations of current art therapy approaches and resources, and a need for radical practice development so that art therapy, as a form of social justice, can inclusively speak to and facilitate a talking back by patients, and be critically accountable (hooks, 1998).

**Context**

**Background to art therapy**

The British Association of Art Therapists (BAAT) was formed in 1964 and is the governing body in the UK. Art therapy, with its origins in Europe and the United States, is historically rooted primarily in
psychoanalysis (Killick and Schaverien, 2002). It has been critiqued as often imposing oversimplified Freudian determinants of mental health, and this is especially so in relation to women (Hogan, 2003). Although its history is located by some in the 19th century, it is largely since the 1940s that use of art therapy has gained momentum (Waller, 1991), and art therapy today is widely accepted as a progressive and effective form of psychotherapy, forming an established part of NHS mental health services in the UK.

Art therapy has traditionally been practiced by women, who still tend to dominate the profession. BAAT Statistics from 2009 show that 85% of the 1,500 art therapists then working in the UK were women (BAAT, 2013). Despite this there has been a dearth of research and publications on issues relating to gender or feminist informed art therapy. While a small number of writers have offered gendered research, critiques, and analysis of art therapy (Hogan, 1997), such as from Eastwood (2012), Huet (1997), Malchiodi (1997) and Mishkin (1971), there is much research and work still to be done, not least because many writers who emphasise feminist approaches to art therapy offer gendered analysis that negates the intersection of gender with race, ethnicity, age, class, disability and sexuality.

Critics of the domination of art therapy by white, middle class, liberal thinking women have pointed out that training has been Eurocentric and inclined to appeal to this particular group of women, which is reflected in the landscape of the majority of practitioners today. In 1989, led by Jenny Cooper, a group within BAAT was formed (Campbell, Fabre-Lewin, Gaga, and Waller) – the Art Therapy, Race and Culture Group (ARC), and this comprised art therapists interested particularly in more inclusive practice that was sensitive to the needs of the marginalised and disenfranchised (Cooper, 1999). It is principally due to ARC, and its interest in the politics of ‘difference’, that there has been some questioning of traditional art therapy practices, of who practices art therapy and the training they undergo. The group also drew attention to the fact that, increasingly, it is vulnerable and traumatised service users with experiences of social marginalisation and disenfranchisement who are engaging in art therapy. Such agitation has led more recently to the inclusion of debates around the politics of difference in the training of art therapists. However, many existing practitioners continue to work within the context of the training they underwent (Ward, 1999), and it is those therapists that this paper’s recommendations, beyond this paper, will be looking to engage. Continued professional development for art therapists has for some time been inconsistent in accessibility as well in curriculum content, nationally and internationally. This has frustrated practitioners’ efforts to engage in continued professional development that is more inclusive and joined-up (Chenery 2002; Potash et. al., 2012).

Hogan (2012) in her work on feminist approaches to art therapy has been significant in talking about making the link between the personal and political – not just in terms of the work in which services users engage, but also in terms of there being greater accountability of practitioners’ sociocultural positions, as a move towards raising more significantly the political dimension of art therapy. Fundamentally art therapy lends itself to feminist action as it is about the vulnerable, marginalised and traumatised in society, and about the liberal thinking values of empowerment and of gaining social justice for the socially disenfranchised. Therefore a more didactic feminist practice is wholly appropriate. But art therapy is also most often practised by the liberal minded socially privileged with a tradition of positioning the vulnerable as oppressed and victims and themselves as the enablers (Hogan, 2012), and so it is important for such practitioners to consider critically how their own position and thinking impacts on the therapeutic relationships in which they are engaged (Cooper, 1999). Maintaining fundamental values and actions towards empowerment and social change, while also challenging the socially privileged, is what could significantly reorientate art therapy.

Further analysis and research in this area is undoubtedly required, and as recent work by Sajnani (2012) – a drama psychotherapist – has suggested, an association between creative arts therapy and current third wave feminist theories is one way of ensuring practice development that is as inclusive as possible. But such calls for action often remain just calls, and the development of strategies and
approaches that push the boundaries of practice persistently go unexplored and/or undeveloped. Further, calls for a more inclusive feminist art therapy need to be informed not only by third wave feminism but also by the current transitioning of feminist debates around the re-emergence of a sense of the collective, and of points of connection and association between what might otherwise be considered individually ‘different’ women (Grewal, 2005).

**Background to feminism**

Over the past 50 years feminism and feminist studies have gone through a process of formation, a flourishing and more latterly a crisis. The recent crisis stage is synonymous with notions of society being in a state of postfeminism. Feminist studies grew out of the second wave women’s liberation movement of the 1960s and for a number of reasons, including equality legislation, demands from students and feminist academic pressure, it took hold as a subject within universities during the 1980s. From then, with the impact of third wave feminisms, there began a questioning by black and postcolonial feminists (hooks, 1984; Lorde, 1984; Spivak, 1985; Anzaldúa, 1987; Minh-ha, 1989; Mohanty, 1991; Yuval-Davis, 2006) of the need for a discrete interrogation of society based on gender alone (Wallach Scott, 2008). During this time of introspection it has been argued that a disconnection ensued between the practice politics and everyday struggles and resistance of women activists, and what feminist academics were theorising about (Wiegman, 2008).

Now, with the re-emergence of notions of collectivity, feminism is still about challenging social injustices and raising awareness by engaging in critical thinking about knowledge, about understanding the personal as political and about taking action. However, it is also now about doing so through collaborations and associations and, further, about reimagining feminism by seeing practice settings as a locus for social transformations and change (hooks, 2010).

The use of reflective practice by health and social care practitioners asks them to learn to be more internalised – to reflect on themselves, their actions and decisions. In terms of art therapists, such reflection has focused on counter-transference (the feelings a therapist may have about a patient or service user) within the therapeutic relationship and has largely failed to challenge practitioners to engage in a more complex, multifaceted self-reflexivity that challenges them to critique their own sociocultural position. But what feminism offers is a challenge to go beyond just a turn towards the self, and instead to engage in a ‘double turn’, a productive gazing back towards Others. There is a need to be self-critical, and for an accountability that is not just practised from the comfort of traditional laudatory models of reflection, which all-too often seek to produce stories of resolution. Instead, it is necessary to turn away from one’s self towards Others (Ahmed, 2004), and to exist as uncomfortable and constantly agitated with the power and privilege of being practising professionals; to feel the agitation and discomfort of being confronted with the realisation that good liberalism is not so good after all (Brown, 2008). And it is this mindfulness that can go some way to creating useful and transformative feminist praxis (Issitt, 1999).

**Discussion**

The question remains, for feminism and feminist art therapy, of how to resist neoliberalism while remaining true to the principles of raising awareness. Harding and Norberg (2005) have pointed out that because of the fluid nature of subjectivities and identity (Butler, 1993; Hogan, 2012) this is likely to be an ongoing process, which is impossible to achieve but is worth engaging in, so that Othered voices and their parallel knowledges are heard and acted upon (‘Othering’ is used as a binary form of knowledge – see Said, 1978, pp 1-7, Mohanty, 1991 and Minh-ha, 1988). This is because such provision can offer points of transformation so that together the practice of speech and action can provide a foundation for communal transgressions, and for those transgressions to be liberating.

The workshop that inspired this paper was influential because, unusually, it involved a group of women only, and women from varying social and ethnic backgrounds. The resources used for the
workshop were standard art therapy resources, including a gender neutral visualisation narrative whereby a service user creates a piece of art related to a character that resonates with them in the story, and clay work. But the inappropriateness of these resources came to light as the workshop progressed. It soon became obvious, through many of the young women’s expressions, that the clay available – standard light grey, drying to white – only reflected a dominant white culture. The attempt to install equity by stripping away any cultural context in the visualisation narrative was an exercise in negating and devaluing difference, and therefore served only to reinforce dominate cultural norms as the marker by which equality is measured (Ahmed, 2004). Illuminated by this workshop was how universalist approaches dominate art therapy practice and resources. Developing art therapy practice to reorientate itself around the emotional, social, and political needs of marginalised and vulnerable patients requires a more critically based form of practice, and a joining up with more critically based feminist theories is a way of providing that transformation (Sajnani, 2012). In order to achieve this, what is suggested is a didactic reorientation to art therapy practice, in the sense that what is proposed is socially and politically instructive about recognising and acting upon social injustices, and is a radical departure and repositioning from what is currently practised.

We want to turn now to explain the evaluation activity we have developed to support art therapists in thinking through how they practise and the resources they draw on in their practice. Such resources include what inhabits the environments in which they practice – for example: the art displayed on practice walls; the books, toys or figures used for patients’ creative reference or inspiration; the colours and textures of materials patients engage with in art making, such as paint, pencils, pastels, crayons, paper, clay, sand, glue, masks and fabrics; and, in the sense that the art therapist is a resource themselves, what language and discourses they engage in, and the training and practice development they undertake. The Bechdel test (Bechdel, 2012) was invented by feminist writer and cartoonist Alison Bechdel in the 1980s as a way of establishing whether a film could be determined as feminist or not. The test involves determining of a film, that:

1. It has to have at least two [named] women in it
2. Who talk to each other
3. About something besides a man

While this test is limited to an understanding of women being singularly constituted according to gender alone (hooks, 1984; Lorde, 1984; Spivak, 1985; Anzaldúa, 1987; Minh-ha, 1989; Mohanty, 1991; Yuval-Davis, 2006) we have found it useful as a foundation to formulate a practice development evaluation activity, which art therapists can use to determine, through the critical questioning of resource choices, the extent to which their practice is universalist in approach. The adapted Bechdel evaluation activity asks three questions of each resource an art therapist uses:

1. Are the resources used reflective of women’s and girls’ experiences?
2. And, women and girls from different ethnic, racial, age, class, sexual orientation, and disability backgrounds?
3. And, do the resources used seek social justice for women/girls?

We decided not to have a criterion of whether resources could be said to come from a woman because being a woman does not necessarily make you care about the oppressive experiences of other women or the disenfranchisement of particular social groups (hooks, 2010). The first criterion therefore asks whether, through a focus on women’s experiences, a resource is seeking to raise consciousness about women’s position in society. The second criterion is informed by the third wave feminist movement and asks whether there is inclusion of the experiences of not only white middle class women. It is important that the criteria reflects current thinking within feminist thought and feminist studies on the politics of ‘difference’, otherwise only one particular type of feminism would be significant and valued above any other. Feminist writers and researchers such as Daly (1973; 1978), from the second wave feminist movement, have often talked about a single monolithic woman experience, and in so doing negated the experiences of women beyond those from a white middle class background. The third
criterion seeks to identify if simply a commentary on women’s lives is present or if there is an agenda of pursuing the positive transformation of women’s lives. We hypothesise the likely response to these questions would be that most practitioners find their current resources meet one or two of the criteria infrequently, and meet all three criteria hardly ever.

This activity offers practitioners the opportunity to carry out a quick assessment of the resources they use in their practice, which will inform a rapid diagnosis of the extent to which experiences of the socially marginalised are negated within their practice. However, some training in how to apply the activity questions to resources is necessary, because to be able to assess the fit between the activity criteria and practice resources, practitioners would need to be aware of what is meant by practice resources, and also to have an understanding of the feminist approach that informs the activity and the questions that sit within it. When we used the activity ourselves it worked well for assessing most art therapy resources, such as books, images, continued professional development engagement, language and discourse, but it was more ambiguous when it came to assessing actual art materials, such as paper, paint and clay. When assessing these resources it was first necessary to establish if the materials could, through art making, constitute the everyday life experiences (Stanley and Wise, 2002) of socially marginalised women and girls; this required a more metaphorical and psychoanalytical interpretation that warrants further exploration than has so far been possible. The activity taught us that most mainstream art therapy resources are exclusive in nature, and that the thinking through or even consideration of gendered and marginalised experiences is negligible. This led us to contemplate how transformation of such disregard might be possible.

Using the evaluation activity can raise awareness of practitioners’ orientation but does not offer support in terms of transforming that position, so we have developed a resource hub for practitioners to access using the social media site Pinterest. The site is ideal in that it is image based and so lends itself to the creative arts. It is also an open access site and so can be used potentially by anyone. Further, it offers a mapping provision that allows users to connect and engage with similar thinkers, and therefore offers a useful way of developing and sustaining the resource hub in a meaningful way. The hub can be accessed at www.pinterest.com/kentarttherapy/, where there is a variety of named boards, each with particular suggested resources sitting within it, such as books, art, artists, children’s picture books etc., with some supplementary information for many of the resources. The resources in the hub meet the criteria of the adapted Bechdel test (Bechdel, 2012), which was not always easy to achieve. Many of the material resources featured are expensive and it is difficult to find retailers that sell them as opposed to selling just mainstream materials. This is concerning, because with 90% of art therapists in the UK practising in the public sector (BAAT, 2013), a sector currently affected by an economic climate of austerity, funding additional, more costly resources is unlikely to be straightforward. In contrast, many of the books are available partly or wholly in open access electronic format, and the art similarly is not difficult to find via desktop based research; in this sense electronic resources have advantages. It is our ambition to use the practice activity and resources hub as a starting point from which to build momentum towards a transformation in practice development for art therapists, and continually to progress and improve both the activity and the hub through evaluation of their significance to practice development.

Conclusion
Feminist cultural theorists have focused on the importance of the politics of women’s everyday life experiences (Stanley and Wise, 2002) and, thinking what that means in terms of women’s sense of identity and the art that came out of the inspirational workshop highlighted at the beginning of this paper, it is possible to imagine not just feminist art therapy, but a critical art therapy praxis. The workshop enabled the young women to express and explore everyday experiences and feelings about their sense of identity, and not just in terms of the whole group doing the workshop but also of the wider community and society as a whole. But beyond this the young women prompted a critical and reflexive look at art therapy practice and resources, which has led to a proposal for a progressively
radical and didactic direction for art therapy. The workshop, the art created from it and the facilitation of it offered a point of reference from which it was possible to think about how feminism could be reimagined, and how that reimagining could bring art therapy to a radical reorientation, and therefore work towards action and change through collaborative associations.

References


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