

Art Therapy: Theory and Practice

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Historical Backgrounds

Art therapy is a form of expressive therapy that uses art materials, within a professional relationship, for people who experience illness, trauma, or challenges in living, and people who seek personal development. Its psychotherapeutic modality is based on the disciplines of 'art' and 'psychology' involving Sigmund Freud's psychoanalytic theory, relying on the human person's symbolic expression as a means of communication as an alternative to verbal communication.

Albeit most art therapists regarded Margaret Naumburg, a psychologist in the United States, a person who coined the term art therapy in 1947⁽¹⁾, Adrian Hill in Great Britain had already conceived the same oddity earlier in 1945⁽²⁾. And as well that the credit given to Nolan D.C. Lewis as a pioneer in initiating the practice of art as therapy for special cases of mentally disturbed subjects while working at the New York State Institute of Psychiatry of Columbia University in New York since 1925⁽³⁾; it was possibly that in 1922 Hans Prinzhorn introduced the development of art therapy beginning with the pictorial works of a mental patient and documented in a paper named "Artistry of the mentally ill" published by the Springer-Verlag company at New York, USA⁽⁴⁾. Edith Kramer,⁽⁵⁾ another pioneer in the field of art therapy, worked mostly with children. Her work laid significant foundation for this field, which has grown significantly in the United States over the past 50 years.

At present, art therapy is included as a modality in alternative medicine in the treatment section of mentally disturbed subjects in most professional health institutions, especially in the Western countries. As for Thailand, it is rather amazing that almost all the pioneers in this particular field had been initiated by a number of lady psychologists, such as Umporn Prabgree,⁽⁶⁾ Primprou Disyavanich⁽⁷⁾, and Somsri Kittipongpisal,⁽⁸⁾ whose works appeared since 1977 onwards.



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Concepts and Theories

Literally, art therapy encompasses the use of art media and images, the creative process, and patient response to the products created for the treatment of psychiatric and psychologic conditions, often as an adjunct to psychotherapy or rehabilitation. The term art therapy includes the usage of a wider spectrum of art media, e.g., music and drama, as therapeutic tools.

According to Edith Kramer, a renowned American art therapist, art therapy is conceived primarily as a means of supporting the ego, and constitutes an element in the therapeutic milieu that complements or supports psychotherapy.

While Nolan D.C. Lewis wrote in a foreword to the first edition of Margaret Naumburg's book, An Introduction to Art Therapy: Studies of the "Free" Art Expression of Behavior Problem Children and Adolescents as a means of Diagnosis and Therapy (1947) that "Spontaneous drawings as products of wishes: this manifest content in some respects covers or disguises unconscious underlying motives. A certain amount of freedom or release of tension is achieved in this way; it is an impulse to express to the self and to communicate to others by means of a special language a partial satisfaction of the underlying wish." Margaret Naumburg's concepts followed closely Nolan Lewis's ideology under the notion that the development of such "free" art expression is always associated with a planned use of the *transference* relationship. The transference content may not express the whole personality situation, but are filled with the neurotic suppression products of hostility or affection connected with one or more symptomatic trends and historical images which may amuse, haunt or distress the conscious mind of the patient. The transitional stages as well as the general progress of the emotional disorder are often presented in an interesting manner, becoming intelligible by means of the study of periodic or serial drawings. Through the analysis of the contents of these productions, ways are found of bringing into consciousness the underlying difficulties in a manner that shows the basic drives striving to satisfy the instinctive life, and thus objectification and socialization of previously poorly understood feelings and behavior become possible.

In brief, Naumburg concluded that "art therapy enables the patient to translate the interior images of his unconscious into pictorial projections; the creation of such symbolic forms establishes a primary basis of communication with the therapist" (1953).

Communication in the art therapy setting has a specific feature: the presence of the art object in the room creates a triangular relationship, where the patient and the therapist are on two corners of an imaginary triangle, and the image made by the patient is on the third corner. This



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feature makes communication very flexible. In fact, the patient may communicate with the image itself (creative-expressive dimension) or the patient may communicate with the therapist through the symbolic space of the image (expressive-interactive dimension) or the patient may relate verbally and directly with the person of the art therapist (interactive-analytic dimension). Different art therapy training schools, and different art therapy interventions emphasize and use the three communicative dimensions in different ways.

Patients' creation of visual art, leading to non-verbal self disclosure, helps them get in touch with thoughts and feelings that are hidden from the conscious mind, the discipline of so-called expressive art therapy.

As of the present authors' understanding, art therapy is a form of psychotherapy that developed out of two main roots: art on one side, and psychoanalysis on the other side. It belongs to the group of "expressive-creative therapies" together with music therapy, dance-movement therapy, and drama therapy. Its objectives are both the strengthening of individual creativity and the expression and elaboration of the patients' thoughts and emotions.

On the other hand, the mechanism of art therapy action may be like the psychotherapy methodology of Edna Faa "the long exposure" based on medical practice of homeopathy cum hormesis.

Art Therapy in Practice

Art therapy is a form of expressive therapy that uses art materials, such as paints, chalk and markers. Art therapy combines traditional psychotherapeutic theories and techniques with an understanding of the psychological aspects of the creative process especially the affective properties of different art materials.

Nowadays, art therapy is practised in many countries, especially in the West, as an alternative means for treating mentally traumatized persons. The main objectives of treatment are the strengthening of individual creativity and the expression and elaboration of the patients' thoughts and emotions. The visual arts of drawing and painting are the most commonly practiced; sculpturing is a practical therapeutic form for dealing with blind patients.

In order to facilitate the expression of the internal world, art therapy practice involves offering the patient a white page and the freedom to choose any art material, and to work within a silent and peaceful environment. Regarding the art therapeutic process, the three elements, namely, image-making, the elaboration of images, and the relationship with the art therapist, are interconnected. They should never be used in isolation, and none of them



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should be forgotten in clinical practice. It must be stressed that the results of treatment rely upon the process of creation and not the finished art product.

Methodology

The objectives of art therapy and the conventional art practice are different. Art therapy focuses mainly on therapeutic benefit and not on the artistic achievement or personal skills; it emphasizes on the therapeutic process within the art. For effective practice, art therapists must follow the following framework.

1. Art Therapy Settings; either group or individual art therapy.

The settings should be easily accessible by the community experiencing natural disaster. A temporary room must be set up equipped with tables, chairs, and art materials.

2. Art Therapy Materials

Art materials such as pencils, charcoals, chalks, pastels, color markers, paints, brushes, palettes, drawing papers, scissors, etc., should be fully accessible during the art therapy sessions.

3. Art Therapy Sessions

Art therapists have to present art materials to their clients, and give directive to them and better is to let them draw or paint freely from their minds. Listen to the clients' narrative or stories about their art products. Responses to art making process and product, and verbal interactions of the clients.

4. Art Therapy Evaluations

Art therapists must observe the process, the client's dynamic behavior, and make notes about them, and the responses of the client during the art therapy session. Art products (drawings and paintings) are then use for interpretation analysis by art therapists after each sessions.

As for this practicing modality, techniques may vary from one practitioner to another. For a standard practice, clients would usually apply for art therapy services through appointments. In the first encounter, clients must be introduced to art materials that are available for them. Next, they should explore any art materials that they find comfortable with in making their artworks. Each art making session takes about one to one and half hour and the session includes the client's expression of internal world through symbolic



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images, the narrative part on the art work, and more drawings or paintings if the client wishes. These art therapy visits continue as long as they like, or may be ended by the therapists based on the on-going evaluations, in particular at times when the therapists have made the decision that their clients should take other form of treatments.

A Case Study:

Letsiri Bovornkitti et al.(10) in 2006 took the opportunity of a catastrophic event that occurred in Uttaradit Province, which caused vast destruction of most citizens' houses and farmland and caused great mental trauma among the residents. Study samples comprised eight school children aged 7-14 years (five boys and three girls) whose property and relatives' lives were lost; the subjects were selected by the psychiatrist member of the team of those children with symptoms that were not so severe that they would require conventional psychiatric therapy. There were follow-up weekly for 12 weeks by the same psychiatrist to observe the progress of their illness.

The artists also attended the weekly sessions and provided the children with the supplies necessary for doing art work and urged them to draw anything they wanted to on the paper provided every week. Their weekly products were photographed for interpretation of their mental progress. At the end of the research session, their mental progress was judged by comparing the results of the psychiatrist's opinion about the interpretation of the drawings. It was concluded that the art therapy practice in this group of children yielded considerable success as evidenced in seven of the eight subjects (87.5 %), and that art therapy is effective for managing children suffering from mental trauma caused by disasters.

How art therapy works:

The general concept of mechanism regarding how art therapy achieves effective treatment for mentally traumatized persons, involves the provision of symbolic language as a means of communication alternative to verbal communication, through creative expression such as drawing and painting, which is much the same as a psychological method of 'exposure therapy' in assisting trauma survivors to re-experience distressing memories; according to the author's opinion the two therapeutic interventions exercise with the same mechanism of homeopathy cum hormesis. (11)



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