

The Use and Role of Art in Mental Health

by Frank Frontis

Molding clay figures to facilitate the expression of one's inner thoughts, mastering the skills required for proficiency in voice, dance or piano, the carefully guided dramatic expression of one's feelings, or merely a visual encounter with a sublimely beautiful painting ... can all have positive effects on one's sense of mental and emotional well-being.

Art therapy, drama therapy, art education and even art appreciation are ways in which art can be employed to make considerable contributions to mental health.

Art Therapy

Judith A. Rubin, Ph.D., a former president of the American Art Therapy Association defines art therapy as the use of art to diagnose and treat mental and emotional illness.

The difference between art therapy and art education or activity, according to Rubin, is that art therapy is diagnostic or therapeutic. The purpose of art education or activity, she ex-

plains, is learning a skill or just having fun.

Despite their vastly different purposes, Rubin points out what might best be described as a "criss cross phenomenon" between the two. Sometimes, individuals undergoing such therapy learn artistic skills, and some students receive therapeutic benefits from their involvements.

Angela Pickett, M.S., A.T.R., one of the few practicing art therapists in Memphis, uses this form of therapy routinely in her work with mentally and emotionally dysfunctional patients at Methodist Central.

"Art therapy," says Pickett, "allows for the expression of thoughts and feelings that either can't be or are difficult to express verbally." As such, Pickett says that art therapy can prove to be very effective for small children, people with hearing and speech impairments, and for those with a history of physical and sexual abuse. Art therapy is also used to diagnose and treat co-dependency problems, family dys-

functions and eating disorders according to Pickett.

Pickett explains that art therapy works by permitting the expression of unconscious thoughts and feelings without "censorship" by defense mechanisms. Further she explains the therapy gives one ownership of one's thoughts and feelings by providing a concrete expression of them.

Pickett says that she has worked with individuals who have accidentally refined or developed an artistic skill as a result of art therapy. This may enhance the effectiveness of therapy.

Pickett also says that there can be a correlation between a patient's fondness for a particular art medium and their response to therapy. "Sometimes," she says, "if people are excited about the materials, they may be more receptive to therapy." Paintings, drawings, collages and clay are often used with adults, she says, whereas children respond well when

working with puppets and masks.

Pickett has observed how sometimes patients refuse to accept art therapy for what it is — therapy — and attempt to treat it like art education." This interferes with the therapeutic process," she says. "Often this is interpreted as a sign of denial." Also Pickett says that hang-ups concerning art materials may limit the effectiveness of therapy. "The most common way of addressing this problem" says Pickett, "is simply to change the art medium."

More than just the client's "creations" is taken into account in art therapy. Pickett says that therapists are also trained to observe and take into account the patient's reactions to the art media, their own

work and their peers.

"Interpretations of a patient's work are made with the assistance of the patient themselves," Pickett explains. "We always try to find out from the person what they mean by their creation in the interpretation of it. And we look at a series of drawings to get the overall picture of the individual's situation."

Pickett, a Member of the American Art Therapy Association, says art therapy is relatively new in the Mid-South, and that it's more established on the east and west coasts. The AATA defines entry level into the field as a Masters Degree in Art Therapy.

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