

## History and Theory of Art Therapy: A Personal Reflection

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I feel an immense gratitude to be a part of The George Washington University Art Therapy program and the American Art Therapy Association. Through interactions with readings, professors, supervisors, students, and internships, I have learned and experienced an incredible amount over the course of two life-changing years. I have had the opportunity to gain an understanding of various theories and applications for art therapy. Built upon my understanding of behavioral and developmental psychology, my studies have provided me a framework and vocabulary for ideas and beliefs I previously held. I can now report that I identify with humanistic theory that includes existential, gestalt, phenomenological, and person-centered art therapy in addition to my longstanding behavioral and attachment theory-based orientation.

A humanistic theme that resonates with me is “a healthy mind in a healthy body in a healthy spirit in a healthy world” (Garai, 1974, p. 161). In this theory, the goal of therapy is not to eliminate emotions but instead to transform them into honest, authentic expression through a creative modality. This meshes well with the strength-based approach of reframing and building on existing, positive traits and behavior (Moon, 1990). While I distance myself from the nihilism associated with existentialism, I do appreciate that this theory lends personal responsibility on the individual for choices. I think that this methodology encourages empowerment and a sense of control for the individual, which fits together with my work with adolescents and taking ownership for actions. From gestalt therapy I take an emphasis on self-awareness and being in the present, especially in the context of the art making process. I admire the work of Janie Rhyne, with her focus on the whole individual and the active movement of art expression

(Rhyne, 1973). Her gestalt approach blends well with my view that the focus should be on the person, not the diagnosis. I also appreciate this theory because it explicitly says that it is not for everyone, and that certain types of people will benefit from it more than others.

Intentional looking and reflective distancing are two aspects of phenomenological art therapy that I have adopted from my supervisor at my first-year internship—an inpatient behavioral health unit of a hospital. There, I noticed therapeutic comments that seemed benign stirred up amazing insight within a patient, and the act of holding the artwork farther away usually brought an unprecedented clarity. I also feel that there is great truth to person-centered art therapy, as the stress is on the therapist's attitude instead of skill. I think this can best be observed as many therapists have the same credentials or even went through the same program, took the same classes, and had the same professors, yet there is a marked difference in the therapeutic abilities and capabilities in how one relates to a client. I've witnessed—and in all honesty engaged in—many power struggles. Through it I've learned that the therapist must not take things too personally or let his or her judgment prevail over a certain circumstance with a client. We as therapists, or therapists-in-training, must model the behavior we wish to see and asserting power or dominating control is ineffective and in opposition of our therapeutic goals. Overall, my acquired knowledge of humanistic theory has really provided a structure upon which I can further build. I identify with many of the tenets of humanistic theory and actively attend to demonstrating them during my own work; for that is the true test of intentional living and practicing what you believe.

While I now incorporate a humanistic theory to my psychological orientation, I have been exposed to and learned from a myriad of alternate theories that I will integrate into my art therapist identity. I will use visual journaling from cognitive behavioral therapy and spontaneous

drawing from Jung and Freud's psychoanalytical framework because I have experienced therapeutic benefits from them on a personal level. But it is the person-centered, holistic approach adopted from the humanistic theorists that have affected my psychological orientation and I am eager to put these principles into action. I am actively aware that this might change in the future and I welcome new insight and meaning in my process.

#### References

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