

An Ancient Memory from the Distant Past and the Arts Therapies now and for the Future.

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September 2021

To recall a memory is to *remember*, but the word remember can also be thought of as to '*re-member*'.

In this formulation, the opposite of remembering is not forgetting, but '*dis-membering*'.

Next, we need to re-examine the distinctions between these two, *forgetting and dismembering*.

Recently I have been developing and delivering an on-line course for practising artists. Titled 'Art Therapy, the Creative Process and the Unconscious' it is designed to provide new perspectives for artists seeking to develop a further or new understanding of their creative practices and of their artistic output. After a career that has spanned more than 40 years, there is question that one of my students asked that I have not been asked before. Up until now I have been mainly involved in teaching students who are training to be therapists, so perhaps that is mainly why that particular question has not arisen before.

The question was ‘why is there such an emphasis on trauma, why are most of the examples that you give concerning the unconscious based around unresolved trauma? The question was not just addressed to me – Freud and Jung were also mentioned, and, of course, this influenced my answer to the question – that the psychiatrists and psychoanalysts that developed the theories about the unconscious were mostly concerned with the treatment of psychopathology, so it came naturally to them to use case-examples based on the clients they were working with to ‘exemplify’ those same theories.

In other words – the psychological therapies, and I include the Arts Therapies here, evolved and developed ways to help people with the memories associated with psychological trauma that they had experienced. And, of course, it was not just individual trauma that influenced the work of first of all, Freud, and then Jung. The time that they lived through included the collective trauma of the First World War during which millions of young men lost their lives, followed by a terrible Pandemic during which millions more died. Hardly had that disease abated before the onset of the Second World War closely followed by the so-called Cold War. These were the events that largely shaped the formulations of both Freud and Jung concerning the Unconscious.

More recently we have had time to reflect on what was born out of those traumatic times and one of those things was the development of the Arts Therapies. It might be argued, as many have, that there is little new about the idea that the arts might be therapeutic and that people have been using the arts to heal themselves for thousands of years, and even that we ‘invented’ art in order to heal. Here I especially wish to reference Ellen Dissanayake, author of ‘Homo Aestheticus : Where Art comes from and why’ (1992) who is, in my view, remains relatively unrepresented in the Arts Therapies literature – I highly recommend her work to you*. The thing that was new was the idea that there could be a ‘profession’, recognised by society and the state for those individuals who practice as Arts Therapists.

* Ellen Dissanayka (1992) *Homo Aestheticus : Where art comes from and why*. New York. Free Press.

So, were the Arts Therapies also born out of trauma? If so, is this something that we recognise and appreciate or has it become, like many traumatic events, repressed? I will be returning to this question a little later in this presentation. As we know, repression is a form of involuntary forgetting, a form of purging of memory – when what has happened, what has been done to us or what we have experienced is too much for us to bear. As an Art Therapist, encouraging my clients into creative expression, I often remind myself that Expression is the opposite of Repression. As a therapist the focus is on the individual client finding ways to safely express that what has been repressed. As for Artists, do they not play a part in expressing the collective repression for society as a whole? I will be returning to this dual-identity, Artist and Therapist, later.

But I want to share with you a perhaps different perspective concerning Memory and Trauma and for this I will employ a 'play on words' and an ancient myth.

I will start with a question – What is the opposite of remembering? The answer, you tell me, is 'forgetting'. What if we consider these words from a slightly different perspective with another question – what is the opposite of re-membering? My answer today will be that it is *'Dismembering'*.

And this brings me to the myth of Isis and Osiris – a story that has many versions including those that includes dismemberment, the severed parts being put together again except one – Osiris's penis, which, so the story tells us, was eaten by a fish. His sister, Isis, who was also his lover and wife, fashions a replacement penis for him, carved out of wood. Through her magic she is able to have sexual union with Osiris and becomes pregnant and gives birth to the God Horus. (The version that I am about to share with you is based upon one that is featured on the Southern Africa Association of Jungian Analysts website*)

ONCE UPON A TIME.....

In the beginning everywhere was water and water was everywhere, and the name of the waters was Nun. And out of the primordial waters of the dark abyss a hill began to rise up; it was the 'mound of the first time', and it was the first time of light. And the name of the High Hill was Atum, the 'Complete One'. Atum, who comes into being as risen land and light, generates the male Shu (Air, Life, Space, Light) and the female Tefnut (Moisture, Order), who gives birth to Nut (Sky, female) and Geb (Earth, male). Shu then lifts his daughter Nut (Sky goddess) away from his son, Geb (the Earth God), supporting her so that she can give birth to the stars and, 'taking them up into her', let them sail across her watery body as the sky... (Baring and Cashford, pp. 228)

In this way, through the union of the Nut, the Earth Goddess, and Geb, the God of the Earth, was born Osiris, Seth, Isis and Nephtys.

Nephtys and Seth became husband and wife, while Isis and Osiris are said to have loved each other from before birth.

Osiris is said to have become the first king of Egypt and the creator of civilization, abolishing cannibalism and substituting this with the agricultural practice of cultivation of corn and barley, and the making of bread and beer. When he travelled to other nations to spread his civilization, Isis ruled efficiently and peacefully in his absence.

The story says that Seth was jealous of Osiris and conspired to kill him. He constructed a richly decorated sarcophagus the size of his brother, which he presented at a palace feast. Amidst the feasting, he promised to give the sarcophagus to the one it would fit. Osiris lay himself in the chest, and was betrayed by the seventy-two conspirators, who nailed the lid shut, sealed it with molten lead and flung it into the Nile, where it floated down to the sea.

When Isis heard of this, she went into mourning and began her relentless search for him. She found direction from some children playing by the river, who had seen which mouth of

the Nile had carried it out to sea, and thus she tracked the chest to Byblos in Phoenicia. In the meantime, the chest became lodged in an Erica tree, which grew around it, enclosing it so that it could not be seen. The tree bearing the god, was so beautiful and fragrant that the local king and queen felled the tree and carved it into a pillar at the palace.

When Isis arrived in Byblos, she disguised herself as a woman veiled and in mourning, then she sat quietly at the local well. When the queen's maidens came to the well, she engaged with them, offering to braid their hair. When they returned to the palace, their hair emitted such a wonderful fragrance that the queen sent for Isis, welcomed her into her house and appointed her as the nurse of her child. In time, Isis revealed her true nature and asked that the pillar that held up the roof be given to her. She took it down and, cutting away the wood of the tree, revealed the sarcophagus of Osiris hidden inside. Then she returned to Egypt with the sarcophagus.

On her way back, when she arrived at a desert place where she could alone, she opened up the chest and laying her face on the face of her brother, she kissed him and wept...(and) she conceived their child. In time she returned home where she hid the chest enclosing the body of Osiris in the remote marshes of the delta, while she went to Buto to take care of her son, Horus. (Baring and Cashford, pp. 229)

Time passed, until one night Seth was hunting wild boar in the light of the full moon when he discovered the chest hidden among the reeds. He furiously dismembered the body into fourteen pieces and scattered them up and down the country, each in a different place, and he throw the phallus of Osiris into the Nile.

Isis, on learning of this new attack, enlisted the help of her sister Nephthys and her son, Anubis, the jackal-god. Isis also included her own son Horus, the hawk-god, and lastly, Thoth, the moon-god, often depicted as an ibis. Together they managed to find all his parts, except for his phallus, which had been swallowed by a fish. Isis re-assembled all his parts as a mummy, and then fanned the dead body with her wings, thus reviving him to become the Ruler of Eternity.

The helplessness of Osiris in his dismembered state, and the call of Isis to enliven him with the help of Nephthys, is movingly expressed in the following poem:

Ah Helpless One!
Ah Helpless One asleep!
Ah Helpless One in this Place
which you know not – yet I know it!
Behold I have found you (lying) on your side-
the great Listless One.
'Ah, Sister!' says Isis to Nephthys,
'This is our brother,
Come let us lift up his head,
Come, let us (re-join) his bones,
Come let us reassemble all his limbs,
Come, let us put an end to all his woe,
that, as far as we can help, he will weary no more.
May the moisture begin to mount for his spirit!
May the canals be filled through you!
May the names of the rivers be created through you!
Osiris, Live!
Osiris, let the great Listless One arise!
I am Isis. (Baring and Cashford, pp. 235)

After this resurrection, Osiris sits in the Hall of Two Truths, presiding over the judgement of the souls of the dead, where the heart of the deceased is weighed against the feather of Maat, the goddess of truth and justice. If the heart is found to be as light as a feather, the soul can proceed to eternal life in the presence of Osiris. If the heart is heavier than the feather, the soul is condemned to a second death, one of eternal oblivion, of being forgotten*.

*The Myth of Isis and Osiris (2019) Renee Ramsden. Southern African Association of Jungian Analysts(website)https://jungsouthernafrica.co.za/wpcontent/uploads/2019/11/Isis_and_Osiris_Renee_Ramsden_pdf

Baring, A., & Cashford, J. (1991). *The Myth of the Goddess: Evolution of an Image* New York: Viking Arcana.

So, in which ways is this myth of Isis & Osiris important to ECArTE? Well, the myth is very ancient, but I remember a time in the past, not as far back as the early Egyptian Kingdoms, of course – but, a time before the birth of ECArTE. Isis, Osiris, Set and Nephthys were siblings, born from the union of the Earth and Sky. While we might not have such exalted parents, Art Therapy, Dance & Movement Therapy, Dramatherapy and Music Therapy, are, in their own way, closely related, indeed, we form a kind of family group. However, it has not always been a harmonious family. Like in the myth of Isis and Osiris, there have been periods of rivalry, disharmony, and suspicion.

So, returning to the more traditional meaning of the term ‘memory’, I remember that it was more than 30 years ago that I had a conversation with my then colleague and boss, John Evans, that went on to directly contribute to the formation of the consortium. At that time, certainly in the UK, the different Arts Therapies professions were still emerging and developing. The professional bodies representing each of the various groups all had relatively small membership numbers and they only rarely, if ever, spoke to one another. Actually, if they formed a kind of family, it was, at that time, a very dysfunctional one. This state of affairs resulted in a weakness when it came to being in a position to negotiate issues such as pay and conditions of employment for Arts Therapists. John Evans had invited the various professional bodies to a ‘conference’ to be hosted by the St. Albans College of Art, where the first Art Therapy training in the UK had been established. The conference failed to materialise because we were unable to get the various professional bodies to sit around a table together. In other words, the groups were in a state of *dismemberment*, and we wanted to *re-member* them. However, this disappointing situation gave rise to a creative spark – if we can’t get the four UK groups together, let us try something even more ambitious and form a Europe wide consortium – if we are able to do that, then perhaps all of the UK groups will eventually join. The rest of this story is well established – ECArTE was founded in 1991 with the support of the European Union through an ERASMUS grant with an initial partnership including The Netherlands, France, Germany and the UK.*

*ECArTE was formed through the support of U-XF1973 – European Community Action Scheme for the Mobility of University Students (ERASMUS). *The Union of International Associations* website.

A great deal has been achieved over the past 30 years and, I believe, ECArTE has played no small part in those achievements. I believe that the consortium has brought harmony to the Family – we are now a strong family group, increasingly sharing our knowledge, resources and experiences. Our Professions are being formally recognised by the countries in which we practice. The Arts Therapies professions are gaining formal State approval, recognition and registration. All of this, of course, has both positive and negative implications.

For example, I wonder whether in the process of becoming established we might have lost sight of ourselves, or, at least, parts of our-selves? Who is it, now, that defines us? Is it we, the practitioners? Or is it the authorities that both recognise and regulate us, who, in so doing also define us? For example, in the UK, Art Therapy, Dramatherapy and Music Therapy are ‘State Registered’ through the Health and Care Professions Council (HCPC), which is in-itself, directly regulated by the Government. HCPC ‘defines’ the Arts Therapies through its ‘Standards of Proficiency for Arts therapists’*.

This includes a total of 127 listed ‘proficiencies’, of which, interestingly, the majority are generic and common to all three of the professions. Indeed, for Art Therapy, there are only 8 specific proficiencies, the same number for Dramatherapists and only 5 specific proficiencies for Music Therapy. So how might we understand this and its implications? Well, using the Family analogy, it might be telling us that we are very closely related indeed – perhaps more closely than is comfortable for us.

Certainly, in my experience within the University sector, where I have had to manage Departments that host all the Arts Therapists, attempting to formally recognise these common family traits into increasing the number of shared, common and generic modules or courses, has never been easy. I wonder whether, staying with the Family analogy, something like an ‘Incest Taboo’ is triggered when an attempt to share ever more closely is suggested. This impacts directly on the process of education and training for those who wish to join our professions.

*The Health & Care Professions Council is a statutory regulator of over 280,000 professionals from 15 health and care professions in the UK.

When we consider how training courses in the Arts Therapies involve a dividing up what it might mean to become an Arts Therapist into parts called modules or courses, and then defining what makes up a 'programme' leading to an 'award' - Is this another form of dismemberment?

For example, who takes responsibility for the curriculum? Well, increasingly this is something that is shared by a number of different 'stake-holders'. The University that hosts the Programme of Study will insist that it conforms to its regulations and timetables. The Government Department for Higher Education in the host country will also have a part in determining the curriculum and structure of the training. Then there is the Professional Body registration system that has a further say in all of this. Each takes a 'cut' and in 'cutting-up' the training in these ways is it not a little like what we have heard in the Osiris story? So, as we are seeing, formal recognition of our professions can have both positive and negative aspects for us.

Perhaps I have left it a little late in my presentation to thank our hosts, The University of Vilnius, Faculty of Medicine, so I take the opportunity to do so now. I have had a relationship with the Lithuanian Association of Art Therapy stretching back for over 20 years. It was in 2002 that I was first invited to Vilnius to run Art Therapy workshops and present theoretical lectures to members of the association. Since then, I have returned to Lithuania on many occasions, and this presents me with an opportunity with sharing some personal memories and observations with you.

First of all, is my memory of just how hungry for ideas and knowledge the people that I met were. I soon learned to appreciate the distinction between the so called 'Soviet Times' and the Post-Soviet era that presented people with its own challenges as well as opportunities. I reflect here how the very fabric of a place, a physical environment, holds traces of memory within it. For example, on the first few occasions that I visited Vilnius I remember crossing what I called the 'Soviet Bridge', more commonly known as the 'Green Bridge', a monumental example of Soviet sculpture featuring giant bronze figures of heroic workers, built in 1952, that spanned the river Neris Viliya. One year that I visited it was still there, the next it was gone. In 2015 the statues were removed and with them, in a sense, a memory of

the past was gone, or at least something that might trigger a memory of the past, had been removed. It has been a few years since I was last in Vilnius and I wonder whether another, less conspicuous remnant from the Soviet period still exists in the city? I refer to the crudely welded together and rusty sconces to be seen on the outside of building that would have been used to hold the Soviet flags during the May Day and other parades. Are they still there, I wonder? I share these observations in order to explore the idea that 'Memory' is not just a product of the mind and brain but something that extends into the physical world. Nature itself holds complex memories of its past, stored in its genetic code, for example, that we are only starting to understand.

But there is also a particular memory, from 2009, that I wish to share with you today. I was in Vilnius presenting a paper to the 'Art for Health Care: experience and perspective' conference*(1) and, following my presentation, as I left the podium, I was approached by a young man who thrust a pamphlet into my hand. Other than thanking him I have no memory of any conversation between us that might have taken place, my impression now, thinking back, was of a rather shy young man handing me something of importance. I still have the document, which I refer to from time to time. The young man, who was also the author, is named Kestutis Sapoka and the pamphlet is a summary of his Doctoral Dissertation, titled ART THERAPY AS AN INTEGRAL SYSTEM: CONTEXTUAL ANALYSIS.*(2) Luckily, the pamphlet was in both English and Lithuanian and there is one passage in particular that I want to share with you now:

Contemporary art therapy is a complex integrated unit of ideas and therapy practices that combine the various and often contradictory theoretical opinions, methodological approaches and practical methods of the activity. (p.8)

*(1) the conference was part of the CEVILNIUS European Capital of Culture 2009 and CEArtists Association Gallery.

*(2) Kestutis Sapoka (2008) ART THERAPY AS AN INTEGRAL SYSTEM: CONTEXTUAL ANALYSIS. Summary of Doctoral Dissertation, Humanities, Art Criticism (03H) Vilnius Academy of Fine Arts.

This idea that some kind of integration has been forged from a variety of often contradictory theories and ideas fascinates me – how could such a thing be achieved? Dr. Sapoka goes on the state –

Despite the quite extensive and, at first sight, eclectic looking field of research, it is the author's opinion that the latter can be considered as *the specific* discursive space which is integrated into a single corpus by miscellaneous actualisations of the relationship between *psychopathology, artistic expression and therapeutic context*. (p.10)

So there is something that happens when our more intuitive artistic process gets applied therapeutically that has this integrating function that somehow permits contradictions to inform or underpin the practice of Art Therapy. To my mind, this suggests another kind of dismembering, that of splitting, not so much of our personality but more of our identity. This is evident, even in the titles we give to our professions – Art Therapy, for example, has two parts, that of the 'Artist' and that of the 'Therapist' and these two 'identities' do not always sit comfortably one with the other. I wonder whether this contributes to the relative lack of empirical research into the Arts Therapies generally, and perhaps to Art Therapy in particular. Is there something in the identity of the Artist, striving for originality, that results in as many versions of Art Therapy as there are Art Therapists? I ask this as a serious question because one of the main factors that has interfered with the possibility for empirical research into the efficacy of Art Therapy is the reluctance (and sometimes refusal) of Arts Therapists to 'Manualise' their practices in order to control the variables necessary for the methodologies usually employed as parts of RTCs. (Random Control Trials). More recently there is evidence of a growing acceptance that manualization does have a roll to play. I include here, the work of Christina Blomdahl in Sweden who has developed a Manual-based Art Therapy for patients with depression*(1). Also Laura Wood and Dave Mowers, who have developed a Manualized approach to creating therapeutic theatre with persons in recovery*(2).

* (1) Christina Blomdahl (2017) *Painting from Within: Developing and Evaluating a Manual-based Art Therapy for Patients with Depression*. University of Gothenburg.

(2) Laura Wood & Dave Mowers (2019) The Co-Active Therapeutic Theatre Model: A Manualized approach to creating therapeutic theatre with persons in recovery. *Drama Therapy Review*. Vol 5. No 2. Pp 217 – 234. Finally, for those seeking a methodological overview regarding the manualization process itself, I highly recommend Elizabeth Taylor Buck's work on the development of a manual for dyadic parent-child art therapy*. You can access her complete thesis on Google Scholar. (As an aside, in using Google Scholar under the title *ECArTE Art Therapy* it gives 2,770 results – which to my mind demonstrates the outstanding contribution that the consortium continues to make in respect to Arts Therapies research on the international stage).

While our colleagues in the Psychotherapy, Counselling and Psychology professions espouse the Scientist/Practitioner identity, we seem to prefer the Artist/Practitioner model, and, in my view, this continues to hamper us in respect to research output. While we have embraced the importance of research informed practice, are we generating enough research to adequately inform that practice? I accept that we are not all that different from our colleagues from the other psychological therapies in that the majority of practitioners are not research active – but we are increasingly the importance of embracing research by focussing on the critical consumption of research to inform our practice, rather than the production of research. The increasing importance of evidence-based practice and 'scientific proof', together with the rise of 'Big Data' is rapidly changing the environments in which we practice. Without playing a more active part in scientific discourse will we potentially gradually lose the legitimacy we have already gained in respect to the perceived efficacy of our therapeutic approaches?

Today we are still living and practicing in the age of Covid. These are challenging times for us all, but we are demonstrating that we are up to the challenges and one of the ways we are doing this is by embracing new technologies and ways of delivering our therapies remotely through the use of platforms such as Zoom and Microsoft Teams etc. Indeed, the pandemic has seen an exhilarated slide into the use of so-called 'Psychotechnics' which might for us, usher in new possibilities and attempts to manualise our practice. Will we, or indeed, should we, continue to resist this development? I think this is an important question for the future.

*Elizabeth Taylor Buck (2014) Development of a manual for dyadic parent-child art therapy.

School of Health & Related Research. University of Sheffield. (Doctoral Thesis published on Google Scholar)

But returning to memories of the past, as an individual who qualified as an Art Therapist back in 1976, I feel that I have a certain responsibility as a holder of memories associated with the profession and its practices that goes back 45 years. Shortly after qualifying I was employed to work in a large Psychiatric hospital, a former Victorian Asylum, that was divided into 2 parts, on one side of the main road there was a hospital for the Mentally Ill, on the other side, another for those, who at that time, were referred to as the Mentally subnormal.

I saw patients from both sides of the road, and it was not uncommon for some patients to be moved from one side or the other depending on their presenting behaviour and diagnosis. During those times we sometimes referred to Art Therapy Departments, and I certainly did in respect to my own, within such institutions as 'Asylums within asylums', offering our patients an alternative creative sanctuary within the Institution. This kind of 'space' is an example of what the Philosopher Micheal Foucault termed, Heterotopias – places functioning in non-hegemonic conditions that are simultaneously physical and psychological, an attempt to create an imaginary utopia*.

Today, I still sense that we continue with the temptation to consider our professions and practices to be somehow '*Alternative*', that our uniqueness means that we fall outside of the dominant paradigm when it comes to research and that we are still something new and 'emerging'. Certainly, we are distinctive, alternative, eccentric, different, dynamic, and determined but I do not consider that still emerging but are now emerged and evolving. So, I ask myself, are we still building Heterotopias, and if so, is it because it is we, as much as our clients, that require the shelter that such places promise?

*Micheal Foucault (1984) 'Of Other Spaces' (Des espaces autres) (in) Architecture, Movement, Continuite. 5 : 46-49.

Surely now is the time to cease dwelling on the past and to prepare for the future. Jordan B. Peterson, the Canadian Psychologist and Author, on presenting an analysis of the Isis & Osiris myth (The Story of Osiris, Seth, Isis and Horus)*⁽¹⁾ suggests that one thing that the myth teaches us that it is through an understanding of your past that you discover your true self and only then can you fully plan for your future*⁽²⁾. In respect to that past, and returning to that question, posed earlier, considering whether the Arts Therapies were born out of Trauma, I turn again to that pamphlet thrust into my hands in Vilnius in 2009. Among his conclusions, Dr Sapoka includes:

5. An experience of World War II and the movement of existentialism impels us to reconsider many basic truths of psychiatry, psychology and even aesthetics. The movement of humanistic psychology and anti-psychiatry highlights these mistakes and impasses, encouraging the institutional emancipation of psychiatry. *The latter applies to psychotherapeutic practices which try to refer to artistic expression and which put an emphasis on the creative freedom of man and the curative effect of art.* (p. 28)

This statement places our development within an historic context, that time of World War II and afterwards, the so-called Cold War period. Those recent traumatic periods of history are part of our history and that is why the memory, our memory, of that history is so important. ECArTE began as a small collective of Western European partners, but it has grown and continues to grow and flourish, more recently accepting partners from Eastern Europe and beyond. As it grows it needs to incorporate and value the memories, histories and traditions of its increasingly international identity in order to better know itself.

*⁽¹⁾ Jordan B. Peterson. Tells an Old Story About Gods (Youtube)

<https://www.youtube.com/watch?v=F3n5q...>

*⁽²⁾ Jordan B. Peterson (1999) Maps of Meaning: The Architecture of Belief. Routledge.

*⁽³⁾ Article: The Baltic Times (2015) 07.20.

One way to achieve this might be through conducting historical research – for example, what do we really know about the early development of Art Therapy in Lithuania during the so-called ‘Soviet-times’? Returning to the story of the ‘Green Bridge’ in Vilnius and the removal of the Soviet era statues, it was argued that the statues represented ‘big lies about the Soviet system’*(3), and this was one of the reasons for their removal. But in so doing, was it also a removal of memory?

You may have noted that throughout my rhetoric concerning research, science and evidence I have not relied on any of those things in making my arguments. On the contrary, I have relied on Myth and Metaphor rather than scientific evidence throughout. Peterson also has something to say about this:

Myth is *not* primitive proto-science. It is a qualitatively different phenomenon. Science might be considered “descriptions of the world with regard to those aspects that are consensually apprehensible” or “specification of the most effective mode of reaching an end (given a defined end)”. Myth can be more accurately regarded as “descriptions of the world as it *signifies (for action)*”. The Mythic universe is a place to *act*, not a place to *perceive*. Myth describes things in terms of their unique or shared affective valence, their value, their motivational significance. *(2) p. 20.

So what I take from this in respect to today's themes, is that Science selects, through consensus, those aspects of the world that it wishes to measure and define. Those listed aspects, in turn, form the variables to be measured, in, for example, Random Control Trials of therapeutic interventions. If there is no consensus in respect to the therapeutic intervention, it seeks to construct one, and it is this construction that forms the basis of the ‘Manual’, that is, the *Manulization* of the therapeutic intervention. This consensually agreed manualized intervention can now be measured in order to arrive at the “*specification of the most effective mode of reaching an end*” – the end being the most effective form of therapy.

*Jordan B. Peterson (1999) Maps of Meaning: the Architecture of Belief. Routledge

This is because the very process of manualization effectively removes “*the unique or shared affective valence, value, and motivational significance*” of the original intervention.

But we can see that there are so many problems with this formulation – that the process of manualization potentially robs the intervention of its potency, is not least among these.

But as I have already shared with you through Dr. Sapoka’s thesis, and as he says, we Arts Therapists are very successful at “*combining various and often contradictory theoretical opinions, methodological approaches and practical methods*”. So perhaps this is one of the challenges we now need to face.

CONCLUSIONS

So, of course we, the Arts Therapies, were born out of trauma, for how can any form of Therapy, not be born out of trauma? With trauma we often have an association with repression and dis-ease, one being the symptom of the other. As a therapy also born out of creativity, we also strive ‘re-member’ that however ill a client might be – they were once well and that at least a remnant of the wellness must remain. A therapy based around an understanding of the creative-process must recognise and appeal-to, and reach-out to, the *well-part* of the client rather than focusing on the psychopathology and attempting to treat it. In proving space for expression let us prize the expression of that wellness rather than dwelling on the diagnosis-focused expression of the traumatic events that triggered the dis-ease.

We know that Psychiatric diagnosis can also be seen as a form of dismemberment – the cutting-up and reducing of the person to a strict series of symptoms that collectively result in a new identity – that of the disease. Over the years, I have heard stories about former patients, who, after receiving Art Therapy, were able to abandon their former identity as a psychiatric patient for a new one – that of Artist. This is testament to how radical and transformative our practices can be.

It is these factors that define us – that we use our creativity to try to counter injustices and inequalities experienced by the people we treat by making changes to society through our work – by empowering clients who then go on to become potential agents for social change.

Both personal and collective memories contribute to the formation of identity. Over historical time we leave behind fragments imbued with traces of such memories. What is history if not the study, analysis and understanding of artifacts from the past. Each object, be it a document, work of art, or shard of broken crockery, is like a fragment of memory from the past and it is through trying to piece together all these elements that historians give us a picture, a glimpse, into that past. When, some time in the future, historians sift through the fragments that we leave behind, they will, no doubt, form a picture of a group of professions, the Arts Therapies, that managed to create a curious, contradictory eclecticism, based as much on ancient myth as it was on modern science. That it placed a high value on intuition and based its practices on creativity and by so doing, placed an equally high value on the intrinsic creativity of the patients and clients that it worked with.

Finish