

ATOL: Art Therapy OnLine

Shifting terrains: Art psychotherapists' testimonies and reflections on employment in austerity Britain

**Emma MacKinnon, Alice Myles, Kristina Page, Taiseer Shelhi,
Jill Westwood.**

Abstract

This article considers the experiences of four recently qualified art psychotherapists as they move from training into work. It highlights the issues encountered and reflects the shifting field of employment as austerity Britain bites into public services and shapes possibilities. Creative testimonies of four women art psychotherapists are presented in collaboration with a woman art psychotherapy educator. Various themes are identified which include; the emotional experiences of change and transition, finding support beyond the training, seeking employment, the social and political implications of volunteering and self-employment, gender, race, adaptations of practise, sustaining core principles and values and finding ways to meet these experiences. These voices and views have relevance for newly qualified art psychotherapists, trainees, educators and other relevant professionals as they raise awareness of the issues, offer creative responses and suggest ways to meet and counter these challenges.

Keywords: art psychotherapy, employment, training, gender, race, art-responses

Introduction

This article arose from an initiative in the MA Art Psychotherapy at Goldsmiths, University of London to include the experiences of graduates as

part of the curriculum in order to raise awareness of the employment field and to prepare trainees for the realities of the transition to employment. The shift towards the marketization of higher education has led to a growing preoccupation with the economics of training experiences and as such, intensified the relationship to trainees' job prospects on graduation. As an educator and first author of this paper, I wondered how graduates were faring after training and what employment was being found or created? In 2014 I contacted some of our graduates with an invitation to be part of a 'Graduate Employment Landscape' session to all the students. This was well received with some students reporting it was "one of the most valuable and compelling sessions of the training". Similarly, the presenters found it clarifying to return and reflect back on their experiences to the current cohort of trainees. Through hearing each other's accounts they felt it sharpened their focus on the issues and challenges they were facing. This article has evolved from the second year of this panel session held in May 2015 which involved eight graduates - three male and five female, from recent years, making brief presentations on their experiences since completing the training.

All contributors to the panel session in May 2015 were invited to participate and four responded. Following this we five (four female graduates and one female educator) entered into a process of writing, image-making and discussion based on what each had presented at the panel session. We then shared and discussed this material alongside reviewing relevant literature to inform our discussions. We took a qualitative, collaborative, and exploratory approach with the aim to open up meanings and create insights from our experiences. We foregrounded the use of visual and imaginative explorations. These formed a collection of creative testimonies that gave rise to identifying themes.

It is relevant to note that, since 2010 the British Government has implemented an austerity agenda. This has involved a series of sustained cuts in public spending with the aim to reduce the budget deficit and welfare spending. This has caused a significant decline in employment in the public sector and a move towards irreversible and ever greater privatization of public services and

consequently an impact on the employment opportunities for art psychotherapists.

A review of some relevant literature and theory is provided. This is followed by four vignettes of the presenters. Then a response is given by the educator. These accounts have led us to collectively identify relevant themes to open up the issues and debates relevant to the training and employment of art psychotherapists. They take a creative form and a commentary has been collectively woven from these pieces in a summarising conclusion.

Background

The development of art psychotherapy as a profession in the UK has been considered by authors such as Waller (1991); Waller and Gilroy (1992); Edwards (1989, 2014); Wood (1997); Hogan (2001, 2009), Karkou (1999) and Karkou and Sanderson (2006). Their work has traced its evolution and discussed relevant historical, social-political, cultural and theoretical influences. In various ways they have considered the employment field and the experiences of newly qualified art psychotherapists. During the period 1980-2009 this literature charted the establishment of this relatively small, specialised, therapeutic profession located mainly in the public sector, where the trainings have also largely been situated. This has been in contrast to the emergence and development of psychotherapy, which is practiced predominantly in the private sector (Edwards 2014). More recently Wood (2011) Huet (2012) and Westwood (2010, 2012, 2015) have reflected on the neo-liberal political agendas that have created an increasingly market-driven context for art psychotherapists in the public sector, including higher education, that have eroded the resources for the intersubjective, relational work of art psychotherapy services and the training of art psychotherapists. Furthermore, several surveys reviewing the employment trends of art psychotherapists have also shown a change from opportunities in the public sector towards self-employment, education and the voluntary/third sectors (BAAT 2014; Case and Dalley, 2006). A survey of newly qualified Art Therapists showed trends towards self-employment and on increasingly

temporary, multiple and voluntary contracts (BAAT 2015). This shifting professional context provides background for these testimonies.

In the process of collaborating we identified some shared influences and perspectives that have shaped our approach to creating this piece, significantly the psychodynamic theories of Winnicott (1971) and Bion (1961), the philosophical view of Deleuze and Guttari (1988), theories of feminism and race (Butler 1990; hooks 1984; Sajnani 2012; Sajnani & Kaplan 2012) and intersubjectivity (Skaife 2001).

Our thinking reflects the importance of play and concepts of potential space and transitional objects and phenomena (Winnicott 1971) as well as the function of containment within the therapeutic relationship and group systems theory (Bion 1959, 1961). The views of Deleuze and Guttari assisted us in considering our experiences and ideas from a post structural perspective to explore our unfolding discussions and open up multiple meanings. In this process we encountered the theme of gender. We found it useful to view this as a socially constructed experience that becomes scripted and performed (Butler 1990), and also to take a radical feminist critique of systems of oppression extending into the intersecting areas of race, gender and class (hooks 1984). Flowing from this the contribution of art psychotherapists Sajnani (2012) and Sajnani and Kaplan (2012) are relevant in raising questions from a critical, race, feminist perspective about social action and social justice, in training and practice and the ways dynamics are reproduced. Drawing on Butler (1990) and hooks (1984), whose work engages with the way race and gender function in structuring social inequality, we recognised we too are seeking to develop this kind of critical stance along with the use of image-making in this process. Therefore, we also found it relevant to include the notion of intersubjectivity as a way of understanding shared experiences. Skaife (2008) has provided thinking about intersubjectivity in relation to art psychotherapy; how the use of art media corresponds to understanding ourselves and others in an interactive dynamic process of becoming. These points of reference along with comments on bureaucracy by Graeber (2015), reflections on interiority, becoming, and transition by Waddell (2002), offer a

background to the following creative testimonies of newly qualified art psychotherapists and an educator on the topic of employment.

Testimonies

Vignette 1: Kristina, graduated in 2012. At the time of the presentation this was 3 years after graduation

Employment landscape; experience since graduation, Volunteer work:
Practical advice

I will start with my context, which informs the route I have taken. I am a single parent, (4 children) and I chose to prioritise working within school hours for at least two or three days per week (so part time, and short days). I also have issues with interviews, and therefore have not applied for many jobs. The ones I have applied for are the ones I have built plenty of experience for. I am consistently torn between making art (artist identity) and working (art psychotherapist identity).

In order to gain the work I wanted, with a client group I had no experience of working with in an art therapy context, (adults with mental health, addiction, and homeless), and with the understanding there was little work being advertised, all of which demanded previous experience, I started to work as a volunteer. When I first graduated I saw volunteering as a 'free experiential learning space', with the aim of building a CV and confidence towards getting paid work in this area.

My relationship with volunteering has been varied; I have worked in six different places volunteering, one of which (Studio Upstairs) has gone on to become a paid job. Some of the volunteer posts had not been advertised, I had simply gone into a place and offered art therapy as a pilot project to see if it was suitable for the client group in that particular environment, and if there was a possibility of applying for funding later (none of these ever gained funding). I did manage to gain funding through a proposal to co-create an

open art studio working with people who experienced brain injury, this was in conjunction with the Kings Trust and involved community funding. The art studio was not supported by the NHS team that we worked alongside and did not manage to continue after the fund ended.

I realised that it is best to start with a time limit on the voluntary work; and to bear in mind that you will be creating relationships with the people you are working with and that can make it feel difficult to leave. Ensure you have good communication with the setting and staff...this has been an area where things have or have not worked out so well and was a big learning curve for me. Be clear in your proposal as to what it is you are intending to provide, especially if you are setting up from scratch. Ensure supervision is provided, or funded. All this can feel like solitary work and keeping in touch with peers is vital; a lot can be learned by sharing experiences. Special Interest Groups (SIGs) can be used as a helpful resource in this way.

Open studio environment and making art with the client: Reflective thinking

I have found I have mostly been in art therapy group situations, in community or hostel based places, where holding the dynamics of art therapy has been challenging. I was recently asked to be more 'directive and chirpy', when running a group in the kitchen/dining room of a hostel. I feel I have sometimes trod the line between art therapy, open studio art therapy, and arts in health.

I have always made art within the open studio groups; the art therapist identity that I had in placement, where everything seemed very definite, slowly has become more flexible with many grey areas. In my most recent post as art psychotherapist I have individual clients and a slow open group, and art making is not part of my job remit. In my presentation I included one artwork in progress, as it seemed to me that at the time I was making it I was feeling overwhelmed with too many people that I felt responsibility towards (Figure 1, Bottled People).

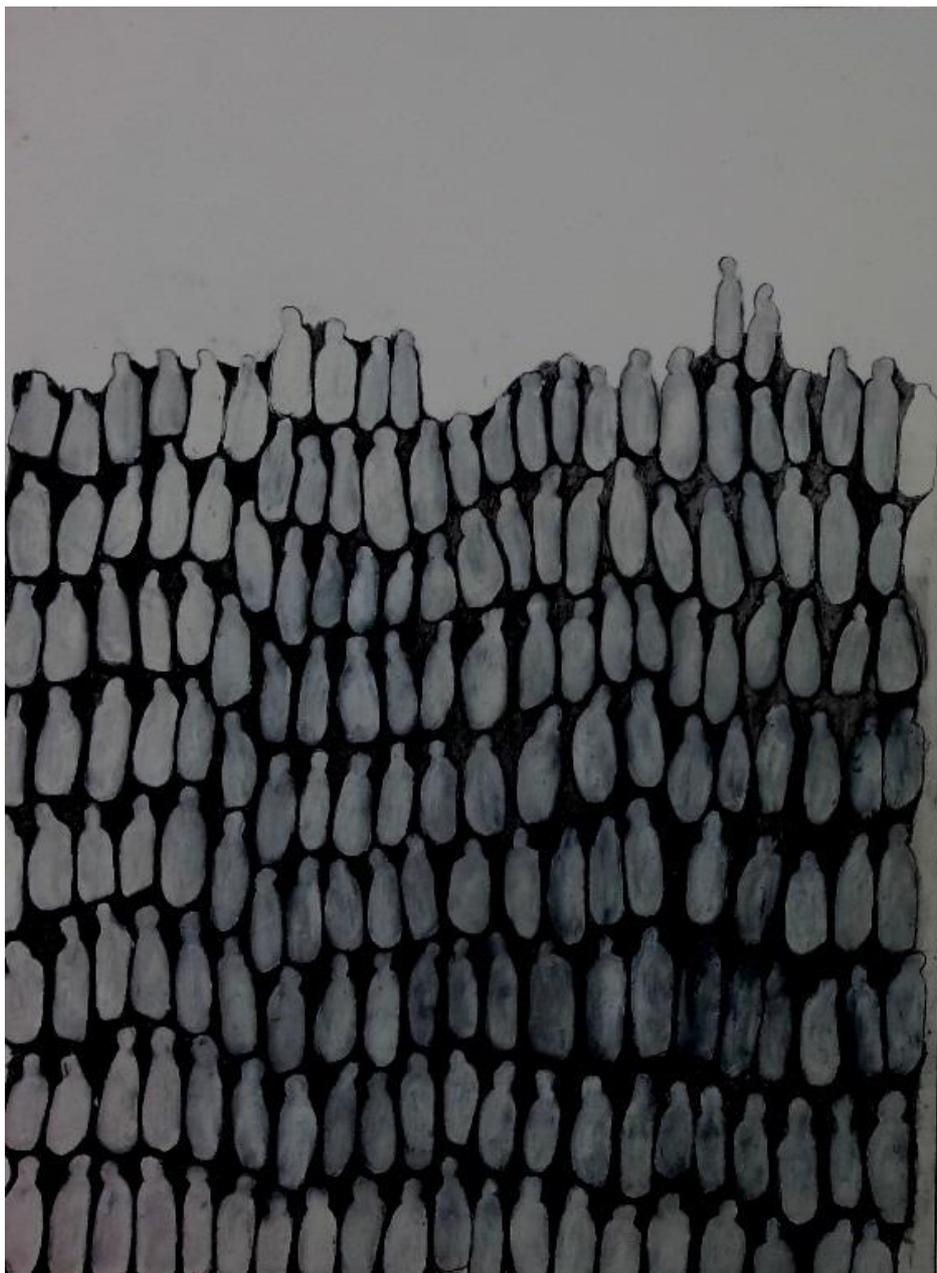


Figure 1. Bottled People. Oil bar and graphite. 60 x 40cm part of a triptych (2015) Kristina Page.

I try to maintain two guidelines within all my work places, I do not offer information about myself unless asked directly and I feel it would be unhelpful to refuse, particularly in this client group. And I try to write process notes at the end of a session, as difficult feelings can be held unnecessarily if I do not take time to reflect. Supervision is provided in the places I work, except in my voluntary job, where I am clear that I am providing the opportunity to make art, but not provide art therapy.

I now work as an art therapist in two places, and as an arts facilitator in two more, one of which is voluntary. I also supervise students on placement, and maintain my own art practice in a shared art studio. My aim is to set up a private practice, possibly working in groups.

Vignette 2: Taiseer, graduated in 2014. At the time of the presentation this was 9 months after graduation

“A man in a desert can hold absence in his cupped hands knowing it is something that feeds him more than water” (The English Patient, Ondaatje 1992:155)

When I was invited by the Convener of the MA Art Psychotherapy course to speak at the employment landscape post-graduation event; my pleasure at being asked was tainted with feelings of shame and anxiety. I did not have a job, so what kind of example would I be setting to the roomful of fresh-faced trainee art psychotherapists? It was easy to think that my unemployed state was the result of some internal deficiency on my part, rather than the external reality faced by the majority in a society in the grip of recession (Nesbett 2015).

This is a brief description of my presentation including the images and themes I touched upon. I opened with a photograph of the desert (Figure 2). This was the first image that came to my mind, in response to the title of the event. This photograph prompted laughter from the audience of art psychotherapy students. I wonder if there was recognition on their part of the scarcity of employment opportunities available after graduation? I chose a photograph of the Libyan Desert, to reflect my heritage. I grew up in Tripoli, Libya, in a dual heritage family. When I started my art therapy training I was struck by the apparent lack of diversity among the students, I think this might apply to all therapeutic trainings. The photograph is not the usual image of undulating sand dunes. The horizon line creates a boundary between the sky and earth bisecting the picture plane. There is a sense of potential. The image of the desert in this context does not symbolise emptiness and bareness. It is an

image of a space that holds the promise of possibilities, while at the same time expressing a sense of limitation.



Figure 2. Desert, photograph.

<http://www.pbase.com/bmcmorrow/sudanlibyandesert&page=all>

Retrieved, 9 May 2015.

This is also true of the second image in the presentation (Figure 3), *Portrait of Space* by Lee Miller. A photograph of the Egyptian desert in 1937, taken when she was married to an Egyptian and living in Cairo. Lee Miller had many incarnations in her lifetime, fashion model, then photographer, surrealist muse and artist, war photographer and journalist.

This is one of my favourite art works. There is a sense of inner and outer space melding and flowing into one another. The tear in the tent fabric in the foreground, frames the desert landscape in the background. In her essay on Lee Miller, *Apertures on Egypt: Lee Miller's Nomadic Surrealism*, Patricia Allmer, explores Miller's method of working, through the analysis of her piece *Portrait of Space*. Allmer considers the focus of Miller's art as the mapping of "nomadic" spaces. "Miller's art explores and focuses on the breakdown of monolithic structures and the emergence from this breakdown of alternative

formations, opening up and revealing new, potentially nomadic spaces” (Allmer 2013: 3).



Figure 3. Lee Miller, Portrait of Space, Near Siwa, Egypt (1937), Gelatin silver print, 37 x 26.2 cm.

This photograph is a metaphor to frame my experience as a newly qualified art psychotherapist. In my training and practice, both as an art psychotherapist and as an artist, my personal experience informed my work. I came to the training as a mature student, holding two cultures; the themes of home, identity and plurality resonated with me. I am both ‘inside’ and ‘outside’. I wonder if the current economic climate favours flexibility and finding peripatetic ways of working?

When I started my training my dream was to work in the National Health Service (NHS). To illustrate this ideal work role, I included a screen shot of a NHS careers website in my presentation (Figure 4). The image of the young white woman used on the web page on Art Therapists is an apt illustration of the homogeneity of the profession. The situation is not improved with the increase in student's fees and with newly qualified art psychotherapists competing against each other for what seems like an ever-diminishing number of jobs. This has led to many graduates accepting honorary and voluntary positions.

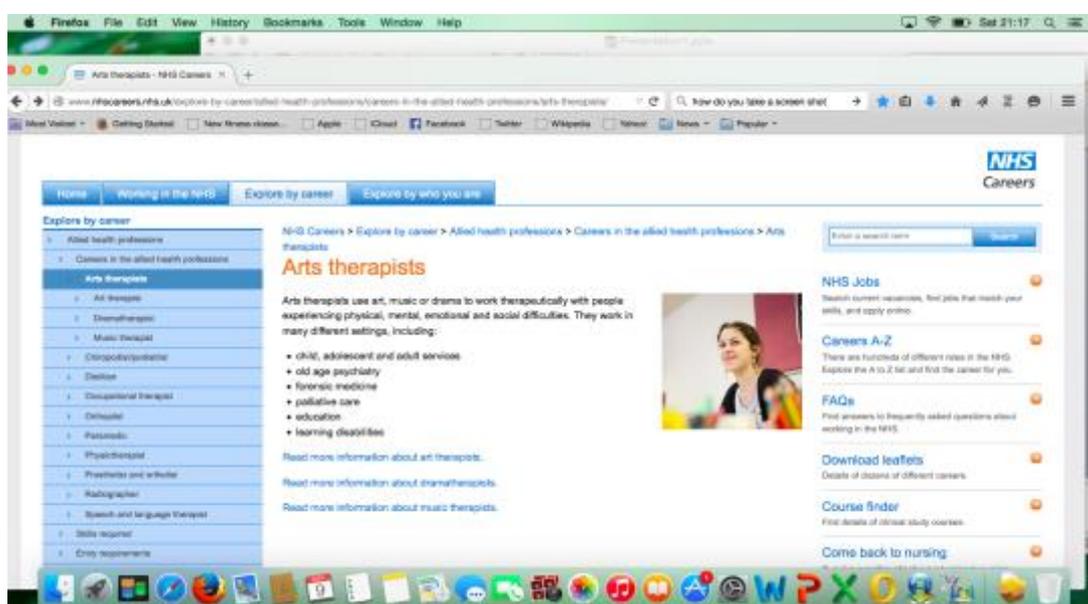


Figure 4. Screen shot of NHS website, 9 May 2015.

My final placement was in a forensic unit in inner London. High fences encircled the hospital site, and I had to negotiate multiple locked doors, to move from one location to another. The soundtrack of keys jangling against my alarm clock accompanied my every step. The creative arts therapy team at the time consisted of five white, middle class women. The forensic patients on the unit were predominantly male and black or minority ethnic. The team met every two weeks and a multidisciplinary approach was encouraged. As much as I enjoyed this placement, as an outsider I could see the effects of budget cuts. It seemed to me that the staff were often overworked and felt marginalised and undervalued by management. I felt sometimes management

needs took precedence over patient's needs and, importantly in a forensic context, staff needs.

I continued with personal therapy after graduation, this provided a secure base for me while I dealt with the ending of the placement and the MA course and processed the loss. I had hoped to move from one kind of institutional containment provided by the university to another provided by work. I reflected on my dream of working in the NHS, and my need to be contained by an institution. In my therapy I explored whether this might be related to my search for the ideal family.



Figure 5. Richard Billingham, Untitled (RAL 11) 1994
Fuji long-life colour print on aluminium, 80 x 120 cm.

The dream of the ideal NHS family in reality can often turn out to be the nightmare of a dysfunctional family, as the ideal family is always a fantasy. To illustrate the idea of the dysfunctional family in my presentation, I chose photographs from Richard Billingham's series *Ray's a Laugh* (Figures 5 and 6).



Figure 6. Richard Billingham, Untitled (RAL 28) 1994
Fuji long-life colour print on aluminium, 105 x 158 cm.

I ended my presentation with advice to students to apply early to NHS Trusts if they were interested in honorary contracts, to maintain contact with their peers and to make use of the British Association of Art Therapists' Special Interest Groups and Continuing Professional Development courses.

It was a sobering experience to enter the college as a former student. I stood in a lecture hall as a qualified Art Psychotherapist in front of rows of trainees, seated where I once sat. I enjoyed listening to my fellow graduate's experience of the art therapy employment landscape. I felt that each of us gave a unique perspective, although particular themes ran through all the presentations.

A few months after I gave this presentation I applied for the role of clinical practitioner in psychotherapy, at a NHS non-residential therapeutic community in inner London. I was not shortlisted. After the role was re-advertised for the third time, I contacted the centre and arranged a meeting with the service manager. When I reapplied for the position I had a clearer idea of what the

role entailed and what qualities, skills and experience to highlight on my application form. At the subsequent interview I felt calm because the worse had already happened, I'd applied before, failed and survived the experience. I got the job, and since December 2015 I have worked at the therapeutic community. My job is challenging, varied and interesting. The client group I work with have a diagnosis of Borderline Personality Disorder, they are often ostracised by society and in some cases by the medical professionals they encounter. My work is in outreach; I act as the bridge between the therapeutic community and the wider community. The service manager described my role as "inside outside, outside inside". His words resonated with me. I felt as if they were both a description of how I experience the world at times, and my understanding of the function of art psychotherapy.

Vignette 3: Emma, graduated in 2014. At the time of the presentation this was 9 months after graduation

HR and HRT: On age, institutions and art therapy

I am 55, Sigmund Freud and yes my brain is still plastic. Made in China. I'm caught between the 'launching' of my big bright grown up children and the fade to grey of my parents. I notice a change in my energies and priorities. I've worked in institutions with rigid hierarchies. In museums and schools. I've commuted for years. I've juggled - been to burnout and back. Seen adolescent mental health from every angle imaginable. Just about kept my family dysfunctionally intact... Been the hub. The go to person. Fallen apart at the seams. Been sewn back together and sewn others back together...I feel so well qualified I could (and do) cry!

As graduates we share a sense of being part of a wider group or "extended family" in that we've stayed connected to the Goldsmith Art Psychotherapy course and staff. I realise from 'someunconsciousthings' (Freud Museum 2015), an exhibition by tutors on the Goldsmiths MA Art Psychotherapy programme, at the Freud Museum, London, that the staff themselves are grouping in solidarity (albeit as a fairly dysfunctional family), beavering away to maintain a creative stance within an organisation that like most others is

trying to survive the impossible Kafkaesque template of backwards looking bureaucracy imposed upon it.

I mourn the life of the children's charity Kids Company because it tried to resist that template.

Being underemployed has allowed me to catch up on 20 years of sleep deprivation and now I've never felt so awake.

Honesty, objectivity, resilience, humour, compassion, creativity, aliveness...once more unto the breach.

I ring up the NHS and speak to a venerable therapist who's been there 30 years: "I'm afraid that we wouldn't, on this occasion be looking for an HCPC registered art therapist", she says kindly.

But actually I don't want targets and a line manager and performance related pay. Or a package or a pension or a puffed-up person specification. I've done all that.

In the words of Morrissey: "I was looking for a job, then I found a job, and heaven knows I'm miserable now" (The Smiths 1984).

Who even knows who Morrissey is these days?

Life is short and "How you spend your days, is of course, how you spend your life." (Dillard 1989). All my careers and jobs have been valid in their own right, but I've grown out of each, changed and moved on. Art therapy feels like something that would utilise the life skills built over the years, would change with me, which I would never grow out of, and would be meaningful. I can make it anything I want. I could be old and do it in a shed. I welcome the opportunity for reflection and a way of facilitating art therapy that isn't form filling in a wipe-clean room with beige industrial carpeting and a box of felt tips.

I want to be part of the solution.

Oh how I wish. I wish I could be an art therapist - just click your heels together 3 times and say "Giz a job. I know you've got one..."

Who even knows who Yosser Hughes¹ is these days? (Bleasdale 1982)

I can't believe students are now called 'customers'. Customers and Clients. Napoleon you were right. We are a nation of shopkeepers.

For now, I'm back to a former incarnation as a Textile Conservator, currently conserving Tibetan Thangkas. Once again sewing things back together that have fallen apart at the seams... It is a privilege to contemplate such objects. I am a coordinator of the BAAT museums and galleries special interest group and yay, I have an MA... Somehow these activities should all link, but they move apart. Speeding up like the universe expanding.

I sit at home pairing up socks, listening to 1970's rock classics, and watching too much news on TV. "I saw some ordinary slaughter and some routine atrocity..." (Cave 2004)

The teenager in me emerges. I hear her voice in this writing...

This period of transition resembles a reverse version of adolescence. I wonder if I am employable? I still have some of the uncertainties of a 17 year old, but they are tempered by hindsight and experience. (Waddell 2002)

Meanwhile I am beginning to parent my parents. To whom old age is new.

I can't face another online job application...my eyes hurt. The words won't fit in the box. What did I learn at college? I'm losing the language to describe myself (Graeber 2015).

¹ Yosser Hughes is an unemployed father of three. A fictional central character from the acclaimed early 1980's BBC drama 'Boys From The Blackstuff', a study of Northern England's grim socio-economic climate at that time. Yosser's catch phrase was "Giz a job". This fell in to common usage and is still recognised today by British people of a certain age.

Ditch the computer and get out the paints...

These hours have a sublime quality. They cannot be measured. Nor wasted.
I exist in this landscape with a journey behind and before me.

They are crying out for therapists. You know. I could do that.

Mum... hey mum. Have you got a job yet????



Figure 7. You can colour this in but it won't be art therapy 2015 Emma MacKinnon

In November 2015 I was catapulted into a newly created University pastoral role where I hope to send out suitably rhizomic shoots – and avoid being eaten by dragons.

Vignette 4: Alice, graduated in 2014. At the time of the presentation this was nine months after graduation

Employment Landscapes – Self-Employment in Adult Mental Health

The following is a short discursive development of the presentation I gave at the Employment Landscapes event. My intention for the presentation was to try to slightly lift the veil from self-employment as an arrangement for working as an art therapist.

I graduated from the art psychotherapy MA into the stark light of 2014 employment policy. The end of the training and my unemployed status produced feelings of anxiety, guilt and shame, which played silent internal accompaniments to the realities of facing current UK Coalition government drives to move individuals off the unemployment register into self-employment and business start-up schemes.

Around this time, I had an opportunity for some voluntary work with the possibility of payment in the charity sector. Perhaps it is a sign of the times that the charity, which provides accommodation and support to homeless adults, was immediately reframed by my job centre advisor as a niche market place.

The BAAT publication *Guidelines for Undertaking Self-Employed Practice as an HCPC Registered Art Therapist* states 'Many newly qualified art therapists will start their working life as self-employed sessional workers and this is how they will build their work portfolio and their experience.' (BAAT 2014: 3) I wonder how many may share my experience of having to scrape around for work with people often in extreme states of deprivation themselves. Setting up an art psychotherapy service for a project that provides support for homeless adults with mental health difficulties, I was working with some of the poorest and most marginalized people in the country. I found supervision was vital for balancing the inevitable tension between trying to make my own living and the countertransference desire to provide a free lunch. It felt like, in essence, we were all in the gutter.

At table, there are perhaps ethical dilemmas surrounding payment, which may be most poignant for newly qualified art therapists as there is more willingness to take unpaid work in order to build experience. However, I believe questions regarding the relation between ethics and payment need to be asked within

the broader political landscape, the framework of the market place and employment structures in which health professionals and their clients operate. The ways in which we are paid (or not) for our work may silently impact on the therapeutic frame and the therapeutic relationship.

Following an 8-week voluntary pilot, I was paid to provide an open art therapy session for the project by the charity. This served a dual function of providing a therapeutic service for difficult to engage individuals as well as an assessment for more extensive individual work. In finding funding for the latter, I met new orphans of Coalition NHS healthcare reform: Personal Budgets and Direct Payments.

Owens (2012) discusses the implications for the quality of intimacy in professional-patient relationships of personalization, noting that its emphasis on choice, convenience and independence may introduce transactional norms more typically found in commercial activities into the care process subjecting patients and professionals to a form of commodification. He considers the growth of a supply and demand model in health care observing its tendency 'to cast the professional as the provider of a resource to be selected and used according to the patient's advantage rather than a partner engaged in caring for them' (Owens 2012: 27).

In practice, seeking funding for art psychotherapy sessional work through government healthcare direct payments found me on a heart-stopping journey running down the middle of the road after a prospective client to the local NHS offices, her apparent disregard for oncoming traffic diverted only with the comment that she was just going the most direct route. How an individual interacts with a resource may of course tell us about transference or elucidate their individual mental health symptoms. However, following Owens' considerations I was left wondering about my own feeling of being a mental health commodity flash sale in a market which finds individual and broader social and political libidinal investments crashing in what might be described as 'perversion of care' (Risq 2012). Discussing some of the political

motivations of personalization in NHS healthcare reform, Owens emphasizes the principle of co-production:

‘advocates of personalization stress the need to create an environment in which patients are actively involved in “co-producing” better health outcomes rather than passively relying on medical professionals to deliver it for them’ (Owens 2012: 23).

Being open on the subject of therapeutic outcomes can be necessary to obtain funding for sessional work. Although the project I work for prefer not to administer any formalized measurement of outcomes, I am aware this will be required by many organizations. I have wondered about my sense of distaste and feeling that the articulation of potential outcomes may be little more than a tongue slip to the unfathomable. Perhaps what is hard to swallow is their necessary inclusion in a form of sales pitch. However, when we speak about outcomes we are generally speaking about something desirable, but often what is less considered is for whom they might be desirable, be it the individual in therapy, the therapist, policy makers or society at large. I believe this question falls necessarily to a deeper exploration of ethics of practice in relation to outcomes. Perkins and Slade (2012), describe new approaches to the individualization of therapeutic outcomes, where participants select outcome domains from a list, which are then linked with standardized clinical outcome measures. However, this bears the assumption that what can be named as a desirable outcome of a therapeutic intervention can be satisfied through an inherently unpredictable process.

These thoughts have also arisen perhaps with my time of entry into the profession, where there is a growing engagement with the findings of neuroscience and movement to align with natural sciences, which contrasts with the more psychodynamically informed training. I have found it has become increasingly attractive to make reference to the brain when trying to describe (or sell) art therapy.

My response to the above concerns has been to search for theoretical frameworks that might somehow get to the heart of the matter. I have found the Lacanian framework useful in its consideration of science, knowledge and the status of the subject within the parameters of ethics and psychoanalytic praxis. Glynos writes:

‘The modern scientific enterprise, for Lacan, is characterized by its tendency to exclude or “suture” the subject, a subject which, ...he conceives as split between truth and knowledge, and as intimately linked to questions of ethics ... (which is) conceived as the function of the subject’s truth in desire’ (Glynos 2002 in Glynos and Stavrakakis 2002: 52).

Lacan conceptualizes this constitutive division of the subject using a topological model of the Möbius strip, or continuous figure of eight: ‘This strip conveys the fact that the division in which these two terms come together is not to be derived from a difference in origin’ (Lacan 1966: 731). Elsewhere, this division is considered in terms of fundamental alienation, ‘science elides, eludes, divides up a field determined in the dialectic of the alienation of the subject’ (Lacan 1981: 264). So it is not so much that the art therapeutic encounter eludes a scientific outcome based approach, but more that this eludes the subject.

I believe the implications of this are how we situate the people we work with in relation to art therapy outcomes and knowledge base. The Lacanian framework suggests that the individual in therapy is bound in a relation of subordination, through which they are at origin pre-nuptially compelled, whilst at the same time internally divorced or excluded by the outcomes therapeutic interventions are predicted to produce. The challenge is perhaps how we hold onto the ethical dimension of our work when faced with mounting external pressures from political agendas during austerity.

The reality is government measures are making it harder and harder to become a practitioner in art therapy. Here I have considered, through

personal experience, the impact on employment structures, payment, ethics and outcomes. Consumerist morality as motif runs through the tensions and ambiguities I described between desire and disgust, employment and exploitation, co-production and procreative dead-ends; a euphemized fellatio or fallaciousness, which where unrecognized continues its procession down a blind alley.

I included the following picture in my presentation:



Figure 8. 'To insane-pace-nomadic' (2015) Plastic bags, skewer, biro. Alice Myles.

A rose from ancient plastic bags and a skewer, I considered the blurring of categories of treasure and trash embedded in poverty, and the seeds of a fragile creativity I witness in the people I work with. I think it also suggests gratitude, romantic ideals, pain and what is at stake. We may be on the margins (or in the gutter), but we are not on our knees.

At the time of writing, I continue to work as a self-employed art psychotherapist in the adult mental health charity sector and am soon to start an honorary NHS position in Forensic Mental Health.

Response to vignettes: Jill, Art Psychotherapy Educator

Rhizoid resistance melts neoliberal glacier

As an educator I feel empathy for the graduates and an awkward uneasy guilt for being part of a professional system that puts them in this position. I wince at the painful struggles revealed in these testimonies while marveling at their virtuosity, resourceful brilliance and tenacity. I am impressed by their presentations, what they have learned and the potential they have to make an impact in society. I think they have the capacity to provide a vital response to the situation and employers should be eager to engage them. What they make visible in these accounts illuminates their thinking and resourceful strategies, responses and resistances to the prevailing social and political agendas and discourses. Figure 9 is a way of reflecting on this collaboration and gaining a perspective on the issues encountered. It is an assemblage construction made inside a shoebox. The metaphors of the desert, creeping glaciers, rhizome hardiness to take root in hostile conditions and nomadic groupings are present. It speaks of my experience as an educator to provide enough of the necessary resources to enable students to survive and thrive. Not only to meet the required proficiencies but more importantly to develop an inner core of political, critical awareness, creative response and ethical values; and to have the capacity to use and hold these, under pressure. Perhaps this collaboration is an act of solidarity to mitigate against the forces that divide? A way to manage my own responses to the differences I feel in my position within this group.

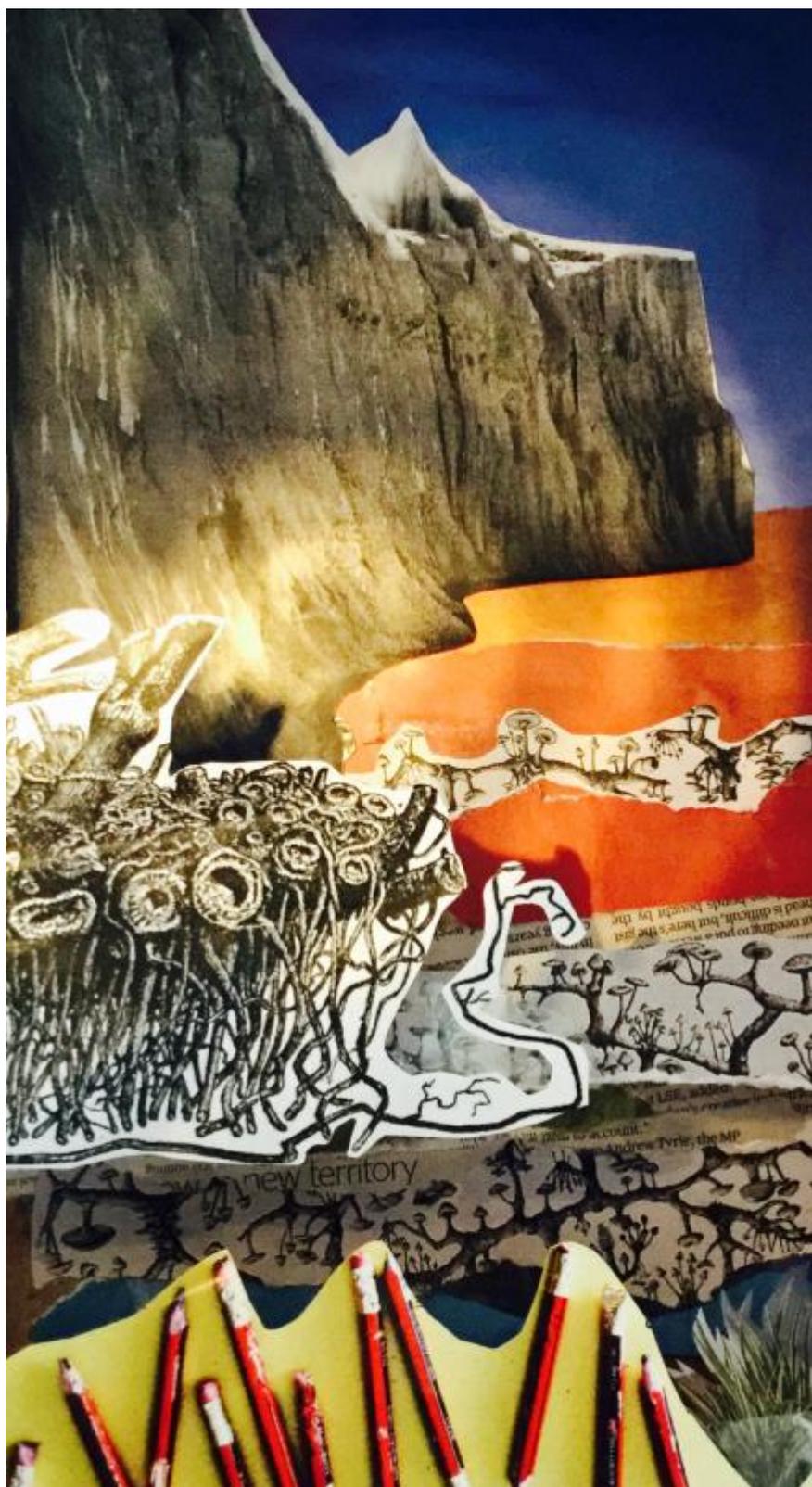


Figure 9. Rhizoid resistance melts neoliberal glacier. (2015) Mixed media, 30x18x10cm. Jill Westwood.

Reflections and themes

These accounts bring to awareness several themes facing the individual, newly qualified, art psychotherapist and the profession at this time. These include; the personal effects of change, the need for continuing professional support and development, the search for employment and the process of adaptation and survival in the spaces and opportunities available or created. They also reveal some deeper encounters with the dynamics of gender, race and other social, ethical, ideological and philosophical issues.

Navigating between the individual personal process and the social and political implications is complex. On a personal level the transition from training to employment can be significant where a range of emotions associated with change and loss are encountered. The process of ending the training, the loss of a holding and containing institutional community and a need to sustain and or transfer these functions to another group or system was shown. Being aware and prepared for these potentially intense feelings was indicated and to give attention to the process of ending the training. In this transitional phase, celebrating the achievement and finding ways to maintain relationships were all discussed as helpful. Maintaining connections with a peer group, continuing therapy, establishing supervision, making use of university careers services, engaging in further training, belonging to BAAT and a special interest group (SIG) were all seen as useful ways to support us as individuals. This concurs with Edwards (1989) who drew similar conclusions when considering the impact on recently qualified art psychotherapists moving away from the nurturing environment provided by training courses into the realities of survival in large public institutions. But now these public institutions are operating on shifting underlying ideological principles and gaining employment within these settings has changed significantly.

The issue of competition amongst peers for these kinds of public sector positions was recognised as potentially arduous, painful and difficult. Dynamics of anxiety, shame and guilt arise in these accounts and ripple from the personal to the professional, social and political spheres. This theme of

shame in the profession was discussed by Read-Johnson (1994). Read-Johnson suggested that through recognising this culture of shame and taking a more conscious, collective approach that our progress as a professional group might be empowered, but now, we need to do so with a more critical lens on the social, political context and the discourses of ethics, gender and race that are brought to bear in these encounters.

It is evident the terrain of employment as an art psychotherapist in public services such as the NHS has been eroded by the government austerity agenda and opportunities in this arena are diminishing. Finding work as an art psychotherapist takes tenacity and graduates are often positioned into taking honorary contracts and working without pay in voluntary capacities or in small fractional, sessional employment, under different non-art therapy job titles with fragile stability or little security. This is a difficult, demoralising experience bordering on exploitation. In these positions there are further layers of challenge; to hold onto the ethical dimensions, and, the hard fought ground of the principles of therapeutic practice in practical and philosophical ways. This is where questions arise about adapting practices and the why and how of these adaptations. The issue of clarity about what boundaries or approaches are important to hold on to and why, can hinge on having sufficient space and support to think about the implications around these experiences. It seems vital to find ways to keep alive thinking about the principles and values you believe are important when faced with these realities.

Protecting the space to continue to keep thinking through art making is indicated in these testimonies. The place of an artist identity and the essence of inter-subjectivity in the therapeutic encounter are guiding principles. Continuing these dialogues contribute to keeping thinking and theorising about these experience in our minds, to help us, collectively navigate the terrain and raise consciousness about the ethical, social-political dynamics we are living and working within and being shaped by. Our images hold myriad themes and concerns like threads in a thickly woven, unfolding fabric; many individual hand drawn containers growing across the pages, open desert space, an historically framed photographic viewpoint, a screenshot of the

NHS website, curious documentary-like dysfunctional family photos, a real life scene of an art psychotherapist, a rose made of discarded materials, and an assemblage where rhizomes find traction in the face of a creeping glacier. We recognise we are in a process of becoming as we make and share these interweaving images.

In this process we asked ourselves how is race and gender reflected in these testimonies? All the voices are of women, several are mothers, they reflect a range of ages although most are mature, they have different life/work/education experiences and social circumstances. One testimony reflects coming from Libya and encountering feelings of being different and foreign. The others are not so openly identified. What does this show? Hidden white privilege? Where are other issues such as sexuality, class, faith, ability and political views located? We suggest the feminist movement refrain 'the personal is political' echoes in these voices – a discontent in response to the structures that exploit and oppress. Education that includes a critical encounter with race, gender, social, political and cultural contexts has never been more needed. This is the field of intersectional theory, where social identities and systems of oppression overlap. Training courses might heed these signs and respond with greater awareness in preparing trainees for this transitional phase and consider what continuing professional development forums would best meet the needs of newly qualified art psychotherapists. There may also be thorny ethical questions to face related to the financially driven higher education context where increasing student numbers and particularly international students becomes a way to survive.

Winnicott's idea of potential space, to hold open a place of play, to meet the challenges and realities of finding work, has relevance. However, perhaps, 'potential space' does not adequately capture the attitude of resistance running through these accounts? Do we find ourselves embroiled in the myth of the hero/heroine/innovator, with the idea that you can produce, by training a knight/warrior in shining armour who, loins girded with beliefs will assault the organizational fortress and introduce changes both in herself/himself and others at a stroke? Such a view is ingenuous. The fact is that organizations

such as schools and hospitals will, like dragons, eat hero/heroine innovators for breakfast (Georgiades and Phillimore 1975: p 315, in Edwards 1989: p 168).

As employment structures change so in turn does the nature of the beast, calling for fresh blood or new theoretical avenues to fuel a reflexive and responsive practice. Deleuze and Guattari, authors of companion volumes *Anti-Oedipus* and *A Thousand Plateaus*, which together make up *Capitalism and Schizophrenia*, continue in the anti-psychiatry veins of Laing and Foucault providing what they term an *assemblage* or post-structuralist toolbox of interventions drawn from psychoanalysis and philosophy, which challenge authoritarian hegemony through micro and macro politics of resistance. The personal and the political are in constant flux through relations of interiority and exteriority, territorialization and deterritorialization. Territories, terrains or potential space are rendered fluid through the actions of thought, a nomadic war-machine of resistance or desiring production, which destabilizes or deterritorializes the limits of power structures themselves (Deleuze and Guattari 1988)

These voices reflect the struggle and adversity of the newly qualified art psychotherapist seeking employment. They reveal a reality of choosing a career in a sector where humanity is on its edges and vulnerability is positioned as inevitably something to be commoditised and politicized. Perhaps it is through mapping these 'nomadic spaces' we might find, even fleetingly, a sustaining place of belonging, occupying an earlier alternative space, like the anti-psychiatry movement, where art therapy as a profession first emerged, one that challenges the dominant discourses of marketization and dehumanisation in these shifting terrains, recognising there is a lived experience of struggle on both sides of the therapeutic/training encounter. We might progress this through our relationship with art and by engaging with a critical, ethically aware, feminist, race viewpoint and taking up a position of solidarity and resistance.

Author biographies

Emma MacKinnon, MA, HCPC Art Psychotherapist, London, UK.

A fine art degree and travel fed an interest in anthropology and ethnographic textiles. After training and working as a textile conservator, Emma moved to school special needs support, and graduated from Goldsmiths MA Art Psychotherapy in 2014. She has worked with asylum seekers, young people and the homeless of South London and is currently in a university pastoral role. Interests include the evolution and demystification of art therapy.

Alice Myles, MA, HCPC Art Psychotherapist, London, UK.

Alice Myles graduated from Goldsmiths MA Art Psychotherapy in 2014. She works as a freelance art psychotherapist in adult mental health, arts in health practitioner, and honorary art psychotherapist in forensic mental health, NHS. From a background in psychology and philosophy, her current research interests include aesthetics and the gaze in pre-oedipal disturbance and ethics of therapeutic intervention.

Kristina Page, MA, HCPC Art Psychotherapist, London, UK.

Kristina worked as a choreographer and performer before graduating from Goldsmiths MA Art Psychotherapy in 2012. Since then she has become co-director of Artapp, a group of exhibiting artists/art psychotherapists, who work interactively as visual artists. She works as an art psychotherapist at the Claremont project and is studio manager at Studio Upstairs. She is part of Second Floor Studio Arts where she continues her own art practice.

Taiseer Shelhi, MA, HCPC Art Psychotherapist, East London Foundation Trust. UK.

Taiseer is a HCPC registered Art Psychotherapist and Clinical Practitioner in Psychotherapy at Unity House Therapeutic Community and Outreach, East London Foundation Trust. From a background in architecture and fine art she worked in community adult mental health before training as an art psychotherapist at Goldsmiths. Her interests include memory, identity, cultural appropriation and the tension between the personal and the political.

Jill Westwood, PhD, HCPC Art Psychotherapist, Goldsmiths, University of London, UK.

Jill is a HCPC registered Art Psychotherapist and Programme Convenor of the MA Art Psychotherapy, Goldsmiths. From a background in fine art she has worked as an art psychotherapist in adult psychiatry (NHS) and in art therapy education, including a period in Australia 1995-2008. Her research interests encompass art therapy education, the transformative potential of art in relationships and art based approaches.

References

Allmer, P. (2013), *Apertures on Egypt: Lee Miller's Nomadic Surrealism*. Available at <http://ir.uiowa.edu/dadasur/vol19/iss1>

Billingham, R. (1994), *Ray's a Laugh* (RAL). Available at http://www.saatchigallery.com/artists/richard_billingham.htm

Bion, W. (1959), Attacks on linking. *International Journal of Psycho-Analysis*, 40 (5-6), 308.

Bion, W. (1961), *Experiences in groups and other papers*, London: Tavistock.

Bleasdale, A. (1982), *Boys from the black stuff*. BBC Play for Today.

Bowie, D. (1972), *Suffragette City: The rise and fall of Ziggy Stardust and the Spiders from Mars*. Producer Ken Scott. RCA records.

British Association of Art Therapists (2014), *Guidelines for Undertaking Self-Employed Practice as an HCPC Registered Art Therapist*.

British Association of Art Therapists (2016). Newly Qualified 2015 Survey <http://www.baat.org/Assets/Docs/General/Newly%20Qualified%202015%20survey.pdf>. Accessed 6 Oct 2016.

Brown, C., Catchpole, K., Cavaliero, A., Kagiafa, D., Martyn, J., Morris, L., Rimmer, L., Rudnik, S., Skaife, S., Tipple, R., Velada, D. and Westwood, J. (2015), 'someunconsciousthings', collaborative artwork as part of the exhibition 'Festival of the Unconscious – The Unconscious Revisited' 24 June-4 Oct. Freud Museum, 20 Maresfield Gardens, London NW3 5SX.

Butler, J. (1990), *Gender trouble: Feminism and the subversion of identity*. New York, NY: Routledge.

Case, C. and Dalley, T. (2006), *The handbook of art therapy*, Hove, East Sussex, UK: Routledge.

Cave, N. (2004), *Nature Boy*. Abattoir Blues. Mute Records.

Deleuze, G. and Guattari, F. (1988), *A Thousand Plateaus. Capitalism and Schizophrenia*, London: The Athlone Press.

Dillard, A. (1989), *The Writing Life*. New York: Harper Collins.

Edwards, D. (1989) Five years on: Further thoughts on the issue of surviving as an art therapist, in A. Gilroy and T. Dalley (eds.) *Pictures at an exhibition*, London and New York: Tavistock, Routledge.

Edwards, D. (2014), 2nd Edition. *Art therapy*, London, Sage.

Glynos, J. & Stavrakakis, Y. (2002). *Lacan and Science*. London: Karnac.

Graeber, D. (2015), *The Utopia of Rules*, London and New York: Melville House.

Hogan, S. (2001), *Healing arts: The history of art therapy*, London, UK: Jessica Kingsley.

Hogan, S. (2009), 'The art therapy continuum: A useful tool for envisaging the diversity of practice in British art therapy', *International Journal of Art Therapy: Inscape*, 14: 1, pp. 29-37.

hooks, bell. (1984), *Feminist theory: From margin to center*, Boston, MA: South End Press.

Huet, V. (2012), Creativity in a cold climate: Art therapy-based organisational consultancy within public healthcare, *International Journal of Art Therapy, Inscape*, 17: 1, pp. 25-33.

Karkou, V. (1999), Art therapy in education findings from a nationwide survey in arts therapies, *Inscape*, 4:2, pp. 62-70.

Karkou, V., and Sanderson, P. (2006), *Arts therapies: A research based map of the field*, London, UK: Elsevier, Churchill, Livingstone.

Lacan, J. (1966), Science and Truth, in J. Lacan (2006), *Ecrits: The first complete edition in English / Jacques Lacan*; translated by Bruce Fink in collaboration with Heloise Fink and Russell Grigg. London and New York: W.W. Norton & Company

Lacan, J. (1981), *The Four Fundamental Concepts of Psychoanalysis*, London and New York: W.W. Norton & Company.

Miller, L. (1937), *Portrait of Space*, The J Paul Getty Museum.

Nesbett, R. (2015), *The mistake we all make and the simple experiment that reveals it*. Available at:

<http://www.theguardian.com/science/2015/aug/09/world-in-context-mindware-tools-for-sharp-thinking>

Ondaatje, M. (1992), *The English Patient*, Toronto: Random House.

Owens, J. (2012), Creating an impersonal NHS? Personalization, choice and the erosion of intimacy, *Health Expectations* 18, pp. 22-31.

Perkins, R. and Slade, M (2012), Recovery in England: Transforming statutory services? *International Review of Psychiatry* 24: 1, pp. 29-39.

Read Johnson, D. (1994), Shame dynamics among creative arts therapists. In *The Arts in Psychotherapy*, 21:3, pp. 173-178.

Risq, R. (2012), The perversion of care: Psychological therapies in a time of IAPT, *Psychodynamic Practice* 18:3, pp. 7-24.

Sajnani, N. and Kaplan, F. (2012), Editorial, The creative arts therapies and social justice: A conversation between the editors of this special issue, *The Arts in Psychotherapy* 39, pp. 165-167.

Sajnani, N. (2012), Response/ability: Imagining a critical race feminist paradigm for the creative arts therapies, *The Arts in Psychotherapy* 39, pp. 186-191.

Skaife, S. (2001), Making Visible: Art therapy and intersubjectivity, *Inscape* 6:2, pp. 40-50.

The Smiths. (1984), *Heaven Knows I'm Miserable Now*. A Hatful of Hollow. Rough Trade.

Waddell, M. (2002), *Inside Lives*, London: Karnac.

Waller, D. (1991), *Becoming a profession: The history of art therapy in Britain 1940-1982*, London: Tavistock, Routledge.

Waller, D. and Gilroy, A. (1992), *Art therapy: A handbook*, Buckingham, Philadelphia, Open University Press.

Westwood, J. (2010), *Hybrid Creatures: Mapping the emerging shape of art therapy education in Australia. PhD thesis*, University of Western Sydney, Australia.

<http://researchdirect.uws.edu.au/islandora/object/uws%3A11151/datastream/PDF/view>

Westwood, J. (2012), *Hybrid Creatures: Mapping the emerging shape of art therapy education in Australia, including reflections on New Zealand and Singapore*, *The Australian & New Zealand Journal of Art Therapy* 7:1, pp. 15-25.

Westwood, J. (2015), *Art therapy in Great Britain*, in D. Gussack, and M. Rosal, (eds), *The Wiley Blackwell handbook of art therapy*. USA: Wiley Blackwell.

Winnicott, D. (1971), *Playing and reality*. London, UK: Tavistock.

Wood, C. (1997), *The history of art therapy and psychosis (1938-1995)*, in K. Killick and J. Schaverien (eds.), *Art, psychotherapy and psychosis*, London, UK: Routledge.

Wood, C. (2011), *The evolution of art therapy in relation to psychosis and poverty*, in A. Gilroy (ed.), *Art therapy research in practice*, Bern, Switzerland: Peter Lang.