

Art Therapy Exhibitions: Participants, Interests, Priorities

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Even though there are many contrasts between conventional art exhibitions and art-therapy exhibitions, the main difference is based on the therapeutic intention of the latter. The public that attends art therapy exhibitions is diverse and its participation illustrates the importance of the therapeutic intention.

The different populations involved in art therapy exhibitions, such as artists/patients, families, art therapists, galleries, and the public in general, play an important role in empowering the artists/patients. By having clarity about the influence of each one of these participants and about the show's curatorial elements, the therapeutic intention of art therapy exhibitions may be fine-tuned to benefit the artists/patients. Art-therapy exhibitions educate the public about the profession and can help the public revise its personal values related to mental health.

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Introduction

Finding the differences between art therapy exhibitions and conventional art exhibitions can be challenging, especially when comparing the two types of displays inside traditional art settings. The Colombian Art Therapy Association presents annual exhibitions at a gallery that promotes both types of expositions during its yearly

schedule. The gallery initiates all exhibitions with an inauguration that welcomes diverse populations interested in the career and work of artists. However, the contrasts between the two types of expositions become discernible when the purposes, goals, themes and audiences of each type of exhibit are analyzed. The intentions of promoters and exhibitors mark the biggest difference between the two types of exhibitions. Increasing the number of art therapy exhibitions can collaborate with the development of art therapy in Colombia and can amplify the public's disposition for examining personal values related to mental health.

Contrasts: Art Therapy Exhibits and Conventional Art Exhibits

The conventional artist is usually sensitized to a particular topic of political, social, cultural and /or personal interest. The artist proposes a new perspective about the topic through a dialogue with the public. For the artist, artworks are usually ends onto themselves. Respectively, when intending to exhibit at a gallery, artists go through filters that evaluate their thematic and aesthetic experience, plus the commercial potential of their work.

The person who creates in an art therapy environment, by contrast, uses art resources, imagery and the creative encounter to go through a transformational process that aims at well-being. Images produced in art therapy processes belong to people who do not necessarily call themselves "artists" nor enjoy careers in the art field. Their focus is not

on aesthetics, composition, technique, artistic/manual skill, nor on the artistic parameters of the moment. The experiences themselves prevail in art therapy, as do the intimate processes developed between creator and material, between individuals and between conscious and unconscious psychological contents.

The primary difference between both types of exhibitions rests on the therapeutic intention of art therapy shows. This intention must permeate all of the logistic and curatorial decisions made throughout an art therapy exhibit. Each potential decision has a metaphorical possibility that can affect all of the participants. Even the parameter for choosing art therapy exhibitors must be therapeutic in nature. Edith Kramer's concept of the 'third hand' (1986), gains a central importance when planning an art therapy exhibition. The 'third hand' refers to the way in which art therapists make verbal and non-verbal decisions to favor therapeutic relationships and objectives: With good planning exhibits can be used as extensions of the therapeutic relationship, just as images in art therapy are understood as symbolic extensions of the clients. As art therapist Bruce Moon (2000) underlines, during an art therapy exhibit the ethical "obligation [of art therapists is] to protect clients and artwork" (p. 67).

Historical Context

In 1922 Hans Prinzhorn, psychiatrist and art historian, published "Artistry of the Mentally Ill," a book that collects over 6,000 artworks created by patients inside European mental asylums. The book and part of the collection toured Europe making an impact on the community and on artists like Paul Klee, Max Ernst and Jean Dubuffet who found the use of color and the uninhibited expressions of the images full of emotion (Spaniol, 1990). The collection was first exhibited in the United States in 1985. It generated a movement that recognized the art work created by people with mental illness as a branch of American art.

Today there are galleries and museums specialized in broadcasting and marketing such art. As an example, the Mexican artist Martin Ramírez has been acknowledged by the New York Times as one of the greatest artists of the 20th century. Martinez suffered from schizophrenia during the last 30 years of his life and thus created a lot of his work in a

mental institution. His work has been exhibited at Moor College of Art and Design in Philadelphia, at the Museum of Folk Art in New York, and at the Milwaukee Art Museum (Parker-Pope, 2008).

The work of art therapist Judith Raskin Rosenthal offers another punctual example. She works with clients of The Bridge Inc., an organization that provides services for people who face mental illness, addiction or homelessness. This art therapist encourages her clients to create pieces inspired by art within the museum of Modern Art in New York (Mc Gee & Raskin Rosenthal, 2009). The clients' pieces are later exhibited at the Lewis B. and Dorothy Cullman Education and Research Building.

Artists, gallery managers, art therapist and patients inquire whether art therapy exhibitions benefit clients' processes and if they challenge communities' stereotypes and prejudices regarding mental illness. The gallery in London, Together Our Space, presented a show called 'Healing Mind: Art Therapy and the Body'. This exhibit displayed artworks created by art therapy clients facing recurrent or terminal fiscal illness. In reference to these types of exhibits, Val Huet, chief executive of the British Association of Art Therapy (BAAT), affirmed that exhibiting artworks benefits clients, since "...It gives them a feeling of empowerment as they are being treated as artists doing something, rather than patients having something done to them" (cited in Good, 2009).

American art therapist Susan Spaniol (1990) describes three principles to have in mind when showcasing the work of people with mental difficulties: *opportunity*, *safety* and *empowerment*. With *Opportunity* she refers to a positive redefinition of identity that clients can have by participating in the exhibition. *Safety* concerns the care and attention needed to assure a positive experience for artists and public during the display: this includes the handling of confidentiality, informed consents and ethics. *Empowerment* is the most important aspect for Spaniol, since art therapy exhibits can restore power to those who have lost it and can provide an opportunity for creating and maintaining support systems.

Spaniol (1990) brings to light additional themes to consider during art therapy exhibits. The use of language is

crucial when confronting prejudice (Spaniol, 1990). Therefore, the title of the exhibition and the way of referring to the artists must be carefully resolved, as should be selecting the art pieces. Concern for the confidentiality of the artists, while simultaneously allowing artist to openly share their work if they wish to do so, is also important. Spaniol (1990) proposes developing strategies to allow clients to manage information. As an example, she presents the following illustration: During an inauguration, the artists who wanted to identify themselves did so with a golden sticker, ensuring the privacy of those who were not comfortable sharing in front of the press. Finally, Spaniol (1990) stresses the importance of having constant feedback from patients.

With regard to individual therapeutic goals, Thompson (2009) suggests that the intimate work created during art therapy sessions finds a way of expression within the gallery. Presenting in a gallery promotes introspection and a commitment to develop a full body of work. Such commitment allows the work created to gain value and meaning, as it becomes part of the continuum of the artistic process (Thompson, 2009).

Art therapy history and research show that the integration of the gallery into art therapy processes is beneficial for the artist/patient and for the community, provided that conscious and careful decision-making is left in the hands of the artist/patient and not in the hands of the gallery or curator.

Public Attendance an Art Therapy Exhibits

As illustrated by the historical context, many questions arise before, during and after mounting an art therapy exhibition. What is the purpose of the exhibition? What are the criteria for choosing the art work? How are the pieces for exhibition created? Where and how should the works be mounted? What information should appear in the title cards? How should the art therapist be included? How should interventions be made during the process? Who makes these decisions? To find answers to these questions, we must answer one central question: Who is an art therapy exhibition for?

The Profession

Art therapy exhibitions carry an informational component that promotes and disseminates the profession. These shows offer the Colombian Association of Art Therapy an opportunity for transmitting its mission and for responding to informational requests. By illustrating and documenting the processes that take place during individual and group therapy sessions, people can clarify what determines an art therapy process. The first exhibit of the Association aimed at introducing art therapy to the biggest number of interested people. The second exhibit, which this article centers around, responded to the needs of the second year of operation of the Association. Two main objectives were established: the first was to continue defining the profession in Colombia; the second was to strengthen the sense of belonging among members of the Association. The show was titled "Creating Community through Art Therapy".



Active members of the Association received an invitation to participate in the exhibit under three possible categories. Two of the categories required clearly identifiable treatment goals, in either individual or group formats. The third category summoned projects outside the parameters of art therapy, in which art had been useful for the welfare of the community. These projects helped clarify and define the different roles that art can play within inter-personal processes. As a pedagogical strategy, various therapeutic approaches were illustrated. Additionally, the presented pieces evidenced the wide range of age groups, mental or physical diagnoses and creative and cognitive functions that this field can address.

Artists/Patients

If the main focus of an art therapy exhibit is to support the therapeutic development of its exhibitors (artists/patients), all of the framing elements must ensure the solicited objective. The artistic nature of a show invites participants to re-signify themselves as creators of personal pieces and to receive artistic recognition. This helps them surpass self-concepts as clients with difficulties (Block, Harris & Laing, 2005). Simultaneously, in order to choose pieces to exhibit, clients must review their processes (Hanes, 2001). The means of selecting pieces to exhibit can highlight the importance of personal development.

The public can deduce that the exhibitors at art therapy displays receive therapeutic assistance. Awareness is therefore asked for even if the difficulties that artists/patients share during consultation are not directly exposed. Artists/patients need to understand that by publicly showing their work, their art will be subjected to a variety of reactions coming from the multiple tastes of the public. When planning to exhibit, it is important for the artists/patients and for the art therapists to ask pertinent questions and reach conscious agreements. What benefit will the act of displaying provide for the artists/patients? How comfortable does the artist/patient feel about showing his/her work? Is exhibiting convenient or counterproductive for the process? Moon (2000) proposes that art images can be understood as participants with personal identities, who can be actively asked if they want to be publicly exhibited. What benefit will the image acquire by being mounted and perceived by guests? These questions must to be supplemented with others, in accordance to the needs and treatment goals of each individual. The relevance of the questions above is seen in the following two cases presented by art therapist Natalia Gomez.

Strengthening the decision-making process

Ana (age eleven) was referred to art therapy services. She was presenting high levels of anxiety manifested in difficulties with sleep and school performance. During art therapy sessions, she actively participated and showed a capacity for artistic expressions. The satisfaction that Ana

derived from her artistic work contrasted with an anxiety produced by her ongoing critical evaluation of it. The art therapy objectives centered on identifying and managing the issues that contributed to Ana's anxiety and in helping her grieve her parents' separation. During the divorce, Ana had had few opportunities for making decisions. Consistent with the therapeutic goals and the characteristics of the client, art therapist Natalia Gomez invited Ana to participate in the show with the intention of evaluating how Ana was managing her anxiety and empowering her through decision-making.

The first decision that Ana took was to participate in the exhibition. To facilitate her process, the characteristics and differences between traditional art exhibitions and art therapy shows were explained. After a slow process, Ana made her second set of decisions: she selected three art pieces that she felt proud to present. These symbolized a welcomed shift from self-criticism towards self-acceptance. The first piece chosen, a doll, represented both an 'ideal Ana' as well as 'current Ana'.



The second piece, a frog-shaped hat, explored Ana's relationship with her mother, who nicknamed her "Rana" (translates as frog) since her childhood. Her last choice, a series of 3D mandalas, had allowed her to make multiple decisions through the use of materials, colors and forms. With this selection, the art-therapist was able to affirm Ana's ability for self-regulation and containment.

As part of the steps towards *empowerment* Ana was given freedom to choose whom she wanted to invite to the gallery.

She invited all of her family and her best friend. However, she only attended with her father and friend. It was a surprise for Ana's father to see her work. His pride was evident. Her friend shared news about the exhibition in school, helping change Ana's reputation as a "student with difficulties" into a status of a "talented artist".

After the inauguration, Ana and her art therapist discussed how the importance of being seen and appreciated had for the artist/patient. She had enjoyed having her work being valued by different people at the show. After the afternoon at the gallery, the need of strengthening the bond between daughter and father was recognized. Spending quality time together was identified as more important than seeing each other daily: Ana's father thus began to share one afternoon a week with her daughter, instead of leaving her at the school bus every morning. On the other hand, Ana was experiencing difficulty in having to share her mom with two half brothers. The exhibition demonstrated the absence of Ana's mother and allowed Ana to communicate to her mother the pain that this caused her. Ana's participation in the show affirmed the achievements gained within art therapy and allowed an evaluation of her family relationships. It was beneficial for Ana to participate in the show.

Options along the process

The second case presented broadens the scene. It demonstrates the importance of carefully analyzing the benefits and risks of displaying pieces originated within art therapy sessions. Mates, age 25, began an art therapy process with Natalia Gomez to process and manage the mental health history present in her mother's side of the family. Mate's therapeutic process reflected a commitment to personal wellbeing. Her art pieces were authentic and original and her creative process flowed freely.

After a year into therapy, the opportunity to participate in the show "Creating Community through Art Therapy" arose. The interest and expectations that the opportunity presented were discussed in therapy. Mate decided to participate in order to share her positive beliefs around healing wounds.

She created a specific art piece to exhibit with found materials, or *ready-made objects*. Through an ample variety of materials, the piece showed the artists internal complexity. Mate displayed her usual behavior during the creative process: enjoyment, introspection and integration of new *insights*. When finished, Mate titled her piece, chose a stage name and expressed excitement about participating in the exhibit. Mate attended the opening with friends.

Although it was difficult for Mate to talk about her experience at the gallery, her emotions were evident throughout the exhibition. It was not easy to define the therapeutic benefit that the exhibition offered her. During subsequent art therapy meetings Mate expressed feeling vulnerable as strangers witnessed her. She felt mixed emotions ranging from pride to shame when she viewed her piece at the gallery. It was concluded that Mate's art examines intimate and private aspects and although she had created a specific piece to publicly show, she felt vulnerable.

In the future, it may be favorable to offer Mate additional opportunities to define her participation. Choices can be offered throughout the creation and completion of the piece, during the set up of the work in the gallery, and at any time during the exhibition. Asking her to personify and directly talk to the art piece (Moon, 2000) before exhibiting them, could clarify additional risks and advantages with anticipation.

The Families

Going to the show is not always enriching or easy for clients; there are those who may feel dazed by the amount of people present or too exposed in the public's eyes. However, families and friends can benefit from seeing the significant creations of loved ones.

As an example we present Pablo's mother. At the time of the show, Pablo was a 15-year-old artist/patient with autism. During 9 months he attended weekly art therapy sessions supplemented with music and bodywork. The main objective of the art therapy process was to help Pablo participate in and enjoy different experiences that could enrich his weekly routine.

For the exhibition, María Reyes, his art therapist, chose three pieces that brought to light important moments of the therapeutic process. The first piece was a sculpture created with wooden segments and other foreign construction materials for Pablo. The second piece was composed of six white masks mounted on black cardboard, each identifying a different emotion through strong feature representations. The third piece was made during the final weeks of the therapeutic encounter. In a life size silhouette (see picture below), Pablo highlighted the most present parts of his body, as well as those body parts that felt less familiar to him.



The three art-pieces represented moments in which Pablo had deviated from his usual behavior. Instead of relating to predetermined forms, through the mentioned pieces Pablo expressed personal inventiveness, with no points of reference to copy from. Through the pieces he conveyed emotion and bonded with his art therapist, he symbolized body awareness, and he ventured into contact with unknown materials and situations, all of which represented great challenges for Pablo.

The importance of the artwork produced during sessions was obvious for Pablo and for his art therapist. However, Pablo's mother needed to attend the exhibition in order to grasp and measure the worth of her son's artistic creations. It was at the gallery when she understood that the art therapy sessions' transcended artistic craftsmanship: art therapy addressed Pablo's emotional world by facilitating a bond between him, the art materials and the therapist. In a conversation at the gallery between Pablo's mother, his art

therapist and his pediatrician, it was concluded that the behavioral achievements gained in therapy were mirrored in Pablo's artistic work. A wider richness and freedom could be seen in Pablo's drawings, through his use of color, form, and interaction with new undertakings. The framed and mounted presentation of the pieces, plus the conversation about the therapeutic meaning of each art-piece, allowed the mother to re-signify her son's artwork.

At the same time, the show offered Pablo's mother an opportunity to share her personal experience as the mother of an autistic child; the content of the art pieces reaffirmed what she felt as she shared with Pablo through his developmental process. Pablo's mother had the chance to listen to the public commenting about her son's work. She saw how the pieces generated reflections and emotions. She expressed that this was comforting and empowering for her. She was also able to articulate some of the challenges that she routinely faced: she identified a lack of supportive spaces for people with autism and she acknowledges the difficulty that many experience when relating to people with the diagnosis. She felt recognized, listened to and a sense of inclusion.

Pablo's mother demonstrated how family members play a crucial role in the healing process of the artist/patients. In similar cases, where the artist/patient needs support understanding his or her consent to participate in exhibitions, (Autism, Alzheimer, Dementia, etc.) it is important to work closely with family members. To prevent overwhelming the artist/patient, Pablo did not attend the opening with his mother. However, it was concluded that it could be interesting for Pablo to see his exhibited pieces, during one of the galleries less concurred moments.

The Art Therapist

Art therapists have personal and professional interests during an art therapy exhibition. As will be seen shortly, a show can facilitate the professional role of the art therapist. Exhibits also provide informational spaces where people can communicate and share different aspects about the intimate and often isolated day-to-day work that art therapists engage in.

Exhibits as extensions of sessions

By revealing the way in which artists/patients share their pieces inside the gallery, exhibitions provide clues about the interactions that they have with others outside the therapy room. As Ana's case clearly illustrates, a show can facilitate the diagnosis of situations surrounding clients. Exhibits can also support treatment objectives such as raising confidence in personal style, promoting self-reference, or benefiting from others recognition. In this way, the gallery becomes an additional space in which treatment plans can be strengthened.

Sharing the professional identity

Exhibitions provide a space for therapists to share their work with different members of the community. For ethical reasons, art therapists do not publicly talk about what happens inside sessions. Given the non-verbal component of the profession, it is difficult to people outside the discipline what art therapists do. Many art therapists invite family members and friends to exhibitions, hoping that through the show, they can communicate an idea of what art therapists do, where such attention and time commitment can be evidenced. Some art therapists expect the exhibition to demonstrate the bonds that they share with artists/patients, their effectiveness in reaching treatment goals, their capacity to offer visual answers and to facilitate creative processes. The artists/patients and their art pieces present and confirm the intangible work of their art therapists.

Identity as artists

An art exhibit exalts the artistic identity of art therapy even when this is not its sole purpose. This exhibit did not intend to show the artwork of art therapists unless if it educated others about an aspect of the profession, or complemented the artwork of an artist/patient. The pieces in this category were originated with the purpose of analyzing countertransference, facilitating affective processes, and/or serving as therapeutic responses.

The following case illustrates how an art piece displayed during the exhibition "Creating Community Through Art Therapy", informed the public about the importance of art therapy supervision. The artwork that art therapist Andree

Salom showed was initiated during a supervision group she attended weekly. This group aims at establishing a supportive community of peers that reinforces ethical and efficient practices. With this objective in mind, six art therapists take turns leading sessions using different theoretical approaches. One of the tasks, to which the group devoted two sessions, consisted of building personal boxes that unified the supervision processes undertaken thus far. Art therapists were invited to review their previously created art pieces and incorporate them into a box, those that addressed themes of professional identity, obstacles, teachings and personal necessities that affected professional work.



The art therapist continued working on her box outside of the supervision group and added a second one. When exhibiting them, she completed a cycle of individual work that had started within a community and was later reinserted into the community. At the inauguration, the boxes incited conversations about professional supervision and in addition (and unexpectedly), about the artistic assemblage of the pieces. In the effort to reaffirm the clinical validity of the profession and to use art as a tool for psychological processes, the artistic identity of the art therapist had faded. The conversations of a few visitors led to an appreciation of her pieces as artistic objects that included, but were not limited to the therapeutic process. This added value to the meaning that the art therapist had imparted on the boxes; Andree expressed that this experience was useful for recognizing her artistic identity and her creative needs in addition to her role as a therapist. Without the feedback from the visitors who were not therapists, the art therapist would not have the present awareness needed to attend to these artistic needs.

From the previous case, which illustrates the importance of the artistic development of art therapists, two general benefits for clients emerge: on the one hand, clients may receive better technical assistance and a greater range of metaphorical resources if the art therapist attends to personal artistic development; and on the other hand, if the art therapist pays attention to his/her artistic desires outside of consultation, there are less possibilities for these personal needs to interfere with the creative processes of the clients, in the form of aesthetic advice or excessive assistance during art production.

The Gallery

Art galleries can benefit from art therapy exhibitions although it is generally thought that these kinds of exhibits do not represent significant sales. These exhibits summon new circles of people and widen the services and activities of galleries. By welcoming new audiences, the gallery can divulge its facilities, its exhibition schedule and the work of artists on display.

Along the trajectory of “La Galeria Espresso del Arte”, this gallery has been aware of the educational role of art. The gallery wants people to benefit from acquainting with the graphic expressions of their artists. Besides its commercial task, this gallery seeks to contribute to the community: with this purpose the gallery supports the Colombian Art Therapy Association by providing its facilities for lectures on a monthly basis, it promotes conversations among the artists associated with the gallery and through a monthly newsletter it informs about the activities of the artists. Concerning the Association’s yearly exhibitions, Camila Granados, the gallery manager, says that, “The contribution that the Association makes to the Gallery is invaluable for we cannot measure the extent of the impact of the works presented: natural expressions that heal and create communication with patients whose only resource of emotional expression is art. The work that the art therapists do every day is conciliatory and healing for many people. The most gratifying aspect for the gallery is to be able to witness this amazing work” (Personal Communication, April 1, 2012).

The Information Labels

Within the curatorship aspects, it is worth commenting that members interested in participating in the show were asked to include the following detailed information with their proposals: initial framework, objectives, monitoring, assessments, results, and informed consent. However, the final labels only presented the name of the author, title of the work and technique used. This generated a meaningful discussion. Some art therapists advocated for not using information about the therapeutic process on the labels in order to maintain the confidentiality of the artists/patient and to privilege their identity as artists. Other therapists and visitors defended the importance of including more information on the labels so that the public could understand and demystify therapy. Supporters of the latter position also reasoned that by understanding the emotional challenges that the authors face, visitors would better grasp the value of the exhibition.

The General Public

The public that visits an art therapy exhibit does so with multiple and varied interests. Some people want to know about art therapy, as the term is unfamiliar and causes curiosity; others want to contact the organizers, either because they are art therapists themselves or because they want to start a therapeutic process through the arts. Most of the visitors are family members and friends of those involved in the exhibit, members of other organizations and associations who are interested in the subject also attend, while a limited amount of people are there by chance. Few attend with the intention of buying, even though many are surprised by the quality of the artworks exhibited and with the emotional background that each work contains.

Discussion

As the presented cases indicate, an art therapy exhibit involves various characters with personal interests. By clearly and honestly looking at the roles and intentions of all of the participants, it is possible to prioritize and empower the clients and their work. To ensure the welfare of the client, Moon (2000) highlights the importance of taking into

account the inequality of power that exists in relationships between clients and therapists. The cases above show the subtle implications of decision-making: not all artwork is to be seen by others and not all patients should participate in public exhibitions.

In reference to Kramer's (1986) concept of the 'third hand', narrative, artwork dimensions, spatial distribution, public, circulation, lighting, advertising, and other elements of curatorship can be used to make interventions without the use of words. During this exhibit, the clarity around wanting to send one unified message to all participants facilitated the criteria for making punctual decisions: title, informational posters, invitations, exhibition dates, promotional products, donations for projects and assemblage costs, snacks and the selection of works, among others, were chosen according to the message of community integration that the Association wanted to send to all of its members.

This exhibit allowed a strengthening of the profession by uniting many interested parties. The communitarian effort reinforced the collective ties. The show provided a space for art therapists to present themselves through the lens of their work. Additionally, the exhibit lent itself for giving and receiving professional feedback and demanded of the art therapists a fine-tuning of their therapeutic skills. The exhibit also helped art therapists identify patterns around the interpersonal relationships of artists/patients.

The interactions that were generated during this exhibition were determined by preexisting interpersonal relationships between attendees. For example, the artists/patients were accompanied by their friends and/or families and felt supported by the presence of their therapists. This facilitated a space of comfort and trust that promoted socialization among strangers. Artists/patients spoke with visible confidence about their art pieces and processes with people attracted to their artwork. Additionally, the exhibition was important for family members who witness a commitment to well-being within the therapeutic relationships. This allowed the bonds between therapists and parents to consolidate, thus facilitating the success of therapy.

An exhibition of unconventional artists requires curators and exhibitors to confront prejudices. Such exhibits ask

participants to support that those with psychological difficulties go through the process of re-defining themselves as creative and capable human beings (Spaniol, 1990). In tune with Spaniol, during the exhibit, this re-definition allowed relatives and other persons associated with the exhibitors to recognize the value of artists/patients artwork. It also provided the conditions for clients to look upon themselves in a positive light. Simultaneously, the care that families provided for artists/patients was validated.

The exhibit met the objectives raised around the community. In parallel, it exposed the public's need for guided explanations in order to fully comprehend the depth of the show. With these observations in mind, the following exhibition intends to educate and expand understandings regarding artistic and therapeutic processes. The objective is to plan and mount a self-explanatory display that can legibly stand without the need of many further clarifications.

The show gathered a group of people interested in art therapy who may constitute future support networks for artists/patients, parents, and therapists. This type of community exhibit was important for all of the participants and for the development of art therapy in Colombia, where the profession is still in its infancy.

Conclusion

From what has been mentioned above, a conclusion is reached regarding the importance of providing multiple decision-making options for the artists/patients throughout the totality of the creative process. Choices must be offered starting at the time of art construction and through the time of the artistic exposure. It is necessary to work closely with the families of those who need help with decision-making. Participants should have the clear possibility of changing their minds at any given moment.

The roles and intentions of the various participants should be well-defined in order to make ethical decisions, empower the artist/patient, facilitate the analysis of events, and support therapeutic containment during the inauguration. It is useful to send one unified message to all of the participants and to simultaneously pay attention to the needs of each individual contributor.

Awareness about the interpersonal relationships among members of the exhibition facilitates group dynamics during the inauguration. These dynamics should have a positive influence on the artists/patients, whose interests should prevail above everything else. The therapeutic intention, guarded by art therapists, should predominate in the interactions between individuals and the relationships that the various participants create with the art pieces during the show. These interactions encourage inquiries about mental health and about art therapy as a viable option for managing it. An art therapy exhibition can thus contribute to the development of tolerance and can provide benefits for the multiple participants.

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