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## History of Art Therapy

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*Art therapy* is an interdisciplinary mix of visual arts and psychology. In the United States, it dates from the 1940s when Margaret Naumburg (called by many the “mother of art therapy”) began publishing clinical cases and, in 1943, gave a name to the new field by calling her work “dynamically oriented art therapy.” The term “art therapy” was used in England as far back as the 1930s (Waller, 1991, 1998), and artist Adrian Hill formally coined it in 1942—about the same time as Naumburg in America. Such use of art is not new.

Since prehistoric times, the arts have played a crucial role in human history, development, culture, and consciousness. Such an understanding goes as far back as cave paintings, when people used imagery to express and master the world. Therapeutic rituals using the visual arts can be found in ancient cultures from hundreds of years ago, such as Navajo sand paintings and African sculpture. These ideas were the precursors of contemporary understanding of art therapy.

Intellectual and sociological developments of the 1940s later provided ground for this new profession. Evolving ideas about psychology, recognition of the unconscious, and the growing acknowledgement of art as an expression of a person’s inner mind gave rise to important notions that led directly to art therapy as an innovative and original mental health discipline. This chapter will provide a brief overview of the evolution of the field.

### **Ancestors and Influences**

Art therapy did not emerge from a vacuum. There were numerous predecessors and cultural influences that eventually lead to the emergent profession we now call art therapy. Several of the influences are discussed here.

#### Outsider artists and the art of psychiatric patients

“Outsider art” is the term for self-taught artists and the art of the insane. Early on, European psychiatrists such as Lombroso, Tardieu, and Simon were interested in the art of the insane because of its *aesthetic value* (MacGregor, 1989).

Few considered that art might contain diagnostic clues or treatment potential. A Heidelberg art historian and psychiatrist, Hans Prinzhorn, collected more than 5,000 pieces of artwork of psychiatric patients and published a book on his collection in 1922, titled *Artistry of the Mentally Ill*. (His work was published in the United States in 1974.) Although Prinzhorn's extensive collection of art of the insane influenced the art therapy community, he was primarily interested in the artwork as compelling and expressive, but not necessarily as potential indicators for diagnosis or treatment.

In the early part of the twentieth century, European psychiatrists Kraepelin, Jaspers, and Aschaffenburg came to believe that the art of institutionalized patients might offer clues to psychiatric and diagnostic knowledge. Later, the Swiss psychiatrist Sechehaye (1951) and the Australian psychiatrist Ainslie Meares (1958) understood the importance of personal symbols by institutionalized and regressed patients.

The American psychologist Tarmo Pasto, a direct precursor of the art therapy movement, argued that artists "had stopped providing the 'one great means of experiencing emotion', but in children's art and the art of the insane, inner meaning could be expressed" (Junge, 2010). In the 1960s, Pasto found the institutionalized Martin Ramirez at De Witt State Hospital in Auburn, California, saved his artwork, (which at the hospital was typically confiscated and burned), gave Ramirez art materials, and organized his first exhibit.

## Freud and Jung

Sigmund Freud and Carl Gustav Jung are considered by many to be art therapy's primary ancestors. Theories and methods of psychoanalysis were the bedrock from which the new field grew. Freud's powerful description of an active unconscious and his personality theory pervading intellectual thought in the twentieth century provided a useful jump-start for art therapists. His fascination with life histories of artists as sources of aesthetic creativity, his recognition of dream imagery as important messages from the unconscious, and even his long-discredited ideas of the connection between creativity and madness served to link psychological and psychoanalytical processes to visual art. However, while Freud prominently recognized the importance of dream imagery, he never asked his patients to draw their dreams. Jung did.

Jung's ideas have greatly influenced art therapy as he believed the image itself was central, rather than a clue or symbol to be deciphered: "To paint what we see before us is a different art from painting what we see within" (1954, p. 253). Jung's concept of the "collective unconscious" as a universal, cross-culturally shared symbolic language is often cherished by art therapists; this includes the *mandala*, a term that simply means "magic circle" in Sanskrit. This symbol has been adopted by some art therapists as a *structure* to contain personality chaos or disintegration.

Although art therapy has proven adaptable over the years to a wide variety of differing psychological theories (including those which are behaviorally-based), there are some today who still primarily associate it with psychodynamic theory and psychoanalytic techniques. However, art therapy's contemporary applications are considerably broader.

## Psychological tests

Projective psychological tests—such as the Rorschach Inkblot Test, Thematic Apperception Test (TAT), Draw-a-Man, Draw-a-Person (DAP) and House-Tree-Person (HTP)—developed in the first half of the twentieth century, were important influences on the evolution of art therapy as a diagnostic tool. With a single image as a stimulus, psychological tests indicated that imagery could be a clinical tool to reveal human personality. Unlike the single image, however, art therapists have since learned to use *a sequence of drawings*, rather than just a single drawing, to provide indications of inner psychic processes.

## Influences from England

Art therapy in Great Britain followed a different evolutionary path. The term “art therapy” was first used there as early as the 1930s (Waller, 1991, 1998). After World War II, Adrian Hill, a professional artist, recuperating from tuberculosis in a sanatorium, began to use his paintings as therapy for himself, and introduced art to other patients. Hill has been credited with originating the term “art therapy.” In 1946, artist Edward Adamson was hired to research the effects of lobotomy on patients in a psychiatric hospital. “His research was the first ‘rigorous attempt in British psychiatry to ascertain the usefulness of art as therapy’” (Junge, 2010, p. 10). In the United Kingdom, art therapy has primarily found its roots in the theories of Carl Jung. In 1942, Gilbert and Irene Champernowne, who both followed the Jungian perspective, founded Withymead House in Devon, the first therapeutic center dedicated to art therapy. Since then, art therapy is included in the National Health Service.

## Education and the arts

Art has also found its way into the educational arena. The scientific study of childhood began in the late nineteenth century, out of which grew the idea that education should consider “the whole child.” Called “Progressive Education” (Dewey, 1958), this philosophy advocates *learning through doing*. New teaching methods were developed based on a respect for the child’s creativity, and included an emphasis on the arts.

Pioneers of modern art education such as Franz Cizek, Viktor Lowenfeld, and Florence Cane were major influences in the development of art therapy. Cizek was the first to study spontaneous art in children. He recognized that child art revealed the inner workings of the mind and had about it aesthetic and creative properties. Lowenfeld studied analysis in Vienna with Cizek, and, in 1947, in the United States, published his influential book in art education. Conceptualizing an artistic developmental process of six stages, Lowenfeld argued that a child’s intellectual development was integrally correlated to creative development. Cane was the older sister of Margaret Naumburg. An artist and art educator, she taught at the Walden School (originally called the Children’s School) in New York City, founded and directed by Margaret. Cane developed methods to free children’s creativity. Along with drawing and painting, they included movement and sound.

## International Society for Psychopathology of Expression and the American Society of Psychopathology of Expression

Seldom recognized in art therapy history, the societies were an important driving force in the establishment of the first and the most important professional organization for art therapists, the American Art Therapy Association. The International Society for Psychopathology of Expression was established by psychiatrist Irene Jakob in 1959 and the American Society of Psychopathology of Expression incorporated in 1964. Many art therapists were members. They attended conferences, presented papers, and published their work in the volumes edited by Jakob. Importantly, the societies became meeting places for art therapists who eventually decided to form their own organizations, which propelled art therapy forward as a separate profession.

## **Art Therapy Profession Evolves as a Separate Mental Health Discipline**

Within the flourishing cultural and intellectual milieu of psychoanalysis, many artists and art educators studied analytic theory and undertook personal analyses. Eventually, the synergy between art and psychology became known as “art therapy.” Milestones in the evolution of the field in America include: (1) artist’s connections with psychiatric clinicians resulting in their employment in mental health institutions; (2) two theories for the new profession; (3) the establishment of the first art therapy journal; and (4) the founding of the professional organization, the American Art Therapy Association, which brought art therapists together to share knowledge and to develop standards of education and practice.

### Mentors and supporters of art therapy and art therapists in the American psychiatric community

Intrigued with the juxtaposition of art and psychiatry, many well-respected mental health professionals recognized the talents of artists and art therapists and the potential of art therapy as an exciting new tool for the treatment of mental dysfunction. They found uncredentialed artists and set them to work in mental health institutions. They trained them in psychiatry and often encouraged further formal education.<sup>1</sup> In 1941, Nolan D. C. Lewis hired Margaret Naumburg at the New York State Psychiatric Institute. Beginning in the early 1960s, university departments of psychiatry and psychiatric institutes provided classes showcasing the intersection of art and psychiatry. Sometimes taught by art therapists, these courses were precursors of art therapy education and functioned to further awareness and value of the evolving field. Roger White began an art therapy program in 1959 at the University of Louisville, which closed after graduating two students. In Philadelphia, two psychiatrists, Morris J. Goldman and Paul Fink, were instrumental in beginning the first art therapy master’s program in the country, at Hahnemann Medical College (now Drexel University), with art therapist Myra Levick as director.

## Early art therapy clinicians

Until contemporary times, the art therapy profession has largely been one of clinicians. Art therapy was an idea whose time had come. Many art therapists working alone in different places thought they had invented the practice themselves. The following information is from my book, *A History of Art Therapy in the United States* (Junge, 1994).

## Midwestern America

The origins of the field of art therapy in the United States are usually thought of as an East Coast phenomenon. However, as early as the 1930s and 1940s, art therapy was beginning to have a presence on the plains of Kansas at the Menninger Foundation. Established in the 1920s in Topeka, the Menninger Clinic was a psychoanalytically based milieu therapy facility. At the time, it was widely considered that the only option for a severely disturbed mental patient was long-term custodial care in an asylum. The Menningers believed that a person with mental problems could be treated and helped, a radical notion at the time. Karl Menninger was a psychiatrist who loved art. His interest inspired Menninger staff members to include the arts in therapeutic treatment. From the start, Menninger patients were treated with psychoanalytically based psychotherapy and activity therapies including art. In 1937, an article was published by two Menninger staff members, Jeanette Lyle and Ruth Faison Shaw (Friedman, 1990). It concerned children's finger paintings and drawings revealing and externalizing the child's inner experience and is considered an early description of art therapy. The authors proposed that, combined with the child's history, the drawings could be used to interpret intrapsychic processes.

In 1946, Mary Huntoon, artist and printmaker who worked at Winter General Hospital, connected with the Menninger Clinic, and later with the Menninger Foundation. First, she was an "art instructor"; in 1949, she was called a "therapist"; and in 1956 a "manual arts therapist." She was never a psychotherapist, but functioned as a *recreational* therapist. Early on, Huntoon named what she did "dynamically oriented art therapy" or "following the patient's dynamics." In this, she may have preceded Margaret Naumburg in her definition.

Don Jones, a Conscientious Objector during World War II, was assigned to Marlboro State Hospital in New Jersey, where he became interested in and collected patient artwork. After the war, he came to Rossville, Kansas, as an artist/pastor. He taught art in Topeka, and many Menninger staff members were his students. Through this connection, he met Karl Menninger. He began employment at the Menninger Clinic in 1951, developing an expressive arts program that would employ and train many art therapists, Robert Ault among them. At first an *activities therapy*, art therapy eventually became a *psychotherapy* option for patients at the Menninger Clinic.

In 1959, Pedro Corrons, a Spanish psychiatrist interested in art and music, visited Mary Huntoon at The Menninger Clinic and then established an art psychotherapy unit at the Columbus State Hospital in Ohio. This was the first state-supported art psychotherapy program. With Bernard Stone, by 1967–1968, there were 12 art psychotherapy programs in Ohio.

### Eastern art therapy clinicians

In the Eastern United States, Naumburg's groundbreaking work at the New York State Psychiatric Institute was a significant influence, and in 1940, perhaps the single most important occurrence in the early history of art therapy occurred when she defined art therapy as a distinct profession. Although her first art therapy book was published in 1947, it was not until 1960 that Naumburg's description of her theory was published in *Dynamically Oriented Art Therapy*. She was 84 years old. In 1970, Naumburg was the first to receive the highest award in art therapy, the Honorary Life Member (HLM) from the American Art Therapy Association.

In the 1950s, art therapists Ulman, Kramer, Naumburg, and others presented their work to psychiatric groups and institutions. From 1964 on, Judith Rubin consulted in New York with Naumburg and Kramer. Having been an art teacher and having worked with schizophrenic children, she wanted to receive training to become a "real" art therapist.

The National Institutes of Health (NIH) in Bethesda, Maryland, outside of Washington, DC, an agency of the United States Department of Health, is a leading medical research center. In 1958, Hanna Yaxa Kwiatkowska was hired as a researcher at the NIH. There, she "accidentally" invented family art therapy and developed a six-step procedure for evaluating families. Harriet Wadeson came to NIH in 1961 and trained with Kwiatkowska. Before that, in 1949, her art therapy career began when she worked at St. Elizabeth's Hospital, a psychiatric facility in Washington, DC.

The driving force behind the founding of the American Art Therapy Association was Myra Levick, its first president, who began work as an art therapy clinician in 1963 at the Albert Einstein Medical Center in Philadelphia.

### Western art therapy clinicians

In 1964, Helen Landgarten taught art to geriatrics in a community center in Los Angeles, California, and became an art therapist in a psychiatric inpatient unit at USC/County General Hospital. In 1968, she came to Mt. Sinai Hospital (later Cedars/Sinai Hospital) in the Child and Family Division, Department of Psychiatry. Here, Landgarten trained art therapists as *primary therapists* knowledgeable enough to carry full case responsibility. Her art therapy master's program, established at Immaculate Heart College, reflected this philosophy and was called "Clinical Art Therapy."

Janie Rhyne was a Gestalt art therapist living in San Francisco. The Human Potential Movement of the 1960s, of which Rhyne was a part, eschewed diagnosis and the medical model in favor of a humanistic psychology focus aiming to aid an individual's personal growth.

### The first art therapy journal

The first art therapy journal was established by Elinor Ulman in 1961. Called the *Bulletin of Art Therapy*, Ulman's journal gave art therapists a forum in which to communicate and debate their ideas. Before the publication of the journal, art therapists had worked alone, often making it up as they went along. Perhaps most

important, the *Bulletin* offered art therapists a way to find out about each other. In 1963, Ulman conducted a survey of art therapists in the United States and Canada and found 30. In 1970, the *Bulletin* changed its name to the *American Journal of Art Therapy*. It existed for 41 years until 2002 when it ceased publication. Ulman's journal was a crucial milestone in driving the rapidly evolving field toward becoming a professional organization.

### Art therapy theorists: Margaret Naumburg and Edith Kramer

Despite acknowledgment that art therapy can be effectively intertwined with almost any contemporary theory (cf. Rubin's *Approaches to Art Therapy*, 1987), there are two major theories in the field—both deriving from Freudian psychoanalytic thought and methods. On one side of the art therapy theoretical spectrum, stemming from Margaret Naumburg's ideas, are art psychotherapists, employing art *mostly as a method of non-verbal imagistic communication or "symbolic speech."* On the other side of the spectrum are the art therapists, originating from Edith Kramer's notions—psychologically informed and close to art educators who believe that it is *the creative process itself that is healing.*

In 1940, Naumburg was the first to define art therapy as a separate mental health discipline and as a different form of psychotherapy. She lived in the lively intellectual zeitgeist of New York City, underwent both Jungian and Freudian analysis, and studied with the educational visionaries of the time such as Maria Montessori and John Dewey. Naumburg went to work for the psychiatrist Nolan D. C. Lewis at the New York State Psychiatric Institute and published her first art therapy book in 1947, titled *Studies of the "Free" Expression of Behavior Problem Children as a Means of Diagnosis and Therapy.*

Edith Kramer, a painter, fled Hitler's Germany for New York City in 1938. With Friedl Dicker, Kramer had conducted art classes in Prague for refugee children and recognized that art could alleviate trauma. Her book, *Art Therapy in a Children's Community*, was published in 1958. In it, she described a second major theory for art therapy, focusing on the importance of how the creative process and product is healing. Similar to Naumburg, Kramer's theory is based on Freudian ideas. She delineates Freud's defense mechanism of "sublimation" as key to art therapy. She postulates that inappropriate id and aggressive impulses can be sublimated into socially acceptable behaviors through creative work, and that the "completeness" of the art product is indicative of successful sublimation. Unlike Naumburg, Kramer argues that art therapists are not psychotherapists, and should not aim to be. Her work relies very little, if any, on *talking*, whereas Naumburg, through verbal inquiry, intends to further the patient's conscious exploration of the unconscious.

### Formation of the American Art Therapy Association

Founding of the American Art Therapy Association was the most important step in the establishment of a separate identity for art therapy. With its formation, art therapy became a distinct and significant field of trained practitioners with special expertise.

In 1966, Naumburg's book *Dynamically Oriented Art Therapy* laid out the theoretical constructs of art therapy. Although discussed earlier in her other books

and presentations, this was the first formal publication of art therapy theory, and it was a major influence in the formation of art therapy as a separate mental health discipline. Kramer's theoretical ideas were first published in 1958.

The British Art Therapy Association was formed in 1964. In the United States, against the background of the turbulent 1960s and with the coalescing force of Ulman's *Bulletin of Art Therapy* and Naumburg's theoretical foundation, art therapists wanted to form their own professional society and focus not only on pathology in art but on diagnosis and treatment.

In 1968, art therapists met in Boston at the American Psychiatric Association to discuss forming a separate organization. Myra Levick, director of the art therapy master's program at Hahnemann Hospital in Philadelphia, was the driving force and energy for founding the new organization, and was its first president.

In late 1968, along with Paul Fink, Levick convened an organizational meeting. All the art therapists they could find were invited, and 50 attended. It was clear from the start that many definitions of art therapy would be included in the new organization, but the hybrid nature of the new field was evident as some feared that an association would define art therapy as *art psychotherapy*. From this split began the great argument—with noisy proponents on both sides—which would dominate the field for decades: *art psychotherapy versus art as therapy*.

On June 27, 1969, in Louisville, Kentucky, the American Art Therapy Association was voted into being. Only art therapists could be voting members. The first conference was held in September 1970, and 100 people attended. The association established a system of standards for art therapists and began awarding the "A.T.R." (Art Therapist Registered) for those who met the standards.<sup>2</sup> Later, the ability of art therapists to attain state licensing for employment became a central focus. However, the small numbers of art therapists make licensing a difficult proposition in state's political climate, and art therapy has sometimes found itself aligning with other mental health disciplines, bringing to fore the perpetual challenge of professional identity.

The immense importance of the American Art Therapy Association to the evolution of the field is obvious. Providing an arena where art therapists could come together to debate the major issues of the new field, it had a tremendous influence on the evolving profession, and, without it, arguably, there would not have been an art therapy profession at all. For a long time, the American Art Therapy Association *was* art therapy. From the early days when Ulman's survey found 30 art therapists in the United States and Canada, and 100 people attended the first conference, there are now about 4,000 members in the American Art Therapy Association.

### Art therapy master's training programs

Soon after the founding of the American Art Therapy Association, and sometimes even before, many art therapy pioneers, mostly self-taught, founded art therapy education and training programs across the country. These programs tended to bear the philosophical and theoretical stamp of their founders and were quite different from each other. With master's-level education, it was the role of the programs to develop art therapists with a certain curriculum and internship experience. In 1975, "Guidelines for Education and Training" were established by the



American Art Therapy Association. A program assessment process began—a form of accreditation—known as “approval” for those programs that met the standards. As with all accreditation procedures, the intention of the American Art Therapy Association was to improve education through curriculum standardization, but establishing acceptable education standards while still allowing for creativity was and remains a difficult balance.

## Art Therapy: Milestones and the Future

Since its beginnings, art therapy has established an expansive literature documenting clinical work, art therapy’s many definitions, and the wide philosophy and approaches to it. The literature has saluted art therapy’s history and pioneers and suggested a number of underlying ideas and practices that contribute to theory. In addition, there are books and articles that survey the field, focusing on special techniques, populations, and specific issues. In the early days, art was thought to be relegated to children and special people called “artists.” Art therapy’s literature reveals the many ages, populations, and problems amenable. Computers and the Internet have resulted in art therapy e-books and CD-ROMs. Research has come to be understood as important to art therapy, although contemporary art therapy primarily remains a profession of clinicians. Advances in neuroscience and technological advances may potentially help explain the mind/body connection and how art and creativity work on the brain.

Great Britain and the United States are well known for highly developed art therapy professions. They are often models for the rest of the world. However, the development and spread of the Internet have given voice and presence to art therapists internationally through the International Art Therapy Organization (IATO). Not unlike Ulman’s original art therapy journal, the IATO intends to be inclusive and socially conscious, and functions as a virtual “place” to argue, to discuss, and to celebrate. In the global village, the idea of the integration of art and therapy has taken hold. A few years ago, it was said that only 33 countries had art therapy or arts therapies associations. In many of these countries, unfortunately, the establishment of education for art therapists was not easy, and, therefore, development of the field was difficult. *The Modern History of Art Therapy in the United States* (Junge, 2010) lists the following as contemporary issues: the Question of Art Therapy Assessment, Multiculturalism, Centrality of the Art in Art Therapy, Registration, Certification, Licensing, Research, and the International development of Art Therapy.

Since the last half of the twentieth century, art therapy has expanded and, in a sense, “grown up.” Establishing widespread practice standards while simultaneously allowing for creativity is, and will always be, a central challenge. With more recognition comes public confusion about what an art therapist is. While it will always remain a small field, the expertise of a skillful professional art therapist is quite different from a mental health professional, who sometimes uses art in clinical practice. Rubin (2010) wrote, “Art therapy is a unique profession, in that it combines a deep understanding of art and the creative process with an equally sophisticated comprehension of psychology and psychotherapy” (p. xxvi). Art therapists are people with an artist’s identity and creativity who strive to help people heal and grow.

## Endnotes

- 1 An exception is the experience of art therapist Judith Rubin, who was admonished not to seek further education by the eminent developmental psychologist Erik Erikson. He was afraid it would hinder her intuition.
- 2 In 1993, the awarding of ATRs was housed in the newly formed Art Therapy Certification Board (ATCB). It became “ATR” (without periods). In the early 1990s, Board Certification as an art therapist began.

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## Professional Organizations

American Art Therapy Association, [www.arttherapy.org](http://www.arttherapy.org)

International Art Therapy Association, [www.internationalarttherapy.org](http://www.internationalarttherapy.org)