

MUSEUM-BASED ART THERAPY

A Collaborative Effort with Access, Education, and Public Programs

Edited by Mitra Reyhani Ghadim and Lauren Daugherty



Museum-based Art Therapy

This practical and inspirational resource offers a wide range of information about museum-based art therapy and wellness programming in various museums.

Featuring contributions from art therapists and access professionals from various museum-based wellness programs, the book describes museum-based art therapy, education, access, and inclusion to enlarge the scope of professional development and higher education training in art therapy and its relation to museum studies. Chapter examples of successful museum art therapy and wellness initiatives increase awareness about the role of art therapy in museums and the role of museums in building healthy societies and improving lives. The text also contributes to the field of art therapy by deconstructing traditional narratives about therapy being conceived only as a clinical treatment, and by introducing arts-based approaches and strategies in museums as expanding territories for being proactive in community health and wellness.

Museum-based Art Therapy is a valuable guide for art students who are interested in working in museum education, access and disabilities, or museum studies, and graduates and professionals working across the disciplines of museums, art therapy, and disability studies.

Mitra Reyhani Ghadim, DAT, ATR-BC, LCAT, is an art therapist, author, and educator. She worked as a museum art therapist for nearly a decade, creating several art therapy programs for various populations.

Lauren Daugherty, **LMHC**, **ATR-P**, is an art therapist at the Eskenazi Museum of Art at Indiana University Bloomington where she established the first museum art therapy program at a university museum in the U.S.

"This richly diverse text documents the exciting partnership that museums and community-based art therapy are creating at the intersection of inclusivity, accessibility, wellness, and education. At its center is the shifting power of museums to provide restorative spaces of reparation and reimagination. A wealth of information details the formation of effective programs and models, strategies for collaboration, critical reflection, and engaging activities and processes. This text will be celebrated as an invaluable guide for multiplying museum-based arts and wellness programs that strengthen communities."

—**Lynn Kapitan, PhD, ATR-BC, HLM**, is founder, professor, and director of the Professional Doctor of Art Therapy program at Mount Mary University

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Contributors

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Contributor Bios

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Ashley Hartman, Ph.D., LCAT, LPC, ATR-BC, is an Assistant Professor of Art Therapy at Marywood University. She is an educator, registered art therapist, researcher, and artist. She earned her Doctorate with a specialization in art therapy from Florida State University. Ashley has also worked as an Adjunct Instructor at Florida State University and has worked in diverse community based and clinical settings. She is a licensed creative arts therapist (LCAT) in the state of NY, a licensed professional counselor (LPC), and a board credentialed art therapist (ATR-BC). Ashley's scholarly endeavors focus on the areas of museum-based art therapy, art therapy and intersectional aspects of identity, art therapy with individuals on the Spectrum, and the integration of Eastern philosophical practices in connection to perception of control, anxiety, and mindfulness.

Kathy Dumlao is the Director of Education and Interpretation at the Memphis Brooks Museum of Art. She has served in several roles at the museum over the last 21 years, including in her current role as head of the education department since 2013. In addition to managing both the education and visitor services departments, Kathy oversees the museum's Art Therapy Access Program, manages adult programming, and serves as a member of the museum leadership team. Additionally, Kathy has served on the board of the Tennessee Art Education Association (TAEA) since 2009, including six years as Presidentelect, President, and Past President. She was awarded the TAEA's Museum Educator of the Year in 2009 and completed the National Art Education Association's School for Art Leaders in 2017. Kathy received her M.A. in Art History from the University of Memphis.

Paige Scheinberg, MS, ATR-BC, RYT, founded SHINE ON Consulting in 2015 with the goal of making well-being and healing more accessible to those in need through creative experiences, integrative approaches, and community partnerships. Paige offers integrative art therapy services, clinical supervision, workshops, and trainings for personal and professional development, which incorporate creativity, mindfulness, and positive psychology theory, approaches, and practices. Currently, she primarily works with cancer survivors and caregivers in an adult oncology outpatient clinic, as well as offers museum-based art therapy offerings at the Brooks Museum. Paige also loves creating and exploring mandalas and enjoys building an international mandala community with her Creating Mandalas team.

Additionally, Paige is committed to raising awareness of and advocating for mental health and art therapy, as well as supporting and empowering fellow advocates. As the TATA Governmental Affairs Co-Chair, Paige co-led the efforts to create a state art therapy license in TN.

Michelle López Torres, ATR, is the National Director of Parent Education Programs at Literacy Partners, leading a family engagement program that centers the voices and experiences of Latinx caregivers as the most powerful influence on a child's early development. She served as Director of Education and Community Engagement at the Children's Museum of Arts and Manager of Art*Access* and Autism Initiatives at Queens Museum, both in New York City. The model Michelle developed for arts programming in community spaces has disseminated through a guide called Room to Grow. She designed emPOWER Parents: Fostering Cross-Cultural Networks between Families Affected by Autism in Queens and Madrid. Michelle has a master's in Creative Arts Therapy from Hofstra University and a bachelor's in Communication Arts from Fordham University. She is an adjunct professor at CUNY's City College's Masters program for Arts & Theater Education.

Vida Sabbaghi is a cultural producer and leader on matters of equity, inclusion, and social justice, is Founder and Executive Director of COPE NYC (Creative Opportunities Promoting Equality) whose mission is to bridge communities through art and design. COPE NYC promotes social relations for all ages and abilities through community art projects, workshops, fashion shows, art exhibits, conferences, and international residencies. Under COPE NYC, Vida partners with cultural institutions to create innovative projects. She works with kindergarten to graduate art students. She also writes articles for art publications. She and Dr. Alice J. Wexler co-edited *Bridging Communities Through Socially Engaged Art*. She received the NYCATA Art Advocate of the Year Award, and the USSEA, Edwin Ziegfeld Service Award for organizing an international conference at Queens Museum. Vida is the Art Director of 630 Flushing Avenue, in Brooklyn, where, under COPE NYC, she mounts rotating exhibitions and runs residencies for Pratt and SVA.

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included in the anthology titled, Art Therapy Practices for Resilient Youth: A Strengths-Based Approach to At-Promise Children and Adolescents.

Alice Garfield has served as the coordinator for MFA Restorative Arts at the Museum of Fine Arts, Boston since 2017, overseeing Artful Healing, Restorative Arts, and Beyond the Spectrum programming. Through these programs, the MFA provides art education and art-making activities to a variety of audiences with a focus on health, wellbeing, accessibility, and inclusion. Alice holds a Masters degree in Art Education from Tufts/SMFA and a Bachelors degree from Pomona College, and is a licensed visual art teacher. She has taught art to students of all ages, interests, and abilities, and passionately pursues facilitating positive growth and change through the arts. Alice is involved in promoting the growing field of arts in health through organizations including the National Organization for Arts in Health (NOAH), AAM, and the Boston Arts Consortium for Health (BACH).

Rachel Shipps is currently an art mentor at Tierra del Sol Foundation, providing direct support to artists with disabilities in their studio practices and their ongoing education in the arts. She held the role of Education Coordinator at the San Francisco Museum of Craft and Design and of Art Access Coordinator at the Queens Museum, and is passionate about possibilities for accessibility and collaboration in cultural institutions. Rachel has a B.A. in Psychology and an M.A. in Public Humanities with professional experience in ABA-based instruction, behavior therapy, and non-directive therapeutic play.

Stephen Legari holds a Masters in creative arts therapies from Concordia University and a Masters in couple and family therapy from McGill University. He has worked extensively with individuals, groups, couples, and families in both clinical and non-clinical settings. Since 2017, Stephen has been program officer for art therapy at the Montreal Museum of Fine Arts where he has developed specialized therapy programs for groups, supervised Masters level students, and contributed to numerous publications on the arts in health.

Chloe Hayward is an art therapist, artist, and educator living and working in New York City. She believes in the power of art to heal and has written articles on the subject for Studio Magazine, Pratt Institute, and Artsy Magazine. Chloe serves on the board of directors for Artistic Noise, an organization which provides self-expression through the arts for youth impacted by the justice system. As Associate Director of Education at The Studio Museum in Harlem, she co-creates with her department to provide a robust focus on the intersection between art, education, and mental health, overseeing programs and projects rooted in community care and abolition. Her work uses the power of the creative arts process to heal, bring awareness, and promote social change, equity, and inclusion.

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Marie Clapot is Associate Museum Educator for Accessibility at The Metropolitan Museum of Art. In this capacity, she and her colleagues provide oversight of key Access programs while also focusing on embedding accessible and inclusive practices into the fabric of the museum at large. Marie has trained museum professionals in the US and abroad, and consults for nonprofit agencies on accessibility and inclusive practices. She also co-convened the last two Multimodal Approaches to Learning conferences with the Met (2009, 2012). Marie's publications include "Insights from an educator into crafting scent-based experiences in museum galleries" in *Bridging Communities Through Socially Engaged Art*, amongst others. Her research includes the role of olfaction in gallery teaching and learning. She holds a Masters in Art Education from Indiana University, and an MA in Heritage Development from Université de Bretagne Occidentale (UBO), Quimper (France), and an MA in Heritage Development from UBO (Brest).

Preface

Mitra Reyhani Ghadim and Lauren Daugherty

Museums are increasingly becoming interested in utilizing their collections to promote health and well-being in the communities they serve. Some museums have hired art therapists trained in psychological theories and use of art materials, and with deep knowledge and interest in the visual arts, to provide wellness and art therapy programming for their audiences. Other museums have chosen to utilize existing museum educators within their institutions to develop wellness programs. This book illustrates the healing power of the visual arts and, more specifically, provides museum-based art therapists and museum educators examples of select art therapy and wellness-based programs from the United States and Canada, while also including existing challenges in the sector that affect art therapists.

Museums have the potential to address a wide spectrum of health, well-being, and social needs such as healthy aging, health education, stress reduction, social isolation, pain management (linked to reduced drug consumption), enhanced mental health, increased mobility, cognitive stimulation, sociability, and employability. Although art therapy collaborations and programs have existed for decades in some museums and galleries, this work is generally unpublished. Our goal was to assemble chapters from individuals who are working to establish wellness and therapy-based programs in museums, and to illustrate that art therapy and wellness programming in these institutions is often a collaborative and interdisciplinary venture.

Different than clinical, outpatient, inpatient, school-based, and other forms of more traditional art therapy, museum art therapy happens through an inter-disciplinary collaboration that might often involve education, access, and public programs. Therefore, various pedagogical, therapeutic, social practice, and accessibility approaches enrich the work of museum art therapists as they connect with concepts and knowledge from various disciplines. Art therapy does not operate as a centralized power; it, rather rhizomatically, grows by making connections with entities and power structures within the museum, as well as with outside partners.

Many art therapist roles in museums blur lines between art therapist, museum educator, and leaders in diversity, equity, inclusion, and accessibility within their institutions. No matter the roles they play, it is important to

note that museum art therapists all have things in common: they are passionate about art therapy and see the potential museums have for therapeutic work.

The first part of this book provides an introduction into art therapy work in museums.

In Chapter 1, Carolyn Brown Treadon explores the history of museums, early beginnings of therapy in museums, and current applications of museum-based therapeutic work, and she offers insight into how museums can be used for therapeutic reparation. In Chapter 2, Ashley Hartman provides a deeper look at existing museum-based art therapy programming organized by population.

The second part of this book outlines several community partnership programs taking place in museums in the United States. In Chapter 3, Paige Scheinberg and Kathy Dumlao outline a partnership between the Memphis Brooks Museum of Art and an organization for juvenile offenders and discuss how the partnership has evolved over time. In Chapter 4, Mitra Reyhani Ghadim explores the collaborative nature of museum-based art therapy programming by highlighting case examples from the Queens Museum. In Chapter 5, Michelle López Torres and Mitra Reyhani Ghadim provide an example of a bi-national program for individuals with autism at the Queens Museum. In Chapter 6, Vida Sabbaghi discusses how COPE NYC partnered with the ArtAccess Program at the Queens Museum to customize internships for high school students on the autism spectrum. In Chapter 7, Sarah Pousty examines the ARTogether Program at the Children's Museum of the Arts, including the program's structure, theoretical approach, and best practices, and she looks at the program through a social justice lens. In Chapter 8, Alice Garfield highlights the development of a partnership between the Museum of Fine Arts, Boston's Artful Healing Program and Boston Children's Hospital.

The third part of the book investigates further museums' art-making spaces and studios and explores how these spaces can serve to promote healing. In Chapter 9, Rachel Shipps outlines her experience of the ways museums can be social and therapeutic spaces by examining the MakeArt Lab at the San Francisco Museum of Craft and Design. In Chapter 10, Stephen Legari discusses the Art Hive in the Montreal Museum of Fine Arts as a participatory artmaking space that empowers the public voice.

The fourth part of this book examines issues museums are grappling with in the current age of social justice: experiences of People of Color within these institutions and how to create inviting spaces that are accessible and empowering for everyone. In Chapter 11, Chloe Hayward outlines her experience with anti-oppression and anti-racist work as an art therapist, using her lived experience as a Black woman to explore art education, art therapy, and therapeutic spaces within museums. In Chapter 12, Marie Clapot presents her thoughts on how museum education concerning disability and accessibility can intersect with wellness and healing outside of an art therapy framework.

The fifth and final part of this book provides readers with practical tools and applications for utilizing museum collections in therapeutic work.

In Chapter 13, Lauren Daugherty provides an overview of how individuals make meaning from objects and discusses the process of selecting museum artworks to use in art therapy groups and individual sessions. In Chapter 14, Lauren Daugherty and Mitra Reyhani Ghadim provide examples of strategies to prompt discussion, exploration, and healing utilizing museum artworks.



1 The Power of Museums for Therapeutic Reparation

Carolyn Brown Treadon

Introduction

The use of the museum as a therapeutic resource has only recently emerged across disciplines. One of the earliest published studies (Silverman, 1989) led to increased understanding of the benefits museums could offer for diverse populations across multiple modalities. This chapter will explore a brief contextual history of museums, the early beginnings of museums being used for therapeutic processes, and foundational therapeutic uses, explore current applications with various populations, and offer insight into the use of museums for therapeutic reparation across disciplines.

Brief History

The 17th century saw the emergence of the modern concept of the museum with the opening of private collections to members of the community (Ambrose & Paine, 1993). Collections were a sign of social status; the greater the collection, the more prestige an individual attained. Museums emerged in the 18th century as institutions founded on the mission to preserve and display objects to the public (Hein, 1998). The major expansion of museums into significant public institutions occurred in the nineteenth century, where their traditional role was to preserve, document, research, and educate. It was through this education that museums sought to bring enlightenment and culture to patrons (Kaplan, Bardwell, & Slakter, 1993).

Early educational opportunities were provided to the public through special events, lectures, programming, and outreach (Hein, 1998). Items on display were labeled, including detailed descriptions when available, to enhance viewer experiences. The expansion of museum services was a response to increased awareness that the welfare of individuals was the responsibility of governmental agencies. Museums were seen as a way to provide access and education to diverse classes, leading to increased overall well-being and appreciation of the benefits of modernization. It is this foundation that led Silverman (2010) to assert that museums have always been "institutions of social service" (p. 24).

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This mission is reflected in the mission of the American Alliance of Museums (AAM, 2020), the major accrediting agency of museums in the United States. Since its inception in 1906, the AAM has supported broad access to its institutions. As identified in the most recent strategic plan, it believes that, "museums educate and inspire, nourish minds and spirits, enrich lives and create healthy communities" (n.p.), with their strength lying in the diversity of the people represented and the breadth of museums they engage.

Similarly, the International Council of Museums (ICOM), founded in 1964, has sought the protection of cultural and natural heritage and views museums as establishments dedicated to the "service of society" (ICOM, 2020). As the world has evolved, its mission has simultaneously expanded to include the potential of museums' knowledge and resources to reach out to vulnerable groups in their communities, promote intercultural dialogue, provide experiential learning, and incorporate programs that tap into the benefits of culture.

Fundamental Functions of Museums

To accomplish their collective missions, museums must first be perceived as having more to offer than the preservation and display of objects (Treadon, Rosal, & Thompson Wylder, 2006; Treadon, 2016). In addition, museums must expand their definition of the typical museum visitor to include those from diverse backgrounds and cultures and with diverse socioeconomic status and abilities (Treadon et al., 2006; Treadon, 2016; Hein, 1998; Silverman 2010). Museums have the potential to inspire hope, promote healing, inspire lives, and lead to a better world (Silverman, 2010). This is accomplished through serving individuals by creating close partnerships with families and groups within society. These groups constitute the foundation of communities and society at large.

When individuals enter the museum space, a relationship unfolds between the visitor(s) and their experiences (Jensen, 1982). This experience is shaped though the interplay between what the individual brings with them – their lived experiences – and the museum. For meaningful interaction to occur, the museum environment must actively engage the individual and reward their attention. There must be a connection to something familiar, a place, event, emotion, or experience (Hein, 1998). This is a space where personal meaningmaking can occur (Silverman, 2010).

Through strategic use of exhibitions, museums can serve many functions, including, but not limited to, the exhibition of historical artifacts, increasing community education and awareness, and therapeutic programming (Peacock, 2012). To accomplish this, museums must determine current functioning and identify what changes may lead to more engagement opportunities. Silverman et al. (2012) undertook a study to identify hinderances that existed in the successful engagement and inclusivity for patrons of interactive museums. They identified three areas that had a direct impact: modifications to the environment,

innovative programming, and personnel training. Addressing these areas can lead to increased community engagement, opening the museum up as an inclusive space for diverse audiences (Hein, 1998; Rochford, 2017).

Mangione (2018) saw the role of the museum as a co-facilitator within the treatment framework as an evolution rather than an innovation of practice. For centuries, individuals have sought museums, including outdoor spaces such as gardens, for solace and rejuvenation. These institutions were seen as a way to escape, for a period of time, the stressors of daily life. Sustained mental effort leads to what Kaplan et al. (1993) discussed as directed attention fatigue (DAF). DAF leads to increased distractibility, impatience, irritability, and unnecessary risk taking due to impaired reasoning. To compensate, individuals must have access to a restorative environment.

Restorative environments must possess four criteria (Kaplan et al., 1993). First, *being away*, a physical relocation from normal environments. Second is *extent* – being in a physical space that is extended in time and space, providing an opportunity for a state of flow. *Fascination* is the third component; one's attention must be engaged in a meaningful way. Last is *compatibility* – the encounter must align with one's purposes. The more properties met, the greater the chance for restoration. Museums can address all four of these criteria. The story behind artifacts or art imagery and engaging exhibitions can facilitate the personal connections, leading to greater engagement and restoration (Ioannides, 2017).

In her foundational research, Silverman (1989) explored the therapeutic use of the museum with a family, leading to her continued research into the museum as an agent of social work (Silverman, 2010). She identified eight distinct therapeutic purposes museums offer:

- 1. Interactive experiences and social relationships
- 2. Communication as meaning-making
- 3. The meaning of things
- 4. Human needs
- 5. Outcomes and changing
- 6. Relationship benefits and social capital
- 7. Social change
- 8. Culture change (Silverman, 2010, p. 14).

Salom (2011, 2015) identified additional benefits to include artistic diversity, architectural boundaries, the collective nature of the artifacts and art imagery, interpersonal exchanges, and changes in scenery. Additionally, he identified four roles museums can fill in treatment: the museum as co-leader (keeping the focus on goal attainment in the environment), the museum as group (the knowledge of the group of artifacts/art imagery), the museum as self (representing wholeness in an organized manner), and the museum as environment (interrelation between time, space, and objects).

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During a museum visit, interactions happen at varying degrees with family members, museum staff, other patrons, and society at large (Silverman, 2010). Museum learning and engagement are social processes – they do not happen in isolation (Hein, 1998). They challenge individuals to expand their views and lead to increases in self-esteem, confidence, and creativity through increased intellectual stimulation and breaking away from normal routine (Hein, 1998; Ioannides, 2017). These benefits, which promote well-being, are a direct result of decreased social isolation. Mental and psychological wellness can be restored in the peace and calmness of the museum (Kaplan et al., 1993). Museums serve to help with identity formation, development of friendships, and facilitation of social bonds between individuals, families, and cultures (Silverman, 2010).

Across disciplines, the knowledge of the therapeutic benefits of museums has expanded and been embraced (Mangione, 2018). Museums provide a sense of normalcy as a nonclinical setting for wellness (Coles & Harrison, 2018; Thomson et al. 2011, 2018). As a community-based resource, the focus is on promoting overall psychological well-being (Ioannides, 2017). To fulfill this, museums must be able to attract and retain attention through relating to the lived experiences individuals bring with them (Jensen, 1982). Art imagery and artifacts reflect collective human experiences allowing individuals to relate to what they are viewing, reducing feelings of isolation and detachment. The addition of small group discussions further promotes social engagement, reducing social isolation (D'Cunha et al., 2019). For both observers and creators, engaging in responsive activities can lead to increased mood and other psychological states, impacting overall physical health (Newpoff, Melnyk, & Neale, 2018).

Museums offer many inherent benefits as therapeutic settings. They challenge individuals' perceptions about art, history, and culture (Rochford, 2017). Through processing these challenging concepts within the museum setting, increased insight and self-awareness are fostered. To best provide the scaffolding needed for these experiences, there must be an understanding about meanings visitors create using their museum experiences – those that are ordinary and those that are extraordinary (Hein, 1998). Through enhanced communication with museum professionals, other professionals, and individuals, museums' roles as agents of social change continue to evolve (Silverman et al., 2012; Silverman 2010).

Early Uses of the Museum for Therapeutic Reparation

The Queens Museum in New York developed the Please Touch Initiative for individuals who were blind or low vision to engage in art education in the early 1980s (Reyhani Dejkameh & Shipps, 2019). This provided the foundation for ArtAccess to expand its reach to include programming to support those living with mental illness. As programming expanded, ArtAccess began including internships for art education and art therapy students, who learned