The Johari Window Test (Joseph Luft & Harry Ingrain, 1955) was originally designed to demonstrate a model of awareness and communication in interpersonal relationships. As part of an in-class studio presentation at the BC School of Art Therapy, I created an exercise using the original model (see box below) as a springboard. I was interested in exploring, through art making, the four areas of Luft’ and Ingra’s model:

- The aspect of self known to both myself and the other is public knowledge.
- What I know and the other is unaware of is part of the private domain.
- The aspects of myself that I am unaware of but that the other knows of me is an area to which I am blind.
- The unknown is that which is neither in my field of consciousness nor in other’s.

### Studio 2 - Exercise
Completion Time - 60 minutes

Do four pieces of art following these guidelines:

**Work 1** - Use only materials/techniques you have used here or with someone (public domain).

**Work 2** - Use some or all materials/techniques suggested by someone else as some that you might want to use but that you have never used (blind spot). The group leader or therapist makes that choice.

**Work 3** - Use, in a different way, some or all materials/techniques you have used before or materials/techniques never used here (private domain).

**Work 4** - Use materials/techniques you have never used here or elsewhere (unknown experience).

Debrief

(Continued on page 2)
Announcements

She’s Back!

We would like to welcome back Sue Manley as the BCATA Administrative Assistant. Her previous resignation was reconsidered. In addition to resuming her regular duties, Sue has kindly volunteered her time and talents to act as our new Web Master.

Sue hopes to re-design our on-line look. She would appreciate any feedback, ideas, or suggestions. Please contact her through the BCATA office.

Upcoming Professional Development Workshops

May 1st, 1999
Exploring the Secrets of Personal Snapshots and Family Albums—An Introduction to Photo Therapy Techniques
Judy Weiser, R. Psych., ATR

What a snapshot is about is often more important emotionally (and psychotherapeutically) than what it is of. Learn and experience how clients’ ordinary personal snapshots, family albums, and various “collected” photographic images (and their interactions with all these) can be used as catalysts to therapeutic growth and change. Prior photographic experience not required.

Judy Weiser is a psychologist, art therapist, consultant, and trainer specializing in counselling those infected or affected by HIV/AIDS. She has long pioneered, taught, and maintained a private practice utilizing “Photo Therapy” techniques. She is director of the Photo Therapy Centre in Vancouver, past Editor of the journal Phototherapy, and author of the book, Photo Therapy Techniques—Exploring the Secrets of Personal Snapshots and Family Albums. Judy is also a gallery-exhibiting photographic artist.

June 5th, 1999
Transforming Narrative into Dynamic Metaphor
Peta Schur, BA, DTATI and Ofir Gabay, DISIS MA (pending)

During the process of art therapy, we explore images. We discover stories, myths, and narratives that have shaped our perceptions of self, others, and of ourselves in the world. These images, stories, and narratives rest on the page. They usually have rested for many years. Some are reluctant to wake up, some shout out in anger because they are so tired of being inactive and all want to be heard.

In this theoretically and experientially based workshop, we will demonstrate the way art making can frame metaphor and give life to images. We will also explore using other expressive modalities to amplify and transform narratives.

Peta Schur is co-founder of the Expressive Therapy Studio, a teacher at the Counsellor Training Institute of Canada, and a therapist at the Ark Child Service Society. She is an art therapist trained in improvisation, storytelling, creative writing and movement therapy. Ofir Gabay is an expressive arts therapist and co-founder of the Expressive Therapy Studio. His work with individuals and groups involves improvisation and active imagination using different art modalities. Ofir runs professional development workshops and has presented at St. Paul’s Hospital, and the Dr. Peter Centre.

(Continued from page 1)

1. Share some of the thoughts, feelings, and or body sensations you experienced choosing and or using the materials/techniques suggested.

2. a) How do you present some part of yourself that is public knowledge? Do you have any comments on this presentation of yourself?

b) How do you react to someone knowing something about you that you are not yet aware of?

c) What happens when someone tries to invade your privacy?

d) Someone is willing to pay you to do a job you’ve never done before. What do you do?

3 Reflect on your reaction to the public, blind, private, and unknown selves of others: strangers, friends, acquaintances, family members, clients.

Marie-José Marcil is a second year student in the Post Masters Certificate in Art therapy at the BC School of Art Therapy. Her practicum is at Victoria Mental Health (Child and Youth Team.) She has a Master of Education (Counselling) from the University of Victoria.
From the Ethics Chair

By Monica Franz, BCATR, RCAT

An ethics related issue on which I would like to encourage consideration and discussion among our membership is the use of computer technology in our work as Art Therapists. As many of us are not proficient in the realm of electronic media (I find myself labouring under a serious case of technophobia much of the time!), we can experience some of the issues relating to the ethical use of computer technology as somewhat challenging or confusing. Some issues which may be of particular interest to Art Therapists centre on themes of confidential information, advertising, legal liability, and professional standards of practice including:

- Ensuring the security of confidential and privileged information that is relayed through e-mail
- Ensuring the security of art products that have been scanned and sent via fax or e-mail
- The security and management of files saved to a computer's hard drive
- The security and management of files saved on disk
- The security and management of files in a networked system
- Web site management and ethical standards regarding advertising
- The use of therapy chat lines to discuss therapeutic or supervision issues
- Computer assisted design (CAD) technology and its implications for art therapeutic standards of practice

As a service to our membership, the Ethics Committee would like to compile a set of guidelines of practice with respect to the uses of computer technology in our work. Given that this technology and the possibilities it provides is continuously evolving, I regard this project as the beginning of a work in progress. I invite members who have interest and/or expertise in this area to join us on the Committee to engage in research, discussion, and the writing of what I hope will be a useful guideline for the skilled and

### SOMETHING NEW

Exploring Books and Ideas with Llona O’Gorman


Even if I am going away for a weekend, I am compelled, usually, to trundle along at least a dozen books, just in case...! Packing for a ski trip in February I managed to overcome my usual compulsion and chose one book, the above, to take along. I was planning to review it for a workshop I am facilitating down the road. Well, as the Fates would have it, I came off the mountain in an ambulance having experienced a heart attack. I subsequently spent the next week attached to monitors and IVs in hospital and guess what? I had only one book to read: *Full Catastrophe Living*. Appropriate wouldn’t you say?

Kabat-Zinn attributes the title to Nikos Kazantzakis’s novel, *Zorba the Greek*, when Zorba’s young companion asks “Zorba, have you ever been married?” Zorba replies “Am I not a man? Of course I’ve been married. Wife, house, kids, everything...the full catastrophe!” In this day and age of high stress and big demands on time and energy it is quite easy to slide into “the full catastrophe” living. While this book describes in detail the program developed by Kabat-Zinn and colleagues of the Stress Reduction Clinic at the University of Massachusetts Medical Center, it is an excellent resource for personal use or for clients.

Patients referred to this particular program are suffering chronic pain and/or stress that has defied all traditional treatment. The demands of participating in the program as patient or staff are the same, a “radical commitment to self-awareness and self-acceptance.” The statistics of success are inspiring.

What Kabat-Zinn is teaching in the clinic is the “how of taking care” of oneself, not as a replacement for medical treatment, but as a vital complement to it. He describes it as “a practical guide for anyone, well or ill, who seeks to transcend his or her limitations and move toward greater levels of health and well-being.” The program is “based on rigorous and systematic training in mindfulness...a systematic approach to developing new kinds of control and wisdom in our lives, based on our inner capacities for relaxation, paying attention, awareness, and insight...There are no drugs that will make you immune to stress or to pain or that will by themselves magically solve your life’s problems or promote healing. It will take conscious effort on your part to move in a direction of healing and inner peace. This means learning to work with the very stress and pain that is causing you to suffer.” The clinic staff starts where the patient is at that moment in his/her life and they never give up on him/her as long he/she is ready and willing to work on himself/herself.

So Kabat-Zinn has undertaken to lay out a manual of techniques and philosophy used in the clinic, including a detailed eight-week practice schedule you can use at home. The program begins with the body scan and asks for a commitment of 45 minutes each day to do develop awareness of the body. They focus on paying attention, on awareness in every detail of one’s life. They teach meditation, yoga and breathing. They teach the “attitudes” of mindfulness

(Continued on page 4)
practice. In discussing the paradigm itself, he describes "healing is a transformation of view rather than a cure."

The program discriminates between "stress reactivity" and "stress response." There is much clinical data and research given, as well as anecdotal histories of many who have made the major commitment to live with awareness and create healing in their lives. The roadblocks to success are boredom, exasperation. Kabat-Zinn says, again and again, "You don't have to like it, you just have to do it." He emphasizes that "mindfulness is not meant to be a battle between you and your pain and it won't be unless you make it into one...Remember, you are trying to find out about your pain, to learn from it, to know it better, not to stop it or get rid of it or escape from it. You're suffering is not you."

I subscribe to Kabat-Zinn's philosophy and I find this book an excellent resource. However, I find far too often in my art therapy practice that individuals can't quite make that big commitment to transformation of attitude, particularly if they are already trapped in the body/mind pain. It would be wonderful to have a philosophically sound, formalized program that was accessible and affordable to those who want the support. (I hereby resist the temptation to even entertain the idea that I might find support in our medical system to initiate such a program—but maybe somebody will.)

Audio tapes and video tapes of the Stress Reduction Clinic program are available. For those practitioners who are not accustomed to translating resources into art therapy modality, you might want to check out Lucia Capacchione’s books. Two in particular encompass many of the ideas in Kabat-Zinn’s work: The Picture of Health, Healing Your Life With Art, and The Well-Being Journal, Drawing on your inner power to heal yourself. Travel in

Where is the “art” in art therapy? OR What does art therapy have in common with the art as healing movement?

By Kathleen Collis, PhD, ATR, BCATR

Cathy Malchiodi in her short article in the American Art Therapy Journal(1998), stated that “many mental health groups are turning to artists, not art therapists/clinicians like ourselves, for therapy.” (from quote p.154) “Because art as healing and related groups such as art in health care and arts medicine are becoming increasingly popular, many examples of the art as healing movement are currently present and thriving...” and she goes on to further emphasize that many health care groups are calling upon artists, not art therapists, for “implementation of art programming in hospitals and community agencies. Why this is happening is a question that the field of art therapy must consider,...(in order) to strengthen art therapy's position in the job market."(p.155)

In her article Malchiodi states that Samuels and Rockwood (1998) note “that art therapists may be seen as clinicians solely interested in art interpretation rather than as process-oriented practitioners who use art to initiate change, enhance health and well-being, and encourage reparation.”

For sometime, as a phenomenologist, artist, and art therapist, I have expressed concern at the lack of artistic training within the process of becoming an art therapist. Many of our students graduate from the various training programs with no deep sense of the power and experience of a work of art ‘in and for itself.’ I am referring to art lived at the very profound level necessary to uncover, articulate, and experience the deeper structures that occur in the process of making art, and in the art as a process of healing. We appear to have lost (or never had) the deep involvement in the arts which is, in fact, the foundation of art as therapy. Instead, many of us rely on the theoretical interpretation of symbols or symbolic imagery (generally phrased in Jungian, psychoanalytic, or other theoretical terminology) to uncover latent meaning in the imagery. Within this interpretive approach, the art therapist is more safely guided to an acceptable analysis of the art object within the theory that he or she embraces. But there is more to the arts in therapy than interpretation and ‘working through.’ There is art in its own right, and what we can experience at that level.

This is food for discussion, I hope we can get some sort of dialogue going.

Reference:

The Discussion Board is a new feature of the BCATA Newsletter. We wish to post thought-provoking articles, opinions, and arguments concerning art therapy and its practice. Readers are invited to respond to these issues as a means of promoting dialogue and sharing among our members.

To post an item or to respond to a posting, please e-mail vrsi@home.net or snail mail to the BCATA address.
Art Therapy in a Changing World

A Conference co-sponsored by the Kutenai Art Therapy Institute and the BCATA

August 27, 28 & 29, 1999
In Nelson BC

For information contact:
The Kutenai Art Therapy Institute Association
#2A-601 Front Street
Nelson BC  V1L 4B6
(250) 352-2264 or 354-4747
Fax (250) 352-5911

Annual General Meeting

Sunday, May 30, 1999
Vancouver Aboriginal Friendship Centre Society
1607 E. Hastings Street
(at Commercial)
Vancouver BC

11am to 12pm  Pot Luck Pig-out
12pm to 2pm  AGM
2pm to 5pm  Paint-in

Join us for food and fun!

The BCATA will co-sponsor a conference in Nelson BC with the Kutenai Art Therapy Institute. Highlights include: a presentation by Lucille Proulx on her work with children (18 mos. to 6 yrs.), a panel on supervision hosted by Monica Carpendale, and a presentation by Kay Collis on phenomenology and research. Other topics will include art therapy and the elderly, and experiential workshops.

The BCATA Annual General Meeting will be held as a separate event. The AGM will take place On Sunday May 30 at the Friendship Centre in Vancouver. It will be an informal gathering to enjoy food, fun, and painting! After a potluck luncheon and some brief business matters, we will hold a “Paint-In” for members to let loose and express themselves. Please join us for this free event. Let’s do what we enjoy best—Eat
CLASSIFIEDS

Butterfly Wisdom:
Illuminating the Evolving Self
April 20-June 8
7:00-9:30

This 8 week group for women age 30+ will provide a safe place to explore and share issues critical for the evolution of growth of self and will include art making and time for sharing and discussion.

Please register early as numbers are limited. $250. incl. GST.

#210 - 307 W. Broadway
Vancouver BC

For more information call:
Eve Stocker, BFA, DVATI 687-0630
or
Heather Miller, BScN, MEd, DVATI 261-4535

Wanted:
Artwork and Ideas

The BCATA Newsletter is always on the lookout for articles, announcements, and ideas. Share your experiences and knowledge.

Your original black and white artwork is also requested. Reach out to the art therapy community.

For more information contact Virginia: (604) 733-9221
vrsi@home.net.

Hardcopy may be sent to the BCATA office.

Business Card $15.00
¼ page $30.00
Inserts $50.00

Applications for Registration Packages

Available from:
Llona O’Gorman
Chair
Registration Committee
2904 Phyllis Street
Victoria BC V8N 1Y9
(250) 472-0549

Submission Deadlines:
April 30
August 31
December 31

Professional Development Workshop Committee

The recent series of Professional Development Workshops has been a huge success. If you would like to become a part of the planning committee, now is the time to volunteer your time, thoughts, and creativity.

For more information, please

BCATA Membership

To become a member of the BCATA please contact our main office. Fees are due on April 30th annually.

Registered Member $100.00
Professional Member $100.00
Associate Member $50.00
Student Member $20.00

To place an ad or submit an article, please contact a member of the newsletter committee:
Virginia Ise vrsi@home.net or (604)733-9221.
Marga Hanna

We welcome your ideas and feedback.
Visit us at our Webster: www.arttherapy.bc.ca e-mail: info@arttherapy.bc.ca