

The Art Therapist as a Nomadic Force:
A Proposition for Contemporary Practice

A Culminating Project and Contextual Essay
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By

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A Proposition for Contemporary Practice

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Abstract

The Art Therapist as a Nomadic Force:

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A rhizome continuously establishes connections among semiotic chains, organizations of power, and circumstances relative to the arts, sciences, and social struggles (Deleuze & Guattari, 1980/1987). This dissertation examines doctoral research within the framework of a professional approach that situates itself in an interdisciplinary position informed by Deleuze and Guattari's philosophy, particularly their figurations of *rhizome* and *nomad*. The art therapist is presented as a *nomadic force*, connecting with clients and knowledge structures using rhizomatic, nomadic thinking. Multiplicities of subjective realities in diverse communities were examined using the following concepts: perception and intersubjectivity, language and the unconscious, creativity and relational aesthetics, dominant culture's effect, and community art therapy and social action. A sample of eight individuals in four distinct settings illustrates the approach, along with the video "The Art Therapist, a Nomadic Force." Its essential feature is a metaphorical image of the art therapist, conceptually de-territorializing and re-territorializing as a nomadic force, viewing individual or community realities with fresh perspectives, without the power influence of centered systems. Recreating trajectories as cartographic explorations, inner terrains and knowledge of art therapy became a base for layered fluid thinking. Using arts-based empirical methodology, data were organized based on wonder and singularities versus theoretical over-determinism. Results included relevant concepts of affect, percept, poetics of intersubjectivities, and the experience of creativity development for client and therapist, demonstrating an engagement in the creative

process of *becoming* within nonhierarchical encounters based on intersubjective dynamics, revealing unique realities about all artists. The rhizomatic, nomadic approach in art therapy was developed as the application of Deleuze and Guattari's philosophical work in art therapy practice.

Keywords: rhizomatic art therapy, nomadic art therapy, arts-based research, affect, percept, intersubjectivity, relational aesthetics, becoming

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CHAPTER 1: INTRODUCTION

Rhizomatic, Nomadic Thinking: A New Approach in Art Therapy Practice

In both clinical and community-based work with people of all ages in art therapy, I find the work of the art therapist to have a unique value that extends to three major areas: the creative expression of perceptions and ideas through relational aesthetics between art therapist and client, the shaping and sharing of perception and affect within the intersubjectivity of relationships, and the value of art as a catalyst for change in the community through the use of arts-based initiatives. Using the philosophical work of Deleuze and Guattari (1972/2009, 1980/1987, 1991/1994)—specifically, their philosophical treatise on nomadology—I have developed a conceptual base that has been beneficial in my work with clients in art therapy, placing myself, the researcher, as a *nomadic force* interacting with diverse populations and settings of practice.

Although clearly dissociating their work from postmodernism, post-structuralism, and all other ism's, Deleuze and Guattari have greatly influenced disciplines across philosophy and art, including postmodernism. Both authors—Deleuze, a Parisian professor of philosophy who also worked in the fields of aesthetics and the history of philosophy, and Guattari, a psychotherapist and political activist—were not celebrant of postmodern playfulness (Goodchild, 1996). At the origin of Guattari's critique of postmodernism is the hope that society can still be transformed by collective action (Guattari, 1989/2013). Guattari wrote that structuralism and, subsequently, postmodernism has accustomed us to a vision of the world drained of the significance of human interventions, embodied as they are in concrete politics and micropolitics (Guattari, 1989/2000). In general Deleuze and Guattari's work is considered to have

highly affirmative and activist aspects; this is especially exposed in the work of Braidotti (2011), which presents nomadic thinking as a political stance of affirmation and transformation.

In art therapy with postmodern perspective, the therapist is seen more as a consultant and collaborator, collapsing the hierarchy and refocusing on clients as experts on their own life experiences (Massino Drass, 2016). This and many other relations can be found between the work of Deleuze and Guattari, in postmodernism, and in post-structuralism. Post-structuralism was an intellectual movement that emerged in reaction to the limitations of structuralist approaches in linguistics and the social sciences. With structuralism, a fixed object of meaning was being studied by objectifying and determining procedures of social science. This resulted in difficulties explaining the nature of the involvement of participants who had to take up and use preconceived meanings.

With their in-depth work on multiplicities, Deleuze and Guattari presented a plurality of ways of being in the world that are incompatible yet coexistent (Smith, as cited in Deleuze, 1993/1997, p. xxvii). Perspectivism no longer implied a plurality of viewpoints on the same world or object; rather, each viewpoint now opened on to another world that itself contains yet another (Smith, as cited in Deleuze, 1993/1997).

I shall attempt to critically appraise how the flow of creative production can be seen in conjunction with thought patterns that align with post-structuralist concepts that offer space for multiple realities. Belsey (2002) posited that post-structuralist theory is not most concerned about what exists, but what we can accurately say exists. Language is the main concern; there being no doubt that a world exists, in post-structuralism there is a

worry and a concern about how we can say something about that world with certainty (Belsey, 2002). In this way, post-structuralist thinking helps with rethinking the many ways language and other signifiers are used during art therapy interactions. This view offers alternatives to deterministic ways that language may be used in art therapy contexts, especially when it is derived from specific paradigms in art therapy. It also offers space and room to validate and make multiple realities more visible.

Historically, art therapy theories have been generated to effectively address the needs of each population in specific settings and specific social conditions. Art therapists who have generated theories have been influenced by their era and life's philosophical, political, and artistic worlds, as well as their organization's culture and systemic makeup. By tracing back each art therapy theory to its origin we can see that it was the outcome of practitioners' efforts to address their pragmatic and hermeneutic needs. Throughout the history of art therapy, practitioners have developed theories using philosophical concepts and arts-based approaches. But they have especially developed theories that were effective responses to their unique needs and life experiences (Wadeson, 1987) and based on the dominant trends in psychology.

Over the years, art therapy approaches have been defined through their positioning on well-known spectrums: from clinical to studio, from psychodynamic to humanistic or person-centered, and from art as utilized in psychotherapy to art as therapy. With regard to the latter, Naumburg (1987), a primary founder of art therapy in the United States, created dynamically oriented art therapy (also known as "art in therapy") informed by psychoanalytical theories of her time. She proposed that symbolic communication within art therapy enhanced the psychoanalytic processes of verbalization

and transference, allowing for the unconscious conflict to become expressed more directly in pictures than with words. Kramer (2000), a contemporary of Naumberg who also was recognized as a founder of the profession, placed the healing value of art therapy in act of art making, as a process of sublimation, rather than on verbal analysis of the artwork. However, as Talwar (2016) observed, the difficulty with dichotomies is that they fuel binary thinking that only serve to reinforce the opposites. Talwar cited the current art and psychology prerequisites set forth in master's level art therapy training as evidence of a continuing, dominant framework that serves to legitimize hierarchies between the historic dichotomy of art as therapy versus art psychotherapy.

As the art therapy profession's context evolves to include much wider multiplicities of communities and settings, such an organization along a spectrum of approaches has become less useful or relevant. Kapitan (2003) wrote that beyond the polarity of "art as therapy" and "art in therapy" used to define the practice, there is a third position where art therapy is understood as a form of socially responsive art (p. 95). An example is Nolan's (2013) search of common ground between the paradigms of clinical art therapy and community-based art therapy, in which her practice is positioned in a hybrid, in-between space where clinical and community may coexist. These multiple positions for art therapy become necessary as societal systems and needs continue to change. Kapitan (2014b) regards the decentering the profession as a necessary realignment strategy, as well as an *affirmative* deconstructive move away from the center. I argue that by applying a nomadic, rhizomatic practice of art therapy, concepts and thinking strategies can be continuously developed to accomplish what is needed while moving beyond central structures.

Today, art therapists may adopt a theoretical framework that is useful in their practice with a specific population in a specific space and time. However, some may believe that art therapists will only benefit from practicing under a unified theory (Huss, 2009); that the multiplicity of theories creates a challenge or struggle for the art therapist. In disagreement with this idea, I find that multiplicity empowers the analytical base of the therapist's thinking and serves as a clear reflection of the diversity of art therapists' subjective thoughts and orientations and of the wide scope of populations, communities, and settings where art therapy is practiced.

As art therapists receive training within the framework of various theoretical approaches, they may rely on these for their work within therapist–client encounters, many of which follow trends in mental health and wellness (Potash, 2014) and narrow the perspective to exclude other landscapes of human relations. Despite their usefulness for the social conditions, historical period, and/or settings for which they were created, misapplied theoretical orientations may set up conditions that can break down during the actual therapy encounter. Moreover, the contemporary art therapist's practice is rarely limited to one setting and population or organization. Many art therapists, like myself, are providing services to very different populations in different settings, and may collaborate with organizations that have very different cultural or systemic makeups. However, when we engage in an ongoing hermeneutical and pragmatic approach to practice, pathways to new knowledge are created that transform prior background knowledge that can be otherwise irrelevant in the setting.

Art therapy is a profession based on valuable practical and philosophical perspectives on the realities and knowledge of human motivation, behavior, creativity,

and life quality that we should not abandon as a result of intimidation or desperation (Gerber, 2014). But as societies go through changes, these philosophical perspectives will change as well. I argue that it is essential that, while striving to enrich the theoretical base of the practice, art therapists keep abreast of developments in philosophy and arts today. I based this assertion on the broad scope of diversity of population, setting, and collaborations in my work that have initiated an inquisitiveness—both conceptual and practice-based. Deleuze and Guattari's rhizomatic and nomadic mapping of knowledge has offered me a freedom of growth and action, allowing me to engage in this hermeneutical and pragmatic approach to practice as an alternative to remaining within a centralized tree-like growth and knowledge acquisition. To the flat repetition of existing patterns, nomadic thought opposes an ethics of qualitative transformation and a politics of complexity and affirmation (Braidotti, 2011).

My research problem focused on the gap in knowledge between current theoretical approaches in art therapy and contemporary philosophical and arts-based approaches, which include the consideration of all aspects of modern subjectivities. Deleuze and Guattari introduced new and fluid ways of describing events and subjectivities that have helped both my clinical and community-based art therapy practice. With a new critical language for analyzing thinking as flows or movements across spaces and borders, Deleuze and Guattari introduced new vocabularies for thinking about knowledge and meaning as well. Their work has changed perspectives and thoughts about education, pathology, psychology, and art.

For example, concepts such as *assemblage*, *detrterritorialization*, *lines of flight*, *nomadology*, and *rhizomatics* refer to spatial relationships and to ways of conceiving ourselves and other objects moving in space (Gough, 2005). These concepts offer new ways of thinking about the individual that are beyond language usage based on institutionally and socially constructed realities. Deleuze and Guattari (1980/1987) distinguished “rhizomatic” thinking from “arborescent” conceptions of knowledge building, the latter of which are hierarchically articulated branches of a central stem or trunk rooted in firm foundations (Gough, 2005). This rhizomatic thinking has been a strong metaphor for me in the relationship between my artistic work and art therapy process (Figures 1 & 2). When Deleuze and Guattari (1991-1994) observed that “what is preserved—the thing or the work of art—is a bloc of sensations, that is to say, a compound of percepts and affects” (p. 164), I found a fresh field to explore in the context of art therapy. Rhizomatic thinking is a strong metaphor for the ways I connect my work with diverse populations and clients, and the ways I think with diverse theories. “A rhizome ceaselessly establishes connections between semiotic chains, organizations of power, and circumstances relative to the arts, sciences, and social struggles” (Deleuze & Guattari, 1980/1987, p. 7). I came to realize that this is exactly how the mind uses knowledge, by ceaselessly establishing connections with all prior knowledge, and this movement to establish connections between diverse knowledge chains is at the base of my interdisciplinary interest in art therapy.



Figure 1. *Rhizomatic Growth*
(Researcher's Personal Journal)



Figure 2. *Rhizomatic Growth*
(Researcher's Art Process)

Gough (2005) used the following definition from Umberto Eco to explain the rhizome: “The rhizome is so constructed that every path can be connected with every other one. It has no center, no periphery, no exit, and because it is potentially infinite, the space of conjecture is a rhizome space” (p. 57). In the same way that thinking nomadically and rhizomatically destabilizes sedentary

conceptions of hierarchically arranged knowledge along a central stem rooted in a fixed foundation (Gough, 2005), I have found that a sense of flow moving independently from central paradigms is highly relevant to my work with clients. This movement does not depend on the decision of how to shift between, to alter, or to be confined to a limited set of paradigms; instead, it builds alternative fluid trajectories across numerous subjectivities. Thus does the art therapist gain new knowledge, as these trajectories that can multiply to reach wider populations in diverse communities.

Gough (2005) interpreted Deleuze and Guattari's (1980/1987) figurations of *nomad* and *rhizome* as tools for “shaking the tree” of modern Western science and its education curricula and research. Relatedly, Collins (2014) developed from Deleuze and Guattari's geophilosophy (1991/1994), a deeper discussion of material thinking that takes place in the relationship of territory and earth, and positions art practice as a making sense of territory. These ideas are highly relevant for experiencing the client–therapist relationship that can lead to insight into clients' worlds and realities, and offer alternatives to the ways in which art therapy processes are described. With these

perspectives, art therapists can reexamine client realities as new legitimate territories, with less reliance on the systemic institutional language involving diagnostic labels and psychological categorizations that can make the individual's reality indiscernible.

Contemporary art therapy research findings reveal that art therapists are proficient in working in diverse ways and in a varied range of settings with specific clients and with the general public. Conceivably, the creative skill of structuring the environment, facilitating the creative process, and finding meaning in one's art may transcend all other differences (Potash, Mann, Martinez, Roach, & Wallace, 2016). With the understanding that the artistic act is the creation of a territory, I aimed to experience other ways of knowledge building that are initiated by moving within these territories, not offered or enforced from outside systems. Deleuze and Guattari suggested that individuals who experience a force produced by an affect can retain this force and be changed as a result (as cited in Hickey-Moody, 2013). The materiality of the artwork holding these affects creates trajectories to experiences that result in change and becoming. This suggests that the art therapist's interaction with the client may include the construction of new meanings and the gaining of new knowledge along with a sense of wonder about other realities. Together, art therapist and clients share flexible spaces for the creation of ideas through the creation of the art, which Deleuze and Guattari (1991/1994) defined as "a bloc of sensation, a compound of affect and percept" (p. 164).

My research goal was to explore and explicate the art therapist–client encounter from these new perspectives with new languages. I wanted to examine my assumptions and to articulate what I observed to have great impact that is therapeutic for the client and informative for the work of the art therapist. I also explored how this approach can offer

the art therapist creative ways to access a larger number of community members and increase community collaborations and partnerships. I proposed that art therapists and the individuals they serve might benefit from greater understanding of the relationship between art and relational aesthetics, if the art therapist can function as:

1. A force able to work with new individual realities through relational aesthetics and support the client with an openness to conceiving of multiple realities and gaining new knowledge.
2. A force that is not static, that is able to de-territorialize from centralized dominant theoretical, psychological, or practice-based paradigms and is dynamic and fluid in navigating through concepts within theories of art therapy with an interdisciplinary interest.
3. A learner with an interest in becoming, affect, relationality, creativity, and multiplicity (Coleman & Ringrose, 2013) and a commitment to multiple paths, who can engage with various communities and take initiative to generate collaborative projects.

I examined how post-structuralist approaches—specifically, Deleuze and Guattari's—and contemporary arts-based frameworks might support the work of understanding or accepting participants' perceptions and realities in art therapy practice. I determined that a nomadic approach could address the gap between contemporary practice and traditional conceptions of art therapy. The nomadic approach explores contemporary and modern subjectivities within clients, and effectively engages both art therapist and clients in a rich, impactful creative process of intersubjective relational

exchange. These exchanges allow for a greater exploration of perceptions and personal realities, leading to what I observed as an impactful therapeutic effectiveness.

I explored the relationship of perception, language, and intersubjectivity and its effects on the artistic process and product. This perspective of creative thinking and intersubjective relations offered more pathways for my work as a force that is moving in-between meanings, in place of remaining static and crystalized inside orientations from mental health professions' systems or trends where clients can become invisible as individuals due to the dominant power structure with its specific diagnostic and assessment language and narratives.

Implications for the Field of Art Therapy

I believe that the ultimate goal of art therapy is to make great contributions to communities' health through creating arts-based projects and organizing arts-based collaborations that work for social change. We can reach this exciting goal by working closely with our clients and listening carefully to their realities, using their support and participation. In agreement with Kapitan (2014c), I believe that as art therapists, we need to recognize our participation in systems that stigmatize, marginalize, and oppress people, and that we need to commit to helping our clients while they develop their own power to expand what is possible for themselves and their communities. This perspective will promote deeper understanding and increased willingness to take action, leading to significant, positive social change (Kapitan, 2014a).

Currently there seems to be little published art therapy research that examines how Deleuze and Guattari's views, with their geophilosophical and arts-based frameworks and their treatise on nomadology (1980/1987), may influence and shape the

work of understanding participants' perceptions and realities through relational aesthetics in art therapy practice. In her art therapy practice *Groundswell*, which is an environmental and therapeutic arts education service located in the middle of mountains, sea, domestic gardens, and agricultural fields and hedggrows, Whitaker has used Deleuze and Guattari's concept of rhizome as as a botanical and psychological concept, a routing through the landscape, and a trail of generation (Whitaker, 2010). Whitaker wrote that a rhizome's horizontal growth can be used to represent subjectivity as a growing enterprise, and that the idea of identity that is constantly in process spread out into different areas of activity that gathers a collection of life perspectives and experiences (Whitaker, 2010). In Deleuze and Guattari's work, subjectivity functions in a way that is affirmative of realities not a flight of perspective from the same world or reality. Along these lines, Kapitan (2014b) wrote that if art therapists are able to leave the old myths and binaries, art therapy can be conceived not only as a profession but perhaps more pragmatically as a complex social landscape that contains numerous communities of practice.

As I will explicate in the next chapter, I discovered in my reading of the literature that a number of art therapists have carried out research and expanded the lens of art therapy beyond the initial clinical perspectives, offering perspectives based on creativity and meaning making through various approaches within the studio model and by focusing on intersubjectivity and relational aesthetics. Many art therapists, with great sensitivity to diversity, cultural multiplicities, and social justice, have been engaged in impactful collaborations with diverse communities connecting art therapy and social action while being inspired by the trend of social practice art. Although they are presented as practice models or paradigms, both studio and social action art therapy offer

a deeper insight into the needs and realities of communities and interactions of therapist clients. Through postmodernism, art therapists have explored deconstruction and multiplicity in client realities (see e.g., Massino Drass, 2016). However, I have limited this research to the specific work of Deleuze and Guattari.

Because human perceptions and intersubjectivity impact the therapeutic encounter for all populations in all settings, I became interested in studies that may inform the therapeutic relationship beyond the language of established dominant trends in health care, which have largely shaped art therapy theories. I also looked beyond the art as image, to explore relational images and intersubjective intensities during therapist–client encounters. The conceptual base of my approach is aligned with Derrida’s idea that the notion of a direct relationship between signifier (the image or sign) and signified (the concept or meaning) is no longer tenable; instead, we experience infinite shifts in meaning relayed from one signifier to another (Guillemette & Cossette, 2006). For example, a word that I say to the client about an image travels on a chain of signifiers that the client perceives, remembers, or experiences at a personal level. These signifiers transcend art to include detailed elements of space, sounds, shapes, gestures, movements, words, and more. They may include word/memory/image associations unique to the client, or other signs, such as my tone of voice, accent, gestures, or other images and other events in the space. The client experiences a unique assemblage of signs, each relating to personal signifiers on the chain of associations from which to make meaning within this complex dynamic.

In this study I have considered the complexities of perception and basic intentionalities of perceptions, and the influences of a fluid, constantly changing give and

take during intersubjective encounters in art therapy relationships. By placing this complexity as a central element during exchanges, dialogues, and arts-based projects, I have approached therapy relationships and interactions without presumption, understanding clients' expressions as multiplicities of meaning creations and artistic statements. The philosophical work of Deleuze and Guattari provided a fresh perspective for thinking with these complexities regarding perceptions and exchanges in art therapy. For this research, I have used concepts from Deleuze and Guattari's treatise on nomadology (1980/1987), Deleuze's work on art, defined as "blocs of affect and percept" (1989), and their critical work about—and against—psychoanalysis (Deleuze & Guattari, 1972/2009).

Nomadic, rhizomatic thinking has been an essential inspiration for my sustained connection with my art process and my profession. In agreement with Deleuze and Guattari, I believe that in the work of art, a bloc of sensations, a compound of percepts and affects, is preserved (Deleuze & Guattari, 1994). They explained that *percepts*, in the artwork, are no longer perceptions but are independent of a state of those who experience them; *affects* are no longer feelings or affections but go beyond the strength of those who undergo them (p.164). Percepts and affects have become existences whose validity lies within themselves and offer new realities, new consonance, and both dissonance and harmonies of tone and color (Deleuze & Guattari, 1994).

This research topic is important for the field of art therapy because it suggests the application of a new philosophy in art therapy practice. This application can be impactful in understanding client–therapist interactions and relations, offering openness to subjective realities and a way to delimit the encounter from therapy tools that can redirect

intersubjective exchanges into health-care systems' power territories. Moreover, because art therapy has aligned itself with mental health counseling for the past two decades (Spooner, 2016), this work may also present as a challenge for art therapists who are seeking creative ways to contribute to communities' health.

The systemic structures of health care offer art therapists limited choice for actualization. But with greater reflexivity and some new language and tools to inform their work, in the near future art therapists may be more successful in disrupting the hierarchical power relations in their work with clients. In our encounters with clients, art therapists may look at various theoretical attempts with an awareness of our era's social, cultural, and political complexities through interdisciplinary investigations. Kapitan (2014b) wrote that in order to collectively consider what is needed to reinvent ourselves and the profession of art therapy as a "community of practice," we need to challenge the use of outdated language, concepts, identities, and stereotypes, and set ourselves to discover better ways to grow and to make a commitment to disseminate our work so that its benefits can multiply throughout the world.

In art therapy literature intersubjective, arts-based, and dialogical values in therapy have been expressed in therapist–client work in some health-care, studio model, or social practice art therapy paradigms (e.g., Kapitan, 2011; C. H. Moon 2002; Skaife, 2001). However, the overall consideration of the biased influence of paradigmatic approaches on patient–therapist relations and realities may have been overlooked. Differing paradigms can result in significantly disparate interpretations and thereby further confuse or alienate art therapists (Henley, 2012). Art therapists have to navigate paradigm loyalty, sort out prevailing theoretical orientations, and determine which

research methodologies serve the diversity of their professional settings (Henley, 2012). Making change in power structures and systemic change in the clinic requires our actualization in any setting. I believe that within the clinical art therapy paradigm, for example, there is a bias that suggests patients in the psychiatric clinic's activities therapy room are not part of a community. Similarly, with rhizomatic thinking, I can envision the clinical process as taking place in the psychotherapist's art studio or gallery. By identifying such challenges as expanding research paradigms, technology, globalization and cultural diversity, and adopting a critical, anti-oppressive stance, Kapitan (2014c) emphasized the importance of acknowledging the changing world of art therapy and to use the great diversity of art therapy as a source of strength and imagination.

In agreement with B. Moon (2016), I believe psychology, art, counseling, and social activism are each polymorphic and, just as in art therapy, require the cooperation of myriad perspectives and experiences. This polymorphism and multiplicities of perspectives and forms of practice may be explored in rhizomatic, nomadic art therapy, offering a nonlinear perspective within fluid, multidirectional ways of moving between thoughts and feelings. Nomadic, rhizomatic thinking has access to knowledge in a multidimensional way, whereby cross-disciplinary research and training can support the work of the art therapist. The conceptual base and image of a nomad has been helpful in reconsidering the movement of the therapist within meanings as a free creative movement.

I have made a study on how individual subjectivities can affect practice and assessment in art therapy. By venturing beyond trends in mental health and investigating the percept and affect of clients through a kaleidoscopic viewfinder, using what Bergson

(1998) explained as “snapshots of their ideas” and their facts, I examined client realities with an interest in the singular and the unique. An in-depth knowledge of theories and an informed engagement with multiple paradigms can increase the possibility of untangling the web of human identity and experience (Henley, 2012). A nomadic fluidity will make this informed engagement possible through more open, multidirectional knowledge-building processes.

I assert that by considering the client–therapist encounter from a perspective informed by Deleuze and Guattari’s philosophical work, especially their treatise on nomadology (1980/1986, 1980/1987) as a similitude for the art therapist who does not bring a personal theoretical view to communities but rather approaches the new environment with openness, current conceptual multiplicities in art therapy approaches can support the applications of new strategies in using knowledge in therapy. This rhizomatic approach is conducive to obtaining snapshots of individual realities and ideas. It is aligned with nomadic thinking that de-territorializes experiences from theoretical and institutional dominance to build knowledge using cross-disciplinary strategies, thus differing from interventionist lenses that deal with pathology or deficiency. Art therapy can adapt to the particular needs and worldviews of host communities instead of remaining ideologically aligned to tradition (Hocoy, 2005). An openness to change and a desire for *becoming* (Deleuze, 1988, 2006; Deleuze & Guattari, 1972/1983, 1980/1987) differentiates the art therapist with nomadic thinking from the “sedentary” practitioner who is confined to the safety of paradigmatic orientation. Giving a first-hand example on limiting effects of paradigm bias, Henley wrote that he discovered how paradigm loyalty is rife throughout the contentious field of autism research (2012). Nomadic rhizomatic art

therapy promotes personal, self reflective, and interdisciplinary studies for a pragmatic response to contemporary practice. I have experienced that with this approach, art therapists can operate as a nomadic force, recreating and redefining pathways and strategies as cartographic explorations, and connecting their inner territories with interdisciplinary inquiry and useful theories to bring about change through networking and a commitment to multiple paths and resources.

Research Questions

My area of interest was the exploration of a greater inclusion and understanding of multiple realities and subjectivities in my work with clients, and an approach to therapy dynamics where art therapist–participant encounters are based on democratic, nonhierarchical exchanges. I believe this view may enable art therapists to learn from and adapt to realities and environments, as well as to access participants’ realities through the lens of multiplicity in place of fixed or settled theoretical orientations. I was interested in having access to participants’ realities and worlds, learning from the experience, and monitoring how my interactions and input can positively influence the therapy relationship. My main questions were:

1. What happens in terms of living a relational form when, during arts-based encounters, the art therapist engages with the client with nomadic thinking as conceptualized by Deleuze and Guattari?
2. How can the deconstruction and reorganization of art therapy epistemology through a new agency, based on art therapy’s deeper philosophical and artistic bases and the use of concepts from Deleuze and Guattari’s nomadic, rhizomatic

thinking and knowledge building, support the art therapist's work in creating new trajectories using these new strategies for understanding participants' perceptions?

My research questions aligned well with empirical arts-based approaches through arts-based research for several reasons. Both of my research questions explored experiences of individuals with the art therapist through the arts and the experience and perceptions of the art therapist based on multiplicities and differences within arts-based experiences, excluding a language (including body language) built around pathology, lack, or impairment. Both questions addressed learning about new worlds and realities of individual clients and communities, which requires an awareness of how influences of language powers and institutional cultural dominance that may influence therapy relations. With nomadic thinking, the art therapist de-territorializes experiences and thoughts from institutionally determined values and socially constructed realities. I based my research on the vast language of life and the arts and used a post-structuralist approach to provide ways that client–therapist relationships can be liberated from redirections to a limited pool of meaning, allowing for singularities to emerge through language justice.

These singularities are explicit in a work of art, which Deleuze and Guattari describes as blocs of affect and percepts (1980/1987, 1991/1994). Deleuze and Guattari defined affect as active discharge of emotion (counterattack), whereas feeling is an always displaced, retarded, resisting emotion (1980/1987, p. 400). This immediacy of release of affect through art is therapeutic and empowering. Feeling, and the verbal expression of it, do not carry this immediacy and can be multiple. Deleuze and Guattari explained that the essence of the act of painting is to paint forces (as cited in Collins,

2014). Therefore, only artistic compositions of artists and arts-based researchers can redirect discussions about social phenomena by allowing others to vicariously reexperience a world, and only they choose to use the expressive qualities of artistic medium to communicate meanings that are otherwise unavailable (Barone & Eisner, 2012). These artistic compositions and the forces they contain have the power of changing and shaking the tree of socially accepted safe realities. It is my experience that the world that is shared through the art is always subjective, and our perception of it cannot be anything but subjective; what is referred to as being objective can only be a subjective conformity to a specific socially constructed and accepted reality. It is these “forces,” painted in the painting or created in the artwork—as well as the affect and the percept noticed in the artwork—that can be perceived by all viewers and art therapists.

My research questions corresponded well to an empirical arts-based approach to research that consists of great focus on gathering data through actual experiences, art responses, perceptions and senses of the researcher, and to the relationship that bases itself on arts-based expressions. My interactions with participants were based on the natural flow of the social situations in the studios, a relationship that was inviting and open to further art collaborations and dialogues with participants. Four of eight participants became interested in some form of artistic collaboration with me as an art therapist, which supported both the empirical methodology of recording through experience and perceptions and the arts-based approach that allowed for a nondeterministic form of artistic dialogue and connection through collaborative projects with participants. My videography work was a final central documentary project that

combined the arts of participants, researcher, and collaborative art and made my analysis of the empirical experiences of percept and affect of arts-based activities possible.

CHAPTER 2: CONTEXTUAL EXPOSITION AND REVIEW OF THE LITERATURE

The development of the profession of art therapy can be conceived as the formal application of a long-standing human tradition reflecting influences from the intellectual and social trends of the 20th century (Junge, 1994; Vick, 2012). In Junge's in-depth narrative of the history of the art therapy profession in the United States, she highlighted development that reveals how theory was created to address pragmatic and hermeneutic needs of therapists during each historical period (1994). For example, a "method of projection" became the conceptual foundation for an incredible array of so-called projective drawing assessments that evolved in psychology during the middle of the 20th century (Hammer, as cited in Vick, 2012). The inclusion of two chapters on art therapy by pioneering art therapist Margaret Naumburg in Hammer's (1958) classic book on drawing as a projective device demonstrates the crossover of influences during that specific time period (Vick, 2012). Many of the common stereotypes about art therapy (e.g., specific, assigned drawings; finger painting; and the role of the therapist in defining the "true meaning" of a drawing) can be traced directly to this era (Vick, 2012).

By using philosophical concepts and, often, psychology-based theories, practitioners developed theories to support their work with clients. Theoretical orientations that were situated on the continuum of art as therapy (e.g., Kramer) and art in therapy (e.g., Naumburg) diverged to sub-approaches and, later, eclectic theoretical orientations (e.g., Wadeson). Elkins and Stovall (2000), found that approximately 21% of art therapists who responded to a membership survey of the American Art Therapy Association in 2000 described their primary theoretical orientation as "eclectic," which

was the single largest percentage reported. The eclectic choice may be due to the need for solution to adapt diverse thinking into changing contexts of art therapy in terms of populations, settings, and healthcare trends.

Dewey (as cited in Brinkman, 2012) insisted that all thinking occurs in relation to a background understanding that can break down, and when this happens the situation appears to lack meaning. Art therapists receive training within the framework of various theoretical approaches. We may rely on learned approaches and techniques, and we might feel deceived when the application of a theory lacks accurate correlation with contemporary movements and concepts in philosophy or the arts, or with the era's social and systemic makeup as it relates to collaborations with healthcare and community-based organizations.

The stimulus for the current research study was practice-based and conceptual. It originated from the multiplicities of encounters within my practice, which included clients ages 3 to 95 within a wide range of racial, cultural, language, and socioeconomic diversity and varying physical, psychological, and developmental abilities, in clinical and nonclinical settings. This scope of diversity of population and setting initiated a conceptual and practice-based inquisitiveness, directing me to reexamine older and newer theoretical approaches and their relevance to the work of the contemporary art therapist. I was searching for a method that offers multiplicity of arts-based entry points to the multiplicities of populations and settings without creating a biased approach in assessment, which I observed as being a result of theoretical determinism. McNiff (2013) wrote that an awareness of how assessment shapes our behavior would help art therapists approach the discipline of art therapy with mindfulness, which can result in a deeper

reflection on our interactions for possible assessment-based decisions or language. If we are willing to engage in an ongoing critique of our actions with clients, we may realize the most complete benefits for them by carefully verifying what is being assessed (McNiff, 2013).

A single theoretical orientation within the contextual diversity of my work offered too narrow a perspective. This, I believed, is common among many art therapists I know through collaborative or supervisory relationships. The idea of switching between established theories of art therapy with an eclectic approach gave a superficial and artificial sense to my work, which I based on artistic exchanges within relations, and was against values of relational aesthetics that I strive for in my practice.

Theoretical diversity has led some art therapists to suggest other types of theories, such as the integrative–multilayered theoretical model, offered for the teaching of art therapy and the implementation of its theory (Huss, 2009). With this model, Huss (2009) offered a totalizing theory, one that integrates all other art therapy theories and can be used in training. I believe a unified theory that is designed to “fit all” can bring additional totalizing power structures to practice, however. In agreement with Deleuze and Foucault (1977), I believe a theory does not totalize; it is an instrument for multiplication and it also multiplies itself, as it is the nature of power to totalize, whereas theory is by nature in opposition with power (p. 208). When not intended to become a new totalizing theory, the integrative theory can be a working theory, useful and effective in addressing Huss’s specific needs within the context of their own practice or teaching. In the case of the claims for the necessity of an integrative theory, Huss defined multiplicities of theories as fragmentation of theories and populations, and a problem for the profession’s identity.

In her book on identity and art therapy, Junge (2014) also defined theoretical multiplicity along the binary spectrum mentioned earlier that was a “theoretical duality that often gave art therapy a decidedly split identity and deeply polarized the art therapy community further” (p. 12). As an alternative to this approach, and in accordance with contemporary schools of thought, I believe that this multiplicity, diversity, and duality enables art therapy practitioners to access an endless pool of conceptual elements, adding to their analytical power through rhizomatic thinking (explained later), which is essential to art therapy due to the immense scope of practice of the field that surpasses clinical and community-based platforms.

I have used interdisciplinary resources from contemporary philosophy and arts to revisit some of the theoretical perspectives of art therapy and rethink them using the methodology of the nomad. With this method, I understand and use theories in their multiplicities as tools and bases that empower my analytical thinking and improve my ability to improvise during decision-making processes, as compared with using paradigmatic models eclectically. By this I mean that eclectic selection of theoretical models as tools can be non-fluid and patchwork-like, with less connection with interdisciplinary resources. In contrast, being selective and “thinking with” concepts and meanings presented in various theories are ways of using knowledge through fluid cross-intersections, not eclecticism. This approach is well exposed with the work and language of Deleuze and Guattari on knowledge building and production. Theories will have a positive impact if not presented to the client from the outside but rather with an approach very similar to the life and interactions of a nomad with the environment, where the traveler adapts to new territories, de-territorializing from a previous one, to learn about

and interact with the new point in the trajectory. Nomadic thinking supported my view of approaching clients' realities as infinite, as nongeneralizable due to their singularity, and as new resources for learning, information gathering, and growth for the art therapist.

I was aware that theoretical orientations based on psychodynamic approaches, humanism, cognitive and behavioral therapy, studio models, and social action art therapy have all been part of my analytical thinking processes as an art therapist. However, through my practice I gradually became more aware of intersubjective exchanges with clients taking place as a moving flow and subject to unique individualized dynamics where there is change happening for both client and therapist due to new knowledge creation, learning, and the exchange of information. Art therapists may operate from their preferred theoretical orientation, but because the actual flow of a session is highly individualized, it is therefore an improvisational art form (B. L. Moon, 2007). The improvisational aspects of this art form can be supported by a fluid way in thinking and acting, which is very different than ways of thinking that rely largely on paradigms and methods. Acting through a theoretical approach can narrow the scope of one's perception of realities.

B. L. Moon (2007) wrote that no single perspective is consistently superior; therefore, many art therapists integrate a variety of approaches based on a client's unique needs. Nomadic thinking allows for a natural integration that happens spontaneously, not by an application of a planned integrated model. In addition, it operates through movements that build knowledge with a cross-disciplinary interest. Working within this multiplicity has had the positive outcome of bringing awareness into the fact that assessment methods based on theoretical determinism may shape art therapists' approach

and behavior toward clients, and theoretical approaches may have a narrowing effect on one's perception of clients or their art.

Different from the psychodevelopmental definition coined by Erikson, Bushe (2013) conceptualized *generativity* as the processes and capacities that help people see old things in new ways. In working with a wide scope of clients, I have often directed myself to use this generativity and nomadic thinking instead of limiting my work to theoretical determinism. As a result, I have often noticed signs of structures of thought processes and intentionality of perceptions that were strikingly unique and original. Creativity and relational aesthetics within the profession of creative arts therapy allows for a presence for the client and the therapist, transforming patterns of perceptions into discoveries of the new and providing access to clients' intentions. A nonhierarchical approach can ease the way into comfortable ground for client and therapist. Although viewing hierarchy as comfort may also be a cultural value that is not shared universally, the egalitarian position can offer alternative ways to think of social positions. The role of art therapy in social change may involve a degree of uneasiness but result in empowerment.

Using Deleuze and Guattari's philosophical treatise on nomadology (Deleuze, 1981/2003, 2006; Deleuze & Guattari, 1980/1986, 1980/1987) and the image or metaphor of the nomad, I examined whether the current diversity and multiplicity of art therapy theories and practices can support a theory where the art therapist operates as a nomadic force, creating pathways and strategies as cartographic explorations and connecting inner territories with other realities. When attempting to describe a nomadic thinking for the art therapist, I think of B. L. Moon's (2007) description of an art therapist as having "the ability to artistically improvise to adapt to the needs of each client, image and session in a

distinctive way” (p. 25). As opposed to interventionist methods of technicians informed by very specific “how to” manuals, the art therapist as a nomadic force uses the ability to analyze and improvise during one-to-one encounters, as well group situations. As B. L. Moon (2007) wrote, this improvisational skill distinguishes art therapists from technicians who are preprogrammed to respond to unpredictable situations in circumscribed ways.

I find meaning making and meaning construction to be at the foundation of creative thinking, creative improvisation, and the arts at large. Clients in art therapy use the particular creative medium of art expression to advance the larger creativity of making their lives meaningful, and art therapists create meaning in their lives through their particular expertise in encouraging and relating to the meanings that others create in their art expression (Wadeson, 2010). I have been deeply aware of the reciprocity of influence in meaning construction through my interactions with clients, which has guided my reflections about intersubjectivity.

The theoretical tenets of the art therapy profession originated from different milieus and orientations—that of psychoanalytic psychotherapy and that of psychologically informed art education (Junge, 2010). But due to an increase in populations with hybrid cultures and ethnicities, and an increasingly globalizing world through technology, immigration, travel, and digital social media, from once being limited to clinically oriented interventionist methods and exclusive healthcare practices, art therapy has evolved into a most powerful social practice targeting community care and community health, gradually becoming more accessible to communities nationally and globally (Kapitan, 2014c). Numerous examples of this impact can be seen in national and international art therapy projects. Art therapy initiatives have been piloted to address

the psychological effects of political conflicts through the work of the Art Therapy Initiative, for example, an independent London-based art and art therapy service established in 1994 (Kalmanowitz & Lloyd, 1997). As another example, The Red Pencil (n.d.) is a nonprofit humanitarian organization that partners with hospitals, family centers, homes, shelters, and schools to attend, through art therapy, to the emotional needs of children, adults, and their families in Singapore and internationally. The Red Pencil intervenes in sustainable humanitarian missions for children, adults, and families caught in natural disasters and conflicts zones or regions affected by refugee immigration and human trafficking. Arts and art therapy services are being offered to people experiencing overwhelming life circumstances in countries around the world.

Digital social connections again bring to mind Deleuze and Guattari's nomadic, rhizomatic growth, and cross-disciplinary associations and connections that are made possible by having access to intense flow and exchange of information, news, and knowledge. In my review of the literature, by working with concepts from the essence of art therapy epistemology through organizing its bases with a new agency, I have attempted to support the multiplicities of definitions or positions of contemporary art therapy in a rhizomatic way—one where each theory can be appraised with the concepts it can offer instead of being conceived as a model for application to generalized types of clients from outside. This approach is helpful in rethinking art therapy theories in a nonchronological, nonhierarchical way, understanding what is essential, inclusive, and relevant to art therapy relationships with all populations in all settings.

Review of the Literature

In what follows, I will first provide an overview of Deleuze and Guattari's work for its positive impact and relevance in contemporary art therapy practice. After introducing the philosophical base for nomadic thinking, I will examine some of the core tenets of art therapy that influence practice and have relevance to most populations and settings. As an alternative to examining the field's foundation by envisioning its epistemology based on a spectrum from clinical to artistic, I conducted a literature review through organizing the art therapy epistemology in a new assemblage. This assemblage consists of five major compounds active in all dynamics of art therapy practice as a relational form. I used these compounds to see situations as unique while simultaneously having the freedom to draw relations with various concepts within art therapy theories. I considered the following compounds for this agency:

- Perception and intersubjectivity
- Language and the unconscious
- Creativity and relational aesthetics
- Dominant culture's effect
- Community art therapy and social action

Through this organization I examined therapy relations as complex phenomena that affect both art therapists and the communities they interact with. I looked for relations between these essential bases and diverse art therapy theories or concepts. I first reviewed how intentionality of perceptions, intersubjectivity, and language (as conscious and unconscious) might shape various meanings in relational forms of therapy. I reviewed my studies on perception, language, and art to highlight the multiple dimensions of these

exchanges. The consideration of the dominant trends and cultures of art therapy, including the cultures of healthcare systems and an awareness of their influence on the work of art therapists and their assessments, is a crucial aspect of the art therapist's work. Social action and community art therapy have been at the base of the field of art therapy from its origins, leading to diverse art therapy initiatives in various contexts. Social action art therapy continues to grow, becoming even more pronounced today, especially given current trends in the world of art. I believe creative arts therapists can be reflective and independent in the creative ways we connect the arts to our profession, as well as the ways we strategize in various contexts.

The Art Therapist as a Nomadic Force

In providing a literature review using an agency that brings forward essential elements of art therapy literature relevant to all populations and settings, I wish to offer a new proposition for contemporary art therapy practice, that of a *rhizomatic and nomadic approach*, which has relevance in art therapists' work with a multiplicity of populations and settings. By introducing the concept of nomadic force for the art therapist, I support fluidity as an alternative to fixed identities, which gives greater freedom of thought and action in navigating various approaches and communities. With the new assemblage of essential elements affecting art therapy relations, and in reviewing them in a new agency in a non-polarized way, I take a direction toward what Freire (1998) termed as *unfinished-ness*, allowing for approaching older concepts in new ways. I use the image of the nomad, with its strong conceptual base in the contemporary philosophy of Deleuze and Guattari, to convey this dynamic element of movement in working with the community and without the application of theoretical paradigms from outside it.

In defining the concept of nomad, Deleuze and Guattari expanded on three essential qualities. First, they wrote, the nomad—not being ignorant of points along the path—goes from one point to another and has customary paths (Deleuze & Guattari, 1980/1987). In nomad life although the points determine the path. However, these points are strictly subordinated to the path that they determine, and this is the reverse of what happens with the sedentary (Deleuze & Guattari, 1980/1987). For example, a water point, is reached only to be left behind, and every point is a relay and exists only as a relay (p. 380). Second, although the nomadic trajectory can follow customary routes or trails, it does not fulfill the function of the sedentary road, that is “to parcel out a closed space to people, assigning each person a share and regulating the communication between shares” (p. 380). Third, in clarifying the differences between nomadic and sedentary space, they wrote that sedentary space is striated by walls, enclosures, and roads between enclosures, whereas nomadic space is smooth, and only marked by traits that are faded and displaced with the trajectory (p. 381).

The only territorial principle of the nomad to distribute oneself in a smooth space space that one occupies, inhabits, and holds (Deleuze & Guattari, 1980/1987). This translates into my work as an art therapist, in creating pathways that are smooth and methods and strategies of engagement with clients and communities that are fluid and practical, and effective but also essential points of relay. Art therapists hold spaces they distribute themselves into and occupy. Enjoying a larger scope of view as we change landscapes, in nomadic art therapy we de-territorialize from centralized systems or oppressive models in order to learn and step into new realities. Learning from new

communities, we re-territorialize and rethink using prior knowledge and theories as a basis for thinking.

Thus, there is an ongoing hermeneutic at work in the life of the art therapist as a nomadic force. This ongoing reflection applies interdisciplinary and inter-theory mapping with fluidity, using pathways to get to points that are essential to practice. Unlike the sedentary space defined by Deleuze and Guattari (1980/1987), nomadic space is comprised of roads that are smooth, serve a function, and serve as a relay to move to the next point. Nomads do not create fixed roads from one territory to another but rather use roads that they create so as to move with fluidity from one territory to another (Deleuze & Guattari, 1980/1987). The nomad, thus, is committed to multiple paths. With this multiplicity, the construct of the nomad celebrates plurality as opposed to unitary, binary, and totalizing models.

The vision of nomadic thinking allows linearity to be replaced with a more rhizomatic and dynamic cycle of thinking (Braidotti, 2011). This thinking can access and intersect with concepts from diverse art therapy theories within a fluid dynamism that looks for relations between meanings. For example, concepts used in creative arts therapy like intersubjectivity, relational aesthetics, metaphor, co-consciousness, multiple realities, poiesis, fluidity, multisensory terrains and art therapy rhizome (see, e.g. Skaife, 2001, Robbins, 1994; C. H. Moon, 2002; B. Moon, 2007; Kapitan, 2014b; Levine, 2005; Whitaker, 2010) allow for rhizomatic fluid connections that enjoy a freedom essential to subjectivity of the art therapist. In my view, this approach is essentially different from eclectic/integrative trends. Eclectic/integrative trends advocate the selection of ideas and methods from a number of different schools of thought within one approach (Karkou &

Sanderson, 2006). In eclectic art therapy, thinking and analysis operate within the framework of theoretical models, and connect with theories in a linear fashion through tracing rather than mapping. Nomadic thinking does not concern and limit itself with drawing only from available styles of the time, or from various established trends and styles of the field, but offers creative options where knowledge is gained through mapping. Nomadic rhizomatic thinking evolves as a result of the body's and mind's relations with the earth, while moving from one territory to another. It is concerned with thinking creatively and diversely—somewhere in between styles and histories—with an interest of finding new, effective methods of engagement and interaction, and growth in art therapy practice. Nomadic thinking, thus, uses dynamic cross-disciplinary thinking that is activated based on our relation to earth, our continuous *becoming*, and of providing infinite options to connect with knowledge. Relatedly, Whitaker (2010) wrote that the ecology of art therapy is a *happening*, where kinesthetic and sensory contact are interchanged, with multiple surfaces consisting of environments within environments, and heterogeneous contexts for expressing lived experience.

Art therapists who utilize nomadic thinking set goals, plan projects, and bring ideas for discussion as they decide on creating new trajectories by which a community can benefit from art therapy. A good example is found in arts-based participatory action research conducted by Kapitan, Litell, and Torres (2011) in partnership with a nongovernmental organization in Central America. Their community-led collaborative research deployed rhizomatic thinking along new trajectories that resulted in social transformation.

These types of movements are essentially different than being a witnessing agent

in a studio or community space. In nomadic thinking and relations, there is often a co-regulatory process within intersubjective relationships with individuals or communities. Co-regulation is understood as a continuous dynamic process in which each person affects the other, rather than exchange discrete information (Fogel & Garvey, as cited in Hass-Cohen & Findlay, 2015). Through listening, feeling, and thinking, the art therapist becomes engaged in a dynamic process. The thinking and the perception of the nomad are intentional in nature, and intertwined with personal history. The nomad has a territory and follows customary paths from one point to another, never ignorant of points, like water points and assembly points (Deleuze and Guattari, 1980/1987).

The art therapist can live as a nomadic force with a nomadic form of thinking that uses the work of remembering to generate creative alternatives. For example, in her environmental and therapeutic arts education practice, Whitaker (2010) created an outdoor studio to transport art therapy beyond the containment of the interior studio space that is separated from the influences of the natural world such as weather, temperature, and sound. Through deterritorializations and reterritorializations, clients can connect the geography of their lived experiences using their subjective relations to earth. As Braidotti (2011) explained, the quest of the image of the nomad is in the quest of balancing between past traditions and present changes through the method of dis-identification from dominant images of thought. Given that art therapists have skills and means to offer a wide range of services, they may continue to offer their creativity to reach beyond the definite focus of therapy and toward a wide range of practices on the health continuum (Potash, Mann, Martinez, Roach, & Wallace, 2016).

The art therapist as a nomadic force is always in close proximity to actualization

within the dynamic process of intersubjective influences. A process of actualization is like the composition of passions, intensities, and visions that coalesce in an adequate frame of composition (Braidotti, 2011). The moments shared in therapy relations consist of a number of platforms where this integration becomes possible for the art therapist. As Braidotti (2010) makes clear, the processes of becoming of the nomadic force rest on a non-unitary, multilayered, dynamic subject attached to multiple communities.

Art therapists may be looking to approach their theoretical frameworks as important to their creative imagination rather than an authority source at the center. Kapitan (2014b) described this shift as one of decentering the art therapy profession as a necessary realignment strategy or deconstructive move away from the center that is affirmative rather than rejecting. This view aligns with my conception of the deterritorializing move of the nomadic art therapist. Nomadic remembering is not indexed on the authority of the past, but rather occurs in relation to creative imagination in the future anterior (Braidotti, 2011). In agreement with Braidotti (2011), I believe that such a position requires a high degree of self-reflexivity because it does not engage with discourses and practices of otherness in a mimetic or consumerist manner, but rather cuts a more creative path through these discourses in a non-dialectical manner and through actualization and experimentation.

As suggested in the collective work of Kapitan et al. (2011), nomadic thinking offers an effective alternative to approaching a community with a pre-existing tool and theories. Strategies for transformation are built from approaching each individual or community anew, and through immersion and working together with client populations. For example, deterritorializing from the idea that there is a “homeless” population with

pre-existing qualities, and finding territory where real connections can be made with individuals to express their realities, creative explorations can attend to many personal, psychological, social, environmental, and political issues.

In order to offer their knowledge for serious dilemmas facing humanity, art therapists are being called to accept the complexities of participatory experimentation and expand conventional ways of practice (Timm-Bottos, 2016). With nomadic thinking and rhizomatic connections, such creative pathway can be expanded, accessing knowledge in many directions. To do so, the therapist must have a thorough assessment of the needs and current state of things, and decide about the process and media in which to set specific and unique therapeutic goals (Kaplan, 2010). Assessment is only possible when it is not confined to available art therapy resources but rather is open to simultaneously considered interdisciplinary knowledge resources. For example, in working with clients whose language is not my own, among other efforts to promote the therapy relation, I am aware of language justice, which is a movement that strives for social justice in recognition of the power of dominant language to oppress. Practicing from this awareness expands the scope of my practice and makes it more resourceful.

As noted earlier, Kramer (2006) differentiated art psychotherapy from art as therapy based on the necessity to use the words for exploration. For her, art as therapy was a nonverbal theory due to differences in the populations served. Kramer attributed this historical argument to the fact that she worked with nonverbal children and Naumburg's theory, as she stated, evolved from her work with middle-class adults within a classical psychoanalytic framework (Kaplan, 2010). Thus, origins of each of those two theories were directly related to the way each art therapist strategized for their setting and

created a theoretical tool to accommodate their population during a specific historical time. Today, thinking about individuals with autism using iPads or tablets as their communication devices, or clients who are Deaf and use SMS or have cochlear implants, can put many such positions in perspective.

In agreement with Potash (2011), I believe that as art therapists we do not need to accept dominant ideas but rather should be ourselves, by knowing what we believe and by adopting a stance. This personal stance can be one of being self-reflective with nomadic thinking and acting as a nomadic force. In nomadic theory the central figuration, which is the nomad, stands for the existence of a process that privileges change and motion over stability (Braidotti, 2011). In art therapy, this reflects the natural ongoing change and transformations that happens through the work of making and creating meanings. In general, any community of practice provides a set of paradigmatic trajectories that embody the history of the community through the participation and identities of practitioners (Wenger, 1998). The history provides a platform for initial introduction and learning. Art therapists practicing in the field have access to unique experience and practices of their own and may approach experience using multiple varied trajectories. What one takes as knowledge and how one thinks and practices is the product of many interactions in the terrain (Kapitan, 2014b).

In different historical times and spaces, the structural power of institutions can greatly affect clients' perceptions on illness and sanity by imposing the time's socially constructed realities onto patients. Foucault's *History of Madness* (1972/2006) followed the changing definitions of madness throughout the history of institutional and cultural dominances. Societies' power systems have reconstructed a history narrative around the

experience of madness. In their work *Anti-Oedipus: Capitalism and Schizophrenia*, Deleuze and Guattari (1972/1983) opposed the authority of the mental health profession as imposed upon the psychiatric clinic because of the ways its structure and power operate and affect the social field in general, as well as affecting all of us (Collins, 2014). Through a study of their philosophy, one realizes how their propositions can shift professionals' perspectives in many fields within the social sciences, particularly those involving client–therapist encounters, as in the field of art therapy. For example, in the psychiatric clinic, by thinking about the client's narratives in a multi-directional way, I can clearly see the influence of unhealthy environments, politics, education, and many other socioeconomic factors that have been oppressive, and realize that the client's challenge in functioning in day-to-day life may be a healthy response to an unhealthy condition, or a line of flight and deterritorialization from an unacceptable state of being.

Perception and Intersubjectivity

Evident essences of art therapy in any context are perception and intersubjectivity, because we perceive and interact while being influenced by each other and the art. Art therapy deals with the perception of art objects: those that are created and those that are otherwise experienced. In this section I will draw closer attention to how one perceives, especially art therapists' perceptions as influenced by intersubjectivity in art therapy. I will first review and compare definitions of perceptual experiences and their connections with what might be considered “the entity that is actually there”; thus dealing with what is sometimes called the objective reality.

I have always realized that perceptual experiences during art therapy as well as daily life are very complex. I first researched readings on perceptions and

intersubjectivity both from scientific and philosophical sources. These included the work of Searle (2015) on perception and intentionality, the extensive work of Sacks (2010) on mind and vision, and the work of Merleau-Ponty (2012) on phenomenology of perception. I will briefly expose my initial findings from the discourse about perception and intersubjectivity, and then explore how these relate to select art therapy literature, closing with a discussion of how Deleuze and Guattari's work on perceptions as assemblage created by nomadic, rhizomatic thought supports the work of the art therapist in dealing with complexity of perception in therapy relations.

In his book *Seeing Things as They Are*, Searle (2015) wrote about the intentionality of perceptual experience. He used phenomenology to refer to the qualitative aspect of our conscious states, events, and processes (Searle, 2015). He explained that human perception operates according to an instrumentality to help us get to the next point. This instrumental and qualitative aspect is a significant area for reflection regarding how art therapists' perceptions are being shaped during the encounter with a client, the client's artistic process, and the product. Because most perceptual activities are instrumental—we see in order to use the content of sight to get somewhere else or to bring closure to an activity (Eisner, 2002), for example—as art therapists working with clients, our intentionality will impact our perception. In art therapy literature, Betensky (1995) suggested that intentionality means the intent to look upon the thing one is looking at, making the thing appear to consciousness so that it “means” something. An art expression is an expression of, and an opening to, a new world. Betensky emphasized the importance of client's intentionality a great deal, with less emphasis on the art therapist's intentionality during these intersubjective engagements. Unlike most perceptual

processes, the arts can have, as a primary outcome, new ways to view the world (Eisner, 2002) and of thinking about life and realities beyond the socially constructed or accepted realities or narratives. In the art therapy literature, Betensky emphasized the “primacy of clients’ eyes and minds” (p. xi) as they experience directly the products of their own self-expression, using capacities such as “intentionality, experiencing that involves all mental forces, conscious self-reflection, a need to create, and the striving for mental and spiritual growth throughout human life” (p. xi).

As art therapists, if our intentionality is receptive to perceive the client’s art as a creative thought, we can see the world in new ways. Being an essentially imaginal practice of entering the world of another person, empathy is intersubjective at its core (Franklin, 2010). In my practice I have experienced that when my intentionality is informed by fluid artistic and cross-disciplinary thinking, and not directed by theoretical determinism or orientation, my perception has greater freedom to capture new ways of seeing the world or a reality through the artwork of clients. Visual representations can influence ways of perceiving the reality that they supposedly represent (Searle, 2015). I have often experienced the influence of client’s artistic representation upon the way I had envisioned a reality or a way of thinking as being healthy or pathological. I sometimes experience the artwork of the client as a new reality in opposition with the theoretical lens I may have used—a reality with a powerful independent power that suggests meaning, as an opening to a different kind of truth and one that may be nonconforming to social or healthcare definitions and constructs.

Visual representations can change the way one has represented a reality in one’s mind. Searle (2015) used an example for the suggestive power of visual representations

for a new reality in his anecdote about Picasso's portrait of Gertrude Stein: "When Stein first saw the portrait she complained 'But I do not look like that' and Picasso replied: 'You will, Gertrude. You will'" (p. 71). Both the image and Picasso's response demonstrate a clear influence of the image and the statement on the perceptions of others. Therefore, the initial and foremost characteristic of the work of art is to introduce new ways of thinking and varied structures of thought process. This is precisely what Deleuze explained when he wrote that art is a territory. Applied to art therapy, the territory is where the client exposes ways of thinking and seeing the world that are unique and creative.

With his work broadly ranging over philosophical problems of mind and language, Searle (2015) offered a framework for understanding the long-standing philosophical problem of perception. Visual experiences, he wrote, are intrinsically intentional. Something cannot be a visual experience if it does not have specific visual intentionality. There is a work of creativity involved in perception. Every act of perception, according to Sacks (2010), is to some degree an act of creation, and every act of memory is to some degree an act of imagination. These multiplicities of perceptual experiences form the bases of the phenomenological philosophy.

The philosophy of phenomenology consists of three separate bodies of work offered by Husserl (1970), Heidegger (1927/2008), and Merleau-Ponty (2012). In the field of art therapy Betensky (1995) used select concepts from this philosophy to develop techniques based on prompting clients to create art and look at their art process with intentionality. In her phenomenology-based art therapy, Betensky drew conceptually from the three philosophers' work, suggesting a method of working with clients that is

based on encouraging clients to reflect on their artwork. She wrote that for therapeutic art expression to be effective, however, clients have to be prompted by the therapist to discover their intentionality and to train their eyes to look at their art with openness and intentionality. With Betensky's techniques, the concept of intentionality of perception was introduced to art therapy, giving clients the space to share about their artwork based on their personal reflections about their objectives and intentions, instead of the interpretations of the art therapist, which used to be common practice.

Thinking deeper about intentionality, I find it important to also consider that perception can—and does—expand beyond a focus on discovering intentionality in relation to the sole object of art as the only signifier perceived by the client in the space. The image or person of the art therapist must be included in the perception of the client, as well as the space where therapist and client meet, with its collections of image signifiers. In an arts-based study of the experience of the art therapy room from the perspective of the client and the art of the art therapist, Fenner (2012) explored how visual experience and meaning making in art therapy constitutes more than looking at the image created. Making studies on the visual elements and details of space where art therapist and client meet, Fenner wrote that within the scope of art therapy literature there is still a dominant “how-to” discourse centered upon the art product and an image–client–therapist dynamic rather than one that is attentive to such experiences as the influence of the setting as a whole and aspects of practice conveyed visually. Relatedly, Case (2012) pointed out that in her supervisory experience it was helpful to encourage art therapists to look beyond the actual art image made and to look at all the imagery present in the room. In addition, the dynamics of relational aesthetics between client and art therapist (C. H.

Moon, 2002) should be considered in phenomenological thinking. When all images present in the therapy space and all intersubjective processes (either with one individual or within a group) are acknowledged and analyzed, we can then have a better understanding of the intentionality of perception of the client from a phenomenological point of view. To think with phenomenology, we need to acknowledge and consider the presence of an assemblage (Deleuze, 2006) of elements, utterances, and signifiers, and the influence of all those elements, in addition to the artwork. This idea is what Searle (2015) called a multiplicity of signifiers or “an entire state of affairs” in the vision field. That is, when we look at an object, our visual system presents us with an entire state of affairs. It is very unlikely that one visual art object can be repeatedly taken into consideration in isolation from this changing state of affairs and interactions.

Reflecting on the art therapist with a nomadic way of thinking, I have found it helpful to work on developing a sense of refinement and mindfulness if prompting the client about their intentionality, so as not to create a feeling of unease between them and their territory. I trust that within the flow of creativity and a sense of freedom for spontaneous expressiveness in a territory, the client/artist’s intentionality is inherent in the act of mark making. A primary objective in my work is to create situations where clients can express through a territory, whereby they can work freely on sense making and meaning making in this territory, whether consciously or in a spontaneous manner.

As an art therapist, I realize that the notion of expertise and hierarchy can have an unwanted influence on my perceptions. An expanded and comprehensive use of phenomenological philosophy, with the consideration of all images or movements that are present in the space of therapy, may expand the scope of art therapy with an approach

that includes relational and intersubjective dynamics (see e.g., C. H. Moon, 2002; Skaife, 2011). This intersubjective experience may sometimes involve co-consciousness. Fonagy (as cited in Hass-Cohen & Findlay, 2015) defined co-consciousness as a shared meaning system that creates scaffolding for flexible reflectivity, thereby aligning with the concept of the art therapist as a nomadic force. With nomadic thinking, my goal is to think of the therapist as a learner/doer. The art therapist engages in a fluid, open relation and has open conversations with clients, has no assumptions, and can engage in discussion through improvisations (see, e.g., Chilton, 2013; Franklin, 2010; B. Moon, 2007; C. H. Moon, 2002; Kapitan, 2014b; Skaife, 2001).

The work of the client is an expression or stamping of an intentional idea in a territory, a symbolic action that operates at the level of the unconscious, or an artistic expression that may not necessarily need or require verbal explanation but rather is a response to life's changing influences. Poiesis (which refers in Greek both to art making and to the more general sense of any activity that brings something new into the human existence) depends upon the capacity to respond within the full range of resources to what affects us (Levine, 2005). A focus on prompting the client to decode their art, or their intentionality with it, may at times contradict this essence or larger meaning and function. Art making and creative expressions require an internal sense of finding safety and asylum through the arts territories. Therefore, with nomadic thinking, such analytical discourses and searches for intentions or interpretations are appreciated but only within the domain of choice of the client/artist. What is imperative in art therapy is, first, the *making or forming poiesis* (Knill & Levine, 2005) that makes possible a territory that holds the outmost therapeutic value, and, second, the intersubjective connections that are

created during therapy encounters. Art therapists may get their cues from clients regarding discussions that involve interpretation or analysis of art; this choice, however, should come from the inside of the community or from the client and not from the outside by the art therapist.

Art therapists can think about, design, and improvise with their behavior and actions—conceptually and concretely—such dynamic aesthetic structures and spaces that make and form relational aesthetics with clients (Chilton, 20113; C. H. Moon, 2002; Robbins, 1994). Boal (1995) wrote about this aesthetic space and its need for plasticity that allows creativity to happen. With a similar thinking, we can say that new perceptual experiences happen in an “aesthetic space” of the here and now, where objects exists as part of a flexible space that has continuity and is changing. The therapy session, thus, consists of a continuity of changing perceptions during intersubjective encounters (Skaife, 2001). Intersubjective experience means that both parties’ perceptions are affected by the flow of exchange as they also work toward attuning to each other’s affective and emotional states.

Art therapy helps individulas experience increased well-being using a number of creative pathways that uniquely illuminate purpose and meaning, and that increase positive emotions and engagement (Chilton & Wilkinson, 2013). The therapist is an active component of this engagement and intersubjectivity. In art therapy the whole brain/body is engaged in the creation of complex intersubjective, perceptual, interpsychic, physical, and artistic processes (Chilton, 2013). The reciprocity of the encounter creates a complex intersubjective flow where both parties are *becoming*. In contrast, as Kapitan (2014a) observed, art therapy practitioners who are used to a

framework in which they only provide (materials, directives, empathy, a safe space to work in, etc.) and clients only receive tend not to incorporate reciprocity, mutuality, and partnership into their approach. A partnership relation can develop through non-hierarchical approach where interactive dynamics are more important than role stereotypes.

In agreement with Stolorow (1994), who wrote extensively on intersubjectivity in a psychoanalytic context, I consider an analyst's transference interpretations not as disembodied transmissions of insight about the relationships but as inherent, inseparable components of that very bond—they are shaping and also shaped by this bond (p. 47). In her work on the importance of questions and answers in art therapy relationship, Bloomgarden emphasized that verbal clarity is essential in order to create an environment of understanding and attunement (Bloomgarden, 2000).

Therapists have their own intrinsic intentionality that guides their perceptions, which will have suggestive repercussions and influence the intentionality of the client's perception. Storolow, Atwood, and Brandchaft (1994) conceptualized psychotherapeutic understanding as an intersubjective process involving a dialogue between two personal universes. Applied to art therapy, the art therapist and clients are in a space where art can become a place of safety, the old self can be confronted, and the new self rehearsed (Franklin, 1992). Their participation is an affirmative process, despite any pathology encountered, which gives rise to a sense of accomplishment for the client that is attested by the environment that includes other viewers and the art therapist (Franklin, 1992). Dealing with aesthetic facts means dealing with qualitative experiences (Arnheim, 1996); thus, each personal universe will act based on their own qualitative experience.

Art therapists' interpretations about art with clients can be about fluctuating snapshots in this continuity of changing perceptions and less about final conclusions or agreements about the meaning of the art or image. What we experience is a snapshot of an idea based on our perception in that time and space. A deeper understanding of perception and intersubjectivity allows for the realization that when two people look at and see the same work of art, they can have different and changing opinions and ideas about it in different spaces and times, primarily because their perceptions' intentionality may not be the same in changing phenomena.

These ideas underscore the notion that what each one of us sees is a result of a lifelong training of the vision aligned with the interactions of the neurons and our senses, as well as daily activities and experiences (Searle, 2015); therefore, it is almost impossible to predict what each person will see in the therapy space. When art therapist and client look at the same thing in the room, they each experience a unique space and time (Searle, 2015), and what they each see is also different, due to differences in the training of their perceptual systems. It would seem that a scientific and philosophical knowledge about perception and intersubjectivity is essential for art therapy professionals and especially for those who emphasize the use of art and images or art therapy relations to create art-based diagnostic assessment tools and tests.

In contrast to this line of thinking, one example of a narrow take on perception and intersubjectivity can be seen in the work of authors Horovitz and Eksten (2009), who offered numerous templates for assessment, diagnosis, and treatment for the art therapist to operate within various educational, medical, and research systems. Kaplan (1998) correctly identified the bias of such a narrow view, citing her own extensive

investigations of the relationship between measures of anger, drawing themes, and age. Her results demonstrated that drawings with a theme of anger is a function of maturity rather than a measureable level of anger present. McNiff (2012) contested the highly projective and reductive practice of diagnostic labeling based on unreliable psychological assumptions, such as those that attribute psychological states to certain colors, subject matter, styles of expression, and compositions.

Our brains learn how to see by reinforcing certain visual pathways and eliminating others, which is a problem for the neurobiologist but has philosophical importance as a decisive argument against the idea that as long as the visual system is intact, a person will have the same experiences as other people with intact equivalent visual systems (Searle, 2015). Visual experiences can be closely tied to intentionality of perceptions; different minds do not have equivalent visions (Sacks, 2010; Searle, 2015).

When the art therapist and the client look, they don't see the same state of affairs. There are two (or more, in group situations) sets of vision aligned with interactions of the neurons, senses, daily activities, and experiences of each. Maybe because of an adherence to thinking that splits subject and object, or combines notions of inter-subjectivity with the idea of an individual psyche, art often takes second place to the verbal in how art therapy is conceptualized (Skaife, 2001). Artworks are often mysterious and perplexing; they hold multiple truths that are open to many valid interpretations (B. L. Moon, 2007). Cultural, social, educational, and developmental experiences may affect the visual experience and therefore an individual's perception. This is obvious in the way in which different people with different cultural backgrounds respond to the same stimulus, such as the same work of art (Searle, 2015).

During an art therapy interaction (see, e.g., Betensky, 1998), there are two or more universes present with different experiences: the art therapist's, the patient's, and other participants' if there is a group situation. These are simply two or more experiences in relation. As Laing (1967) wrote, it is not about the interaction of two objects, or their transactions within a dyadic system, nor is it about the communication patterns within a system comprising two computer-like subsystems that receive and process input and emit outgoing signals (Laing, 1967). In their study of the intersubjective artistic matrix, Gerber et al. (2013) defined the dynamic intermediary space between people as where fantasies and realities of individuals converge, interact, and inspire creativity and result in an expressive art process that depicts meaning of an experience of self/other. The intersubjective relation concerns two or more origins of experience in relation (Laing, 1967); the art therapist's presence this relation results in unique, singular, non-replicable new experiences (Gerber, et al., 2013; B. L. Moon, 2007, C. H. Moon, 2002; Skaife, 2001).

B. L. Moon (2007) asserted that experienced art therapists do not rely on stock interventions that are a result of theoretical paradigms for assessment and judgment. As Laing (1967) wrote many years ago regarding behavioral psychology, transaction alone—without experience—lacks specific personal connotations. Such personal connotation result is personal chemistry and will be different in the work of each therapist. The great danger of thinking about the individual by means of analogy is that the analogy is then presented as a homology (Laing, 1967). Patients' ideas, realities, and experiences may then be dismissed and prescribed by diagnostic perspectives and assessments. Laing (1967), who seriously questioned many psychological theories and

assessment and the behavioral method, asked: We notice patterns of behavior, but where is the experience?

Today a pattern persists in applied behavioral analysis, used in public schools as the dominant approach in working with students with autism. ABA not only relies on a predominant set of theoretical principals in autism intervention (Smith & Iadlora, 2015), but also was the only therapy or treatment endorsed by the United States Surgeon General as recently as 2000, and is considered by many to be the standard approach (Wolfe & Neisworth, 2010). Encountering ABA in 15 districts and 75 partner schools in New York City where I provide art therapy services for students with autism, I have seen it widely implemented as well as incorporated into art therapy sessions. The experience of the behavior analyst toward the student in ABA remains as that of a subject as receptacle for reinforcing prize awards without any meaningful intersubjective experience. In contrast, rhizomatic thinking as art therapists creates other connections with students that are based on unique, interpersonal, and intersubjective relations. Stepping away from interventionist views coming from the outside, infinite instances of meeting can happen in art therapy relations, allowing for difference and multiplicity of perceptions for therapist and client. An example from the art therapy discourse is Kapitan and Newhouse's (2000) account of postmodern art therapy that accepts a highly relative, fluid reality that grows out of and matches the flux of the pluralistic culture in which they lived.

The significance of a shared and connected experience can be understood through the perspective of intersubjectivity, and with the understanding of connections between the therapist's and client's intellectual, emotional, affective, and perceptive experiences.

Skaife (2001) articulated the concept of intersubjectivity in the phenomenological philosophy of Merleau-Ponty to explore the significance of the body as expression and speech for art therapy. Skaife proposed that when something goes wrong, an intersubjective perspective considers it as a problem between individuals in relationship and not as a single individual's pathology. Drawing from Deleuze and Guattari, and several concepts they created, I have been able to work with complexities on perceptions and exchanges to better understand or imagine perceptive and intersubjective experiences in terms of mapping and associations. By exploring perceptions in their complexity, I have examined experiences with clients with this expanded understanding of the mind's associations, an awareness of their multiplicities, and with an *assemblage* (Deleuze, 2006) that can be used to convey perceptual experiences in place of linear narratives.

Deleuze and Guattari's concept of the assemblage is a mode of thinking that relates to the rhizomatic growth of a nomadic thought. Rhizomatic/nomadic thought operates by forging "linkages or connections between different systems of knowledge-formation" (Kaufman & Heller, 1998, p. 5). With this perspective on knowledge formation, theoretical tenets of art therapy can be seen as fluid agencies of thought, allowing for various types of linkages and connections. Assemblage helps us to rearticulate the way we see, understand, and thus live in the world (Dewsbury, 2011). Assemblages are about how individual organisms and objects are understood, first in terms of the intensive environment from which they emerge (Dewsbury, 2011) and then through the variety of capabilities and capacities they exhibit "to form assemblages with other individuals organic or inorganic" (DeLanda, 2013, p. 66). With respect to perception and intersubjectivity, essential components of art therapy relations (e.g., the

effect of environments with all objects and individuals in its landscape), I believe, can best be imagined as an assemblage resulting from the linkages (associations, memories, and intentions) that form during the art therapy encounter.

In explaining desire, Deleuze (2002) wrote that we never desire one object, but rather a landscape in which the object is a part. What we perceive in objects is what they offer to us as a function and meaning we desire (Fenner, 2012). When we desire a thing, it is within a landscape where that object is placed in our mind by our associations. That is, our desire for the thing is flowing in a landscape we envision—it is really something about that landscape we desire, not an isolated element or thing. For example, if what we desire is located within an assemblage of linked images that create a positive feeling, we desire this assemblage. Thus, in the art therapy encounter, art therapists can consider that the client's image is situated within a landscape, with specific meanings associated to one another in a chain of signifiers. The emphasis is on perception and intersubjectivity, as informed by dynamic linkages using knowledge and memory.

Language and the Unconscious

As muteness, too, is a mode of being of language, and empty spaces are signifiers as much as full ones are (Lang, 1997), I will next consider language in its full presence during intersubjective encounters. The therapy relationship flows as changing moments that include language in many forms: expressive form, unconscious structure, sounds, tone of voices, and noise. In the phenomenology-based art therapy conceived by Betensky (1995), speech is used with the assertion that words are expression in parallel with art is, and that consciousness, thought, and speech are often one. But language and speech in art therapy are acting beyond their function of conscious expression of thought.

Aside from its intentional conscious expression of thought through speech, language operates at the level of the unconscious. It has a presence that is acting from the deeper levels of the unconscious, affecting the structures of thought processes. Deleuze and Guattari (1980/1987) stated that one should never oppose words to things that supposedly correspond to them, nor signifiers to signifieds that are supposedly in conformity with them. Foucault wrote “It is vain that we say what we see: what we see never resides in what we say” (as cited in Deleuze & Guattari, 1980/1987, p. 67). Reflection about language as a regime of signs and signifiers intertwined with other images, movements, sounds can illuminate the multiplicity of meanings a viewer can receive or give to art.

As a multilingual person, early on I became aware of the complex functioning of language in daily life in general, and later in art therapy in particular. My personal memories and history with four languages I use engage dynamically with each situation I encounter, at conscious and unconscious levels. This experience directed me into deeper readings of the work of Derrida on language and Lacan’s psychoanalytic work, wherein language holds a central place. With a brief account of my study on language in this section, I hope to add a dimension to language discourses in art therapy. I would like to initiate reflections on language that extend beyond usual perspectives on dealing with language and ethnicity, culture, or approaches that merely focus on avoiding labels when working with diverse populations in art therapy.

I aim to bring attention to the function of language—conscious and unconscious—not only for its expressive functions but also for its work of executing and creating ideas. Language does not presuppose thought, but accomplishes thought (Merleau-Ponty, 2012). The language of the art therapist can generate rich content into

the consciousness of the client based on creative thinking, new ideas, and meaning making, and therefore be empowering and therapeutic. The way we think with words—and the way that we use words to express or execute thought—guides our belief systems and perceptions. In Lacanian psychoanalysis, language occupies a central place where “the unconscious is structured like a language” (Lacan, 1970/2006, p. 223).

Understanding language at this deeper level means that we think, see, and feel with words, but also that words and meanings are created and shaped, and acquire meanings with the conscious and unconscious experiences of each person.

In his theory of language, Saussure showed how the essential quality of a sign is arbitrary, and that a particular combination of a signifier and signified is arbitrary as well (Culler, 1986). The sign is not always something that links a word or name to a thing, but can also be something that connects a sound or image (signifier) to a concept (signified). Meaning is created by relationships between signifier and signified, and also by the relations of the signifier with other signifiers. For Lacan (1976), the meaning of a word is created by its place in a “signifying chain” with other signifiers. This signifying chain will be different in each mind with its unique experiences and memories.

The interpretation of a visual experience, and especially a work of art, is a function of language as a conceptual instrument that the interpreter transfers to the experience (Searle, 2015). I have examined language for its essential role in forming meanings through unique unconscious and conscious associations within the thought process and memory. Most individuals acquire language starting early on in childhood, and in my experience, language—conscious and unconscious—may have a most powerful

presence and influence on intersubjective encounters in art therapy as well, where unconscious language is especially activated through arts-based activities.

Studies on language reveal its mysterious and complex nature beyond the possibly general assumption of its being predominantly a tool for social exchange. C. H. Moon (2010) reviewed personal and language associations in art therapy within an understanding the use of material and media as primary components in the exchanges that occur among art therapists, clients, and artmaking process. Art therapists are engaged with the mysteries of the human mind and the unique structures of the thought process. Within these structures, the visual and language-based content are linked. Art therapy discourse has examined the importance of language to influence the field (McNiff, 2009) or in assessment (Betts, 2013), in my reading it appeared that language has been studied as an entity separate from the work of art or images, or from the process of the creative act. By bringing more attention to the deeper presence of language in human minds (Knill, 2005; McNiff, 2009) affective, and perceptive states, we can emphasize the unavoidable interconnectedness of images and words as signifiers. We look at images with words; we see with language and words.

Humans use language to construct thought and reveal their thoughts, both for self-reflection or inner discourse and for communication with others (Mellon, 2003), and engage inner discourses that are interconnected with inner images (image memories, image representations, and image signs). Language has different executive functions in the world of each different individual. It accomplishes something: a thought, a meaning, or a goal or desire for each world.

In their article about the power of language in the art therapeutic relationship, Spaniol and Cattaneo (1994) viewed language as a dynamic social instrument that absorbs and reflects all aspects of human experience. The authors raised critical awareness of how biases become imbedded in language and how language usage maintains differences in power, and suggested ways to monitor language use in professional practice. They make a clear distinction between images and language by claiming that although the use of images is the distinctive hallmark of art therapy, words are also essential tools because language is the basic medium of everyday exchange between people. They defined the functioning of language as a direct effective signifier:

Language enables us to name, define, and organize our inner worlds of feelings, sensations, and thoughts. It allows us to externalize these interior phenomena by translating them into signs and symbols that communicate meaning to others. It also directs our actions because language is integral to anticipating, planning, and problem-solving. (1994, p. 266)

The above statement stresses the importance of language presence at the personal and social level. However, I believe that the communication of meanings from interior phenomena translated into language also happens through a complex agency. During this process, we most importantly create new meanings and new ways of thinking, rather than translating and communicating existing meanings. The problem solving and planning that happens through language is due to the fact that language executes thought.

Derrida's work had always been marked by his interest in what words can accomplish, having produced a body of work that explores how language can incite thought (see, e.g, Derrida, 1967/1974). Today, with the influence of the work of Lacan

(1976) on the relationships between language and the unconscious, and the work of Derrida on language and deconstruction, contemporary studies take into account issues such as the complexity of language as everyday medium or signifier with difficult and ambiguous relations with the signified. For Lacan, the unconscious is composed of symbolic elements; because we are speaking beings for whom language is the main apparatus of representation, the building blocks of the unconscious are words (Bailly, 2009; Lacan, 1976, 1998, 2006) . In other words, at the basic level, the relation between the language as signifier and the signified is viable only within the presence of multiplicities of meanings.

In art therapy relationships, language may be present through expressive artistic forms such as a narrative, creative prose, or poetry; as a prompt to initiate verbal sharing and dialogue or a discussion about art; as questions to clients or as answer to their questions; or as an explanation of any art therapy directives. As art therapists, we are called upon to be just as sensitive and skilled in the verbal aspects of communication as we are with our nonverbal communication with clients (Bloomgarden, 2000). A consideration of the many levels at which language operates may illuminate how a language that is merely derived from theoretical approaches can influence the therapist–client relations from the outside. My interactions with clients may result in a multiplicity of meaning construction. In addition each of us—therapist and client—will have a selective memory when it comes to decide what has been taken away from the session and our dialogues. In therapy, a free, natural use of language, both for therapist and client, allows for a flexible platform where meanings fluctuate. Nomadic thinking de-territorializes from one meaning and with this distance, having more space, a different

perspective is acquired. Such destabilization allows for multiplicity in meanings and is affirmative of meanings created by client.

In my research, I consider language as an essential signifier embedded in the origins of all creative and social acts. In art therapy literature, C. H. Moon (2010) calls attention to examination of language used to circulate around a material, proposing that the meanings ascribed to a material can be examined by deconstructing the language usage associated with it (2010). Deleuze (2006) explained that words and images work together in our minds as fluid lines of signs and signifiers. Thus, language has no significance of its own, but is composed of signs—yet these signs are inseparable from a whole other element that could be called “the state of things” or, better yet, “images” (Deleuze, 2006). This “assemblage of utterance” is composed of images and signs that are moving and circulating in the world (Deleuze, 2006). In art therapy, this assemblage presents an ideal opportunity for the exchange that can happen among individuals in a nonhierarchical democratic platform, but only if we can experience our relationship with clients as non-artificial, with natural flows. For example, authors Spaniol and Cattaneo (1994) considered therapeutic relations as an essentially artificial construct that is based on power imbalance and, as such, is inherently unequal, even when clients come to the therapist voluntarily. I believe a fair language usage (i.e., language justice) is not entirely present when the therapy situation is defined or used with a power imbalance. But within a nonhierarchical interaction, this composition of signs and images can circulate between the art therapist and the client, creating a positive generative force for idea exchange.

Thinking of language in the way Deleuze (2006) described it, as signs within other states of things or images, language can be considered at its very basic level as a

natural flow of signifiers or images between people. Language may be used as an apparatus within personal and social agencies, and as a system with the power to execute thought at its many levels and forms, like an agency interacting with perceptions connecting past and new experiences. Language can thus be understood as an apparatus intertwined with other signs, such as the bodily and facial expressions of its users.

Even without the consideration of multilingualism, for each signifier or concept, many words or signifiers may coexist for each person, and for every word or signifier, many images or concepts. When art therapists or clients are bilingual or multilingual, it adds even more to this complexity. The fact is, words in translation are never equal, and there are even more images for words and more words for images in inter-linguistic encounters.

The acceptance of multiplicities in meaning creation through de-territorialization in thinking (i.e., moving away from theoretical territories to look at the clients' territory), opens up a whole new world to the way we look at theories. In art therapy, when language usage is based on one theoretical orientation, the discussion can be directed or influenced by this language coming from the outside. I consider that language, and consequently the proposed idea or thought, may be produced by the institutional power structure or an authority. This condition may narrow perspectives by eliminating other territories of thought. For example, in many schools and other organizations in the United States people who have a diagnosis of autism are considered to have a developmental disability. At the same time, a growing number of individuals with autism want to be simply considered as belonging to an autistic culture, and they do not want to identify with any disability; they think of themselves in terms of neurodiversity (Silberman,

2015). In so doing, they believe non-autistic people need to adapt to autistic culture by making environments and conditions more adaptive. Deleuze and Guattari have explained these ethical concerns on numerous occasions, especially in their work *Anti-Oedipus* (Deleuze & Guattari, 1972/1983), which Foucault in his forward described as the most important book on ethics ever written. This sensitivity around language and power structures is even more important in art therapy. Unlike other psychotherapists, in the work of art therapists the act of art making is central. The act of art making is the ultimate act of freedom of expression for all clients. The art therapist works to create conditions and encourage clients to work on an artwork/territory. This art—the act of making—is intertwined with the unconscious language of the maker.

In the art therapy literature, the question of improving the language of assessment has initiated thought about the way clinical language can have negative influences on the profession. For example, in her review of the principles of culturally appropriate art therapy assessment tools, Betts (2013) recommended that art therapists examine equivalence, bias, and construct validity when applying assessments in cross-cultural or multicultural contexts. It also has been suggested that clients should be allowed to use their own language to inform the therapist on how to write assessments and avoid prejudice (Spaniol & Cattaneo, 1994). Language plays an important role in assessment, especially with populations that may experience a language barrier (Betts, 2013). This awareness is significant from another point of view as well. In my experience, personal language that reflects an art therapist's personal worlds, language(s) and culture(s) has received less attention for its possible contributions and impact in the therapeutic relationship than the language offered by a theoretical approach. I believe that by considering the therapy

relations as a natural egalitarian situation, the language of the art therapist must be included. The language of everyday life, or what Husserl (1970) termed *lifeworld*, is a reality that exists for therapists as well as clients. This language is present at the conscious and unconscious levels with its associations with images.

The words of French philosopher Bachelard (1971) advise us to experience otherness through the consideration of various possible roles that language plays in feeling or meaning creation and expression, along with its imaginative role in accessing double meanings:

About every image that strikes us, we must ask ourselves: what is the verbal force this image releases within us? How do we pull it loose from the too stable bedrock of our familiar memories? To acquire a feeling for the imaginative role of language, we must patiently seek, in every word, the desire for otherness, for double meaning, for metaphor. (p. 21)

In his discussion of the role of metaphor in art therapy, B. L. Moon (2007) included an in-depth investigation of how meanings in art therapy are communicated. By considering the complexities of language, the interconnectedness of language and image, as well as the complexity of interpretive language, Moon acknowledged the indirectness of relations between signifier and signified, and offered visual or language-based metaphors as ethical and efficient options for creative, open-ended communications and expressions. Moon incorporated a fusion of the visual, verbal, and haptic with his concept of metaphor. Alter-Muri and Klein (2007) regarded metaphors as constructs that are part and parcel in the work of art therapists, allowing them to how learn to enter into clients' constructions of their stories as depicted in their art. Art therapists may find in Moon's

(2007) writing encouragement to think of ways for indirect communication or connection in art therapy to allow for a structure in the art therapeutic relationship that is both flexible and open-ended, thus granting the expression of multiplicities of facts in subjective realities.

It appears that there are no other mental health professions besides the creative arts therapies where the practitioner can see the poetic in the behavior of a client instead of seeing the pathological. As with poetry in writing, the poetic of a behavior is well understood in the discourse (see, e.g., Chilton & Scotti, 2014; Knill & Levine, 2005; C. H. Moon, 2002). The position of poetry on expressions of realities about life and human condition is well known. Undeniably, poetic language enjoys a particular and unique relationship to truth (Gadamer, 1998), and as art therapists we face these poetic languages every day—in art, in human behavior, or with words. When a person reads a poem, it does not occur to them who is it that wants to say something to them and why (Gadamer, 1998). The nature of the poetic is accepted and absorbed with efforts to feel, imagine, or understand this new reality, this new world of the poet. I would assert that we don't ask poets to decode or analyze their intention. We don't expect poets to break down the shapes and forms of the poetry and use a flat language for self-discovery. Should we guide a client to do so with art? The poem has validity of its own. The visual arts are no different. The language of poetry may be nearest to the visual arts: It resides in proximity of truth, a territory of affect, percept, and thought while being in a decentered position.

At the level of socially constructed realities, studies on language reveal that language is also a communication medium for turning a power base into influence and, more than that, it can be a medium for the creation of power and its maintenance or

change (Reid & Ng, 1999). An openness to the usage of a language that is not based on any single field such as psychology and psychotherapy may be a first step toward a transformation in thinking, creating conditions for evolution and becoming of individuals. These conditions should be based on equitable language usage, including language borrowed from the arts, humanities, philosophy, and aesthetics. In the art therapy context, language is a very effective tool when not charged with psychological idioms or derived and motivated by the power of a single industry, such as health care, spirituality, wellness, or meditation industries. By de-territorializing from one field art therapists are able to adopt an interdisciplinary view that demonstrates awareness of the active presence of language in shaping perception of the image. In Spaniol and Cattaneo's (1994) review of the effects of language on art therapeutic relationships, they noted language as an everyday tool for communication that is a separate entity than image, used to decode or help the client decode an image. They suggested the use of language from phenomenological perspectives as opposed to clinical ones. An awareness of the influence of language shows that language derived from theory can dominate the intersubjective experience in art therapy.

However, with the concept of assemblage of "utterances" and things, composed of images and signs "moving and circulating in the world" Deleuze (2006) offered a new way of thinking about language, one that provides the freedom to use language with fluidity while navigating through clinical, phenomenological, artistic, or other contexts. Spaniol and Cattaneo's (1994) position that the meaning of an artwork is constructed by the client aligns with Betensky's (1995) phenomenological approach, which includes a structured sequence of motivating, viewing, describing, and integrating artworks.

Nucho's ipsomatic approach (as cited in Spaniol & Cattaneo, 1994) provides a similarly structured process for helping clients describe and decode their artwork phenomenologically without preconceived notions.

It is important to note that since Spaniol and Cattaneo's 1994 article, many new theories on language and perception have influenced the arts and humanities. Although they observed the importance of language within the art therapeutic relationship and brought attention to disability etiquette and labels, more contemporary work is needed to study language's deeper connections in art therapy and its implication as an active part of one's unconscious world and conscious life. Relatedly, Betts' (2013) considerations for the successful cultural adaptation of drawing-based assessments include the role of language. Although the larger ethical issues with drawing-based type assessments is beyond the scope of this work, as an art therapist who identifies with more than one ethnicity, has lived in several continents and speaks several languages, I would argue that such a complex topic as language cannot have a simple and direct connection with the complex topic such as culture. I also note that culture is becoming even more complex as situations such as mine are becoming less unique and as multiracial and multilingual individuals are increasingly found in many places in the world, especially in the U. S.

In agreement with Deleuze (2006), I understand language as operating within an assemblage of utterances and signs, and as such my use of language is more liberal in art therapy. In any assemblage, during processes of subjectivation various subjects are assigned: some are images, some are signs (Deleuze, 2006). For example, I think of a client interested in engaging in a Socratic discourse or method, as opposed to engaging in self-decoding. Critical thinking may introduce new thought and create a dynamic shared

experience with clients while constructing new meanings or making sense of changing perceptions. These multiplicities of ways of being can have a positive impact on the creation of images and art. With a nomadic freedom, as an art therapist I think in between concepts. The clinical, psychodynamic, behavioral, phenomenological, and all other schools of thought are used in a liberal way as background knowledge, and I can make associations and comparisons that add richness and difference in the way that I use language.

New words will inevitably bring new meanings and create room for clients' realities and creative ideas. Hillman challenged people to let go of their psychological jargon and look at life from more perspectives, through the varied things that people do, including the arts (as cited in McNiff, 2009). By emphasizing the importance of including new languages into practice, I believe art therapists can create more pathways into individual's worlds, and support clients in expressing and sharing their realities.

Dominant Culture Effect

Delineated in the earliest days of the profession, the continuum stretching from "dynamically oriented art therapy" to "art as therapy" has been used as a dominant model in art therapy practice (Vick & Sexton-Radek, 2008). Despite being adaptable, it is a paradigm linked to the medical concepts of identifying and treating pathology (Kaplan 2010; Vick & Sexton-Radek, 2008). Kaplan (2010) stated that as she observed it, for various reasons (e.g., standardization, accreditation, and licensing) a number of training programs placed a primary focus on the art psychotherapy approach rather than "art as therapy" that has a stated rationale a greater focus on art making (p. 258).

Along with deinstitutionalization and advanced knowledge of psychotropic medication in psychiatric treatment, a variety of ethnicities and races as well as various levels of physical and mental diversities are now part of the face of urbanization. For Beuys, social improvement can arise only if power is exercised by everyone under a decentralized social and economic order (as cited in Antliff, 2014). Beuys's art exhibition *Questioning Reality—Image Worlds Today* was intended to encourage the critical examination of the relationship of art to society (Antliff, 2014). Without examining how the worldview and social order of the dominant culture is embedded in its practices and philosophy, art therapy can unknowingly reinforce structures of domination and contribute to continuing injustices (Hocoy, 2005). Every person continually performs material processes, creating interrelationships and understanding of the necessity of a social sculpture or organism (Harlan, 1986/2004). With the participation and inclusion of the artwork of individuals with disabilities in community platforms, for example, mental health professions may begin to experience a different relationship with clients and their art as part of the social sculpture.

Art therapy allows for this material execution of thought or expression. The development of the function of today's artworks and the way they are shown attest to a growing urbanization of the artistic experiment (Bourriaud, 1998/2002). By becoming engaged in the community as Beuysian social sculpture, the art therapist can work toward de-pathologizing artistic activities and introducing clients' creative acts as material expressions of a reality. As one example, Gray (2012) collaborated on community art that sought to symbolically challenge the right of the wider community to determine what culture is, and to communicate the issues or views of residents. By creating such a shift

in the dominant culture, Gray could be seen as de-territorializing via work in an alternative form in alternative space where creative exchange led to positive change and transformation at personal and social levels. This openness and collaborative artistic work, whether with people with or without mental illness, will affect centralized structures of knowledge with alternative territories where new connections with clients become possible and clients are not classified under a different culture.

In my reading of Spaniol's (1998) ethnographic participatory research I see the influence of a dominant culture and alienation of individuals from each other. To learn about individuals with psychiatric illnesses as subjects, Spaniol grouped participants with mental illness diagnosis together as representing a culture of disability. She based her resulting model on an assumption that people with psychiatric disability can be regarded as members of "disability culture." However, I find traces of alienations from the individual imposed by dominant culture in this assumption, based on the *culture of disability* term used by the Americans With Disabilities Act to promote inclusion and equal legal rights for individuals with disabilities. Although the Act does not address disability culture or pride directly, it does discuss such issues as historical and social participation (Brown, 2015). The positive value of grouping and labeling people by a profession that is based on human knowledge and art is unclear to me.

An example of how patterns of stagnation in practice can result from adapting to dominant models without applying a new or original concept is a social empowerment model of art therapy proposed by Morris and Willis-Rauch (2014). I base this critique on my own experience with four different open studios that I initiated in both a psychiatric unit and in museum settings, and a field experience at a psychiatric hospital. Group

formation; unstructured, therapist-supported format; structured intervention as a group support; independence in selecting art materials, processes, and styles; feedback and collaboration that emerges the group forms—all have become common practice in art therapy. Therefore, I find the authors' approach conforms to many open studios in clinical settings. From art therapy history, we know that Cliff Joseph in the 1970s and many art therapists since have practiced in this way—not because they followed a model but because it was part of their analytical work and decision-making. The notion of a democratic studio as a microcosm is certainly not new. This model appears to be conforming itself to a current trend in art therapy and social action; the language the authors used is clearly derived from the dominant trend, leaving little room for pathways to creative thinking or action.

Over half a century ago Foucault (1976) wrote about the cultural dominance of central systems in the mental health field, stating that the analyses of psychologists and sociologists that turn the patient into a deviant are, above all, a projection of cultural themes. He also was critical of the depersonalization of patients and the empowerment of the dominant culture: When such a culture diagnoses the illness, it excludes the patient (Foucault, 1976). Cultural or hierarchical classifications between professionals and clients may decrease possibilities for real exchange of ideas that can promote new knowledge about divergent truths. Using terminology from Foucault, Freedman and Combs (1996) wrote that people tend to become docile bodies under “the [internalized] gaze” of those who control the discourse of power in a culture (p. 39). The art therapist's role is therefore critical in contributing to transformations of established cultural themes in order to enable creative thinking in populations considered marginal or outsiders by a

dominant system. Many of clients' ideas about life and social justice develop and materialize in their art. Kapitan, Litell, and Torres (2011) defined art in this way as a transformational act of critical consciousness, eliciting new ways of thinking and learning that things can change. Art can become one of the active agents of critical exchange by using a multiplicity of entry points when the art therapist is actively seeking community engagement through arts-based projects and creating new forms of collaborations to support communities' health.

Relationship and Creativity: Relational Aesthetics

The previously examined areas of language, perception, and the effect of dominant culture all have a significant role within the space of relationships and creativity, for client and therapist alike. They influence the dynamic exchange within a safe space that deals with relations and aesthetics. In the art therapy literature, Robbins's (1994) concept of *psychoaesthetic*, and C. H. Moon's (2002) comprehensive account of both aspects of conceptual and practical implications of relational aesthetics, elucidate the observation that the art therapist and client must go through vast, complex, and changing phenomena that are decidedly not limited to the one image or object of art.

To my knowledge, too, this essential aspect of space and time—which includes a number of signifiers, including the therapist—has not yet been specifically presented in client–therapist narratives, especially in the limited literature pertaining to the phenomenological approach to art therapy. For example, in reviewing Betensky's 1995 text on the phenomenology of therapeutic art expression, Cleveland (1997) expressed her difficulty in accepting that the concepts of transference and countertransference were limited in its approach to treatment. A contemporary phenomenological example,

however, is Fenner's (2012) study that extends understanding of the importance of visual experience in the art therapy room and in the therapeutic encounter. Deleuze and Guattari's use of the term *assemblage* may illuminate Fenner's findings in that it is inclusive of space elements, faces, bodily organs, bodily tensions and smells, sounds, and utterances for what is experienced by human perceptions. For example, they write about *faciality* and give a special place and significance to the face, stating:

The face is not an envelope exterior to the person who speaks, thinks or feels. The form of the signifier in language, even its units, would remain indeterminate if the potential listener did not use the face of the speaker to guide his or her choices ("Hey, he seems angry . . ."; "He couldn't say it . . ."; "You see my face when I'm talking to you . . ."; "Look at me carefully . . ."). (Deleuze & Guattari, 1980/1987, p. 167)

In the art therapy literature, Robbins (1994) explained that by working within a variety of art forms and offering patients a variety of creative holding environments, both therapist and patient enter a playground of *psychoaesthetic experience* (p. 47). Robbins emphasized the importance of hearing the sounds behind the words, sensing the visions that erupt out of communication patterns, and feeling the bodily tensions that emanate from transference and countertransference—all as part of the psychoaesthetic experience (p. 47). These considerations reflect the therapist's heightened awareness of human perceptions and expressions, and the complex functioning of language, both of which are areas examined earlier in this essay. C. H. Moon (2002) also emphasized the importance of attending to the aesthetic experience that informs art therapy, the relationship with one's art, and with others that unfold when creating art. She used the term *relational*

aesthetics to introduce an aesthetic that is interested in the nature of artistic phenomena and aesthetic sensibilities within the context of relationships. This focus on the aesthetics of relationships between clients and therapists demonstrates the awareness that what the perception captures during the therapy encounter consists of rich layers that influence relational dynamics.

Relational aesthetics is also used in the world of social practice art today.

Bourriaud (1998/2002) wrote that the possibility of a relational art—an art taking as its theoretical horizon the realm of human interactions and its social context, instead of the assertion of an independent and private symbolic space—points to a radical revolution within the aesthetic, cultural, and political goals introduced by modern art. When the work of the art therapist is inclusive of the private (art as territory), the social, and the interactive, greater freedom and creativity can be realized. The intersubjective work of the art therapist with clients is based on the affective, perceptive, and intellectual content of sessions shared through art and relational aesthetics.

Boal (1995), who has written about his therapy work with people with mental illness using theater arts, described his creation of an aesthetic space as follows. To create an aesthetic space only three elements are required: human beings, a passion, and a platform. In agreement with Boal, I believe that aesthetic activity, which emerges from the aesthetic space, is vocational and belongs to all human beings and manifests itself constantly in our relations with other people and other objects. In the art therapy relationship there is an improvisational exchange of meanings that works in an open democratic platform, leading to the expression of creative forces.

Creativity can be measured by and also conceptualized as divergent conscious thinking (Hass-Cohen & Findlay, 2015). We may witness this divergent thinking and extreme creativity in the art of clients with mental illness, developmental disorders, and chronic illnesses, for example. In spite of their undeniable visual authority and emotional power, not even the finest examples of art by individuals with mental illnesses have found a permanent place in most museums of the U.S. and European world (MacGregor, 1989). This is again where nomadic thinking differs from established norms for classification and categorization. Nomadic thinking conceives of creative experimentations as a minor science (Braidotti, 2011). In art therapy contexts this can mean making space for multiple realities, instead of assessing based on limited views of reality.

This stance of multiple views of realities within art therapy relations was expressed in the art therapy literature around 2000 that sought to incorporate postmodernism. As Kapitan (2003) explained, the postmodern view in art therapy is discordant with the presumed authority of educational and treatment methods that favor a singular view of reality (p. 25). There are similarities here with the idea of multiple realities in the work of Deleuze and Guattari. However, due to their resistance to associate with postmodernism, and Guattari's clear position against it (Genosko, 2002, p. 36), I have not used the term in my research in association with their work. My understanding is that in art therapy contexts, during exchanges and sessions with clients, the art therapist utilizing nomadic thinking learns about divergent thoughts of the client and conceives of them as what they are, which is creativity. Instead of identifying their

reality as pathology or problem, art therapists can thus allow it to be visible because it is executing a function for the client.

The art therapist and the client experience vast, complex, changing phenomena, including aesthetics, whenever they enter the playground of psychoaesthetic experience (Robbins, 1994) and see the value of developing an aesthetic relationship (C. H. Moon, 2002). In agreement with Bourriaud (1998/2002), who wrote that as part of a relational theory of art, intersubjectivity does not only represent the social setting but also becomes the essence of artistic practices, I argue that, with nomadic thinking, divergent conscious thinking of the client can enrich the artistic practices of both client and therapist through a intersubjective and relationist theory of art. The work of clients, regardless of how different or divergent from socially accepted norms, should be strongly supported for their creative content and forces, which are reflected with blocs of affect and percept in the art product (Deleuze & Guattari, 1980/1987). The state of energy within the creative intersubjective force extends from private symbolic spaces into the experience of relational aesthetics that can lead to positive social change. In nomadic thinking, relational aesthetics has both personal and social values. Art therapists and clients experience the dynamics of society in the microcosm of the therapeutic relationship; society ares that are unbalanced and require redress can be expected to emerge in this relationship (Hocoy, 2007). Productive artistic collaborations between art therapist and client can result from these intersubjective relational forms of being.

From my review of relational aesthetics in the art therapy discourse, what I believe to be its most impactful aspect at the social level is that it is not narrowed by the image of the art therapist entering a pre-defined social platform with a plan, using a lens

of empathy to create a collaborative community art project, and/or maybe doing fundraising and advocacy to bring attention to a social situation (e.g., Allen, 2007a, 2007b). Relational aesthetics is made possible by experiences where hierarchy does not lead or guide, and where one can make assessments based on ongoing concerns about different structures of thought process, as shaped by unique desires and needs of clients. Creativity and relational aesthetics best thrive in flexible conditions. As Hass-Cohen and Findlay (2015) wrote, creative artistic states seem to fluctuate between activation of processes such as mental flexibility and control and default modes associated with dreaming, unfocused attentions, and the loosening of controls. As an art therapist I take initiatives that are concerned with providing flexible, stress-free environments and conditions for art making and creative thinking.

The idea of a relational art—meaning an art taking as its theoretical prospect the realm of human interactions and its social context rather than the assertion of an independent, private symbolic space (Bourriaud, 1998/2002)—continues to have a positive impact on the work of contemporary art therapist–client relationships. The nomadic approach is therefore concerned with providing these literal and figurative spaces for clients through building a relational trust. The strategies and techniques that the art therapist will find appropriate and useful for this therapy relation may be multiple and multiplying, based on cues, signs, request, input, and indications coming from participants.

Art Therapy in the Community: Social Action

Social action and community art therapy continue to be impactful, especially within the current trajectories of art therapists as leading to various cultural domains or

territories where they engage in dialogues with new communities. In the last few decades, it appears that there has been a growing interest in art therapy initiatives for social action and in community-based art therapy. In the new urban culture expanding globally through actual and digital connections, community-based art therapy is also expanding beyond shelters and disaster relief services—it is growing as a proactive engine that is reminiscent of Beuys’s social sculpture (Antliff, 2014).

On the occasion of founding the Organization for Direct Democracy Through Referendum, Beuys (Antliff, 2014) issued a statement declaring that “EVERY HUMAN BEING IS AN ARTIST who—from the state of freedom—the position of freedom that he experiences first-hand—learns to determine the other positions in the TOTAL ARTWORK OF THE FUTURE SOCIAL ORDER” (pp. 70–71). Beuys’s goal as an artist was to change the constitution of West Germany in order to take power away from representative political parties and government bureaucrats and transfer it to the people (Antliff, 2014). The inclusion of all human beings in the creative process of active participation in the structuring of laws that Beuys and other artists initiated continues to give direction to the art world today. A growing contemporary movement of artists choosing to engage with timely issues by expanding their practice beyond the safe confines of their studios and into the complex public sphere is known with many names: social justice art, relational aesthetics, social practice, and community art (Thompson, 2012).

Living As Form: Socially Engaged Art From 1991–2011 by Thompson (2012), the creative director of Creative Times, is a text that describes over 100 projects that illustrate social practice art from around the globe, each one addressing critical issues by socially engaged artists. Socially engaged art functions by connecting itself to subjects

and problems that normally belong to other disciplines, moving them temporarily into a place of ambiguity and temporarily snatching away subjects into the realm of art making, thereby bringing new insights to a particular problem or condition and in turn making it visible to other disciplines (Helguera, 2011). Referring to the genre of public art or activist art, B. L. Moon (2003) expressed his belief that art therapy, although on the periphery, has had a close philosophical connection to these art trends. This connection is evident in the socially engaged art and social action movement in art therapy today.

Social action art therapy and contemporary examples of social practice art manifest many similarities. Some social practice art projects (e.g., Thompson, 2012) place emphasis on the artistic process versus the art product, the use of sensory-based and multisensory material, and/or participatory and collaborative aspects of art. Most projects are participatory by nature and have a goal of social change. Art projects may be initiated to address a crisis in communities and in so doing place an emphasis on relational aesthetics. Art is made not to generate great museum objects but rather as a process of creating territories through art.

In parallel with socially engaged art or social practice art, various projects have been initiated and implemented by art therapists in response to community needs or crisis situations. Kaplan's (2007) *Art Therapy and Social Action* features art therapy programs that include a range of topics dealing with interventions leading to healthy communities, addressing gun crimes, homelessness, racism, experiences of terrorism, and many more. For example, in her description of how art therapy can address conflict resolution, Kaplan (2007) emphasized the essential power of art for transforming emotions, making

communication possible, and helping with solving problems by objectifying inner visions.

At the same time that fine art is moving beyond the narrow confines of the curatorial system, mental health care is expanding into community and cultural institutions like museums and galleries (Kapitan, 2014a), providing many new locations and paradigms that are reinventing art therapy. A community-based practice is a platform where a multiplicity of intersubjective narratives and exchanges can create change and empower individuals. Through these encounters, and with a collective elaboration of meanings by the art therapist and client, community-based initiatives can be generated with and for the community. For example, in 2015, in connection with the Queens Community House, the *ArtAccess* Program of the Queens Museum of New York (Peacock, 2012) piloted a series of museum-based art therapy sessions for individuals with mild and moderate Alzheimer's, along with a series of art therapy sessions for caregivers, a program that I served as a facilitator for. Queens Community House is a platform that offers programming for people of all ages to strengthen the community. Connecting with Social Adult Day Services, *ArtAccess* partnered with LIFT, a program that serves frail older adults, and TYME Away, a program for adults who have cognitive impairments.

Due to the success of the pilot program, social workers and counselors of Queens Community House are now working together with the Queens Museum to create funding for more art therapy programming at their site and at the museum studios. The ultimate reality that makes the funding argument powerful is that individuals with Alzheimer's can have a schedule that is rich, creative, and productive, and be engaged in community

activities in settings that are arts-based. They receive a therapeutic service that is based on art, which is very different than their usual daily activities focusing on medical needs or recreation through shopping, outings, or crafts.

At the end of one *ArtAccess* art therapy session with caregivers that I facilitated, one of the participants told me that it was the first time she had ever participated in a therapy group where she wasn't crying all the time; where, instead, she created something and thought about her own feelings and needs. Potash (2011) wrote that the art therapist could add a social change paradigm into current practice by fostering the creative process in service of relationships. In the realm of environment social action, Whitaker (2016) explained how going outside traditional therapeutic boundaries brings art therapy not only to nature, but to the realities of how people live their lives in diverse public territories, and that such art therapy associates with society and the general public as relevant therapeutic constituencies.

Community-based platforms where art therapists can become involved in social change through art include cultural institutions such as museums, public libraries, and community houses or centers. Working with these multiple platforms, art therapists are finding it possible to integrate knowledge of clinical, art, and philosophical theories with social engagement. Peacock (2012) described collaborations between the disciplines of museum education and art therapy, reporting that the few museums that have employed art therapy have done so as a means of demonstrating community awareness or providing education services. Clearly, museums and cultural organizations can benefit from greater presence of art therapy in their interactions and collaborations with the public. Community art therapy acknowledges that the fabric of culture provides the necessary

healing context for individual healing, therapeutic art making, and transformative community dialogue (Timm-Bottos, 2011). Human beings are capable of acts of self-rescue, finding the idea that revitalizes a life and lends it strength (Carr, 2011).

Community-based art therapy can create and design new spaces and structures that individuals use to engage in acts of self-rescue through the process of art making, reflection, and sharing. Whitaker's (2016) review of Kopytin and Rugh's "Green Studio" text noted that the authors encourage art therapists to seek out new ventures out in the open and in so doing extends art therapy's influence into the world at large. Hocoy (2005) asserted that art therapy may have to take place outside of the consulting room and outside of the traditional "therapeutic frame," and engage according to community norms, which has been happening throughout the past decade.

To make observations and processes that will help people flourish, they require voices in inviting places in the community; as such, institutions may function as places for public critical thinking and for the reflection that brings people together in progressive reciprocity (Carr, 2011). Applied to art therapy, such flexible thinking in terms of program spaces can lead to multiple trajectories in the community, where social action and art therapy may become welded. When the lens that recognizes the interrelation inherent in our human existence is utilized, divisions between personal and societal, therapy and social action disappear (Hocoy, 2005). This fusion involves projects that are shaped from the inside, not applied from outside. One example as evidence for this claim is the development of Boal's (1995) "Theater of the Oppressed," in which audiences initially were invited to discuss a play at the end of the performance and thus remained viewers and "reactors" to it. Boal's process asked audience members to stop the

performance to suggest different actions for a character who was experiencing oppression, which the actor would then carry out. In a now legendary development, one woman in the audience once was so outraged when an actor failed to understand her suggestion that she came onto the stage and showed exactly what she meant. Boal discovered that audience members became empowered not only when they made suggestions but especially when they acted that change on stage, reflected, collectively on the suggestion, and thereby empowered and initiated grassroots activism.

As previously noted, in 1994 Spaniol and Cattaneo wrote that the therapeutic relationship in art therapy, like any therapeutic relationship, is made of an artificial construct based on an imbalance of power. As such, it is inherently unequal, even when clients come to therapists voluntarily. Such a view based solely on hierarchy makes a discussion on social practice art therapy difficult. Because therapists and their clients recapitulate the dynamics of society in the microcosm of the therapeutic relationship, those areas in society that are unbalanced and require redress inevitably emerge in this relationship (Hocoy, 2005). Therefore, despite the fact that imbalances emerge, art therapy relationships are not artificial constructs; rather, they are social microcosms with natural imbalances.

Conclusions

In organizing this review of the literature based on distinct elements of art therapy and through a new agency beyond the spectrum or polarity that has been used to define practice, I explored the epistemology of art therapy based on a nomadic, rhizomatic thinking, using concepts from the philosophy of Deleuze and Guattari that have influenced post-structuralism. This approach and the exploration of each element allowed me to see

relations and parallels between concepts within art therapy theories, philosophy, art, and other art-based disciplines as well as in my work as art therapist. I believe these essential components are at the base of art therapy.

I identified the following conceptual compounds as the new agency affecting my work with diverse clients in diverse settings: perception and intersubjectivity, language and the unconscious, creativity and relational aesthetics, dominant culture's effect, and community art therapy and social action. I believe these compounds are at the base of my work, and relevant to all populations in all settings. Therefore, I found it necessary to deconstruct the discourse of polarities and spectrums between the clinical and the studio, in order to create a working base that allows for nonlinear access to all theories of art therapy.

Working with this agency I can de-territorialize from a school of thought to re-territorialize without building walls around any theory as a property regime, in agreement with Deleuze and Guattari's (1980/1987) treatise on nomadology. My approach is aligned with the contemporary concept of nomadic, rhizomatic ways of knowledge creation, which is inclusive of cross-disciplinary investigations to access multiple truths and theories that are multiple and multiplying. I aimed to exemplify, on a smaller scale, how various theoretical approaches in art therapy contain impactful elements and concepts that become reactivated as a conceptual base for thinking in contemporary art therapy with cross-disciplinary perspectives through nomadic thinking.

CHAPTER 3: DESCRIPTION OF RESEARCH AND METHODOLOGY

The idea of the nomadic stance, as an adaptive and impactful proposition that provides alternative ways of thinking and acting in art therapy, originated from the multiplicities of populations and settings within my clinical and community-based practice, along with my longtime study of the vast body of work of Deleuze and Guattari (Deleuze, 1988, 1981/2003; Guattari, 1989/2000; Deleuze & Guattari, 1972/1983, 1980/1987). For several years, I have worked with clients ages 3 to 95 with a wide range of racial, cultural, language, and socioeconomic diversity; with varying physical, psychological, and developmental abilities; with chronic and temporary conditions; and in clinical and community-based settings.

Making images and sculptures while relating to the work I was researching, I explored several questions that intrigued me. From the many concepts created by Deleuze and Guattari, one especially preoccupied me: the nomad and nomadology. It seems that imagination is where the inquiry and the art form converge (Kalmanowitz, 2013). The art forms, as the visual data and “the making” of art, were happening parallel to my efforts of making sense and making meaning, all resulting in imagining new possibilities for thinking about art therapy epistemology. I was asking and reflecting on questions about the effectiveness of nomadic, rhizomatic thinking in art therapy practice. In agreement with Collins (2014), I find that making sense is a process of interrogating both sensuous–intellectual data and ideas that make up the style and contents, and the elements of the composition or abstract machine that pull the work together.

The image or metaphor of the nomad (see Figures 3, 4, & 5) directed me to understand more and be curious about the experience behind the experience of making.

Making a provisional move into fiction is a quest for clarification on the part of both the researcher and the participant, but it is also forever incomplete (Kalmanowitz, 2013). Shifting into fiction and making provided me with multiple means of support, both intellectually and emotionally, by which I became engaged in a continuous process of making meaning and exploring. I was interested in new and multiple ways to create knowledge—ones that can move, de-territorialize, and re-territorialize, like a nomad.



Figure 3. Nomad Image/Metaphor (Research Data)

For years, the scope of diversity of population and setting in my work had initiated an inquisitiveness that was both conceptual and practice-based. To work with and respond to this diversity, I engaged in rereading and reevaluating current theoretical approaches in art therapy and their application by contemporary art therapists. I was in



Figure 4. Researcher's Sculpture of a Nomadic Figure With Wire, Clay, String, and Wood

search of a method that provided a multiplicity of new arts-based entry points to a multiplicity of populations and settings without creating what I had come to see as a biased approach in assessment that may be paired with a theory or paradigm born out of the needs of a specific historic space, time, and condition. I wanted to examine what I could learn directly from each environment or encounter and I wanted not to know a population in advance; I wanted to be able to use my

intuitions freely, to sense the singular, the variation, and the unique in each person.



Figure 5. *Open Trajectories vs. Fixed Roads*” (Researcher’s Painting, Watercolor on Paper)

Despite having a powerful intellectual value in my practice and a practical value in the setting they each initially originated in, the theoretical approaches I found did not provide direct support to the diverse and complex work I was responsible for. In working with any one theory, I felt that I was pulled toward and influenced by a central power structure, and this meant that I was missing minor sciences. Deleuze and Guattari (1980/1987) wrote that minor science is continually enriching major science by communicating its intuition to it, its ways of proceeding and itinerary, its sense of it, and its taste for matter, singularity, variation, and intuitionist geometry. The philosophical work of Deleuze and Guattari—especially their treatise on nomadology (1980/1987)—and the work of Lacan (1976, 1973/1998, 1970/2006) on language and the unconscious, and his concept of *sinthome*, helped me take my theoretical understanding deeper to gain more knowledge of the essence of art therapy epistemology through the expanded lenses of psychology, philosophy, and contemporary art. I recognized that there are endless

concepts in art therapy to be used with great impact in working with diverse populations, when they are studied as “concepts” in place of a paradigm or central structures.

I then started experimenting with these philosophical views and concepts, along with working with images and metaphors, as I looked into ways to unite these ideas through the arts-based content of my work and my interactions with clients (Figure 6).

Initially, I had one major tool: the arts. The common base and entry point to this diversity was creativity and art making.

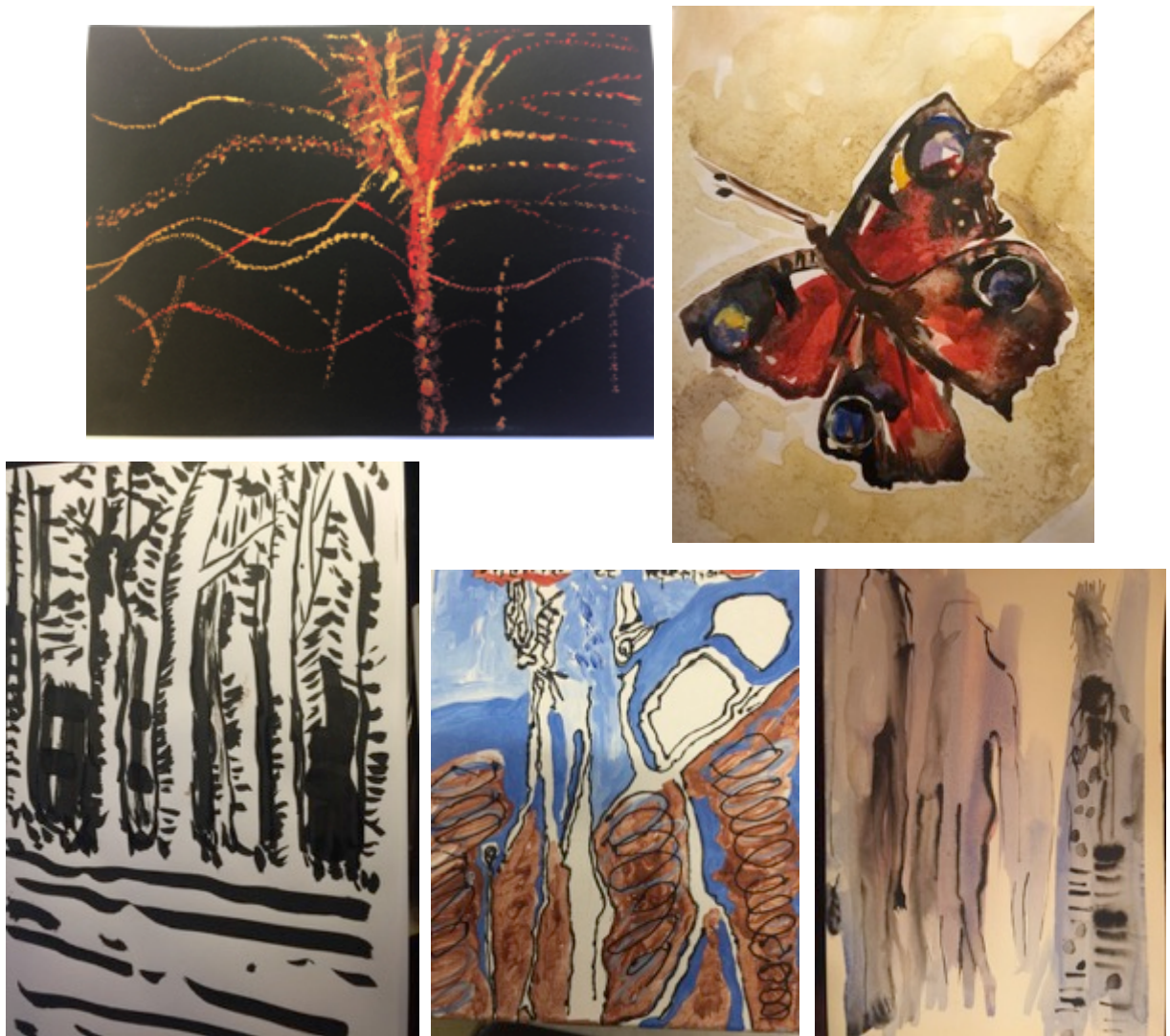


Figure 6. Examples of Researcher's Artistic Improvisation During Sessions (Creativity Development)

I experimented with an approach that is informed by the particularities of each situation and population, viewing all populations with the same basic belief; like a nomad who does not carry religions or spirituality to teach or convert, I refrained from selecting a theoretical orientation and applying it to a population. Unlike the missionary, the nomad learns from the natives about their gods. With nomadic thinking, I created a trajectory that led to the population's realities to establish grounds for possibilities of learning or knowledge creation for both parties. I de-territorialized from theoretical knowledge to learn, and re-territorialized to the realm of theories and philosophy to reflect and review elements of practicality, absorbing useful concepts from art therapy that supported my work. Through this method, over the years, I had already created a number of projects with very different communities, while feeling the freedom to live with a fluid identity that takes creativity and art making at its base, both for client and for art therapist. What gradually became different in my approach was that I was not professionally or ethically content with entering clients' worlds with a single theoretical lens. I further reflected on refining how I can use nomadic, rhizomatic thinking in my work with clients.

Most of my reported observations were part of my doctoral study, but these observations have also been part of my current practice, with a much wider scope that includes school children and youth aged 3–21, adults with disabilities, adults aged 18–95 with developmental disorders and chronic illness, adults with Alzheimer's disease and memory loss, adult cancer survivors, and adults in acute psychiatric inpatient clinical settings.

Method

For my research study I conducted an arts-based inquiry that involved eight participants at five different sites . Over the course of six sessions, I used multiple naturally flowing arts-based activities to explore my experience and perceptions through the senses. In art therapy, direct engagement in art becomes a site for investigating research problems and methods (Kapitan, 2010). I adopted an empirical approach in recording my lived experiences and perceptions through visual and written field notes from which I could reflect on the outcomes of my approach. As Arnheim stated (as cited in Kapitan, 2010, p. 162), art making requires many, if not all, of the same complex cognitive operations that are involved in the creation of models of scientific theory. *Empirical* refers to making observations to obtain knowledge; the term *empirical research* refers to making planned observations (Patton, 2010).

I organized my work with participants as a *montage* with three separate layers, each targeting one or more specific data type. Originally a method of editing cinematic images, montage is also one of the many methodological practices in qualitative research (Denzin & Lincoln, 2011). Montage uses brief images to create a clearly defined sense of urgency and complexity, inviting the viewer who puts sequences together into a meaningful emotional whole, like at a glance, all at once (Denzin & Lincoln, 2011). As is the case in Jazz improvisation, the qualitative researcher uses montage to create the sense that images, sounds, and understanding are all blending together, overlapping, and forming a complex new creation.

From having conducted initial pre-session art projects planning, I determined the three layers, which were: (a) my multimodal arts-based field note data collection during

sessions or in between sessions (Layer 1), (b) the collaborative art making with participants (Layer 2), and lastly (c) the progressive creation and retrospective finalization of a video art project (Layer 3). The stages of Layers 1 and 2 were repeated three to four times during the research timeline of six sessions, allowing me to collect various data that were analyzed through the final video art project.

Setting

The settings for the study were three art studios where I usually work with art therapy participants and two private settings. The first studio is where I worked with two participants who are living with developmental disorders and have experienced depression, childhood trauma, or major loss in the past. The second setting was a studio used by independent artists with mental illness, where I worked with two participants who have a mental illness diagnosis. The third studio is where I work with older adults aged 65 and older who are adapting to life changes related to aging. The fourth and fifth spaces were where I worked with independent, individual artists who—to the best of my knowledge—had no challenges or disabilities. One of these spaces is in Connecticut and the other is in Queens, New York.

My research was based on knowledge gained through my experience and senses, positioning the art therapist in a nonhierarchical stance that is open to changing while learning through observation and arts-based interactions with participants. I accomplished the goal of making research with human systems with a method that is multidimensional, based on direct experience and using my own art. My method was empirical at base; that is, as direct observation and experience on which to construct knowledge, that allows for a platform that does not situate itself on theoretical approaches during encounters, and

that trusts experiences gained through senses and perceptions throughout the process of observation and interactions. I believe that we change as researchers by merely studying and interacting with participants and the data we gather (Deacon, 2006). We become the research instruments ourselves (Deacon, 2006, p. 97; Kapitan, 2010). By including active and creative methods of data collection, researchers are responsible for analyzing and including their own experiences and perceptions in the data analyses and reports (Hesse-Biber & Leavy, 2006). My research was an arts-based study largely focused on observed experiences and interactions, including my own art, participants' art, collaborative art between myself and the participants, and my final video. McNiff (2013) stressed that arts-based research is a physical process, an empirical "doing" with materials of expression that may be close to what a scientist does in the lab.

In my research, Deleuze and Guattari's work on multiplicity and difference served to validate realities and to support the Guattari's idea that what happens during art therapy encounter is always unique and nonreplicable (Boutang, 2011). The overall objective of the study was to examine how Deleuze and Guattari's philosophical approaches and arts-based frameworks support the work of understanding participants' perceptions and realities. To this end, I used a direct observational approach in various arts-based encounters, and I analyzed my approach with a final videography process that allowed me to include fluid movements of my perceptions and actions.

I conducted an arts-based qualitative study interacting with eight individual adults selected from four different adult populations, with two participants from each, recruited from diverse community-based art studios. I did not use predesigned intervention methods, surveys, or questionnaires for this study. Data were collected during naturally

unfolding art studio sessions or encounters in the art studios. With the belief that our behavior is a function of our experience, and that we act according to the way we see things (Laing, 1967), I documented my perceptions and reflected on the outcomes and influences of my perceptions, and my behavior and interactions within these relationships. Using written or arts-based field notes, observations, and data from audio and video recordings, I made an artistic analysis of my behavior and perceptions of participants' experiences during the naturally unfolding arts-based activities, collaborations, conversations, interactions, and exchanges. From these I created a documentary essay video. The ongoing, intense work of multimodal data gathering resulted in my video project, which provided the vehicle to explore and express my research questions as well as to share my study. Multimodal, creative methods served to accomplish the goal of making research with human systems multidimensional.

Art-based research is an emergent method where the art of the researcher is an active part of the research (Kapitan, 2010). McNiff (2013) defined art-based research as the use of personal expressions in various art forms as the primary mode of inquiry. The artistic expressions of others may accompany or be included in the studies but the making of art by the researcher remains the unique feature, in McNiff's view (McNiff, 2013). My research design required and included art by both researcher and participants. My art projects instilled and gave direction to my research design in three ways:

1. Through the art created by me during or in between sessions, including photography and video clips, I was engaged in the process of meaning making and improvisations through art.
2. With the collaborative and relational art that was created and documented during

or in between sessions, I looked at intersubjectivities in action through arts-based collaborations.

3. The creation of the final videography allowed me to improvise and create a fluid representation of the entire experience of research from beginning to end through the audiovisual medium.

Recruitment of the Sample

For this study I identified eight participants. There were two older adults (one man and one female) from a community-based art studio for older adults in Queens Village, New York; two adults (one male and one female) with developmental disabilities and a significant loss in the past, who were from a community-based art studio in Queens, New York; two male adults who had a mental illness diagnosis, living independently and attending an art studio in Queens Village; and two adults (one male and one female) who were artists with no disabilities or significant challenges, in their personal studios in Queens and Connecticut. I invited individuals to participate in the study based on the following criteria:

1. Positive rapport and regard existed between the participant and myself, based on my professional judgment. I deemed a positive rapport as necessary because I was attempting to generate a naturally unfolding study that was inviting, collaborative, and participatory based on my relationships with participants, which required openness and initial trust on their part.
2. Participants were adults, to prevent possible developmental gaps between adults and children both regarding perceptions and naturalism of sessions, considering that my typical work with children requires structured activities that would not fit

in the design of this study (yet can be considered in the future).

To create a small sample for greater multiplicity of perceptions, potential participants included two individuals with a mental disorder diagnosis who lived independently, two participants who were older adults experiencing life changes experienced through aging, two participants who had experienced severe depression or loss in the past, and two artists who were typical. For greater inclusion of multiplicities, cultural, ethnic, and religious or spiritual diversity was also considered, which is also reflective of populations in New York City where the study was conducted. Participants included an individual with a Chinese American background, a Haitian immigrant, an individual of Caribbean descent, a Colombian immigrant, an individual with Peruvian origins, and three White individuals who were diverse in terms of faith or spirituality.

Participation was optional, with no penalty for declining the invitation to be involved in the study. In recruitment and selection of participants, I did not proceed without first determining that participation in the study was unlikely to harm the client's therapeutic process or interrupt the benefits of the art therapy process. Participation in the study also was congruent with the expectations of the clients regarding the span of time for sessions. The study was conducted during naturally unfolding sessions and any collaborative work was done upon voluntary interest and request of the participant.

The Institutional Review Board of Mount Mary University reviewed and approved the study. As a requirement of participation, each participant was provided with the safeguards and protections that are outlined in the consent form (see Appendix). These forms were reviewed with all participants.

Sampling More Than People: Data Gathering Driven by Concepts

Because Deleuze and Guattari's concepts were influential in designing this study from a post-structuralist perspective, I considered my sampling as having significant theoretical sampling aspects. Theoretical sampling does not mean that people are the only objects of sampling; the researcher can also use data gathering driven by concepts derived from an evolving theory (Strauss & Corbin, 2015). According to Strauss and Corbin (2015), the researcher can base comparisons to concepts by going to places, to people, or to events that will maximize opportunities to discover variations among the concepts and to add density to categories in terms of their properties and dimensions.

I had envisioned that this method of sampling might clarify associations that I might make that had significance in my ongoing process with clients. I also saw that it would allow for increased opportunities for the process of mapping intersubjective perceptions and monitoring of my perceptions through other conceptual associations I made in between each session. For example, I often find myself thinking about or interested in finding out more about an idea or a thought I carried with me after interacting with a client. This situation can result in finding and watching a movie, visiting an art exhibit, or going to a specific location, always triggered by an exchange with a participant during arts-based interaction. Or, for instance, I may look up the names of flowers in German and Greek that I have heard from a patient diagnosed with schizophrenia who had talked about it in great detail.

The continuing work of my process was a necessary part of data construction and meaning making within the study of perceptions, within intersubjectivities, and through associations. This approach aligned with the multiplicity of conceptual bases within the

nomadic, rhizomatic thinking as defined by Deleuze and Guattari. I was inspired by theoretical sampling to examine how my practice and nomadology and other philosophical concepts discussed by Deleuze and Guattari could mutually build upon each other. Theoretical sampling is an important component in the development of grounded theory, but with the nomadic stance, I wished to propose an action-oriented position for the art therapist that emerges from pragmatic and artistic efforts. The theory was considered practice itself in this research. This view comprised an effort to understand and acknowledge the intensity of life and work's interconnectedness with no boundaries, because thinking and the activities of the conscious and unconscious mind have no boundaries; associations happen without boundaries between work and life.

Aligned with what Kapitan (2003) called “situating art therapy simultaneously in the art world” (p. 96), contemporary art therapists, being also artists, may work through ongoing weavings and interactions of life material and art material. Glaser and Strauss (1967) described an iterative sampling process that is based on emerging theoretical concepts. In my study, this sampling approach was used toward the goal of developing a rich understanding of the many dimensions of the concept of the nomad in everyday practice. I intended to develop a practice-based theory of the art therapist as a nomadic force in art therapy, which can further the development and dissemination of art therapy practice through direct connection with real-life circumstances in all settings. I used methodologies inspired by the work of Deleuze and Guattari and their concept of the nomad, and nomadic theory as proposed in the philosophical work of Braidotti (2011).

Role of the Researcher

I conducted this study in a dual role of art therapist and researcher so that I could analyze and further refine my approach within art therapeutic relationships. I wanted to explore the multiple ways that meanings are constructed in a fluid and flexible way. As an art therapist, I fulfilled my professional responsibilities with the participants, six of whom I had regularly worked with in art studio sessions and the remaining two being artists with no diagnosis or significant challenge to the extent of my knowledge. As a researcher, my role was that of being vigilant, with a refined sense of observation and presence during the exploratory process of observing what happens when art therapist and client are engaged during a naturalistic condition, during which time they interact, and to record—using my art or writing—any repercussion and continuity with regards to my thoughts or feelings during or in between sessions.

Facilitating the research involved art making and discussion aspects with the participants as well as collaborations in art making with interested participants, which included working on a project collaboratively during my own time as well as ongoing coordinated work during all phases of the project. I also conducted the logistical and pragmatic aspects of the study including operating the sound recording, still camera, and video camera in a nonintrusive way and using computer equipment necessary for several forms of data collection and videography. Additionally, I used digital photography software applications such as Superimpose to convey the idea of multiplicity of platforms and layers of thinking and acting. After organizing the data at a basic level to begin making meaning of the experience, I then engaged in the creation of a video—a creative documentary essay in order to reconstruct meanings through a multimodal form—and

began to explore my experiences and perceptions of the process in comparison with my conceptual propositions.

Data Collection and Analysis Procedures

Despite being relatively uncommon in both quantitative and qualitative research literatures, active and tangible methods for data collection such as video, photography, and artwork can be a good fit for those studying dynamic living systems (Deacon, 2006). Arts-based, multimodal methods may serve to accomplish the goal of conducting research with more multidimensional human systems. I collected data in three distinct layers, each targeted at one or more specific data type, with the two first layers repeating two to six times, depicted in Figure 7. The layers of data were organized as a montage (i.e., nonlinear information on experiences and perceptions) due to the fact that data collection and analysis was occurring during, after, and in between sessions in connection to four different populations at four different settings. In addition, it was necessary that my experience of trajectories leading to these settings was also included in the data, both to emphasize the naturalistic approach and to depict the symbolic nomadic concept that this study explored.

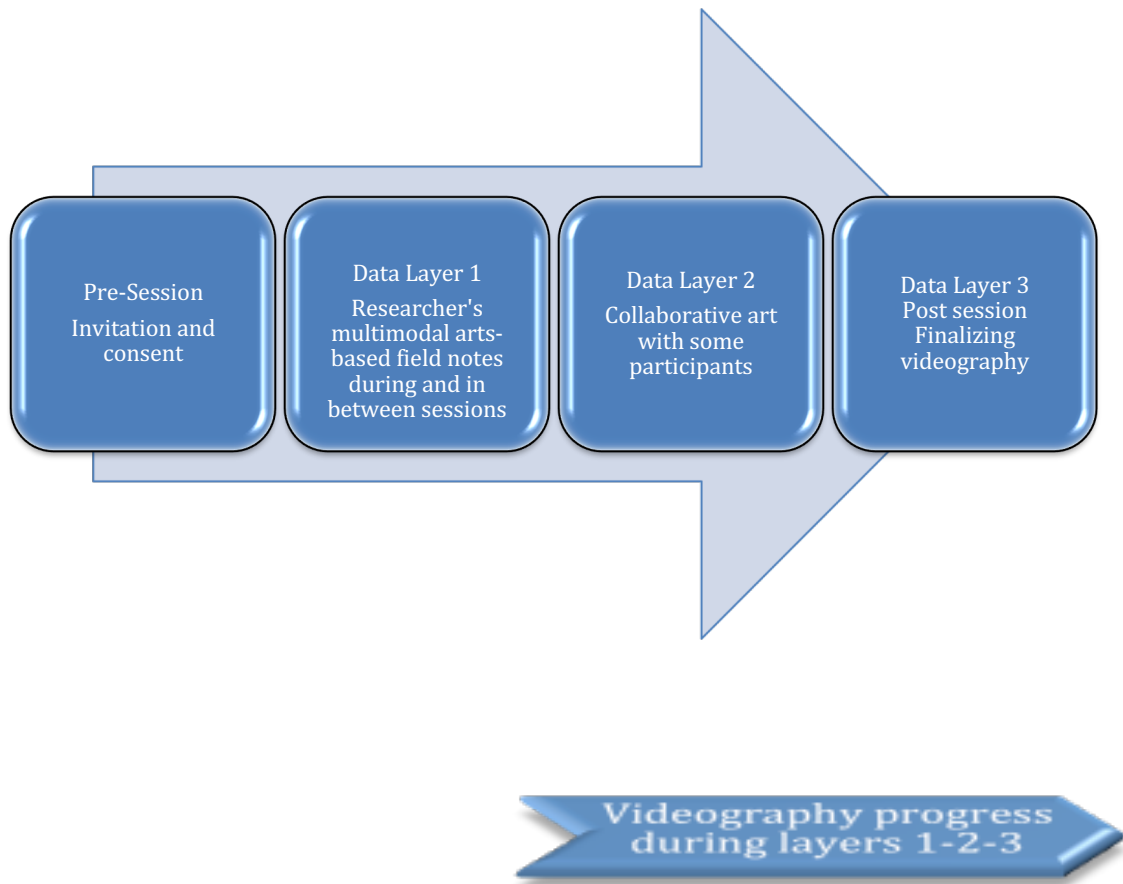


Figure 7. Data Collection Layers

To draw out its inherent multiplicity, I organized the data digitally. I created and stored in my computer subfolders for the following: (a) material I collected during or after each session with each participant, (b) collaborative art-based activities, (c) images of spaces and buildings, (d) more detailed perceptions of each place, and (e) reflections on the nomad and its image associations. This multiplicity allowed me to better record my experience and perceptions of encounters in a naturalistic way that had direct connections with the multiplicity of perception in everyday life.

The first layer of data was collected from a variety of sources. Data were collected from my visual field notes during and in between sessions. Notes on participant

sessions and memo writing and field notes were added after each session. I also collected audio recordings, photography, and video recordings during sessions. In arts-based art therapy inquiry, visual materials and objects, artworks and arts-based products, photography, performance, video, sound, poetry, storytelling, and social practice art may be used in many different ways, depending on research questions and design (Kapitan, 2010). In keeping with the nature of art and artists, the design possibilities are infinite (McNiff, 2013). For example, research-generated photographs can be used for the researcher's field notes whereby extant photographs become the main source of data about the field in which the researcher is interested (Bryman, 2008). Photographs may also be used as prompts to encourage people to talk about what is represented in them. Throughout this research, from the design phase to the analysis, inquiry was based on both artistic and professional tenets.

The second layer of data collection consisted of co-creation of art by participants and myself, which occurred throughout the sessions, as exemplified in Figure 8. The creation of collaborations was an option offered in the consent form in case the participants were interested in co-creating art, which I included in the design in order to explore intersubjectivity through collaborative art in addition to relational aesthetics. By making the option of art-making collaborations available, my goal was to enrich the interactions through the use of art as an indirect mode of connection.



Figure 8. Collaborative Art Progress of One Participant With Researcher)

As one example of collaborative art making, Wadeson (2010) instructed a couple to create a joint, well-integrated picture together without communication. A couple might reflect upon what they had felt while making their pictures and the associations they had while looking at them. In family art therapy sessions, family members draw perceptions of the family and engage in making joint pictures to explore family dynamics (p. 404). Such interactive art techniques demonstrate a potential for arts-based connections and dialogues.

Two additional well-known interactive techniques used in art therapy are the squiggle game and the scribble drawing. According to Rubin (2005), the squiggle game was an interactive method invented by Winnicott to take turns with children by making squiggles using pencil and paper and naming them. Cane, who unlike Winnicott was an artist and dancer working with gifted children, used the scribble techniques during preparatory breathing and movement exercises, using an easel with large paper and soft pastels. Inspired by these interactive approaches, I used a different collaborative art method appropriate for adult interactions to provide a tool to explore my perceptions of each participant and learn about the dynamics of intersubjectivities with a nonhierarchical stance, opening to new types of communication and exchange while sharing affect or percept through a co-creation of art.

The third layer of data collection in my study was my video essay project, which I started editing after the fifth session with clients at various settings and continued until the last layer of finalization. At this stage, I synthesized all the data. As a form of data analysis, the editing process required me to select ever-refined elements of data/material that reflected my process and that I saw were significant. This layer soon became dense with multiplicities of material uploaded in the iMovie library of my computer, which I had started building by uploading from previously organized subfolders described above.

The final work of finalizing the video occurred after the end of six sessions, when I created the third and final layer of data, post sessions. The video was intended as a documentary audiovisual essay, created with multiple aspects of my work and interactions in mind. My justification for this decision was aligned with Rosenblatt who asserted that rigorous research need not be limited to systematic designs and analyses, but may be broadened to absorption in the actual gathering of data, because researchers change only by studying and interacting with participants and the data we gather (as cited in Deacon, 2006). Repeating the first two layers provided the opportunity for an absorption of data both through collaborative art making and reflection on collected visual data during and in between sessions, plus the culminating videography project.

Naturalism is an approach to research that seeks to minimize the intrusion of artificial methods of data collection, which implies that the social world should be as undisturbed as possible when it is being studied (Bryman, 2008). In this study the space or studio of interaction represents a microcosm of the social world, where, although there is a sense of safety, the art therapist's perceptions absorb and react to a new state of images and signs each time. I collected data during each of the six naturally unfolding

sessions. To increase the multimodality that can best represent human interactions, I used conversations, observation, art responses, and other visual field notes including photos, sound recording, and videos, plus participant art and collaborative art projects. Specific design tools during all six sessions were conversational inquiry, unstructured participant observation, and the arts as visual material and objects.

With conversational inquiry I focused on the here and now of the situation that contained the intellectual or emotional signs. Conversational analysis is defined as a fine-grained analysis of talk as it occurs in interaction in naturally occurring situations (Bryman, 2008). Conversational analysis is aligned with naturalism as used by qualitative researchers. By including conversational inquiry in data analysis I refrained from classifying the participants in conversation under preconceived terms of the values, terminologies, beliefs, or typical mode of behaviors of a group or cultural entity.

The medium for this research was the arts. I conducted my inquiry using unstructured participant observations within arts-based settings and/or through arts-based relationships. The use of the “arts” was considered in an absolutely wide sense of the word, and included various art forms and trends, socially engaged art, images as impressions, visual arts, sound-based and/or musical arts, literary and/or poetic arts, and three-dimensional sculptural field notes by the participants and myself. The arts in my study consisted of multiplicities of creative signifiers—as produced by the participant, by myself as the therapist, and by both of us in collaboration. These positions shaped the foundation of the methodology, keeping the conversational and the observational connected to the arts within the relational aesthetics framework.

CHAPTER 4: DATA ANALYSIS AND RESULTS

My primary focus was to conduct the research and data collection as close to a naturalistic way as possible, which in the context of my work involved using the studio space as an arts-based platform and to observe with intent, in addition to collecting data in the least intrusive way.

Results from the Art-Based Montage

The three layers of data, which included audiovisual material and conversational data, produced evidence for my proposition: that by deconstructing and reorganizing my preexisting art therapy epistemology through a new agency, I was able to find relations between my work with diverse client populations and concepts from various theories that, through natural fluid associations, aligned with nomadic thinking. With this nomadic, rhizomatic thinking I was able to think with multiple concepts in my relations with them and make space for multiple realities.

I also was able to locate how the concepts of multiplicities of perceptions, assemblage of things and utterances, modern subjectivities, intersubjectivity, relational aesthetics, re-territorialization, de-territorialization, and the nomad all directly or indirectly informed my resulting video project. All data yielded a high level of creative engagement and the sharing of emotive and perceptive realities and ideas throughout the study, which was possible through my proposition for a nomadic, rhizomatic approach in art therapy. Although I was using concepts from various psychology or art therapy theories, this occurred by using a fluid way of thinking and was not directly guiding my perception of the clients.

In order to work with the scope and multiplicity of data I had collected, and with an intention to access, experience, and prioritize realities of participants' worlds and expressions, I explicitly avoided coding of data. This decision prevented a logic of representation that may work to subsume all differences under the one, the same, and the necessary (Olkowski, 1999). My intent was to directly explore something about the uniqueness of each situation, and differences between experiences based on my reflection. In agreement with Olkowski, I believe that it is in reflection, not in contemplation of impressions, that ultimately the judgment is made that makes difference submit to representation (1999, p.185). I had experiences that were based on my sensory, perceptive observations in the moment, with their singularities. In his critique of coding as practiced within qualitative research, MacLure (2013) claimed that coding may conflict with some of the key tenets of a poststructuralist research approach. A significant part of the problem with research coding is the fact that the "grammar" always preexists the phenomena that are being investigated. Deleuze (as cited in MacLure, 2013) claimed that in coding, things are condemned to always contract the same type of relationship to one another—genus to species, category to instance, general to particular—always disposed according to relations of identity, similarity, opposition, or analogy. I avoided these dualities in order to work with multiplicities.

In order to share my findings without creating relations between already formed entities, to explicate my analysis I have selected one participant from each of the four populations, and have made a systematic exposition of a snapshot of the arts-based experience, with diversity and multiplicity in mind, which was the essential focus on my study. I then added my reflection for each participant to explicate my experience as it

relates to my research questions. One of my questions focused on the process of what was happening during and in between sessions for me, what my perception and experience of the client's world was, and how we connected.

Throughout all of the sessions, as all data demonstrated, my interactions were based on nonhierarchical relational engagement with participants, an essential aspect of the nomadic approach. Perceptions—including perceptions of spaces, my conceptual art, and other responses—were informed by arts-based and rhizomatic thinking that value multiplicities in realities versus a single socially constructed reality. The multiplicity of my sensory and intuitional perception was clear even in the diversity of my artworks. Styles, media, and material were different and multiple and demonstrated the fluid access to various forms and realities, aligning with the material making of diverse perceptions of changing moments and changing thoughts.

The data collected in Layer 1 consisted largely of my photographic work and video clips, in addition to my art as it related to the work I was researching. A photograph mechanically repeats what could never be repeated existentially, and what it reproduces to infinity has only occurred once (Barthes, 1981). I captured frames, reinforcing the reality of becoming in changing moments. I also used photography and filming as art responses to access other ways I can see what I see when I step into these places, and micro-spaces, when I am on my way or leaving the location, and when I interact with participants in the space of therapy. Kalmanowitz (2013) explained how her camera gives her distance and closeness at the same time, opening up to communication sometimes at a level that is unexpected. By communicating with spaces through photography of detail and people, I exposed and expressed the complexity of perceptions through photographic

data. Reflecting fragments of lives, people, and communities, the photography, video, and art helped me capture the multidimensionality of my perceptions and experiences, with their changing speed and intensities. Through my arts-based data about each individual I was especially able to see aspects of realities and singularities that were proving that intersubjective shared moments are snapshots of subjective realities of two different worlds in relation at any given time.

Reviewing the relational aesthetics dynamics through gathered data, in Layer 1 I first presented visual snapshots of my perception, selecting one participant from each setting, in the form of the following motifs emerging from the data: (a) setting or space; (b) participant's emergent creativity development cluster; (c) new reality: percept and affect; and (d) poetics emerging through relational aesthetics. I then added my reflection and analysis for each one of the four selections.

Photography of spaces, including zooming in on details, helped me understand the simultaneously close and distant relationships I have when entering a space. I thought about the possibility that patients and clients can have changing perceptions about the space depending on their perception at various times. I thought about how clients, just like me, may experience the space and its objects as close or distant, fragmented or whole, flexible or strict, comfortable or intimidating, inspiring or dull, depending on a moment's mindset. These details within each space inspired me, or made me think about perception in different ways. My perception of images was different and changing each different time I looked at them. I could have different and changing narratives looking at images. Rich details captured in the space of the studio on the grounds of the psychiatric hospital in Queens provided me with a multiplicity of images with an endless freedom of

expression and creativity.

All images and art responses were created in accordance with the idea of multiplicities in changing perception, and the non-arborescent but rhizomatic ways that knowledge can be built. For example, if I thought about the way participants reconstructed a memory through their art, and if I made analytical associations with Freud's (1963) Wunderblock (screen memory, or the "magic slate," a metaphor Freud used to explicate the process of recording memory), in thinking about their reconstruction of meaning I was aware that this was one of the many interesting possibilities to explain what was happening for a participant that can be therapeutic or empowering. It was one of the multiple ways one could think about it. I also looked at the creative approaches within different artists' artwork/territory, and saw that working on a territory is inherently expressive: It grants a sense of safety, power, and freedom. Art is freedom. My internal discourse became a joyful discourse about multiple realities and art as an opening to those. Art therapy sessions made the creation of these territories possible in multiple flexible ways. As art therapists continue to structure situations where the public can create more territories that reflect more realities, the process will form pathways leading to social change, including invisible realities into larger social discourses.

After creating an assemblage from emergent themes of setting, creativity development, and percept and affect, I made the following observations:

1. All of the participants unveiled unique realities within this relationship that emerged through the nonhierarchical, rhizomatic thinking and nomadic approach, as well as arts-based relations.
2. All of the participants were expressive of thoughts, ideas, and feelings through

creative exchanges.

3. One of the participants who was recruited as one of the two typical artists, meaning that I was not aware of any challenge or diagnosis, expressed very singular and unique realities about himself both as an artist and as someone recovering from a significant challenge and now engaged in a lifelong process of recovery.

With respect to this last observation, sessions with this participant were intense, gradually redirecting my attention to more in-depth therapy due to his expressing a need for a deeper process. As an art therapist who has access to concepts from diverse theories, I was able to see and respond to this reality in ways that were greatly influenced by group psychotherapy language and culture, due to the participant's lifelong participation in support groups. It is important to note that this final experience and observation with this artist demonstrated that my interaction was impactful, nonhierarchical, and open in nature, and my knowledge of humanistic person-centered theories was helping me better understand and support him. Because art and the creation of a territory was the central point of access for all populations, a collaborative artwork became a shared territory for our dialogues and processes.

Snapshots and Encounters

Concentrating on my first research question's target of sharing a perception within an intersubjectivity, or looking at emotions and feelings within the realms of relational aesthetics, I clustered participant expressions based on singularities and resisted generalizations. I created an assemblage of my perceptions, sustaining wonder as the liminal experience that confounds boundaries of inside and outside, active and passive,

knowing and feeling, or even animate or inanimate (MacLure, 2013).

Below I give an exposition of select snapshots of settings and encounters with one of the participants for each setting. I then present an analysis of my reflections about the participant in relation to these snapshots, sharing a reflection of my experience. My reflective analysis is based on conversations and art within the following fragments of assemblage:

- Setting: assemblage of perceptions of places and spaces
- Participant's emergent creativity development cluster
- New reality: percept and affect
- Poetics emerging through relational aesthetic

Setting 1, Participant 1

Participant 1, who I'll call "D," attends an open studio for adults in a borough of New York City (Setting 1). Figure 9 is an assemblage from the setting and Figure 10 presents an emergent cluster of D's artwork. One completed painting is a focus on Brooklyn Bridge. Another image is a focus on Mount Fuji. Three others are different versions of the same final piece, which depicts the Golden Gate Bridge. One of the two unfinished versions is a snapshot of a video clip in which I have a discussion with D.

New reality: Percept and affect. D: "Yeah . . . my trip from long ago. . . Did have photos but I lost them when I was evicted from my home, my apartment. Like the Brooklyn Bridge painting I made before, I'm doing this [points to painting of the Golden Gate bridge about his trip to California many years ago, before experiencing loss and depression] So that in time, if I forget, it will be right here."

D: "When it comes to travel, there are some things that people don't want to

forget [points at the painting]. I don't want to forget this place; I don't want to forget my trip to Europe in the 1980s. There were some good places there that I never forgot. And I never forgot Washington."

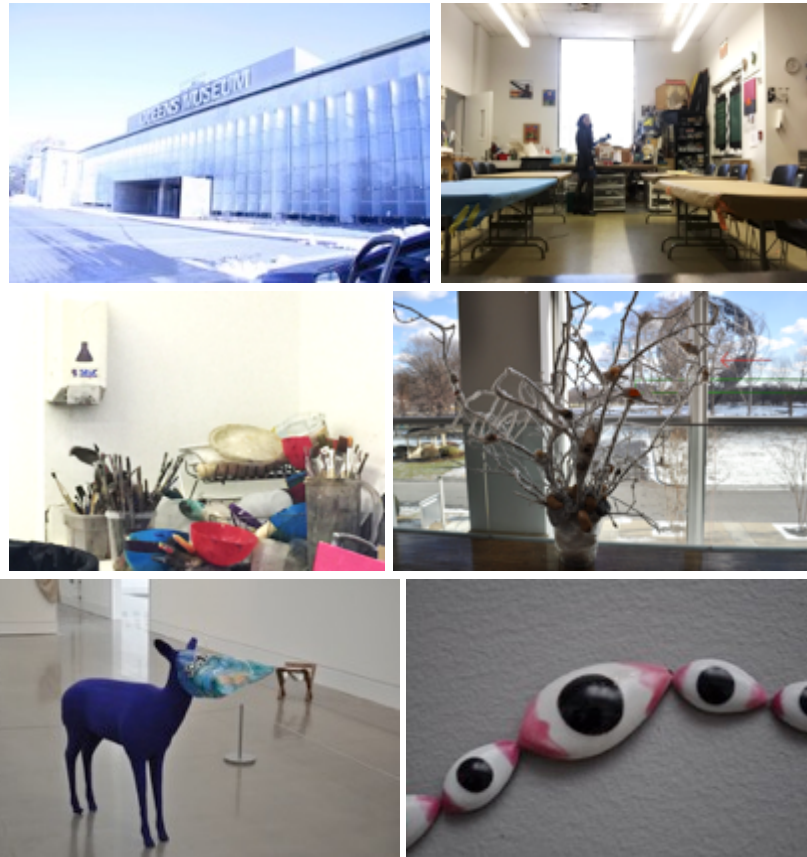


Figure 9. Participant 1 Assemblage of Perceptions of Places and Spaces

Poetics emerging through relational aesthetics. Researcher: "Did we do paintings on Europe?"

D: "Ah . . . I don't think I did a painting around Europe, but I did do the Brooklyn Bridge and I did . . . No, wait! I did do the painting of "Wine and Cheese," yeah. I lost that picture [during an eviction] but someday I may do it again, you know, I first have to do this [points at painting]. Well . . . depending . . . It was not too hard to work on, it wasn't too hard. It was a painting of a Paris bistro."

Researcher: "Maybe you can include these thoughts in the new book we were

thinking of planning, *Reflections*?”

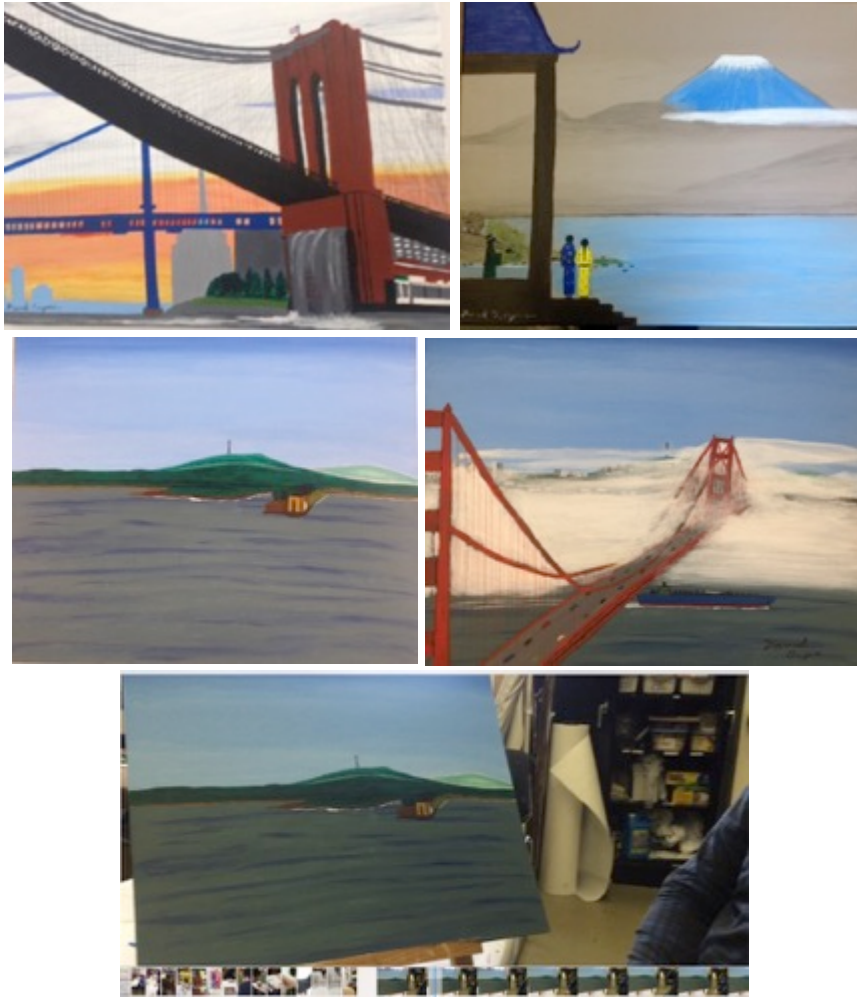


Figure 10. Participant 1 Emergent Creativity Development Cluster

D: “Now that you mentioned about *Reflections* . . . I like the idea of doing something around not just things I know and like but places as well. . . . It would be nice to work on something surrounding places. Maybe set up something as a theme surrounding that, and, maybe one part of the book [could] just deal with that, another part my favorite things, another part of things I would be interested in in the future, and I could mix paintings and drawings together.”

Researcher: “Yes and if I remember correctly you had said at one time that you

have started visiting some of the places you used to go here in New York.”

Reflections and analysis from the field notes. Expressing new meanings using distant experiences and empowered by his painting of the Golden Gate Bridge, D is working on his territory. In this territory, he creates forces that reconstruct a memory, and in this territory he overcomes the resistance of paint and challenges of proportion and size to carve his signs and signifiers. He uses the material and the making for thinking and imagining. He is working on his territory, where he states he is reconstructing a memory of his travel to San Francisco in the early 1990s. The photos of this trip were destroyed during his eviction from his apartment a few years back. But just as he did a painting of the Brooklyn Bridge before this, he is reimagining an experience today, in a new way. Maybe he is consciously or unconsciously working on repairing the dark and negative, and replacing the idea of loss and damage caused by his eviction by recreating new rich images for the memory of an experience of travel.

D’s art making is like an act of self-rescue and he is empowered by this making. He reconstructs a snapshot of the past using a positive line of escape from darker places. As I was watching D speaking during the video clip recording about the Golden Gate Bridge, I was fascinated by how he remembered visual details, such as the way the bridge appeared to continue into infinity in the fog. I was thinking about the concept of Freud’s Wunderblock—a psychic apparatus for perception, where our impressions of memories from our unconscious interact with the conscious present act and stimulus. Knowing that several traumatic events have happened in the past to D, I also thought of Freud’s (1893/1975) concept of *Nachtraeglichkeit*, or afterwardsness, as something that was

experienced at one time but is being activated later. These concepts were created around the question of the actual event and the memory of it.

I considered Lacan's (1973/1998) proposition about *Nachtraeglichkeit*, which he translated to French as *après-coup*, where he said that there is no real memory of what the truth was. Lacan said in his seminars that he had borrowed *tuche* from Aristotle, who used it in his search for "cause." Lacan had translated *tuche* as "the encounter with the real," which is beyond the automaton, the return, the coming-back, the insistence of the signs (1973/1998, p. 53). With *Nachtraeglichkeit* or afterwardsness, as Freud (1893/1975) explained, the brain reconstructs a memory of what happened in a way that is entangled with fantasy. This new creation, this construction, the working and reworking and materializing of force with lines, colors, and movements, is making me think of a "becoming." D's art is the expression of a becoming. I am thinking about this afterwardsness and the relation of becoming with memory as Deleuze and Guattari explored it. The line-system—or bloc system—of becoming, they wrote, is opposed to the point system of memory (Deleuze & Guattari, 1980/1987). They explained that becoming is the movement by which the line frees itself from the point (Deleuze & Guattari, 1980/1987, p. 294). It is precisely this freeing that lines do in a very material way for the artist. In this way his art is the ultimate territory for a becoming.

Clearly, D's art was a territory where he could de-territorialize, with free lines, to a new way of thinking about or a new way of constructing the old—where D can recreate an assemblage and redirect the negative thoughts of loss, parents, job, apartment, and inability to travel to positive constructions of places, things and people, or a new landscape for "desire." After watching the video clip of me speaking with D, I noticed I

am very subtly reintroducing the idea of “reflecting on” when suggesting the *Reflections* book project.

D’s eloquence with words and language made me think of a creative project that can include his words/signifiers as well as images of his art. I suggested that D extend this territorial work to this book project, which can be printed in house, in the offices of the place I work. The creation of a book as an assemblage of art and prose about his ideas and processes can be a project for a new type of imprint, this “becoming” freeing itself from memories as stagnant points, with newly created and reconstructed images with paintings, lines, and narratives. I sensed that D might be interested in this project that he can work on this coming year. The proposition was well taken by D. He promptly selected the theme of “places” for his *Reflections* book, a book that will include his art and prose about places he thinks about, places he has easy or difficult relations with, places he needs to travel to, or places he wants to challenge himself to visit again.

I believed his selection of “places” as theme for *Reflections* is a perfect one because it can help him reexplore some places anew, working on freeing them from negative associations that relate to his losses. D told me that he plans to take trips to these places—for example, his old apartment he was evicted from, or childhood neighborhoods. I think the *Reflections* book will give him the perfect territory to work between the negative and the new reflection, with a new “gaze” directed to those places. We decide he can start working on an outline for *Reflections*. This arts-based territory is where we can see and learn about his feelings and ideas. I feel he is ready to explore old places in new ways. After all, through an ongoing engagement with art in the studio where we meet twice a month, over the past 5 years he has been able to move from a

major depressive period and living in a men's shelter in New York City to getting a volunteer job, then a part-time job followed by a full-time job and moving to a reasonably priced rental room of his own. These have been such transformations, especially for D, considering his low tolerance for stress and his discomfort in social situations. Many events happened in the past: eviction, loss of both parents to cancer, loss of job after 16 years, loss of all artworks and photos during eviction. Working with a new agency of thought and associations, he makes a new image. There are no traces of brokenness in this painting—it is a new world on its own, and D shares it generously with me and other viewers. It is a “becoming.”

I was thinking that I have learned so much about D with this artwork. I learned about the huge impact of travel in his life. Through this painting and interaction, I learned that he also traveled to Europe and to Washington. I learned about the precision with which he has recorded his perception of these places. I realized that the imprint of travels or places works in a very different way for me as compared to him. I don't remember my travels with memories of places, building, and cityscapes. I recognize that I have memorized scenes and events based on perceptions of my interactions with people, and in my memory places are connected to people or interactions. D's perception of his memory of places, bridges, landscapes, and the weather is so precise and detail-oriented, even without people in them. I wondered if the absence of people in these places had a function for his becoming, for the new agency he created.

Although my approach requires an active engagement as artist and therapist, as the art therapist I try to think with multiple conceptual bases from multiple theories, but not apply models or paradigms. I let myself think freely so I can improvise during

sessions. I choose to think and act naturally, beyond the hierarchical thinking of the settled—such as, for example, in the institutionalized psychotherapy models that I learned years ago. Deleuze and Guattari’s concepts of nomadism, and nomadic, rhizomatic thinking allows me to work with concepts without a strict application of an art therapy model. Nomadic thinking enables me to consider an open democratic platform for ideas and structures of thought processes, and work with lines of becoming that are in between, snapshots of worlds. There is no single scenario for a narrative about a client’s experience of reality or mine, but we share a flexible platform to work with snapshots of ideas, using art to create, express, and to “become.”

The essential components of my literature review are highlighted in my interactions with D. Through *perception and intersubjectivity*, I learned how D reconstructed and shared a perception through his painting and other discussions. Use of *relational aesthetics* went beyond the artwork and extended to other discussions, suggestions, or exchanges about common interests such as cinema, politics, or how D celebrated his birthday this year or last. *Language and the unconscious* were strongly in action as I was rethinking and reevaluating D’s form of speech, which is highly elaborate and rich in terms of vocabulary: I thought this has also been a strong element that has kept him grounded, even after the experience of loss. The power of language and words was a major component of executing his thoughts even when he lived in the rough and brutal conditions at the men’s shelter in New York City.

D’s *creativity* and art processes have gently yet powerfully supported him in his efforts to make sense of things, making new meanings and becoming motivated to succeed. His elaborate language must function at the level of his unconscious as well as

his conscious life. Sometimes his art functioned as a place for creating new narratives that could support him in an exclusive territory; sometimes it functioned as a territory where he learned by practicing new art techniques, where I offered technical knowledge like a teacher would do; sometimes it functioned as an engine for socialization and exchange, as he explained his ideas to me or to art therapy interns in the studio. Sometimes his studio visits and his art were leading to deeper sharing of pressing issues in private with me after studio hours, and sometimes it was a territory where he could continue to explore the unknown.

As the art therapist, nomadic, rhizomatic thinking provided me with multiple platforms from which to think about my encounter with D. I am able to think with Freud's concept of *Wunderblock*, a fascinating idea about the relation between the actual event and the reconstructed memory of it. I can then de-territorialize and reflect about the *poetic* aspect of D's telling me the narrative, which sounds like a powerful story, as he uses elaborate words with hand and arm gestures ("as I was looking out the window the Golden Gate Bridge went inside the fog, it went on and on and on, to infinity . . ."), and then think about his use of technique and colors in his artwork/territory. I am able to think of Lacan's concept about language and envision how the word associations of D are present in his paintings.

My thinking is nomadic in that I do not process the subject through one theory or series of theoretical machines, and I do not finalize my encounter with a beginning, middle, and end. We are, and will always be, in between points, like the nomad. When I am with a client or observe or interact with a client, through natural association, I simply access ideas and thinking resources from my training, experience, and knowledge, from

great philosophers, art therapists, artists, psychiatrists, neurologists, colleagues, treatment team and friends I work with in my other job setting at the hospital. With this approach my intention is to de-territorialize from the effects of dominant culture. Through our interactions, I also learned much about the field of cinema, as D tells me about movies, themes, and actors with his extensive knowledge on films and impressive memory of dates, names, themes, and titles of movies. I watch what he may suggest when I can, and he watches what I suggest if he can; this adds to the attunement and supports the intersubjective platform we share. These connections add multiple dimensions to the session while adding strength to the supportive relation.

This all happens in a cultural institution's studio that is facilitated by art therapists. It is community-based art therapy where the museum functions as a "third space," a "safe place," an "asylum" for creative making and exchange. This is a space in between the cultural dominance of health-care institutions and the outside world at large.

Setting 2, Participant 2

Participant 2, who I'll call "E," is an adult who attends an open studio for people with mental illness diagnoses in New York City (Setting 2). Figure 11 is an assemblage from Setting 2, and Figure 12 is an assemblage from Setting 1. Both studios were used for sessions with E. Figure 13 presents an emergent cluster of E's artwork. Paintings in the top row of Figure 13 were created after we visited a Zhong Hongtu exhibit on Mao Zedong at the museum. Paintings in the middle are of a man who is blind, and of Moses, and paintings in the figure's bottom row are selected from a series of E's work that involve people drinking alcohol.

New reality: Percept and affect. E: "I used to play solitary and something on the

computer and it made it worse [points to his eyes]

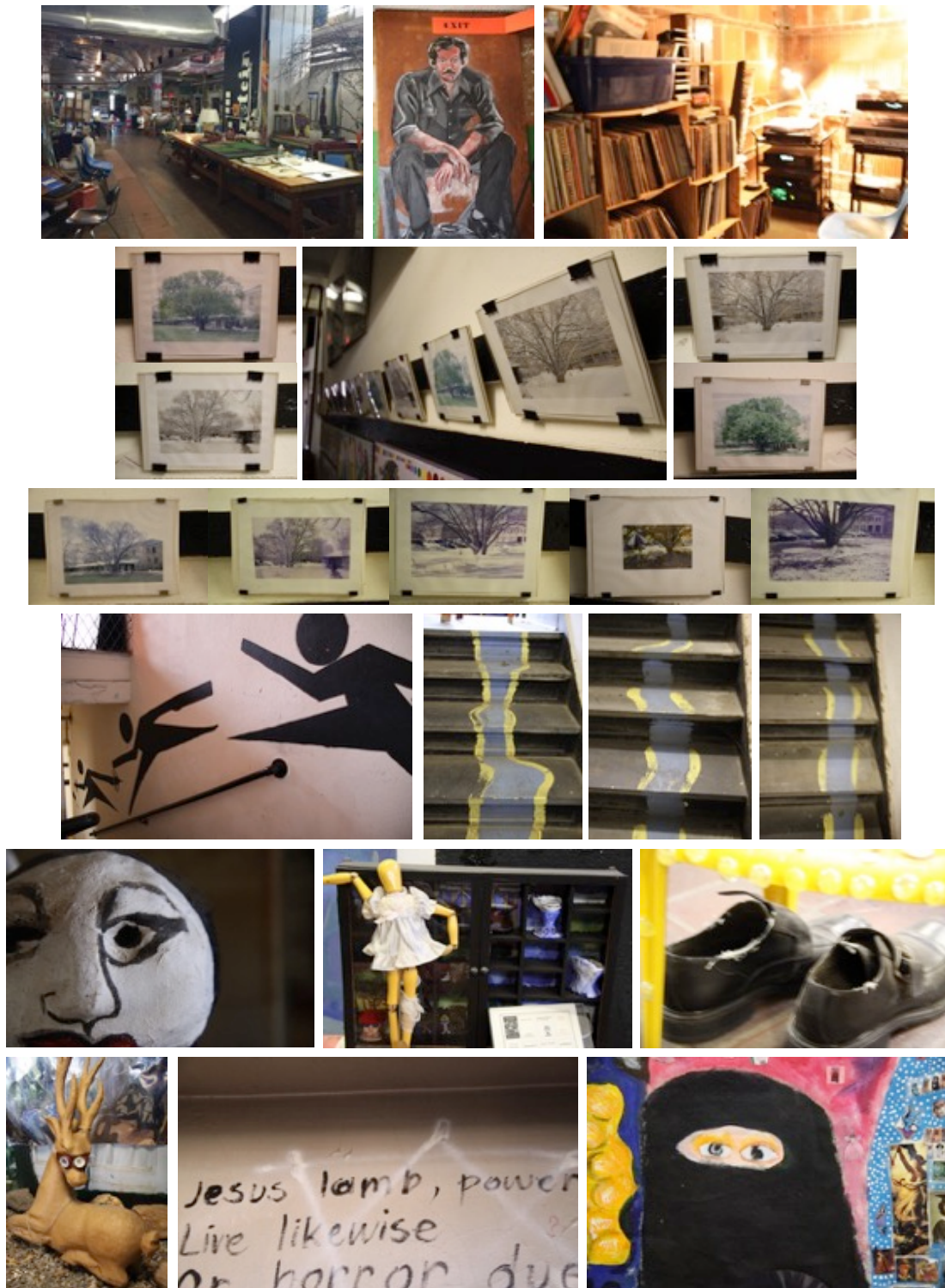


Figure 11. Participant 2 Assemblage of Perceptions, Setting 2

Researcher: “Oh I see. Yeah, the computer screen is really tiring. You would have liked this exhibit here at the museum: the Caribbean exhibit.”

E: “Ooh yeah?”

Researcher: “Yes. It was all about Caribbean art.”

[E looks at Caribbean exhibit booklet.]

Researcher: “You can keep that one.”

E: “Oh keep it? Thank you.”

Researcher: “Yes, we have more.”

E: “Since I saw the painting downstairs, the Chinese one, I changed my mind: I don’t want to do anything like this like that. I want to make something I could explain why I made, so, I change. He is a good artist! I love the way he works. The Chinese.”

Researcher: “Hongtu, yes, Hongtu.”

E: “He make my mind up now. After this stuff I have to make. Like . . . about Haitian history.”

Researcher: “So what did you like about the Chinese artist Hongtu? He uses a mix of his country’s politic and the West.”

E: “Yes, Mao Zedong.”

Researcher: “Mao Zedong, and he made a negative picture of him, right?”



Figure 12. Participant 2 Assemblage of Perceptions, Setting 1

E: “Yes.”

Researcher: “So were you thinking you can do that about Haiti?”

E: “Yes! I have a bunch of ideas. You know, Francois Duvalier, he was a dictator, he killed a lot of Haitian people. And his son was president too—both of them. I have the history.”

Researcher: “His son was a dictator too?”

E: “Yes, both of them, father and son, father passing the power to son. They kill people, they come and pick you up and you vanish. Your family will never hear from you.”

Researcher: “You disappear, right?”

E: “Yes.”

Researcher: “This reminds me of Iran. The same thing happened there, you know, they come and pick you up and you disappear and no one can ask questions.”

E: “Yes? That was happening in Iran too?”

Researcher: “Of course, of course.”

Poetics emerging through relational aesthetics. The triptych in Figure 13 demonstrates, from left to right: Francois “Papa Doc” Duvalier, Haitian dictator (1957–1971), Napoleon Bonaparte, and Jean-Claude “Baby Doc” Duvalier, Haitian dictator (1971–1986). With an incredible capability to “make real” after sessions and discussions about his country of origin, Haiti, and both a visit to an exhibit of Zhang Hongtu’s work and a response to Mao Zedon’s dictatorship (Figure 12), E expressed his thinking, percept, and affect through powerful metaphors.

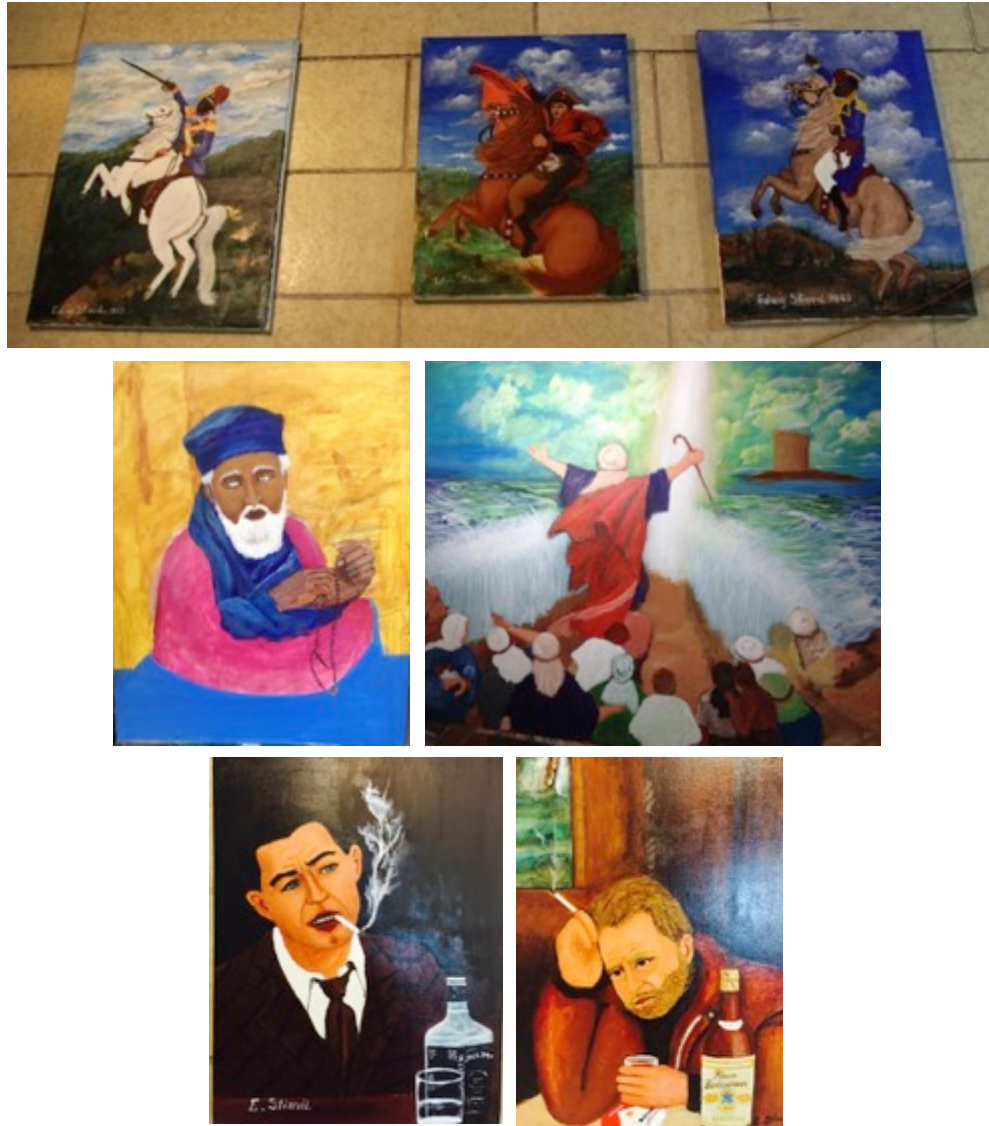


Figure 13. Participant 2 Emergent Creativity Development Cluster

Reflections and analysis from the field notes. I am very touched and captured by the endless detail I discover each time I walk into these studios. There is something about this place that has to do with freedom, endless ways of thinking about realities, and extreme creativity. It was in this place that I met E, about 2 years ago, when I was an artist-in-residence in these art studios located on the grounds of a psychiatric center. With their numerous visual details throughout the spaces, the music, and the interactions, the studios are inspiring in multiple ways—never ceasing to inspire me with ideas and

projects every time I walk into them.

The space itself is transforming; it takes me to a zone where time is experienced with other definitions. Collins (2014) wrote about how participating in an artwork provides one with a liberal sense of time, which is healing and poetic. Being in this space leads to participation in numerous artworks and gives a new, timeless sense of time.

When I enter these studios, the perception of time and being is modified: I have no worries of the next moment and am in the immediate present reading different worlds through artworks. This state may be the influence of the creativity and artworks I see on every wall, room, and corner in the entire space, and the way the space is organically structured, arranged, and decorated through the choices of individual artists.

Conversations maintain a natural flow and are authentic, away from socially constructed artificial exchanges. Dialogues are less conventional here and responses serve to provide clear function or simple expression. This place invites one to simply “be” and to create, to select a space and work in a territory. Individuals with mental illness diagnoses create and mark territories, engage in relational aesthetics and exchange, make music, watch movies, or try something new. The community that uses the space runs the place.

E, a man in his mid-50s, has been coming to these studios for about 2 years and taking painting as his daily practice. Never before in his life had he engaged in art and painting, not even during childhood. Because I was interested in creating a two-way relation between this space that is located on the grounds of a psychiatric center and my studios in the cultural institution in which I work, two years ago I invited artists from these studios to visit the museum and work in those studios every month. I have always had essential issues with terms such as “outsider art,” “art brut,” and any other terms that

exclude certain types of art from the typical museum or art gallery, and I wanted to initiate trajectories between institutions where, through the exposure to art in more community places, these stigmas are abandoned. In agreement with Deleuze and Guattari (1980/1987), I believe that what is called art brut is not at all pathological or primitive, as originally thought, but is instead a freedom of expression in the movement or territoriality, which is the base or ground of art.

During one of the sessions with E at the museum where I work, we visited the new exhibit of Chinese American artist Zhang Hongtu, an immigrant who has distinctly diverse periods for his art, consisting of an academic period under communist China, a period following his immigration to New York, and a period influenced by the fall of communism where he could openly feature Mao Zedong's negative image in his work. I have been fascinated by the way E spends hours every day in working with matters of expression to mark his domains with signatures that belong to him. He takes anything and makes it a matter of expression. When together we viewed Zhang Hongtu's political artwork about Mao Zedong, he reflected on his native country's dictators and turned it into a matter of expression. Many different areas of knowledge surfaced after that. The rituals of Voodoo, the miracle of Moses, and the sacrifice of Ibrahim turned into materialized expressions on canvases of all sizes.

E did one peculiar thing: He often, almost always, changes the painting, and then changes it again. Almost like the reality of affect and percept changes every day, he needs to change the artwork to reflect that. His paintings keep transforming day after day. He is becoming continuously. When I ask him, he replies that he is not happy, he has to "change it," and it's not good. His movements of territoriality and lines of becomings are

multiple—they involve changes, working on more than one territory and more than one painting at a time, some changing, some continuing. There is a continuous performance of self-evaluation in E’s paintings. This happens in the stage of art. Even when they tear up their own posters, artists are “stagemakers” (Deleuze & Guattari, 1980/1987), and E’s ongoing change is like a stagemaker’s performance process.

Setting 3, Participant 3

Participant 3, who I’ll call “F,” is an adult over 65 years of age who attends an open studio at a senior center in New York (Setting 3). Figure 14 is an assemblage from Setting 3, and Figure 15 presents an emergent cluster of F’s artwork. Two paintings at the top of Figure 15 are a focus on a soccer player, and the sketch in the middle row is a preparation for the painting on the bottom, which is shown both in its unfinished and finished versions.

New reality: Percept and affect. After a long period of creating paintings that all reflected nature in different ways, its calm or energetic aspects and its beauty, F started working on human figures and including them in her work. She expressed that, with the painting she wants to create, she wants to give the viewer a sense of the specific moment, when the woman has just stepped out of the very festive and loud party. She has gone a distance and is walking by the ocean to enjoy the peaceful space, admiring the bright light of those minutes of sunset, during the infinite moment. F created several sketches. During the last session, she worked on completing the nature elements while leaving the figure of the woman in a party gown for the end. As she was speaking to me, I wondered how it would be to stand by the ocean, stepping out of a party in the beautiful gown that F would create, and I wondered if she had done this before, or if this was something she

wished to do.



Figure 14. Participant 3 Assemblage of Perceptions of Places and Spaces

Her painting made me think of F in a different way, and see her in a new way—it made me wonder about her. It was almost as if the moment of contact through discussion, art, and shared space made a different kind of knowing possible, bringing a potential to blur the boundaries between the researcher and the researched, or the real and the imaginary. I could see how in the relational field there is more, always more than what is—more is sensed, imagined, and felt.

After over a year of attending weekly open studio sessions, F began working on human figures with a series of soccer players, creating two paintings and more sketches. She shared her interest in drawing the figure of a soccer player, the body movements, and

matching outfits. She said she wanted to work on a soccer player image, and to try working on a body that is moving. In F's country of origin soccer is a national sport. Her passionate interest in this theme also made me wonder about her inspiration, based on possible connections she made, her memory of her previous life, or maybe from a different time. I am also unsure if she has been able to visit her home country at all since she immigrated to the United States years ago.



Figure 15. Participant 3 Emergent Creativity Development Cluster

Drawing the moving body, as we discussed, is more difficult than drawing figures that do not move. I gave F a small number of printed images of soccer players, snapshots

of “movements” showing the muscles and body parts. She did not want a canvas because she had never tried representing human figures before. She was intimidated by the idea of working on canvas. She worked carefully and diligently, creating two paintings on paper. She continued sketching at home, and said she thought she had made progress in working on drawing the soccer player’s body, especially in showing the moving body. She was satisfied with the second painting and asked if we could work on creating some kind of black frame for it. Together with another artist in the studio we created a frame for F’s painting of the soccer player (Figure 16).

Poetics emerging through relational aesthetics. She speaks with few words, always very thoughtful and purposeful. Unlike other older adults in the studio, she does not spend too much time socializing unless there is something important to be communicated. She is very gentle and soft in her speech, movements, and interactions. She gradually started working at home on her sketches and bringing those to sessions. She also brings other older adults to try art in the studio. There is nice peaceful distance in between us.

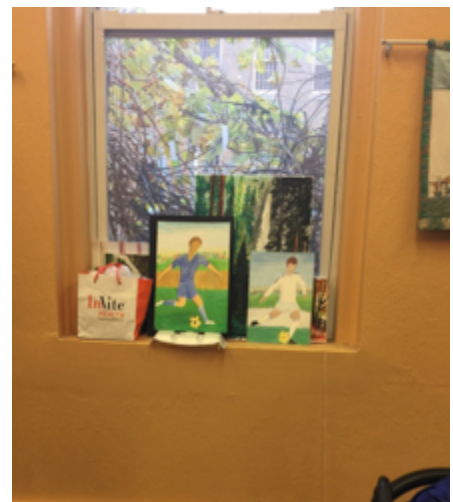


Figure 16. *Soccer Players* (Paintings by Participant 3, Acrylic on Paper)

Reflections and analysis from the field notes. In the studios of the senior center, I was often surprised by topics that F selected. The first idea she had was a view of the seashore, she said. She described a woman with a party dress, facing the ocean. This woman, she said, will be wearing a long gown, and it will look as if for a moment she has stepped outside of the party space to take a break and enjoy the calm and quiet at the

seashore when the sun is setting down. F is generally a little quiet. After she initially speaks with me to share and discuss her idea or topic for her new painting, she usually becomes focused on her art until the end of the session. She has a soft gentle voice and her movements are gracious. She is also very kind and perceptive of other artists in the studio.

F works 2 days a week in an accounting office. She is a grandmother. She started art for the first time 2 years ago in this studio. I have observed her confidence greatly growing in terms of her drawing and painting. Very often she continues to sketch and try her ideas at home, bringing those plans to the next session. She was very particular about the party dress of the woman in the painting. This was a soft pink gown and she wanted the dress to stand out, she said. As she worked on the painting, she changed the color of the dress toward the end. She worked on her artwork/territory exactly as she had planned, from her sketches, and worked step by step to materialize the expressive forces on her canvas. I was fascinated when I saw her working on such a feminine dress. I was also thinking about her methodical and planned way of creating this environment in the painting. I thought about the sense of comfort that one can get from this style of working.

Later F said that she was interested in practicing drawing the body while moving. I learned that she really liked soccer. She said she was very interested in the movements and aesthetics of soccer players in particular, and in sports in general. To me, the two themes of the seaside with a woman taking a quiet break from a party, and the movements of athletes, could be seen in so many ways. I thought of these paintings as being materialized expressions related to F's imagination. She constructed an assemblage that she was making positive connection with. Maybe an assemblage that included

elements from memories, and an assemblage reflecting a landscape of things she desired and reconstructed. I thought about associations with subjects from distant times and places, like her native Peru, and how F may be incorporating and materializing meanings using themes and points of memories, releasing them through lines of “becomings.”

With nomadic, rhizomatic thinking, I see F through her multiplicities and becomings. With her unique expressive art, she is working on a territory. Her art consists of de-territorializations and re-territorializations. There are many becomings-animal, becomings-woman, and becomings-child in painting (Deleuze & Guattari, 1980/1987, p. 301). F’s painting is where these becomings materialize. Becoming is the movement by which the line frees itself from the point, by which the rhizome, the opposite of the arborescence, breaks away from arborescence (Deleuze & Guattari, 1980/1987, p. 294). Becoming is anti-memory (Deleuze & Guattari, 1980/1987). I see F’s paintings of soccer players and the woman as becomings. There is a territorializing factor in the becoming expressive of rhythm or melody, or in the emergence of proper qualities like color, odor, sound, and silhouette (Deleuze & Guattari, 1980/1987, p. 316).

Setting 4, Participant 4

Participant 4, who I’ll call “B,” is an adult male who has two personal art studios: one in New York and one in a neighboring state (Setting 4). Figure 17 is an assemblage from Setting 4, and Figure 18 presents an emergent cluster of B’s artwork.

New reality: Affect and percept. In an excerpt from video recorded conversation, B stated:

The feeling of intimacy (it’s so much more intense and all-encompassing and harder to find than just sex) and making art stimulate the same “feel good”

receptors in my brain. What about other people? Actually, maybe that's what makes an artist stay an artist or create in the first place. If art didn't make you feel good, why bother? So many art masterpieces and songs and literary contributions deal with love and attraction and its consequences—good or bad. So really when you get down to it, the reason I'm even participating in your project (or at least am enthusiastic about it) is because I think the first time I saw you was at P's restaurant and there were a lot of people there—I didn't know who anybody was and I thought maybe you were a patient.

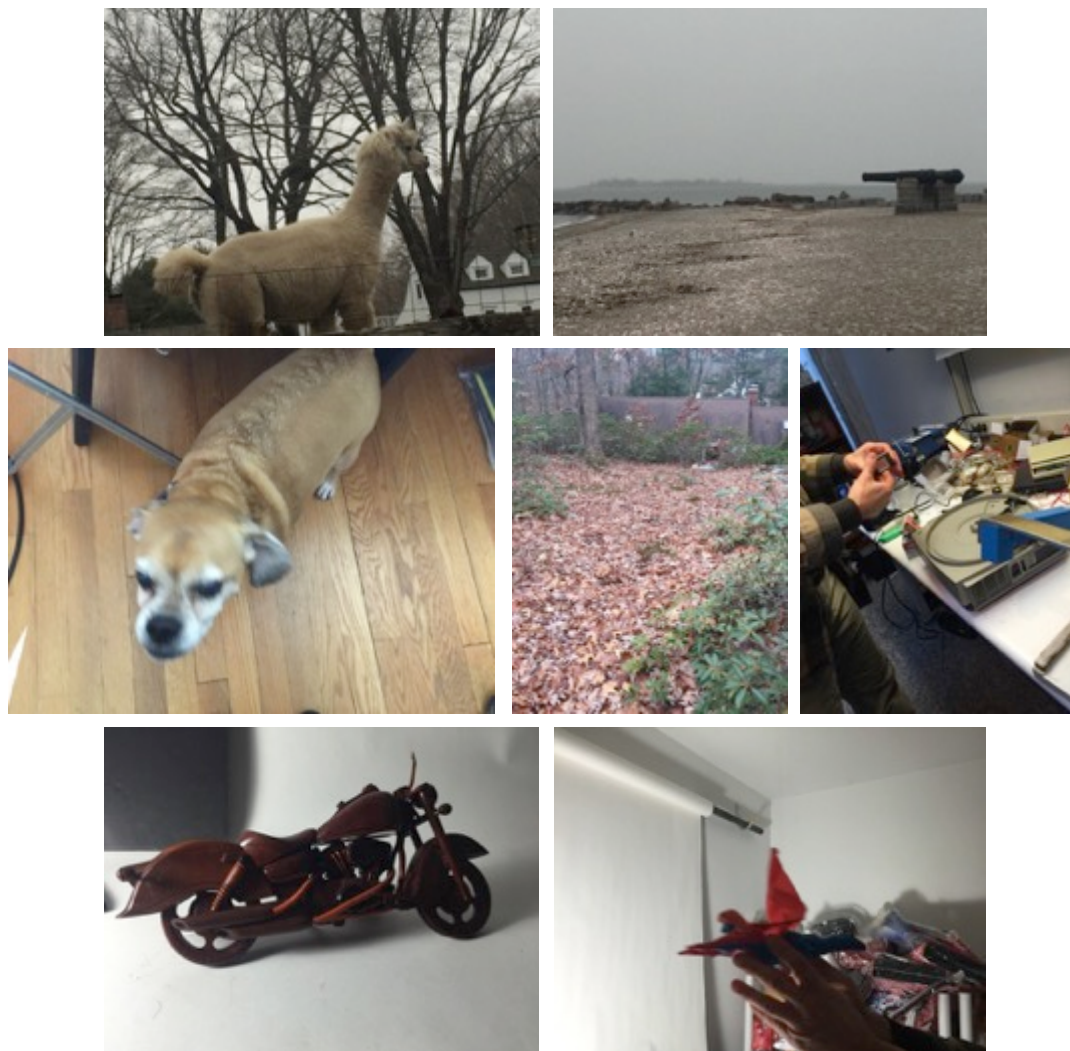


Figure 17. Participant 4 Assemblage of Perception of Places and Spaces

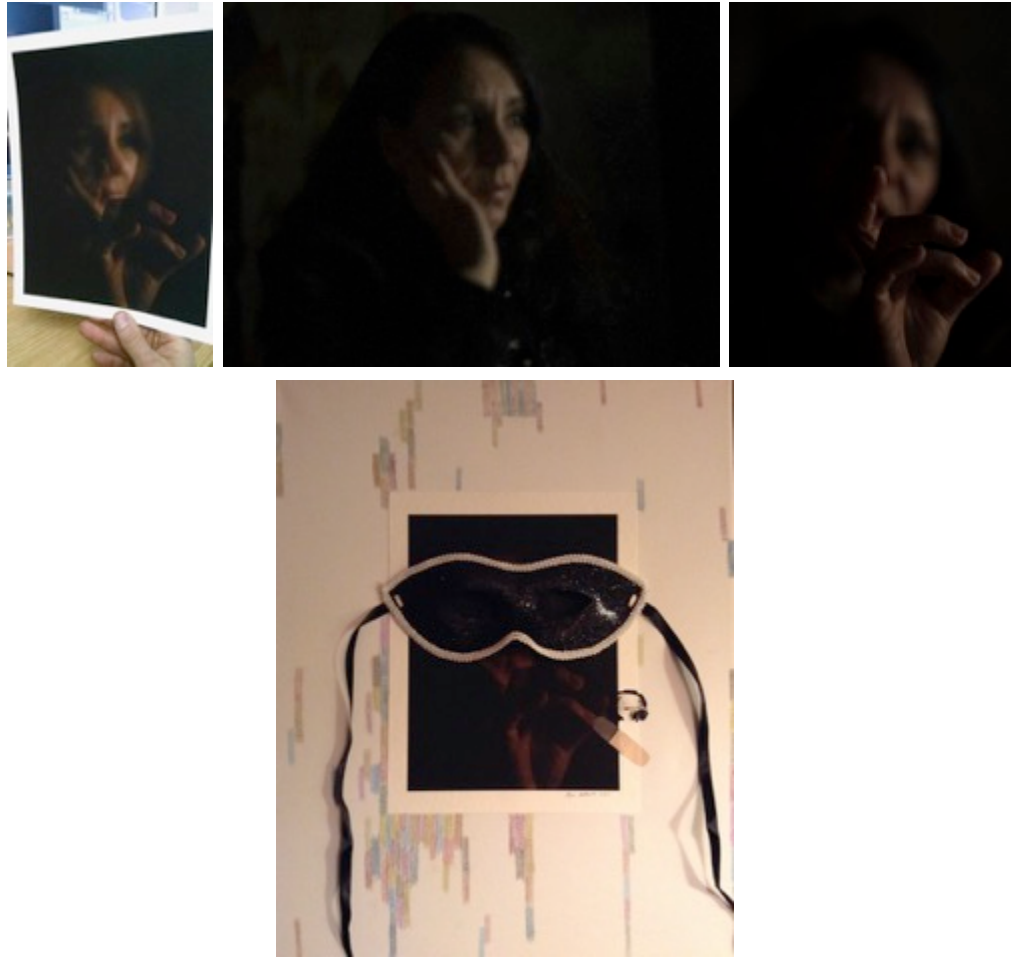


Figure 18. Participant 4 Emergent Creativity Development Cluster

In excerpt from e-mail sent to me after the session, B said:

My perception of you is going to be different than your perception of yourself (maybe). The cut-out shapes—what I thought was going to be the hard part is turning out to be the easy part. I have ideas for the cut-outs but couldn't envision how I wanted the selfie photos of you to look or be displayed or anything. It just stopped. I was thinking only of the process and watching a movie of that project in my head but didn't know what we/I would do with it. Maybe it's because the cutout is a selfie of me and I can deal with that, I have full control of it, be accountable for every aspect of it—the part with you, involves you, is about me,

involves you and me collaborating in an unusual way—I am risking what you might say or feel or how you might react or what you might think. It's not like actors playing a role—there's no script or an end point—it's a collaboration on an art project, a sociological and psychological exploration with art as the catalyst and nucleus (at least that's my perception of it).

This is why it is easy for me and why I may totally freak you out and push you away BUT that's ok—you had enough guts and an open enough mind to actually listen to what I had to say, so maybe we will follow through on this and confront whatever and let it take us wherever. What I'm talking about is where creativity originates for me and why I love it. Did you ever see this movie called *Perfume*? Excellent movie that dealt with creativity in odors and the lead character had an over-the-top heightened sense of smell and his obsession with it.

Poetics emerging through relational aesthetics. In an excerpt from an e-mail sent to me after the session, B reflected:

Maybe I/we shouldn't think about it so much and just start working on the different photos of you and see where a selfie project will take us? Maybe I need your input and ideas to take it somewhere else? I just want to make you my material for a sculpture and have you react and have you record your reaction and learn what we learn. I mean again, we are dealing with personal stuff. My personal notions or visions creating an artwork through you, with you which you then create the finished piece by photographing yourself when and how and with whatever expressions and inflections you present to the camera. Maybe I should stop for now and get your reaction. I'm not going to read what I wrote or I may

get embarrassed and want to delete something. I'm pretty sure I can obsess over you as a new medium I've never worked with. I think if we are both fearless it could be pretty intense—but I can't think of a more collaborative collaboration than what I have outlined. What is scary (for me) is it involves some of my core beliefs and letting you in on my personal thoughts and leaving myself open for your reaction. Basically, I think we will be dealing with everything there is to be a human. Wow, if we could cover that ground it would be quite an achievement! I don't think I digressed all that much in this—I did write everything I was thinking so I must have been pretty focused.

What do you think—you asked for it—now you got it. I kind of like how I feel now. I think I will email you this and leave the phone off and not check my emails for the rest of the night. Was this an “art therapy” session? I hope not. I hope it was something else that can't be so easily defined.

Reflections and analysis from the field notes. I was noticing the way B is connecting the art that he was starting to think about with me with his sentence, “I just want to make you my material for a sculpture and have you react and have you record your reaction and learn what we learn.” Everything about art making had a direct connection with affect.

Toward the middle of the sessions in his art studio, he was talking for extended periods about himself, his life, and other things, and I was making a number of watercolor paintings or snapshots of moments (Figure 19). I came to realize that our discussions were becoming very similar to one classic type of verbal therapy session, very much Rogerian in style. The words and language he used included familiar words

from humanistic theories.

Why? I didn't act as a

person-centered or

humanistic therapist

toward him, unless, as he

had so much to say about

his life, my intense listening was felt similar to a Rogerian session by him, where he was constantly trying to develop a sense of self.

What was happening? This was unlike all other clients that I had worked with, and he was selected in my study for being artist. He sounded like someone who is familiar with the languages of support groups: identifying problems, making confessions, self-suggesting solutions for those problems. Why was it that in his studio where we met so I can see some of his photography art and maybe do some initial work on a collaborative art project, B, a man that I selected as a typical artist, wanted to talk for hours, and in great detail, about himself, his feelings, his challenges, and his problems?

Another condition was that he seemed to be unable to separate art from love and intimacy with a person. Why did he have such difficulty separating art from love? In agreement with Deleuze (as cited in Boutang, 2011), I thought maybe B's desire for art was situated in a landscape, one that involved intimacy. Perhaps he needed to recreate or restore that landscape (as he had previously lost love/intimacy situations) so that he could create the ultimate monument of sensation through art. He immediately associated my research project and its art collaboration option with love and intimacy, to the extent that he almost trapped himself in this landscape.

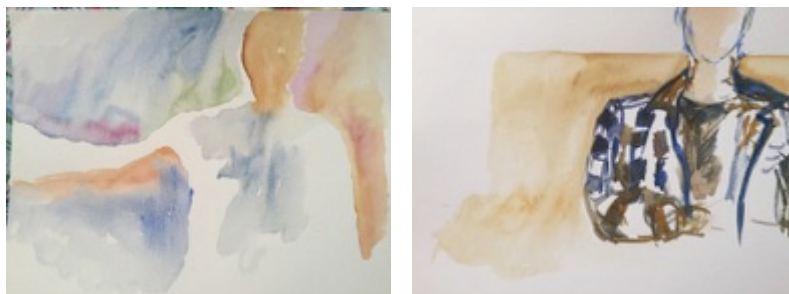


Figure 19. Researcher's Art During Session With Participant 4

The day at his studio passed without a discussion about an art project or collaboration. I knew I had invited him to participate due to his art background and body of work as a professional photographer and installation artist, thinking of it as an opportunity to reflect about creativity through working with him as participant who uses photography and installation as medium. The visit took another direction as he talked about his significant life challenges.

I gradually learned a unique reality about B's world. Engaged with an ongoing, lifelong battle with a significant challenge, the encounter with me had triggered, in his words, the "feel good receptors" of his brain. Even the specific words and language he used contained specific terms such as this; for example, in prompting me to have "empathy" when he became upset (or asking me to look online for the meaning of the word *empathy*)—all were coming from a person-centered psychology place, and I was trying to understand where and why. I wondered. As he continued talking about his life, I learned about his years of ongoing participation in specific support groups and much of the situation became clear. This was where this specific language was learned and used; it was the vocabulary and style often heard in support groups.

As our encounters progressed, it seemed to me that in B's interactions with me, he was becoming unable to distinguish the "feel good" of art from the "feel good" of intimacy. Despite repeated emphasis on the clarity of my position from the beginning to the end, the encounter with me caused him to create and live with an elaborate assemblage, creating a landscape from images of art and intimacy, even entirely imagined movie sequences combining creativity and intimacy. He simply could not undertake one without the other, making him almost incapable of taking a different creative direction

through collaboration.

Creating his own territory was a challenge. However, when I left B's studio that day, I left the blank canvas I had brought with me. Days later, he had mounted printed portraits of on it, and added

some black paint on it too. This became a territory for our collaborative dialogue (Figure 20).

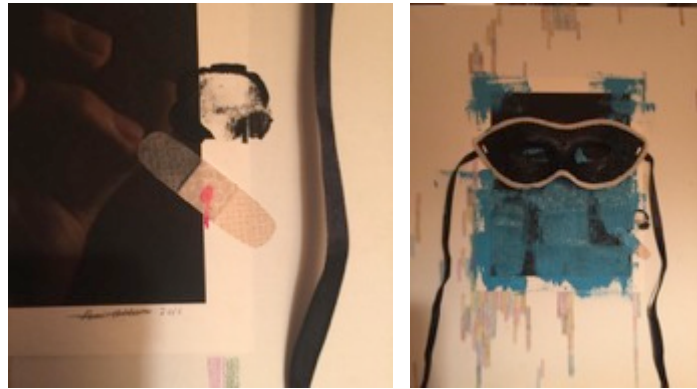


Figure 20. Participant 4's Last Contribution to Art Project (Left), and Researcher's Last Contribution to Art Project (Right)

Creating New Trajectories

My second research question investigated the relationship between a deconstruction of my own art therapy paradigms and the use of concepts from contemporary post-structuralist philosophy and the experience and perceptions of the art therapist. I posited that the use of the deconstructed elements of art therapy paradigms would lead to a sense of self-discipline along with creativity development for the art therapist, enhancing the flow of each session and making what B. L. Moon (2007) termed “an improvisational art form” and thus providing the art therapist with the “ability to artistically improvise to adapt to the needs of each client, image and sessions in a distinctive way” (p. 25). I was able to navigate and think with Freud, Lacan, and others with fluid associations and knowledge due to a nomadic, rhizomatic way of thinking that prevented centralized knowledge building.

I further posited that with this perspective the participants and communities would not feel judged or directed toward a final position, and would be open to experiment art therapy sessions based on their interests, as well as increasing a desire for these encounters through art therapy programing. Creating trajectories for art therapy in diverse platforms becomes an increasing necessity when rhizomatic, nomadic connections are made between individuals, communities, and organizations. Finally, I posited that the participants and I, as an art therapist, would have a greater sense of motivation and creativity, which is indicative of the impact of relational aesthetics through intersubjectivity in a working community of practice with minimal influence from an external dominant culture. All data showing, planning, working on, and talking about artistic processes illustrated a sense of desire for encounters, motivation, and heightened creative expressions by all eight artists in this study.

Figures 10, 13, 15, and 18, above, contain visual vignettes of participants' emergent creativity development clusters and represent my artistic improvisation as the researcher. Figures 21–24 contain samples of researcher–participant arts-based



Figure 21. Intersubjective Art Sequences (Participant 4 and Researcher)

collaborations and co-creations reflecting the fluidity of intersubjectivity through the arts. Figure 26, discussed below, exposes my two arts-based conceptual projects, one of which was created in collaboration with participants. Co-creating alongside each other or together supported the connection and raised attunements to a higher level. Co-creative activities such as response art within and outside the session allows for the attachment relationship to develop while supporting the participant's capacity to process difficult



Figure 22. Intersubjective Art Sequences (Participant 2 and Researcher)



Figure 23. Intersubjective Art Sequences (Participant 3 and Researcher)



Figure 24. Intersubjective Art Sequences (Participant 1 and Researcher)

experiences (Fish, 2013; Franklin, 2010; Hass-Cohen & Findlay, 2015). My co-creation with Participant 4 (Figure 21) was clear evidence of his gaining the capacity to work with the difficult experiences we had throughout the research sessions.

Conclusions from the Video Project *The Art Therapist, A Nomadic Force*

My final video project comprises an arts-based analysis of all three data layers. While working on the script for the video, I used a combination of clips from my interactions with participants to capture a sense of the flow of relational aesthetics and the spaces and territories I visited. I was working with a large amount of data and facts that I had collected through diverse modalities.

In the video I used narrations, quotes, and clips to introduce the three layers of the research and evolving theory:

1. First, I introduce the diversity of my populations and spaces as one example of the work of a contemporary art therapist practicing under various contracts.

2. Next, I present interdisciplinary roads and nomadic thinking with the relations between art therapy and concepts from the philosophy of Deleuze and Guattari.
3. Finally, I reveal my perception of arts-based exchanges—some through interactions and some by using metaphorical art projects—as essential elements of my work in four diverse arts-based platforms.

The planning, organization, and production of the videography process involved three distinct phases (see Figure 25).

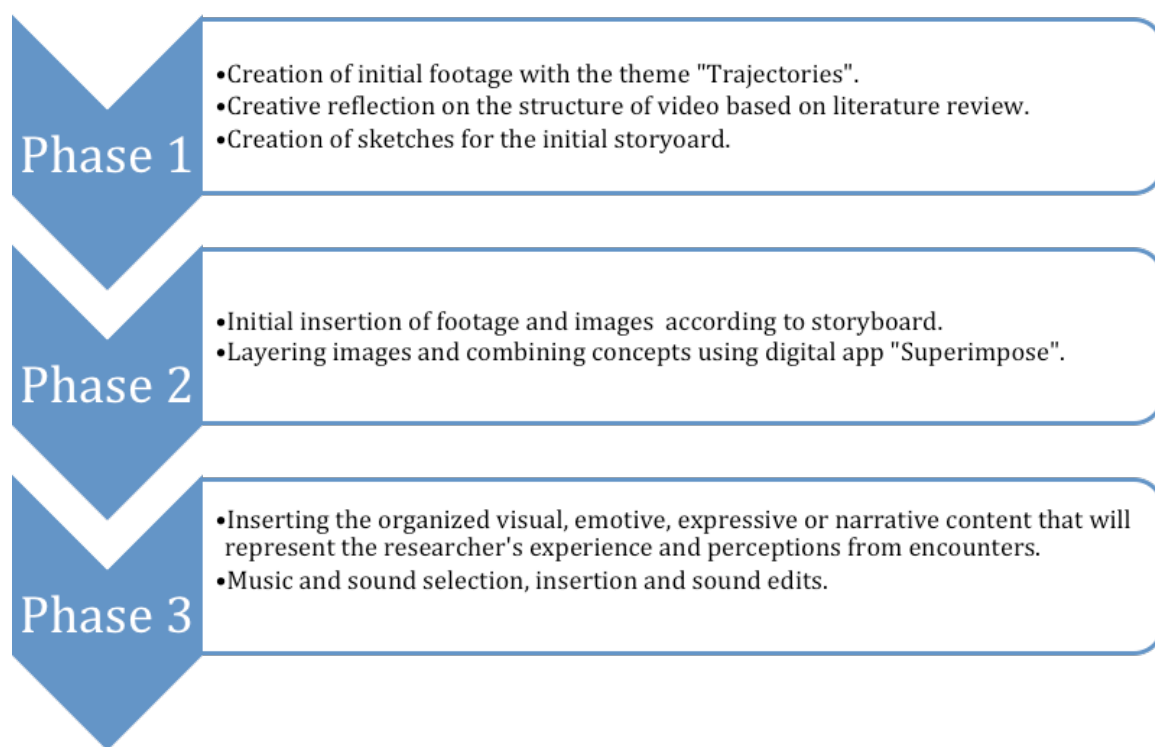


Figure 25. Videography Process

Videography Phase 1

During the first phase of the videography process I did a creative reflection on the conceptual bases of my research, which included what I considered as essential concepts in art therapy. I inserted “perception and intersubjectivity,” “language and the unconscious,” and “relational aesthetics,” as section headings with title slides. I placed

myself into the video as an art therapist with nomadic, rhizomatic thinking, traveling to multiplicities—a metaphor which also served for multiple realities. I used the *Trajectories* project (Figure 26) that illustrated the first conceptual art video clip from my art process about nomadic thinking, showing the movement of nomadic forces creating trajectories in the volcanic sand by my use of a small hand shovel.

Project 1: *Trajectories*. Figure 26 illustrates a conceptual art project for my arts-based study that involved movements, which were acted several times and filmed multiple times. The conceptual video art clip consisted of creating pathways and trajectories using a hand shovel and black volcanic sand that I had found in the studio space in Queens Village. With the movement of sand and the push of the shovel, in *Trajectories* I created a metaphor for Deleuze and Guattari’s ambulant or nomad sciences that do not destine science to take an autonomous power, or even to have an autonomous development, because they subordinate all of their operations to the sensible conditions of intuition and construction; that is, by following the flow of matter, drawing and linking up smooth space (Deleuze & Guattari, 1980/1987, p. 373). This symbolic and very simple action demonstrated the phenomena I experience as an art therapist and artist, and with this performance art I “acted” the metaphor for what I wanted to say.



Figure 26. *Trajectories* (Researcher’s Conceptual Art)

The volcanic black sand used for this conceptual art piece was also a metaphor for the power and force of what is personal, of what relates to life experience, and affirmative of layers of cultural pools, for it reminded me of the volcanic mountain I saw from the house in which I grew up, with many more unconscious positive empowering associations with that space and time. Simultaneously, the pathways and lines were symbolic of “becoming” through lines, as opposed to points that represent memory: the lines are freeing themselves from point and memory. The metaphor of the black volcanic sand connected the past and the personal force with the present, where new forces create new trajectories and function as the black sand: a nutrient for soil, leading to multiple germination and rhizomatic growth.

Project 2: *The Stage*. My arts-based research included projects based on collaboration and co-creation with clients. Some were response–dialogues using a single canvas or piece of paper as a shared territory that could be worked on outside of the session and some involved co-creating alongside clients. The second art project that was also to be included in the video was *The Stage* (Figure 27). I designed an arts-based activity about the conceptual base of my research, which became a collaborative metaphorical art project. Conducting research with diverse populations in diverse settings, I used this art project for meaning construction around the relational improvisational aspect of the work of the art therapist.

By designing a multimodal art project, I wanted to create an initial territory that, as sessions progressed, might become a space for inviting participants or other artists to make contributions. I wanted to think of it as an improvised art project that could become a collaborative one, depending on the sessions’ flow and participants’ responses. Inspired

by Boal's (1995) work on aesthetic space and therapy, which made me think of a space where the art therapist and the client interact, I created a "stage" in one of the art studios to reflect on the idea of plasticity of space in therapy, where people interact and the art therapist improvises. In his book *The Rainbow of Desire*, Boal (1995) described the first property of the aesthetic space as plasticity. I wanted my stage project to represent this plasticity in some ways, as a symbolic space where I could improvise along with participants.

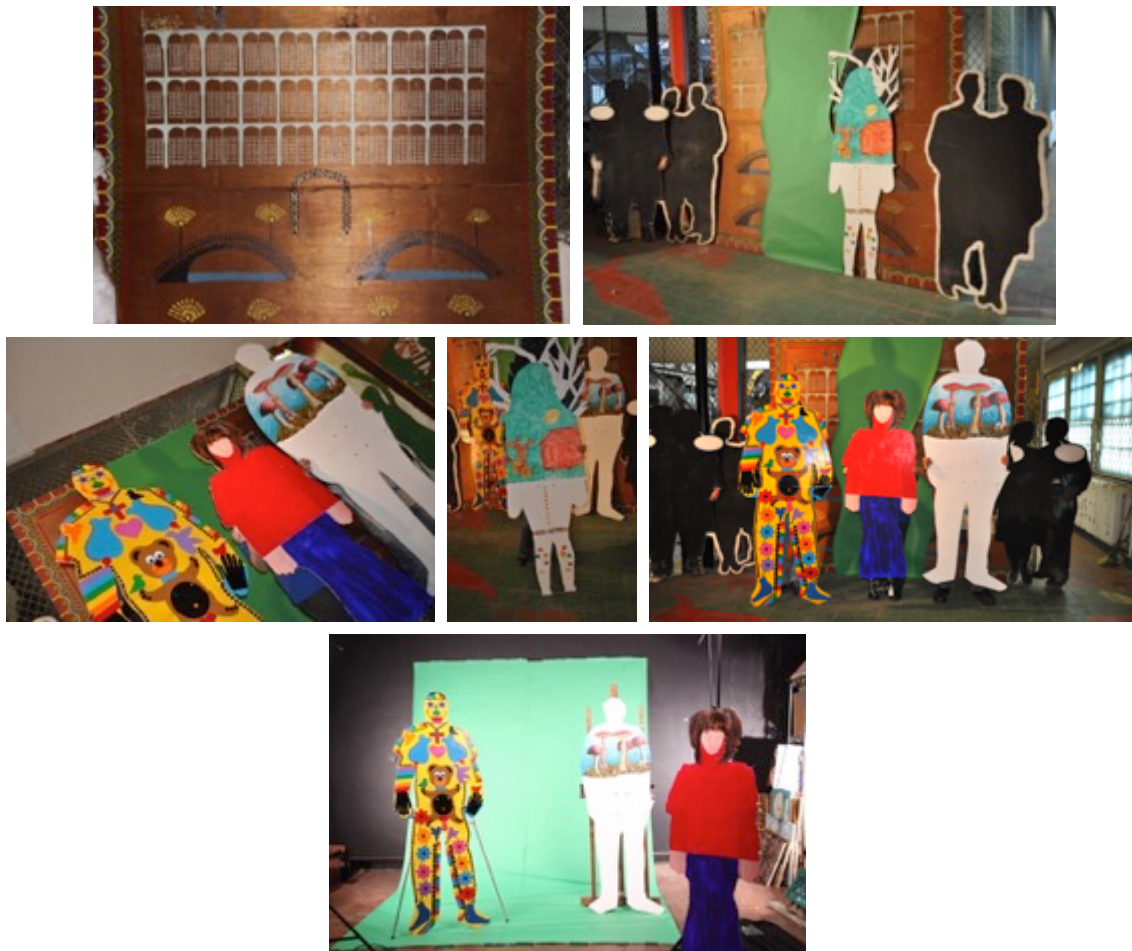


Figure 27. Images of *The Stage* (Researcher's Conceptual Art)

With its emphasis on risk, responsiveness, and relationship, improvisation is at the heart of the artistic process and art-based research (Sajnani, 2013). I used various

metaphors, including the participants, the stage itself, and changing backgrounds, for improvisation with music and full-size self-portraits. Using white foam core, I traced, cut, and created actual-size silhouettes of myself and three other artists for improvisations on the stage. We used these white silhouettes as canvases and artists in the studio made art on them. Through the creation of this stage and the performers, I wanted to create a moving image of my thoughts of space plasticity, where I could symbolize a decentered improvisation around the idea of the artist–therapist encounter. This stage was a metaphor for where and how therapy happens, in indirect and subtle ways, through the forces involving an assemblage of perceptions. I was unsure of the direction that the project would take, yet felt simultaneously comfortable with the open-endedness of it, creating a plane of immanence for multiple possible directions.

The aesthetic space has properties that trigger knowledge and discovery, cognition and recognition, which are all properties that stimulate the process of learning by experience (Boal, 1995). I wanted to create a metaphor for aesthetic spaces where we interact and discover. A space with plasticity would represent the impact of the art therapist having a decentered position in therapy, an actual experience with individuals that is about creative journeys and expressions. Along with allowing for a symbolic performance, reminiscent of life acts and life decisions, I wanted to construct the symbolic space of therapy as a space for free movement and improvised art. With the video performance art project, this space for improvisation would include the changing presence of emotive and perceptual flow in the background. Nature, fire, water, and rain would symbolize these life elements. The improvisational performance art with silhouettes representing individuals’ “art worlds” as multiple worlds and realities enabled

us on the stage to enter the space of imagination. This would highlight the importance of alternative world experiences.

The alternative world experience has two sources that enter the discourse of interpretation in therapy, one being the symbolic content of imagination and the other being the affective sensory experience (Knill, Levine, & Levine, 2005). The symbolic content was created through the stage and art silhouettes, and the sensory sources were represented through movements and dancing to music, all included in the video. On this stage, holding the art silhouettes, as actors we had a performance session with dance and movement to Patti Smith's (2004) song "Stride of the Mind." I used the green screen film technique to create changing backgrounds for this stage, consisting of fire, water, rain, and nature, as representations of elements affecting our conscious and unconscious existence.

Videography Phase 2

During the second phase of the videography process, I reorganized the material that I had collected from a variety of sources and organized in digital folders after each one of each participant's six sessions, this time according to the structure for the videography. This included data collected from participant sessions in the form of written and visual field notes, and video or audio recordings during or after each session. I worked on my art responses and used the digital app Superimpose to layer and combine

conceptual elements to be superimposed in one image (Figure 28).

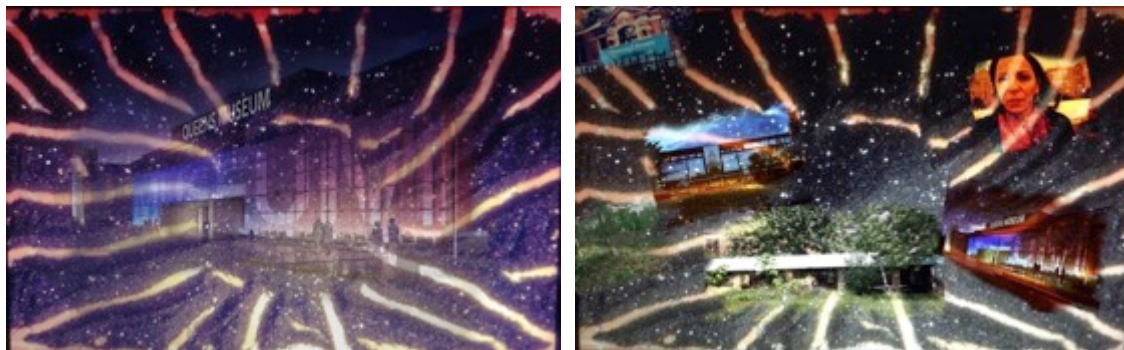


Figure 28. Nomadic Accessibility Strategies (Researcher's Digital Illustrations)

In addition to written and visual notes, there were informative data collected from resources similar to theoretical sampling, where the researcher seeks other documents or material as a follow up to a session. To the video, I added clips containing those informative data. I included examples of conceptual samplings using either Van Offlen's (1984) book *Nomads of Niger* or the book *Film: An International History of the Medium* by Sklar (2002) borrowed from a library by one of the participants and brought to share and discuss movies with me, this being a common interest of ours. There was something else about the book: It was among the many belongings that the participant had lost when he was evicted from his apartment many years ago. Just like he was recreating paintings that were thrown away during that traumatic time period, he had found the book in a library and brought it to the studio. After our rich ongoing discussions on films, I purchased two copies of the book, one to give the participant, and one for me, which we both continue to use. These samplings are examples of complex processes of learning and intersubjective influences that can happen in the therapy space.

Videography Phase 3

During the third phase of the videography process, I inserted the organized visual, emotive, expressive, or narrative themes or content reflecting my perceptions and experiences from my encounters with spaces and from exchanges with participants. Upon entering each space I inserted an assemblage of images and sounds I perceived in the space, creating clusters of my perceptions. I conveyed how the image and metaphor of the nomad has two distinct levels. The first level is around perceptions and de-territorializations from traditional ways of perceiving art therapy encounters while using fluid ways of accessing knowledge. The second level deals with travel, movements, and the creation of trajectories in the community. During this phase I also inserted the audio and sound into the video that best described the energy and affect during, after, or in between sessions.

In summary, the video documentary presented results as an assemblage of narratives, perceptions, ideas, and words exchanged in the field, as well as my art projects and responses in various forms. The production progressed as I reorganized my script and selected images and videos and added to the video's digital timeline.

CHAPTER 5: DISCUSSION

A Rhizomatic & Nomadic Approach in Art Therapy

About the emergence of a “becoming” through art, Deleuze and Guattari (1980/1987) wrote that the expressive is primary in relation to the possessive, and that expressive qualities, or matters of expression, are necessarily appropriate and constitute “a having” more profound than being (p. 316). They added that this is not in the sense that these qualities belong to a subject, but in the sense that they delineate a territory that will belong to the subject that carries or produces them (Deleuze & Guattari, 1980/1987, p. 316). The expressive qualities in art become “a having.” In art therapy context, the artist becomes an owner of forces in a territory. This situation has relevance to all client/artists in all settings and communities where art therapy is practiced. It is an “expressive having.” The signs and signifiers in the art are like landmarks that form territories.

In agreement with Deleuze, I see that the territory is not primary in relation to the qualitative mark, because it is the mark that makes the territory (Deleuze & Guattari, 1980/1987, p. 315), and the process of making the mark develops relations between the subjectivity and the relation to earth. A territory only comes to existence because of the act of mark making. During sessions with participants in this study, the way I experienced and observed the participants was through their markings, forming territories where signs and signifiers appear as forces. These are forces resulting from making a mark; they are forces of having, forces of movements in the art territory, and forces of *becoming* by moving forward. Changes and transformations take on rhizomatic lines of flight involving creative processes that impact individuals’ thoughts and their becoming.

In the art therapy context, transformation is like “becoming other” — becoming line, becoming shape, becoming color, becoming memory, becoming animal, becoming woman, becoming more than a body and organs, becoming a *body without organs* (Deleuze & Guattari, 1980/ 1987) —through an investment in creating signifiers on territories, expressing and sharing with signs, symbols, and metaphors in visual, haptic, and verbal forms.

Art processes take place in a territory for transformation (Kapitan, 2014b) wherein an individual’s worldview and view of self can change. Deleuze and Guattari (1980/1987) proposed the artist as the first person to set out a boundary stone or to make a mark (p. 316). It is this expressiveness of the territory that delineates a territory that belongs to the subject that carries or produces these marks (Deleuze & Guattari, 1980/1987, p. 316). There are endless opportunities for unique exchanges and sharing in a zero-stress environment, which is developed with the participants rather than for them, and there are numerous territories developed by individuals who have various diagnoses in the flexible space of art therapy.

The concept or image of a nomad is particularly relevant in my work. The way I connected with theories of art therapy was fluid and accessible and not paradigmatic, allowing movement and growth in all directions. Knowledge building happened in interdisciplinary and multidirectional ways. I made rhizomatic connections to gain insight and build knowledge, linking concepts or meanings from theories to any other point in systems of knowledge. With a rhizomatic nomadic theory of art therapy, I can think with one concept, such as from psychoanalytic art therapy as used by Naumburg, and observe free association in relation to spontaneous art making, and how it can bring

unconscious forces into attention and offer insight into a new reality shared by the client. Similarly, concepts from other approaches can stimulate deeper reflection into the intersubjective situation in art therapy. Unlike the linear development of trees and roots, in nature rhizomes—for example, ginger rhizomes—grow horizontally rather than vertically, and don't grow with tree-like hierarchies. The mapping and connection depends on my subjectivities and connects with potentially infinite other networks. This rhizomatic mapping does not have one central structure, but many knots and centers, creating networks. Being nonhierarchical, democratic, and creative, rhizomes use alternative ways of constructing and working with networks. In my practice during sessions throughout this research, connections with clients' worlds were established using this open sense of knowledge building. Working with the diversity of client's realities, in addition to diversities of art therapy settings, I was interested in nomads' ease of learning from various environments with an admirable adaptability, and their eagerness to explore limitless possible realities as they move from one point to another, and from one landscape to another, creating trajectories to explore territories without a need to enforce their spiritual beliefs or their ways onto communities they travel through.

Unlike *sedentarism* that is supported by bounded and essentialist notions of place and identity (Kabachnik, 2007), in nomadism, fixed places or identities are not essential. What matters instead are the movements and interactions in between spaces, identities, and unique encounters and connections. Unique encounters between clients and art therapist can be defined by movements and becomings. With the ability to de-territorialize and re-territorialize using nomadic thinking, the art therapist can gain a fresh view of previously explored territories. With nomadic thinking art therapists distance the

self from centralized power structures or dominant culture effects in their efforts to make clients' individualities more visible.

With this arts-based study I explored multiplicities of intersubjective perceptions as tools for transformation and sense making for the participant as well as for the therapist–researcher, with the exclusion of hierarchy and authority. I created a series of artworks exploring the image or metaphor of the nomad. Deleuze and Guattari's philosophical treatise on nomadology (1980/1987) offered new perspectives on multiplicities of perceptions and realities. Based on their philosophical work, I created two conceptual performance art projects: one using black volcanic sand and, through movements, creating connections in the sand, and the other using life-size self-portraits to create a performance on a flexible space of therapy. Both projects explored the idea of multiplicities of pathways and trajectories to realities. I used the stage and performance art with self-portraits as a metaphor for a different kind of space. In agreement with Smith in his introduction to a volume of Deleuze's essays (1997), I propose that “concrete space is no longer stable or unstable, but ‘metastable,’ presenting a plurality of ways of being in the world that are incompatible yet coexistent” (p. xxvii).

Reflecting my proposed theoretical rhizomatic and nomadic approach in art therapy, my personal art processes throughout this research project have been multiple and multiplying. I agree with Kapitan (2003), who wrote that art therapists have enormous potential for creating new forms in the world that are life enhancing if they can hold a vision of themselves that is beyond longings to fit in with existing categories of mental health care or the art world (p. 95).

With nomadic thinking, I absorbed a client's perceptions or reflections and ideas,

regardless of pathological or other types of classifications. I easily adapted to environments I worked in, or to the structures of thought processes of each participant by listening, looking, and learning. This approach and conceptual base have led to connecting with clients on the basis of creative thinking and idea generating that is therapeutic. In place of limiting the focus on client weaknesses or impairments, naming their weaknesses for them with psychological or socially acceptable terminologies, and looking through the lens of one reality that is dominant or, alternately, having an exclusive goal of using the arts as tools for expressiveness, I engaged with art in multiple ways as the flow of sessions defined. I created discussions, ideas, and art with clients, with an interest in new realities, ideas, affect, and percepts. Rhizomatic growth was a result of connected efforts. In this way, clients' thought structures or views may become more visible in their societies, and their creative power can broaden the scope of socially constructed or accepted realities.

Much like nomads live in harmony with the environment, I harmonized with a new thought or space. This was possible through a nonhierarchical approach, which was perceived by clients as such. A non-hierarchical approach promotes human relations in a way that do not fall into role stereotypes, whereby a collective critique of the power relations in society becomes possible. Sensing authenticity, clients became even more interested in this creative exchange and dialogue within the realms of relational aesthetics. Five of eight participants wanted to work on collaborative art using art as a shared territory. Relationships became empowered in unique ways. New forms of being and thinking became possible through these nonreplicable intersubjective dynamics.

The proposed image or metaphor of the art therapist as a nomadic force drew largely from the critical concepts and body of work of Deleuze and Guattari, and also the work of Foucault; theories on language and perception from the work of Lacan (1976, 1973/1998) and Searle (2015); and the nomadic theory in the work of Braidotti (2011); from liberation art and social practice and the works of Boal (1995); Beuys (as cited in Antliff, 2014); and Thompson (2012). My inquiry was based on a sense of wonder versus theoretical over-determinism, and on openness to the singular and the new. Using the concept of nomadic, rhizomatic thinking for knowledge building, as stated previously, I reorganized my prior understanding of the basics of art therapy epistemology that have relevance to all populations in all settings into an new agency: perception and intersubjectivity, language and the unconscious, creativity and relational aesthetics, dominant culture's effect, and community art therapy and social action.

Making a rhizomatic connections with philosophical knowledge at the base of art therapy theories has been visible and in my art therapy practice for several years. This empirical arts-based study was an affirmation of multiplicities of perceptive realities, in accordance with Deleuze and Guattari's affirmative stance towards these subjectivities. I conducted an empirical arts-based qualitative study with four different adult populations, with two participants from each who were recruited from diverse community-based art spaces. Three of the spaces were studios where I regularly visit or facilitate art therapy sessions; one studio was an artist's personal studio. Participants were selected based on consistency of attendance in the community-based art space, and on difference in age group and ethnic background. I did not use predesigned intervention methods, surveys, or

questionnaires for my study. All data were collected during naturally unfolding art sessions or encounters in the art space.

Through engagement and interaction with participants, and through creative analysis and comparison of the conceptual image of the nomad and the sedentary as used by Deleuze and Guattari (1980/1987), with this study I articulated arguments to propose a different position for relating to art therapy theories, seeking rhizomatic relations to meanings within theories instead of looking at or using theories as totalizing power models.

Through this study I developed a new approach in art therapy by adapting Deleuze and Guattari's philosophy into the field of art therapy. With a new theory that I have conceived as a rhizomatic, nomadic approach in art therapy, the art therapist is conceived as a nomadic force, a presence that is becoming. By exploring the idea of the art therapist as a nomadic force, I adopted a creative approach to practice where the art therapist can adapt to places and communities and take a stance through a professional and artistic analysis. Finally, by using multiplicities of theories as fluid entities that can enrich our knowledge with analytical power, this approach helps envision the current and future of the profession as evolving into multiplicities of proactive platforms that promote and maintain healthy societies, in which subjective realities are visible and validated.

The concept of the nomadic force is that of a dynamic force that moves physically but also includes nomadic thinking, such as in moving between concepts, and in between non-crystallized theories that contain ideas accessed through fluid movements of de-territorialization and re-territorialization. Unlike the settled, which calls to mind the image of walls being placed around its property regime, the nomad de-territorializes and

re-territorializes (Deleuze & Guattari, 1980/1987). I assert that nomadic thinking offers the freedom of reflection and creative thinking through its ability to de-territorialize.

My overall goal of the research process was to test my assumptions and observations in order to clarify whether or not what I thought was happening in my practice with such a multiplicity of clients and spaces was actually happening. My approach to practice and my view of my clients was evidently nonhierarchical, as I was able to document that the information I received during therapy was approached with a multiplicity of meanings in mind, and I based the anchor of the process of healing on the expressive becoming of the client in their territories. The rhizomatic take on knowledge and theories and the nomad's image and its conceptual base benefited my art therapy approach by refining my ability to form projects and relations with positive outcomes. Thinking about personal and shared territories gave me opportunity to work with clients' perceptions in multiple flexible ways. This conceptual thinking had an emancipatory effect with an empowering result in both of my work initiatives, leading to various pathways in working with diverse communities and also benefiting me as a practicing artist. A shift to a nonrational, paradoxical, ambiguous state of experience rather than a rational and goal-oriented approach can be central to creative orientation and stimulate creativity development (Robbins, 1994, p. 30). Rhizomatic thinking supports these alternative states of being.

My first research question was: What happens in terms of living a relational form when, during arts-based encounters, the art therapist engages with the client with a nomadic thinking as conceptualized by Deleuze and Guattari? In order to explore this question, I identified themes that emerged from the experience of my study with eight

participants, based on the naturalistic unfolding of arts-based sessions. The results demonstrated that my rhizomatic thinking in exploring clients' expressions was in accordance with the multiple realities of clients, and I did not work with deductions and linear narratives.

My second research question was: How can the deconstruction and organization of art therapy epistemology through a new agency, based on art therapy's deeper philosophical and artistic bases and the use of concepts from Deleuze and Guattari's work—especially nomadic, rhizomatic thinking and knowledge building—support the art therapist's work in creating new trajectories using these new strategies for understanding participants' perceptions? To explore this question, I worked to discover in what ways the concept and metaphor of a nomad created a sense of open space as a platform with emancipatory potential, both for clients and therapist. I also worked on understanding how, while guided by a sense of discipline and structure that is fundamental in the art therapy profession and training, wonder can lead into unique arts-based exchanges in client–therapist encounters. I explored the relationship between a nonhierarchical approach based on relational aesthetics and creativity development as the sessions progressed.

Finally, I documented my perceptions and my experience of interacting with participants in the study that confirmed clients' sharing of percepts and affects through an artwork/territory where lines and forces demonstrated a becoming that is also shaped by intersubjective exchanges. A new potential strategy emerged from participants' interest in collaborative art making with me; through a shared territory, I looked at arts-based dialogues in this new way. Arts-based discourse or exchanges and increased interest in

sustained meetings for arts-based creative activities were both indicative of interest in continuous engagement in sharing of ideas and discussions with the art therapist. A series of rich sessions based on nonhierarchical exchanges led to extreme creativity and building of territories, some including collaborations in art and performance projects with me as the researcher.

Discussion Concerning the Video Project

I had initially created the video in iMovie as a conceptual art response to my work, as an artistic tool that has supported my goal of making connections with the multidimensionality of everyday life. I later came to the decision that a documentary-like video essay would be a better means both for expression and for sharing and dissemination of the results of my research. The videography became a synthesis of the contextual, the artistic, and the analytical. It has been my experience that every documentary film illustrates the filmmaker's subjectivities and perceptions, carrying affect and percept as similar to the arts. Scholars such as Foucault (as cited in Brinkmann, 2012) have argued that there is nothing neutral or objective about the visual as such, and there is no doubt that vision can become a tool by which power is exercised (p. 128).

To create a video that had aspects of documentary, I worked with a postproduction documentary editor, which also helped with making the film with larger audiences in mind. In this way, the construction and editing of the video was similar to the process of writing an article for larger audiences. I plan to share my video with the full staff of the cultural institution in which I work, with the participants in other studios, with the graduate art therapy departments of schools that I am connected to in my role of

supervisor, and with art therapy platforms at conferences at national or international levels.

After reflection on the video, I realized that the creative process that includes my work with clients is continuous and ongoing, encompassing my professional life and affecting my artistic life. Shusterman (as cited in Kapitan, 2003) wrote that in the broader practice of living, and in how we organize and create from our lives, there is so much room for the art that “the idea of confining art to what we hang on walls is pathetic failure of theoretical as well as artistic imagination” (p. 95). There is an active and complete participation from my part as the art therapist in all aspects of interactions in alignment with McNiff’s (1992) assertion that the realization of the promise of art therapy necessitates the complete participation of art therapists, as well as attending to others does not require them to stop expressing themselves (p. 39).

I believe that this expansion of language in art therapy processes, and the knowledge related to these processes, can also have a positive impact on the art therapist’s creativity development. Creativity development as artists empowers art therapists through their artistic territories for strategic thinking that is not limited to dominant theoretical models. A nomadic thinking that uses art as territories for unlimited visions is inclusive of the art therapist’s identity in a contemporary world of endless subjectivities. Art therapists who connect personal creativity development efforts with practice work simultaneously on a personal and professional identity that is fluid rather than static, that is enmeshed rather than divided, and that is informed by interdisciplinary studies, especially around culture, language, the arts, and philosophy. Kapitan (2003) defined the process of forming and reforming oneself in relation to the art world as a

primary method of artistic practice. My art processes have been the essential guide for the development of my practice, connecting personal and professional identity through providing territories for creativity and sense making for both.

My video project is also a metaphoric illustration of a highly creative therapeutic interaction between the art therapist and life at large, reminding me of Beuys's impactful statements in presenting his life as a hybrid document of *Life Course / Work Course*, which he supplemented with autobiographical tales saturated with symbolically charged meanings, suggesting that the entirety of his life was in effect an “art in progress” (Antliff, 2014, p. 25). My conceptual clips with the black volcanic sand became an art form using a memory point from my past (the volcano I saw from the house in which I grew up) to expressive lines of becoming of the present (trajectories in sand, making roads, being a nomadic force, and/or being a nutrient to the soil of communities) just like volcanic ashes and nutrients.

The scene of the conceptual–metaphorical–improvisational dance while holding the self-portraits includes multiple different meanings about the dynamics of relational aesthetics, being as a form, creativity, intersubjectivity, and the flexible space of therapy. Behind the stage of dance we see the changing faces of life, which are represented through clips of ocean, fire, rain, sunshine, nature, and a bird representing freedom. These elements behind the performance of the self-portraits represented the fragility of our spiritual and mental worlds, and the changing states of humans' affective and perceptive worlds. The dance metaphor shows that on this stage there are no hierarchies or power plays, as we are all artistically improvising with those changing backgrounds of our lifeworld (Husserl, 1970) behind us.

Creating the video allowed me to zoom in on perceptions, interactions, experiences of myself, participants, and life at large. I hope I can share my ideas about nomadic thinking and the limitless future trajectories of art therapy with the world.

Limitations

Although it was not intended to be representative, the sample size of eight participants for an arts-based study on my experiences and observations is smaller than the populations and communities I serve. My art therapy work with patients in an acute inpatient psychiatric hospital could not be included due to patient privacy laws and processes taking extensive time for hospital settings. Also, my work with children with multiple severe disabilities could not be included due to differences in development stages and also due to the fact that working with children in group settings requires a more structured format, with specific projects for each population, which was beyond the scope of this research. I hope to continue to study these topics with larger and more varied populations in the future. I especially hope to do further research based on nomadic, rhizomatic thinking with my other clients in the acute psychiatric setting so that their realities can be heard in new or different ways.

Another limitation of this study is that generalizing the claims' effectiveness to all art therapists is not possible. Just as theories are multiple and multiplying, not totalizing, art therapists have multiple ways of preparing for their work with clients. However, I believe that nomadic thinking can have an impact in a vast variety of settings.

Conclusions

My research problem focused on the gap between my knowledge of philosophical work of Deleuze and Guattari and the current theoretical approaches in art therapy. I used

concepts of nomadic, rhizomatic thinking from the philosophy of Deleuze and Guattari (1980/1987) to create a theoretical base in art therapy where I, as the art therapist, am a nomadic force and create rhizomatic connections for growth and knowledge building that support my practice. I have developed this approach during years of practice, working with a wide scope of clients ages 3 to 95 in diverse community-based and clinical settings. The practice-oriented approach for the art therapist as a nomadic force was presented in the video documentary project, which accompanies this essay, entitled *The Art Therapist, a Nomadic Force*. I aimed to expand awareness of the impact of the art therapist working with diverse communities using Deleuze and Guattarian approach involving nomadic, rhizomatic thinking. With this approach, I considered the multiplicities of subjective realities in diverse communities through understanding the complexity of human perception. I illustrated my experiences and perceptions and their impact with a sample of eight individuals.

My review of scholarly and interdisciplinary work supported my observations and propositions for art therapy using nomadic thinking during my research project. These propositions are, firstly that all participants tended to connect with their unique snapshots of ideas and realities, which seem to emerge through a nonhierarchical, non-pathological approach to relationships, and through arts-based platforms that are affirmative of multiple realities. Secondly, all of the participants were expressive of thoughts, ideas, and feelings through working on arts-based territories. They creatively exchanged ideas, sharing their affective and emotive states and their needs. With a nomadic, rhizomatic thinking, as the art therapist I connected to meanings and diverse concepts with fluidity, with an interest in learning, and using my experiences, perceptions, and analytical tools instead of

approaching clients with one theoretical methodology. This position enhanced the expressive states of participants, having great therapeutic impact, as they all were engaged in making meaning with lines and forms, leading to ongoing transformations and becomings.

Thirdly, through a differentiated study of art therapy with a view informed by Deleuze and Guattari and nomadic, rhizomatic thinking that operates through de-territorializations from the established power structures or cultural dominance, it appeared that as the art therapist I was able to have greater sense of creativity development. I used impactful concepts from art therapy literature, building a fluid, responsive practice that combined artistic, personal, and practice-based experiences, and was able to express myself both artistically and professionally.

Finally, through adopting an approach that was open to the consideration of collaborative projects such as multiple forms of arts-based collaborations, participants and researcher engaged in a greater experience of expressiveness of art as shared territories, increasing attunement with arts-based intersubjectivities,

By using an empirical arts-based research methodology, I aimed for a general approach to the study of reality that suggests that only knowledge gained through experience and the senses is acceptable (Bryman, 2008), while offering all perceived data as facts on their own merit. Rich empirical arts-based data and arts-based projects helped me understand and make sense of claims raised in the art therapy discourse.

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APPENDIX A

Consent Form for Participation in a Research Study

Mount Mary University of Milwaukee, WI

Researcher: Mitra Dejkameh, ATR-BC

Study Title: The Art Therapist as a Nomadic Force, a Proposition for Contemporary Practice

Dear Participants,

This form is called a Consent Form. It will give you information about the study so you can make an informed decision about participation in this research.

I, Mitra Dejkameh, a graduate student at Mount Mary University Milwaukee, am conducting a study to explore human perceptions and sense making strategies during collaborative art making and interactive exchanges, and the effects of these interactions on my inter-subjective perception as an art therapist. You are participating in this study because you are at least 18 years old one of the individuals engaged or interested in the arts.

If you agree to be part of this study you will be expected to participate in arts based activities for six sessions, one time per week, for a total of six weeks. The work will include creating art, using the arts as tool for conversation or exchange of perception. The art medium or theme will be based entirely on your selection and decision. You can choose to engage in collaborative art making with the researcher.

Data will consist of researcher's written, visual, audio, video field notes, or observations and response art, and the art created by you, or the art created in collaboration, if any. The researcher will formally assess data after each session. Assessments will be analyzed and evaluated to show participant's strengths through creative processes and sense making strategies and methods. All data will be destroyed if you withdraw from the study. If any video or audio recording is used, it is only for the use of the researcher to transcribe or use to create an art response that is non-identifiable, and will not be shared with anyone otherwise. Collected video or audio data will be secured in a locked cabinet in a secure location. All identifiable material will be destroyed one year after close of the study.

The following procedures will be used to protect the confidentiality of study records such as written, audio or video field notes. The researchers will keep all study records, including any

codes to your data, in a secure location, inside a locked cabinet. Research records will be labeled with a code. A master key that links names and codes will be maintained in a separate and secure location. The master key and audiotapes will be destroyed immediately after the close of the study. All electronic files including database, spreadsheets containing identifiable information will be password protected. Any computer hosting such files will also have password protection to prevent access by unauthorized users. Only the researcher will have access to the passwords. At the conclusion of this study, the researcher may publish her findings. Information will be presented in summary format and you will not be identified in any publications or presentations.

Minimal risks associated with this study are only risks that may involve art making, as interactions are no different than those taking place in any art studio activities and exchanges. As participant you have the right to withdraw from art making and get one to one assistance from the researcher in case you experience emotional discomfort. The potential benefits to you are that you will get individual attention and may receive helpful feedback for continued artistic and transformative development. Your participation will also help the researcher to better understand individual needs and how to best acquire new knowledge about creative thought processes and sense making strategies.

Any personal identification will be omitted so that you will not be identifiable in the written analysis. Any reference to interviews or conversations will be anonymous. All information gathered in this study can be made available to you upon request. The Mount Mary University Institutional Review Board (IRB) has approved this study. If you have questions about the study, you may direct those to the researcher, (Mitra Dejkameh, *telephone number redacted*) or the researcher's advisor/professor, (Dr. Bruce Moon, *telephone number redacted*). Questions about your rights as a research participant should be directed to the IRB at Mount Mary University. Thank you for your support!

Sincerely, Mitra Dejkameh

Consent for Participation in Arts-Based Research

I volunteer to participate in a research project conducted by Mitra Dejkameh from Mount Mary University. I understand that the project is designed to gather information about arts-based perceptions, creativity, and structures of thought processes. I will be one of approximately eight people being involved in this research.

1. My participation in this project is voluntary. I understand that I will not be paid for my participation. I may withdraw and discontinue participation at any time without penalty.
2. I understand that most participants will find the arts based interactions, discussions, and projects interesting and thought-provoking. If, however, I feel uncomfortable in any way during sessions, I have the right to decline to converse, or to end my participation.
3. Participation involves independent art making or collaboratively art making, or discussions about art, or other naturally unfolding discussions with the researcher from

Mount Mary University. Notes may be written during each encounter. An audio or video recording of dialogues may be made. If I don't want to be taped or video recorded I will not be able to participate in the study. Audio or video recording will be used for the researcher to create field notes and art response and will not appear as direct data or be shared.

4. I understand that the researcher will not identify me by name in any reports using information obtained, and that my confidentiality as a participant in this study will remain secure. Subsequent uses of records and data will be subject to standard data use policies, which protect the anonymity of individuals and institutions.

6. I understand that this research study has been reviewed and approved by the Institutional Review Board (IRB) for Studies for the Protection of Human Subjects at Mount Mary University. For research problems or questions regarding subjects, the Institutional Review Board may be contacted through the IRB office of Mount Mary University.

7. I have read and understand the explanation provided to me. I have had all my questions answered to my satisfaction, and I voluntarily agree to participate in this study. I understand that I can withdraw at any time. A copy of this signed Informed Consent Form has been given to me.

Participant Signature:

Print Name:

Date:

By signing below I indicate that the participant has read and, to the best of my knowledge, understands the details contained in this document and has been given a copy.

Signature of Person
Obtaining Consent

Print Name:

Date: