Taking Art Therapy Outside of the Studio: Bringing Creativity and Care to Women Within a Boston Homeless Shelter

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Bringing creativity and care to women within a Boston homeless shelter  
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Abstract

Within the walls of a homeless shelter in Boston, Massachusetts there is a room designed to be a safe space for anyone who identifies as a woman. The room is outfitted with most of the services provided elsewhere in the shelter; computers, phones, coffee, water cooler, breakfast foods and access to the clothing distribution center and the clinic. The only things missing from this space were mental health clinicians and art, care and creativity. When the shelter’s studio space closed for a month, the Women’s Center became my studio away from studio. My aim was to bring these missing aspects of creativity and care to the women who spend most of their day in the Women’s Center. I developed directives and assembled an art kit to help the women express themselves and to increase the feelings of safety and comfort that have become the focus of the Women’s Center. A total of five directives were used during this time period, however, this paper will focus on the use of three directives: Collage your Calm, Affirmation Station and Manicures. These three directives were chosen because they display the most variety in the levels of participation, perceived mood, energy and resistance.

Keywords: art, art therapy, focus oriented art therapy, expression, wet shelter, day shelter, homeless shelter, homeless women, collage, affirmation, therapeutic touch, creativity, care, flow, dialogue
Introduction

Within the walls of a homeless shelter in Boston, Massachusetts there is a room designed to be a safe space for anyone who identifies as a woman. The room is outfitted with most of the services provided elsewhere in the shelter; computers, phones, coffee, water cooler, breakfast foods and access to the clothing distribution center and the clinic. The only things missing from this space were mental health clinicians and art, care and creativity. When the shelter’s studio space closed for a month, the Women’s Center became my studio away from studio. My aim was to bring these missing aspects of creativity and care to the women who spend most of their day in the Women’s Center. I developed directives and assembled an art kit to help the women express themselves and to increase the feelings of safety and comfort that have become the focus of the Women’s Center. A total of five directives were used during this time period, however, this paper will focus on the use of three directives: Collage your Calm, Affirmation Station and Manicures. These three directives were chosen because they display the most variety in the levels of participation, perceived mood, energy and resistance.

This study was conducted within the Women’s Center of a “wet shelter” in Boston, Massachusetts. The term, “wet shelter” refers to a shelter that allows guests to bring alcohol onto the premises. The shelter does not condone drug or alcohol use, however, it is a regular occurrence in the day shelter. The Women’s Center is a space within the day shelter; some of the women in this space were intoxicated at the time of this study. The population varied slightly from day to day but mainly consisted of women between the ages of 25 and 65 who preferred not to be amongst the general population of the shelter. It was reported by other members of the staff that the majority of these women have had traumatic experiences involving men and that the
room was a safe space where they did not have to be around anyone of the opposite sex. These women have experienced varying degrees of physical and/or sexual assault and domestic violence at different stages in their lives. Attendance in the Women’s Center varied greatly from the beginning of the month, 5-16 women a day, to the end of the month, 8-30 women a day.

Despite the variable attendance the ethnicity of the group remained fairly consistent; roughly half of the women were black, roughly one quarter of the women were Latina and roughly one quarter of the women were white. The women self report various ancestral and cultural backgrounds. These women also varied in ability level, expression of mental illness and involvement in drug and/or alcohol use or recovery.

The less-able bodied women appeared to be the only women who were engaging others in conversation, typically the interaction took place because one person needed help and another person appeared capable of providing that help. The women who slept and the women with physical disabilities were the only women displaying any vulnerabilities and many of the women appeared withdrawn. The ladies would often ignore requests or comments by watching the television or reading. It was clear that the unifying factors for these women were their identification as women, their experiences of trauma and their inability or unwillingness to be emotionally vulnerable. I had two hypotheses; 1.) if I could bring some creativity and care into this space these women may feel safer and 2.) if they are able to use expressive materials they may be more likely to be introspective about their experiences. I was curious, if these women felt safer, and more empowered to express themselves, what effect that would have on their willingness to be vulnerable and open with another person. It was this curiosity that prompted me to develop an art-kit to bring throughout the shelter and later to develop directives which helped
to structure the time and art making in a way that appeared to make the women more comfortable. I gathered the art supplies from the studio and set up a creative space in the Women’s center for 3-5 days a week over a four week period which began in October of 2017.

Literature Review

Art Therapy and Expression

The American Art Therapy Association defines art therapy as, “an integrative mental health and human services profession that enriches the lives of individuals, families, and communities through active art-making, creative process, applied psychological theory, and human experience within a psychotherapeutic relationship” (2017). Beyond this definition there is some debate about what can be defined as art therapy; former president of the American Art Therapy Association, Dr. Judith Rubin, wrote a short essay in an attempt to clear the confusion around what art therapy is and what it is not. In “Art Therapy: What it is and what it is not” Rubin stated that, “The essence of art therapy is that it must partake in both parts of its name- it must involve art and therapy”(1982, p.57). Rubin’s focus was to, “distinguish between art in therapy and art activities that happen to have therapeutic components”(1982, p.57). She explained the role of the therapist as someone who is not only capable of teaching the artistic skills needed to create but also the emotional skills and coping techniques needed to process the art on a level that connects it to the life, struggles and successes of the artists. Appropriate training to become an art therapist includes lessons on the place of art in diagnosis and treatment, as well as the importance of giving permission to clients be authentic in their expressions. Clients
in art therapy are expressing emotions that are less socially acceptable, such as anger, because they have been given the space and permission to feel comfortable and safe in that expression.

Dr. Pat B. Allen developed an open studio model for working with clients in which the roles of therapist and client were relaxed, allowing space for creative self-expression (1995). In the beginning stages of the Open Studio Model, “no big therapeutic outcomes were really expected beyond trying to provide a supportive community to help people stay out of the hospital” (Allen, 1995, p.161). Over time the studio model began to take shape and the key concepts for working within the model emerged. One of the central concepts to Allen’s Open Studio Model is that the artist is the expert of their artwork and of their experience (1995, p.163). Another central factor to the success of the Open Studio Model is the willingness of the facilitator to create art alongside the clients. This type of side-by-side creation relaxes the roles of client and therapist and has the power to lead to a mutual learning experience, as it did for Allen (1995, p.162). Above all, Allen says, “the primary attribute to an open studio is energy...the main source of energy is generated by the artists working in the space” (1995, 164). In this regard, the facilitator has a responsibility to intentionally create art in the studio which brings an appropriate energy to the space.

expression of thoughts, feelings and ideas” (Nathan & Mirviss, 1998, p.107). In their book, Nathan and Mirviss (1998) define creativity as a six step process; Inspiration, preparation, incubation, insight, evaluation and elaboration. The authors outline nine elements that allow the experience to be enjoyable for the client: “clear goals, immediate feedback to one’s actions, balance between challenges and skills, action and awareness are merged, distractions are excluded from consciousness, no worry of failure, self-consciousness disappears, sense of time becomes distorted, and the activity becomes autotelic” (Nathan & Mirviss, 1998, p.14). The process and elements allow an art therapist to develop a creative space for clients that feels safe and non-judgmental, which in turn promotes more authentic expression and self-exploration.

**Trauma Informed Approach to Art Therapy**

Focus Oriented Art Therapy is an approach developed by Laury Rappaport for use with clients who have experienced trauma. Rappaport (2010) outlines six steps of focusing that begin with creating an artistic representation of an, “All-Fine Place”. The client is then invited to ask themselves what they need or how they are in that moment. Once safety has been established the client focuses on a handle or symbol, has a dialogue with the symbol and is invited to, “welcome what comes from the felt sense and the art” (Rappaport, 2010, p.131). This process was combined with Judith Herman’s three stage model for recovery, “establishing safety, remembrance and mourning (working through trauma), and reconnection with ordinary life” (Rappaport, 2010, p. 133) to create the FOAT approach. The FOAT approach is described as, “a methodological and theoretical approach that integrates Gendlin’s (1981, 1996) focusing method and principles of focusing-oriented therapy with art therapy” (Rappaport, 2010, p. 129). There is room for more research with the use of this model, however, Rappaport’s case example
demonstrates a range of potentially positive therapeutic outcomes, including; increased attunement, understanding of trauma as separate from the person, bearing witness, cathartic expression, documenting change, resilience, empowerment and creative intelligence (2010, p. 141).

**Entering a New Space**

Trudi Schoop serves as a prime example of the inexperienced expressive therapist entering a new space (1974). Schoop attempted to engage 22 patients who were resistant and, “categorized as chronic schizophrenics” (1974, p.27) by asking them to join her dance and movement therapy group. At the mention of the word, “dance” the group verbally and physically expressed that they would not be engaging (Schoop, 1974, p.28). This is an instance of the expressive therapist asking for more expression than the group is comfortable or capable of giving in that time and space. In a later group, one of the patients engaged the other group members in a simple movement; a stretch to touch her toes without bending her knees, and once the group was more unified, Schoop began directing the movements (1974, p.32). This demonstrates the idea of meeting the group where they are in their emotional exploration. Schoop wanted to immediately engage the group in dance, however, they needed to take the time to get comfortable with their movements within a group before they could be expected to dance. It is important for the therapist to remember that expression does not come easily to all and that they must become attuned to the client’s comfort level and needs in order to form the trusting relationship needed for a beneficial therapeutic experience.

**Art and Art Therapy in Homeless Shelters**
Lisa Braun’s work with homeless men examines the importance of art in the lives of people who are homeless and/or chronically poor. In 1997, when Braun published, “In from the Cold: Art Therapy with Homeless Men” there were few art programs within homeless shelters. Braun designed an open studio model for a shelter and documented the process to explain the importance of providing a space for creative expression to the homeless population. In addition to providing a place for artistic expression the model, “created a means for this particular population to go beyond the boundaries and limits of daily living” (Braun, 1997, p. 122). Braun does little to cover the limitations of her study or the limitations of the open studio model, instead focusing on the positive therapeutic outcomes of the study; increased sense of trust, pride in one’s work, and formation of, “a new kind of self-identification” (1997, p.122).

Rachel Mims designed a six-week visual journaling program that was used with a two person, homeless military veteran, art therapy group in order to reduce symptoms of anxiety, stress, depression and trauma while in recovery. The study is difficult to legitimize and there appears to be information missing from the discussion; however the area of exploration is rather interesting and warrants more research. The study is limited by the sample size and the reality that both participants were receiving additional mental health care at the time of the group. Despite the limitations of this study it does demonstrate the process of psycho-education and visual expression as they relate to healing and recovery. The study sets the ground work for use of visual journaling groups to help increase self knowledge. Mims reported that, “Increased self-knowledge gained via journaling and art making resulted in increased self-confidence, increased self-understanding, and hope for the future” (2015, p. 110).
Francis J. Griffith, Liz Seymour and Mathew Goldberg reframed art-making with the homeless population in attempt to address the psychological factors and financial factors of homelessness (2015, p. 33). Under this model of art making the process and the product are almost equally important. The process should address the psychological factors while the product becomes something that the artist can sell. When the artist makes a sale then it gives them a sense of confidence and pride in their art and can promote positive life changes and achievements. The authors concluded that, “homelessness is maintained by psychosocial and financial factors” (Griffith, et al., 2015, p.39). Many of the participants in this study were in an additional therapeutic group so the outcomes may be influenced by this additional attention. Despite the limitations the authors report a statistically significant relationship between participation in the art group and, “life achievement, such as securing housing, finding employment, quitting substances, developing prosocial skills, and selling artwork” (Griffith, et al., 2015, p. 39).

**Art with Homeless Women**

Jean Henry’s article outlines a program designed for homeless women and their children to engage in creative and educational activities to offer, “mothers and children a safe way to transform grief and anger into creative acts”(2000, abstract). The program outline focuses on the importance of providing a space where these women and children felt safe. The program is scheduled and structured to provide as much consistency, education and care possible to, “stimulate a sense of empowerment, self worth and respect for self and others” (Henry, 2000, p. 7). Each activity was to designed to be completed on that day in case the mother and/or child were not able to attend multiple weeks. Henry emphasizes the psycho-educational aspect of the
program, the volunteers needed to learn about trauma, homelessness, drug and alcohol addiction. “Museum staff and volunteers received training that alerted them to how hard it is not to have a home...to have no present father, often with...mentally ill or [substance] addicted mothers” (Henry, 2000, p.6). The Saturday Program model was effective when used with this specific population with a lot of volunteer work and close monitoring. The model is not easily transferable to other locations or populations as it hinges on an incredibly understanding, supportive and educated staff of volunteers; however it highlights the importance of meeting the basic needs of a person in a shelter. These women and children were given meals, a space for interpersonal connection, a quiet place to sleep and the materials and freedom to express their emotions creatively.

Darlene Clover asked homeless women of Victoria, Canada to participate in a collaborative art making project aimed at empowerment and formation of a new identity as artists. Art works were made, shared and discussed by approximately 20 women over an 18 month period. The group was facilitated by two facilitators, two artists and two feminist researchers. While individual artworks were part of the study, Clover wrote that the researchers believed, “that empowerment as well as trust and collective identity emerged better through collaborative practices than simply working individually and pushed for this from the beginning” (2011, p.22). This view point acted as a limitation on the creative expression of the individual in favor of developing a group identity and sense of community.

In “The role of art for homeless women and survivors of domestic abuse” Mary Stokrocki, Sandra Sutton Andrews and Sigrun Saemundottir define homelessness and domestic violence, review the literature and present information from interviews and studies to attempt to
explain the role of art. They conclude that generalizations cannot be widely made, however, “the interviews reveal[ed] that the women in the study value and make art that is emotional, sentimental, or that has a cultural attachment...employ symbols of protection...and value frugality” (Stokrocki, et al., 2004, p. 79). The work for this study was split between several students at different levels of their educational career which can be limiting in the sense that these individuals did not work together to create the finished research project. While their professor did make the piece fairly cohesive it still feels as though the researchers had different interests going into the project. Limitations aside, this group of researchers provide some useful information to facilitators who are developing directives for use with women who have experienced trauma related to homelessness and domestic violence.

**Collage**

Gioia Chilton and Victoria Scotti define collages as, “visual artworks that are created by selecting magazine images, textured papers or ephemera; cutting or altering these elements; and arranging and attaching them to a support such as paper or cardboard” (2014, p. 163). Chilton and Scotti present collage as an effective tool for gathering and analyzing data. The author’s shared their creations and their process as well as the three themes that emerged around the use of collage as a form of arts-based research. Chilton and Scotti found that, “collage enabled (a) integration of layers of theoretical, artistic and intersubjective knowledge; (b) arts-based researcher identity development; and (c) embodied discoveries”(2014, p. 166).

Marta Garrett’s work, “Using artist Trading Cards as an Expressive Arts Intervention in Counseling” details the use of collage, mosaic, stamping, painting and altering photos to create small works of art. Artist trading cards are the dimensions of a playing card and which allows, “the interventions to be ‘better, faster, and cheaper’ in many ways” (Garrett, 2015, p.78). Artist
trading cards, or ATCs can utilize a large range of materials and can be used with a variety of directives in a way that may feel less intimidating to clients who do not consider themselves to be capable of artistic expression. The obvious limitation in this example of collage making is the limitation of size, however, this size may be a strength when it comes to working with populations who do not have much space.

**Affirmations**

Nicholas V. Palmieri, Associate Professor of Adult Education recalls teaching classes to students who spoke English as a second language. He reflected on an instance of a female student struggling to give her presentation and his insistence that she give the final two minutes of her presentation in her native language. She instantly became more confident, energized and clear, qualities which Palmieri associates with his, “use of affirmation to generate positive emotions” (2008, p. 30-31). Affirmations have the power to support an individual which may lead to a sense of holding and safety; which allow space for therapeutic work to be done.

Marva J. Larrabee explains that, “the primary aim of the approach is the resumption of dignity and personal responsibility as well as the affirmation of the client’s integrity” (1982, p. 106). The approach emphasizes equality between the counselor and client, the client is the expert on their situation. Larrabee uses the case example of “The Skipper” to highlight subtle affirmation in counseling. In this example the facilitator mentions that the client had skipped class the previous day; the client disagrees, “maybe it was the day before” (Larrabee, 1982, p. 107). The facilitator agree that it was the day before yesterday that the client skipped class, affirming the client’s statement and providing space for the client to explain what happened. This type of affirmation allows the client to feel supported in the expression of thoughts, feelings or
actions that are not seen as socially appropriate. In conclusion Larrabee wrote that the affirmation techniques, “offer a counselor an option for maintaining a facilitative position with reluctant clients while directing their self-exploration of a specific situation that the client may not consider a problem” (1982, p. 109).

**Therapeutic Touch**

David Burkholder, Michele Toth, Kevin Feisthamel and Paula Britton examined faculty and student curricular experiences of non-erotic touch. Burkholder, et al. found that educators felt uncertain and apprehensive when teaching about non-erotic touch and students felt they did not receive training that was extensive enough for them to appropriately utilize non-erotic touch in a therapeutic setting. The authors review the benefits of touch in a therapeutic relationship and discuss questions that students and faculty were asked about non-erotic touch in the curriculum of their program. The themes that arose from the faculty members included: an elusive definition, factors to consider when implementing non-erotic touch, the difficulty with training students, perceived struggles of the counseling students, and frustration with boundaries (Burkholder, et al., 2010, p.175-178). Similarly, the themes that arose for the students included: an elusive definition, the complexity of a hug and the confusion around hugging a client, potential pitfalls, and inadequate training (Burkholder, et.al., 2010, p.178-180). This study calls for more discussion on the topic of non-erotic touch and the benefits of properly utilizing touch within a therapeutic relationship. The authors conclude that counseling students need better training to begin confronting the issues with non-erotic touch in counseling.

Carlos Durana presents the scientific evidence supporting the importance of touch in development as well as the taboo with expressing intimacy that develop as the person ages. The
inability of many cultures to separate nurturing touch from erotic touch lead to an inability to appropriately utilize touch in a therapeutic setting (Durana, 1998, p.269). Durana explains the therapeutic benefits, “touch may be used to communicate a variety of feelings, as well as to strengthen, center of help a client enter an altered state of consciousness” (1998, p.271). Durana concludes that touch is complex, that therapeutic touch cannot be outlined in a simple list of rules, however, he offers his suggestions in, “The use of touch in psychotherapy: Ethical and clinical guidelines” (1998).

**Methods**

Materials were selected that would best facilitate expression as outlined by Nathan and Mirviss in their chapter on visual and tactile arts (1998). The materials listed as Expressive Art Materials, “allow for non-verbal expression of thoughts, feelings, and ideas” and include; crayon, collage, felt tip pen, crayon resist, string painting and pencil (Mirviss, 1998, p.107). I gathered these materials as well as chalk pastels, oil pastels, scissors, glue sticks and a box filled with affirmations which had been written based upon concerns that I had previously heard from guests in the art studio. I was announced as an art therapy intern and entered the room with my box of materials and a sign inviting the women to come visit and create with me. I had a theory that if these women could become creatively engaged then they may become more comfortable with expressing themselves in a way that could be therapeutically beneficial.

The initial approach was unstructured in an attempt to determine whether there was any immediate interest in the art materials; however, there was very little. I asked the clinician on the floor whether she thought directives would be helpful and we agreed that these women are so
creatively malnourished that they would likely benefit from more structured invitations to create.

It was at this point that I reviewed the expressive materials and began developing my directives. Collage was chosen for the expressive nature of the medium as well as the approachability of working with existing images. The affirmation also allowed for a starting point in the form of the pre-written affirmations in the affirmation box. Women were given the option to create their own affirmations or to take one from the box and build around it with words and/or images. The manicures and temporary tattoos stood apart as manicures are not new to the Women’s Center and are less traditional forms of artistic expression. Despite the lack of traditional art materials involved in the final directive, it was still a very creative process in which many women chose to express themselves and their own unique style.

I ran directives in the women’s center for three hours, 9:00am to 12:00pm, four days a week, Tuesday through Friday, for a four week period. In the three hours as many as 30 women would visit the Women’s Center, with an average of 10 guests and 2 staff present at all times. During the three hour sessions I would speak with 2 to 15 women for periods of time ranging from 30 seconds to half an hour. With each activity, I anticipated more participation, however there was an average of 2 women who participated in the directive provided in the session. During sessions I kept short hand notes of conversations and observations, later writing up process notes and observation notes. I kept track of the number of women in the room, the number of women who came to speak to me or ask questions, the number of women who participated in the directives, the number of creations, perceived mood and perceived levels of energy and resistance. Additionally I created reflection art and later processed the art for personal themes resulting from my time in the Women’s Center.
I utilized the arts-based approach of found poetry as a way of analyzing the written data that had been collected. The process of creating found poetry involves reading the conversations several times to isolate phrases that were used multiple times by various guests over the month long period. These words and themes were used with some creative freedom to create the three found poems presented in this paper. Reflective artwork was made to process personal themes that arose from my time with the women in the Women’s Center.

**Materials:** National Geographic magazines, fashion magazines, sports magazines, scissors, construction paper, colored tissue paper, drawing paper, bristol board, pencils, colored pencils, crayons, oil pastels, glue sticks, school glue, nail polish, temporary tattoos

**Limitations:** The space was not ideal for art-making, the messier expressive materials like paint and clay were not an option, table space was limited and lighting was not ideal. I had expected more participation and may have brought an energy to the space that made the women feel that I was imposing the need to create art instead of feeling invited to create. It is also possible that the women thought of me as someone with more wealth than them and did not feel comfortable disclosing to me as a result. It is important to note that some of the women in the Women’s Center did not speak English, the other languages were primarily Spanish and Portuguese. I am limited to speaking English and understanding only a few words and phrases in Spanish, so my communication with these women was limited. The data collected was limited to the stories from English speaking women, interest and participation in the arts-based activities and my personal perception of the energy and mood of the room. The data was analyzed by creating found poetry which was undoubtedly written with the influence of my experiences making the resulting poetry a reflection of my perceptions of the women in the Women’s Center.
Results

For the period of one week in October, the studio of the shelter was partially open; I was not getting enough contact with the guests and decided it would be best to volunteer in the Women’s Center. My first impression of the space was that it was very sterile, with its high ceilings and white walls. I read over the rules for the room which were written on poster sized paper on one wall and noticed that the list was the most colorful aspect of the room. Women were spread throughout the space, some in chairs, some standing, others lay on the floor napping. There was very little conversation, mainly the women were watching television and did not seem to want to engage with anyone else in the space. This was in great contrast to what I had experienced in the studio space where artists would often have meaningful discussions. It struck me that artistic expression may help these women to be more open to engaging with me and, maybe, with each other. At the end of the week I was informed that the studio would remain closed and there was no estimate as to when it would re-open. The studio remained closed for a month and I continued to spend time in the women’s center, attempting to engage the population.

Session 1- Collage your Calm

The first directive that I brought to the Women’s Center was titled, “Collage your Calm.” Collage was chosen for the level of expressive it allows (Nathan & Mirviss, 1998, p.107). The directive was designed to create an image of calm that these women could take anywhere as well as to introduce myself and my materials to the space. It took more than half an hour before the first woman approached to ask more about the directive. Over the course of the session 3 women
asked about the directive or the materials. Two of the women were frustrated with the fact that I would not allow them to take the materials back to their seats; one made a collage while the other took a magazine and ran out of the Women’s Center. Many of the women appeared tired, some were napping, some watched the television despite it having been turned down for my time in the space. The women appeared resistant to the directive as evidenced by the desire to engage with the materials in another way. It is possible that the women were also resistant to me being in their space as evidenced by their hesitance in talking to me and the reported feeling that, “[collage] won’t help.”

**Goals:** self expression, identifying the feeling of calm, expressing images and ideas of calm, introspection

**Observations and notables:** The women seemed more suspicious of me than curious. I was announced as an art therapy intern at the start of each session, but very few of the women were interested in the art. Three women approached to ask questions, one of whom just asked to borrow a pair of scissors. The other two came to me as a pair and while one made a small collage the other walked away with one of my magazines and left the women’s center.

**Session 2- Affirmation Station**

The “Affirmation Station” directive invited the women to create miniature posters that feature affirmation statements of hope and self-empowerment. Additionally a box of pre-written affirmations sat on the table beside the other art materials. During this session 20 women visited the Women’s Center, 6 asked about the directive, all of whom took affirmations from the affirmation box. There was more participation on this day, 3 of the women created affirmations.
The overall energy level in the room was medium-low, some of the women were eating and talking at a table in the center of the room, other women slept in chairs near a window. The women seemed tired as evidence by the bags under their eyes and conversations about “sleeping out” meaning these individuals slept on the streets.

**Goals:** affirm client, improve mood, increase expression, introspection

**Observations and notables:** Two of the three creations were small, the women who made them huddled over their work and did not feel like sharing their finished products. One woman did make a miniature poster on an 8.5x11 inch piece of paper using torn construction paper, glue and markers. The woman began by taking a few affirmations from the affirmation box and then tearing pieces of construction paper, she then glued the affirmations and the torn paper onto a piece of white drawing paper. Torn paper collage is a notable variation in that it, “allow[s] for expression of aggression” (Nathan and Mirviss, 1998, p. 107). Many women did not want to create an affirmation but were interested in taking a pre-written one. Several women asked me to read the affirmation aloud to them, some wanted to discuss what it meant to me and what it meant to them. One woman was incredibly grateful for the affirmation and the conversation, she reported, “I can tell, even though you don’t know me, you care about me.” She thanked me repeatedly and continued to offer me coffee throughout the morning. After disclosing some of her story of homelessness she asked me, “do you have a home?” To me, this demonstrated her thought patterns and her care for me in a way that was profoundly sorrowful while also indicative of a willingness to be vulnerable, and to express herself.

**Session 3- Open-Ended Collage**
Collage was utilized a second time because of the initial interest in the “Collage your Calm” directive. The facilitator invited participants to create a collage using any images that they felt drawn to. 16 women visited the Women’s center on this day, three asked about the materials, only 1 decided to create a collage. The two women who did not create artwork were resistant to the activity and wanted to take the materials out of the space for other purposes. The energy level in the room appeared low, as evidenced by a lack of movement and lack of conversation. For a period of less than five minutes there was a dispute between two of the women who were escorted out of the area by the shelter’s security team. The women who were not involved with the incident appeared to be frustrated by the disturbance as evidenced by mutterings about the noise made by the two women.

**Goals:** self-expression, assess mindset and preoccupations of participants, introspection

**Observations and notables:** There were fewer women in the Women’s Center on the day of this session, and there appeared to be less interest in the directive. There was one woman who made a collage utilizing the fashion magazines. She disclosed that she was making a collage of her “perfect outfit” including accessories. At this point in time, this was the highest energy level I had perceived in my other conversations in the Women’s Center. This conversation made me feel as though the woman was enjoying her time with the materials and the collage she was making.

**Session 4- Affirmation Station**

As in “Session 2” I entered the room with a box of pre-written affirmations and the materials for women to create their own affirmation posters. On this day the materials included colored paper, markers, colored pencils, crayons, magazines, scissors and glue sticks.
Additionally a box of pre-written affirmations sat on the table beside the other art materials. There were 28 women who visited the Women’s Center during this session, 11 of whom asked about the art materials and directive. Of these 11 women, one created an affirmation, 7 took affirmations from the box of pre-written affirmations and the rest had no interest beyond their initial inquiry. The perceived energy level in the room was low-medium, there was some discussion and movement among the women. The women appeared tired, as evidenced by some napping in chairs and under tables, while others were curious about the art materials, directive, or my presence in their space. While there was some interest, the women seemed resistant to either the directive and art making, or me and my invitation to create something artistic.

**Goals:** affirm client, improve mood, increase expression, introspection

**Observations and notables:** The general attendance in the Women’s Center was higher on this day than many other days which was reflected in how many women asked about the directive being offered. Despite the apparent level of interest there was little participation in the creative aspect of the directive; one woman made a small affirmation collage. The collage was made by folding an 8.5x11 inch piece of bristol board to look like a greeting card, images were then cut from a magazine and glued to one side of the bristol board. The woman grabbed a purple marker and quickly wrote something on top of the images and stood to leave. I asked if she wanted to talk about what she had made; her speech was slurred and she did not want to show her art but she explained, “I want to sleep, I deserve to sleep better.” She left quickly after finishing this statement. Many more women came to take an affirmation from the box, again several of these women wanted to discuss the affirmation that they chose. Women disclosed a range of
information including; how the affirmation relates to their state of homelessness or street-involvement, their former lifestyles, support systems, stressors, fears and suspicions.

**Session 5- Manicures and Temporary Tattoos**

The manicures and temporary tattoos directive was based on the nail care that is already done once a month in the Women’s Center. Typically on nail care day, the women line up to have their nails clipped, filed and painted. For this session temporary tattoos which resembled gold and silver jewelry were also offered. This directive utilizes therapeutic touch to create a sense of holding and safety for the women while giving the opportunity for self expression through nail design and temporary jewelry choice. During the session 30 women visited the Women’s Center, half of the women, 15, asked about the manicures and temporary tattoos. I worked with another intern to paint nails and apply temporary tattoos for 10 women before the end of the session. Some of the women, 4, wanted their nails cut, filed and then painted with a clear coat of nail polish and did not want any of the temporary tattoos. The other 6 women requested colored polishes, some wanted designs painted onto the nails and many of them chose at least one of the temporary tattoos. There was a lot of energy in the room, lots of discussion and movement, only one woman appeared to be napping. Many of the women who visited the station wanted to talk about their lives, past and present. Some of the women expressed gratitude for having their nails cared for as well as for having been heard.

**Goals:** physical contact/therapeutic touch, humanization, care, self-expression, interpersonal relation, physical hygiene
Observations and notables: This directive was different in that it built upon a structure that was already part of the Women’s Center, nail care. The women had more energy, were more interested, participated more and disclosed significantly more than at any other point in the month. Several women disclosed that they used to have their nails professionally done and discussed how much they missed certain aspects of their former lifestyles. One woman sat with me and kept asking for different details to be added to her nails and for more temporary tattoos as she continued to share more of her story.

Found Poetry and Artistic Processing

Many of the interactions from the month were documented and read over multiple times for themes and repetition of phrases and words. Artistic freedom was taken in combining the themes, words and phrases from the month to create found poems. These poems represent the expressions of the guests and my perception of their mood and their attitude toward me and toward others. The first poem, Appendix A, “We Used To...” is based on stories of past lifestyles and the grief and mourning that people experience when the lose so much. I highlighted the speech patterns of a woman who disclosed more as she asked for additional details to be added to her nails. The themes of loss, especially loss of contact with loved ones, were present in many conversations. Appendix B, “They” examines the negative self-dialogue of one of the women in combination with fears that other women disclosed while making art work or discussing affirmations. Appendix C, “Your Kindness Gives Light” was titled after an affirmation which read, “Your kindness gives light to the lives of those around you.” The conversation that was spurred by this affirmation formed the basis of the poem, while the affirmation itself helped to
structure the integration of gratitude that I felt from the women who were able to be vulnerable with me.

My artistic processing was primarily done in collage, one piece was a large painting. Appendix D shows a collage that started after the first session and was completed a week later. The collage shows a man reaching after a swan that is swimming away from him, there are ropes around the swan’s neck, three stands of this rope have small climbers attached. I felt like these women were the swan that I was trying to “catch” trying to get the women to express themselves. The climbers on ropes represent the Women’s Center, the clothing department and the clinic, the only areas of the shelter that many of these women utilize. The piece is about my desire to help these women to seek the use of services they need and to express themselves in a way that is safe and feeling as though I might not be successful. After the first day, I felt as though things were slipping through my fingers and that I would not be able to help if I did not find a directive that would engage these women.

Appendix E was created in response to the “Collage Your Calm” directive. I started the collage during session 3, the open ended collage, as a way of modeling the use of the materials. I had also hoped that using the materials would generate more curiosity and that women may more readily engage with the materials. I was making some progress with these women but still felt as though I was unable to engage the majority. I wanted to create a warm and natural environment in my collage so that I would have a calming image to keep for the remainder of my time in the Women’s Center. After my research was complete I took a studio class, I thought about my time with the women, the conversations and silences, their hands, and I created a painting. Appendix F was painted on brown paper with a mix of acrylic paint and tempera paint. The leaves of the
tree and the texture of the ground was created by tapping my finger into the paint and onto the paper. The trunk of the tree was done by picking up paint and smearing it up and down the page with my hand. The piece was a reflection on the limitation of materials, and resources, available to homeless individuals. The leaves represented the words of the women who chose to share a piece of their story with me, the ground reflects a similar pattern but represents the women who remained silent and the pieces of stories that I will never hear. The trunk is where I would place myself, but I would not say I am the trunk, maybe something climbing the tree to look at and listen to the leaves.

**Discussion**

This study was conducted over a one month period in a specific location with a population that varied greatly from day to day. The outcomes are specific to this location and the population. The population was withdrawn and resistant while they became accustomed to me being in their space. The number of women in the Women’s Center was calculated by observation and does not account for the women who quickly entered and exited the space. Some of the women seemed suspicious of me for the first half of the month and only began to relax in the last two weeks. It is possible that I asked too much in inviting the women to create a collage that represented the concept of calm as Schoop did when she mentioned dance to her group (1974, p.28). High levels of resistance and minimal participation resulted in the few stories and many untold stories representing the group.

**Conversational Themes:** There were two main themes that arose from the conversations with these women; identity and loss. On many occasions these two themes intersected in the story of a woman’s loss of identity. Identity was the most common theme of conversation; women felt
they had lost pieces of their identities, feared that someone had stolen their identity, were
redefining their identity, and some were holding onto and expressing their identity as the only
thing they could still call their own. Many of these women identify as homeless or street
involved, an identity that comes with stigma. Clover writes that the label, “is a designation which
carries with it particularly negative connotations that when absorbed erode understandings of
multiple identities that make a person fully human” (2011, p.20). In this way the majority of
these women had been stripped of their former identities and had only been given the label of,
“homeless woman” as a replacement. Clover’s study allowed the women to develop, “an artistic
identity to combat the stigma” (2011, p.12) of homelessness.

The secondary theme was loss which, for some women, extended to grief. Many of the
women grieved their former lives and lost pieces of their identities; few of them expressed their
grief beyond discussing their wishes for their former lifestyles. Some of the women did speak
about death losses they have endured, each woman felt differently about their loss and appeared
to be in different places with their grief. For one woman, death from overdose had become so
common in her community that she reported, “it doesn’t even surprise [her] these days, just think
about it being more space.” This woman was coping with complex grief and her own closeness
to these situations by reasoning that there would be more space in the shelters after a person
overdosed in the women’s night shelter just days prior to our conversation.

**Personal Themes:** Throughout the month I continually had to adjust the materials and directives
I was providing in the Women’s Center, often feeling a sense of loss for the directives that I
planned and was not able to use or directives I used and found to be unsuccessful with this
population at this time. I grieved these directives by engaging in them on my own,
acknowledging their therapeutic benefits and using them to process my feelings about the sessions and the continuation with the research. When the women did not want to engage with the “Collage Your Calm” directive I created the image in Appendix E. I was modeling the use of the materials for open-ended collage, but was engaging with the previous directive which had not been particularly successful. Creating this image allowed the space to grieve the directive and gave the sense of calm strength that I needed to continue the work without being discouraged.

Identity was another theme that I shared with the women, contemplating my identity in my own eyes as well as questioning how the women saw me. I wondered if they thought I was wealthy, or if they could tell I had come from poverty, whether they thought I was from Boston or if they could tell I was out of place in the city. I was reminded once more of the early work of Trudi Schoop, in the days when clients would ask, “What ward is she from?” (1974). Schoop entered the space with the larger-than-life identity, “dance therapist” as I imagine I entered with my identity as an art therapist. While the identity of expressive therapist serves us well, I feel that it can also hinder relationships with clients who are more resistant. I wondered if I was being seen as an artist and whether that intimidated the women. I wondered if my identity as a therapist, a counselor, a helper, made the women suspicious of me in the ways they were suspicious of other helping professionals. Some of the identities I hold and some that were projected onto me by the women likely limited the information I was given as well as limiting my understanding of the information I was given.

As the women spoke about their own identities I heard many stories about relationships and the theme of connection started coming into my mind and creative work. The theme of connection is one that stood out as it was also the goal of my work in the Women’s Center, one
which I hoped my directives would lead toward. I wanted the women to feel that they could connect with another person and to be comfortable enough to express their thoughts and feelings. I had hoped that creativity would allow for more interpersonal connection in the Women’s Center. It appeared that once the women became more comfortable with me they became more comfortable with art making and creative expression. This movement toward self-expression could represent a willingness to engage with someone in the future. My response to my time in the Women’s Center, Appendix F, reflects the relationship I had with the site as a whole as well as my relationship with the women. It was a response to their stories as well as a response to the relationships I have experienced, professionally and personally. The tree feels like a community where each leaf depends upon the next for something, be it nutrients, or sunlight, or just being in the proximity of other leaves.

Conclusion

The women were least engaged with the collage directives, more engaged by the affirmation directives and most engaged when receiving a manicure. Affirmations allowed many of the women to open up to a small degree to disclose something about their past which often supported Larrabee’s assertion that affirmation techniques allow for facilitation of conversation with clients who are resistant to counseling (1982, p.109). The nurturing touch (Durana, 1998, p. 271) and permission to be creative with their requests allowed the women to feel safe and free in their expressive manicures and temporary jewelry. It is possible that the differences in race, ethnicity and language contributed to the resistance to the directives and to an incomplete understanding of the women in this space. Despite resistance some women felt comfortable
discussing their histories and disclosing personal information, and some women felt they could express themselves creatively, visually and verbally. The feeling of safety in expression allowed the women to disclose more within sessions focused on a nurturing activity, such as nail care.

While in the Women’s Center some of the women asked about coloring pages which I did not have at the time. While I do not support the use of coloring pages as an art therapy directive, I feel that they could be used as a way for resistant clients to explore and engage with art materials. Since the end of my time in the Women’s Center a large donation of coloring books and colored pencils have come in to the building, some of which were given to the Women’s Center as a way of continuing to explore their creativity. I believe that if the women choose to use these coloring pages that they will become more open to other low-risk art forms which could help with self-expression.

There is room for additional research in providing a nurturing, therapeutic touch to clients, including the use with survivors of domestic violence and homeless women. The use of Art Therapy with homeless women is another topic that deserves to be more heavily researched. It is my belief that homeless women could benefit from creative expression but stay away from studio spaces in favor of staying in a safer space, like the Women’s Center. The women should not have to leave the safety of these spaces in order to have the opportunity to express themselves. The women could benefit from having the ability to express themselves visually and having regular opportunities for activities that combine creative expression with therapeutic touch.
References


Appendices

Appendix A
“We Used To...”

Back then, before, you know...
We used to do things like this, like-
Could you do one more thing for me?
It’s just what we used to do together as a-
Can I have more?
Clear coat?
Clear coat and silver? Wait-
Can I have clear coat, silver and glitter?
We would go together every weekend.
My daughter, even my son-
It was like being close.
We were a real family.

Appendix B
“They”

She stole it from me;
It was mine and she’s selling it.
It’s my story, it’s my life.
She’s out to get me and they won’t let me stay.
It’s her fault, that bitch.
She’s the one who isn’t allowed.
She made a name for me,
But it’s mine.
This is my body.
This is my flesh.
Cut my hair, wear a wig.
Take my apartment.
This is my flesh.
Appendix C

“Your Kindness Gives Light”

Paint without canvas,
What does that mean?
I think it must be true, I hope that it is.
You care about me,
I can tell.
Can I get anything for you?
Coffee, three feet away?
A bagel from the end of the table?
Are you sure?
This means so much to me.
Are you sure there isn’t anything-
I’d like to do something for you.
Do you have a home?
Appendix D
Appendix E
Appendix F