Pushing Back on Patriarchy Through Feminist Expressive Arts Therapy

Rosanna Alejo
Lesley University, ralejo@lesley.edu

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Pushing Back on Patriarchy Through Feminist Expressive Arts Therapy

Capstone Thesis

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Rosanna J. Alejo

Expressive Arts Therapy

Dr. Elizabeth Kellogg
Abstract

Utilizing a feminist expressive arts therapy stance and a literature review method, this thesis is based upon the telling of the authors story for a cathartic exploration of pushing back traditional patriarchy viewpoints. Various topics are explored, including the role of gender stereotypes, benevolent sexism, and the patriarchal lens of the Diagnostic Statistical Manual (DSM).

Patriarchy, feminism, and expressive arts therapy will be reviewed, as well as the use of the arts as a tool used to empower individuals. Lastly, a discussion on the importance of combining feminist therapy with expressive arts therapy is explored.
Pushing Back on Patriarchy Through Feminist Expressive Arts Therapy

This thesis will take an untraditional approach to introduce the subject matter. It will share the telling of one Latina’s story, and my experience of patriarchy in order to paint a picture of what patriarchy looks like in the microsystem of the home. It will take the reader on an adventure into the past, in order to reach the depths of the reader’s soul. This is done in an attempt to clarify my perspective on choosing the subject matter that will be analyzed in this thesis.

This single case study is in no way attempting to generalize my lived experience, with the lived experience of other Latinas. What it I am attempting to do is to tell my story, a story of a Latina. I will be using my cathartic storytelling as my personal feminist expressive arts therapy, and with such a release I will be attempting to let go of some of the harmful effects patriarchy had on me. Since this thesis focuses on pushing back on patriarchal ways, I thought it fitting to take a untraditional approach on an academic thesis.

Introduction

What happens to the self when one listens to a magical tune that makes all of the senses dance and smile? What happens to the self when one uses color to reinforce what is happening inside, where no one but the self has access to? What happens to the self when one uses movement to convey the emotions that one is too coy to share with the outer world? What happens when drama is used to share story? What happens when a story is used to transmit emotions into the listener or readers heart? The powers of the arts are unlimited, and in this paper, I wish to share my testimonio (testimony). I wish to use the telling of my story as a tool in letting go of patriarchal restraints that have been weighing me down for so long, as well as an avenue used to elaborate on my personal experiences with patriarchy.
This paper will take the reader deep into the story of me. It will take the reader down the rabbit hole that I have lived through and it will challenge traditional academic papers. The purpose of this paper is to share my testimony, to share my story, and to help other young Latin women that may be going through what I went through. I want to share my story, and encourage those who are currently living a similar experience. I want to tell them that they are not alone.

For me, storytelling and the arts have largely been an outlet to let my emotions out. They have allowed me to dive deeper into myself and explored my inner workings, my deep and penetrating emotions. They have given me a clear view on how I view myself in society. They have been a tool that I have used to heal from my sufferings. This, my own internal processing system through the arts, has been one that has been used by many before me. “Expressive arts therapy has been linked to the traditions and cultural precedents of world healing practices because they frequently involve the integration of all the arts (McNiff, 1981 quoted by Malchiodi, 2003, p. 106”

In the following section, I will let the readers read first hand my battle in a patriarchal home in order to give context for the importance of feminist expressive arts therapy. In the sections following my testimonio (testimony), I will explain what feminist expressive arts therapy is and how I arrived at such a concept.

**My Relationship to Patriarchy**

From the mere moment that I was born, and my parents were told that I was a girl, the expectations of who I was began. I was expected to look at the world from behind a glass wall. I was there to be seen but not heard. I was expected to help my mother with the chores, while my brother could be free to climb trees. I was expected to wear dresses, smile, and be a polite young lady. I was expected to be wary of any man, because all they were out to get was my flower. My
flower was the most important thing, and I was expected to guard it with my life. My parents and my society were molding me to be a “good” and “respectable” young woman.

When I began to fight back against those social norms, I was answered back with strict rules. I was now unable to leave the house for anything other than school. At certain points of my adolescence, I was not even allowed to speak on the phone. So much so, that one of the chords of the land line was removed, so I would hear the phone ringing, but had no way of answering. From my childhood days with my father, I remember being a prisoner in my beautiful glass house. Needing for nothing and wanting for everything that was outside of my reach.

With all of this said, I need to clarify that I was not always locked up. There were occasions in the weekend when I would go to the finca (estate) with my dad, where I was allowed to enjoy nature. One might think that my push back to societal norms meant that I was a troubled child, but in reality, all I did was start being interested in boys. My father, being raised with “traditional” Dominican patriarchal ways, intended to raise me, his first-born girl, within the same principles.

With all of this said I want to clarify views of my father that are beginning to form. In no shape or form do I consider my dad to be a bad father for raising me in the way he did. He did the best he could, being a single father of two young children, and only having the parenting guidance of what he had seen his parents do with him.

It was a beautiful morning, and I woke up excited to go to the finca (estate). The finca (estate) is a beautiful piece of land that my dad had inherited from his father, on which he had built a house and an underground pool. I woke up energized because I knew it was going to be a fun day filled with sunlight and nature. At that moment, I thought it would be like any other day, but I was so wrong.
My dad was going to have friends over, his old-time friend from when he first had moved to the United States. His friend who was also his old employer. A tall, funny looking man with an orange beard. The treat was that he had travelled over with a few of his nephews. Among them was a dashing seventeen-year-old with a magnetic smile that made my knees grow weak every time it was directed towards me.

At the time, I was a scrawny fourteen-year-old, who was craving and delighted with any positive attention directed at me. The only time that I had to socialize with the opposite sex was when I was around family, since my dad had me under lockdown in the house.

Every time I would look at that cute boy, he would smile at me. It was an innocent flirtation that was fully welcomed by my part. I then proceeded to go inside the house to get a glass of water to help alleviate the parched feeling that had suddenly come over me. I get my glass of water and then turn around. There stood the same divine creature that I had been crushing on all morning. He stood there smiling at me, and I smiled back. It was like if we were giving each other mutual permission for what followed. He approached me, brushed my hair off of the side of my face. The mere touch of his fingers on my face made me blush. Then he leaned in and our lips met. At the very moment, when my heart was singing, my father walked in. It was like if he had a gut instinct of what he was going to find by walking inside the house.

My dad rushed into the room, pushed me to side and punches my crush in the face. He then pulled me into his camioneta, his old and beloved pick-up truck, and hit the gas. He sped like crazy, that before I knew it I was in my house, and in his room receiving insults and getting beaten. If I were to be asked about how hard he hit me, I wouldn’t be able to answer. I blocked most of it out. All I know is that I had bruises for weeks after that. From this incident, my lockdown now became high security.
Special note: This is a part of my past that I have not shared with others before. Until now, I have been ashamed to share it because, a part of me believed all the names my dad called me on that day. I thought there was something wrong with me, and I should take my indiscretions to my grave. That is why, the sharing of this story is cathartic to me. It has allowed me to set free a memory that has had me trapped for years.

This was my new reality, while living under my dad’s roof. I was the whore, I was the bitch, I was the one asking for it, and because of this I could not be trusted. One may think that this was my reality only at home, but the truth of the matter is that this blame game was played in the society I knew. I have had to always be cautious of what I say and do around men. I needed to maintain distance and not smile too much, because they will always think I want something.

Walking down the street in my town, there was not one occasion that I wouldn’t be stared at like I were naked or hear Pst Mami, que Buena estas!!! (Pst.. Mami, how good you look). This was a form of cat calling that was usual when a female stepped out on the streets. I had always been told to keep a watchful eye because men were lurking. I was raised to be afraid and very cautious of my actions.

I wonder now, why was I the one who had to be afraid, and not the men to be more respectful? Why is it always up to me, and my fault when it comes to what happens to me? Why has it always been this way? It comes down to the fact that in a patriarchal society, this has been the reality for most females. In a patriarchal society, women are considered less than men, and thus, men can do anything and everything to women without having to take any blame.

Even though I lived like a prisoner for most of my teenage years, I have forgiven my dad. He locked me in my house because he was afraid that I would throw away my life for some guy.
The thing is that it wasn’t up to him to lock me in my house, especially if he did not have the same standard for my younger brother. What my father did was what I have seen many Hispanic fathers do their daughters, benevolent sexism. A form of sexism that is subtle and stems from the mindset that women need protection through any means necessary (Barreto & Ellemers, 2005).

Many Dominican girls go through the same thing that I went through as a teen. Fathers, with the girl’s best interest in mind, do injustices to their daughters. By not allowing them to learn on their own what is right or wrong, by “protecting” them, they are actually hindering their spirits and limiting their potential. I had to learn all the things that I didn’t learn as a teen in my twenties. In the age, in which I should be focusing on my career, I have been learning how to be independent outside of the protection of my parents.

**Literature Review**

I have just shared my personal testimonio (testimony), in an attempt to give the readers context on why I believe feminist expressive arts therapy to be a valuable approach in pushing back on patriarchal views. In the following sections I will be diving into literature that support my perspectives. I will first define certain key terms that will be necessary to understand before getting to the subject on patriarchy. Then feminism, and feminist theory will be explored, leading up to the arts and expressive arts therapy. The final subject that I will introduce will be my discussion on feminist expressive arts therapy.

**Gender Stereotypes**

Throughout time, women have been described by femininity, fertility, and love. A perception of what a woman is, and what a woman should thrive to be. Yet, what many fail to understand is that this perception is a stereotype perpetuated by a patriarchal society. From the mere moment that a child is born, society begins to dictate how they should act, feel, and be. In
this section I will elaborate what gender stereotypes are, how they can sometimes be subtle, and how they have infiltrated in the field of psychology.

**What are Gender Stereotypes?**

According to Planned Parenthood, “gender roles in society means how we’re expected to act, speak, dress, groom, and conduct ourselves based upon our assigned sex” (www.plannedparenthood.org). The key point to pick up in this definition is “expected.” Planned Parenthood also emphasized that there are expectations placed upon individuals very early on, and they have no say in them. These expectations mold the individual into becoming what others think they should be, and not who they truly are. This in turn may lead to a lifetime of searching for their “true selves.”

Prentice and Carranza (2002) emphasized that sometimes the stereotypes that individuals are scrutinized under tend to be due to certain societal “prescriptives.” They argued that the qualities used to describe the female and male sex are the ones that society “requires” of those born with such genitalia (Prentice & Carranza, 2002). They stated that most gender stereotypes are linked to traditional social roles (Prentice & Carranza, 2002).

Broverman, Vogel, Broverman, Clarkson, and Rosenkrantz (1972) defined sex-role standards as “the sum of socially designated behaviors that differentiate between men and women” (p. 60). These roles play a huge role in the development of each individuals, and ultimately dictates certain traits in their personalities. They stated that having a predisposed image of who one should be from day one, can be a very limited reality to the individual (Broverman, Vogel, Broverman, Clarkson, & Rosenkrantz, 1972, p.60). It can also impact how others around them treat and act like around the individual. In some occasions, the treatment can be subtle, and seem good hearted. With time, it can show its true colors in the form of sexism.
Benevolent Sexism

Women experience many stereotypes that cause them to question who they are. They are constantly bombarded with expectations of who they should be. These stereotypes can sometimes be blaring to the human eye, while other times can come disguised with positive intent. Be it out in the open or in “good” nature, gender stereotypes place the person inside a constraint of expectation that should be challenged. In this section, I will introduce a subtle form of stereotype called benevolent sexism, and the negative implications of such stereotype.

Benevolent sexism is a term coined by Peter Glick and Susan T. Fiske, in their article, “The Ambivalent Sexism Inventory: Differentiating Hostile and Benevolent Sexism” (1996). They defined the term as “a set of interrelated attitudes toward women that are sexist in terms of viewing women stereotypically and in restricted roles but that are subjectively positive in feeling tone (for the perceiver) and also tend to elicit behaviors typically categorized as prosocial (e.g., helping) or intimacy-seeking (e.g., self-disclosure)” (Glick, & Fiske, 1996, p. 491). Glick and Fiske (1996) expressed that benevolent sexism is not something that should be accepted, because even though it may be in good nature, it is a subtle form of sexism. Initially it can be brushed off as inconsequential, or in meaning no harm. With time, this form of sexism can be deemed oppressive and perpetuate gender stereotypes (Barreto & Ellemers, 2005).

Barreto and Ellemers explored the definition of benevolent sexism in comparison to hostile sexism. They explained that benevolent sexism is when sexism occurs in “positive” manner, in which the perpetrator acts on their patronizing beliefs about women (2005). Benevolent sexism can be seen when the person exhibits protective paternalism (the belief that women need to be protected by men); complementary gender differentiation (the belief that women have domestic qualities that few men possess); and heterosexual intimacy (the belief that
women fulfill men’s needs) (Barreto & Ellemers, 2005). They defined hostile sexism as much easier to notice since it is direct antipathy towards women (p. 634). These two forms of sexism are similar in that they rely on the gender stereotypes in which that women are dependent on men (Barreto, & Ellemers, 2005).

Barreto and Ellemers (2005) conducted a quantitative study with 235 students at a Dutch University, exploring if individuals perceive benevolent sexism as a form of sexism. Their results indicated that “both men and women perceived people endorsing hostile sexist views as significantly more sexist than those who voiced benevolent sexism” (Barreto, & Ellemers, 2005, p. 639). Barreto and Ellemers (2005) also stressed the importance of this finding, because it indicates that individuals do not perceive benevolent sexism with a negative connotation; those who are exposed to this form of sexist behavior would not challenge it, thus, the person may continue to accept such actions. This form of sexist behavior can be so subtle that it can sometimes be found in an institutionalized format as opposed to individualistic mindset. Institutions like the Mental Health Field is one that has been carrying this stereotype from its inception.

**The DSM and traditional patriarchal perspectives**

There are institutions placed in society that come from a benevolent sexist perspective. One particular institution is the one of mental health, that, according to the American Psychological Association bases its diagnosis on the guidance of the Diagnostic Statistical Manual (DSM; www.apa.org). This section will briefly touch upon reasons why a feminist approach is necessary in using this diagnostic tool and in the field of mental health.

According to the APA, the DSM is a “handbook used by health care professionals in the United States and much of the world as the authoritative guide to the diagnosis of mental
disorders” (“DSM–5: Frequently Asked Questions”, n.d.). In Feminist Approaches to Art Therapy (1997), the author argued that “even though the DSM III-R claims to be an impartial descriptive inventory of symptoms, it was developed by white, middle-class, heterosexual males and based on their definition of what is normal, abnormal, mental health and mental illness” (Burt, 1997, p. 101).

As such, Burt (1997) highlighted that the DSM III and IV has a male perspective with regard to the diagnostic criteria. “In the DSM diagnostic categories are viewed as objective truth rather than as the highly subjective constructs of the dominant group in our society which continues to oppress women, other races, cultures and sexualities” (Burt, 1997, p.101). Abell and Dauphin (2009) suggested that “gender bias in the diagnosis and treatment of children ultimately serves to foster patriarchy, by reinforcing existing patterns of maternal child rearing rather than promoting the goal of shared parenting” (p. 117). These objective diagnostic categories have been an issue throughout all the versions, and will continue to be this way until a more feminist approach is taken.

Burt goes back and forth between DSM III and IV, explaining how the DSM III had no women or minorities on the panel that created the guidebook. The DSM IV did have some women and minorities, but “the damage has been done” (Burt, 1997, p.101). The author’s argument comes in through the lens that the criteria for a healthy woman (mental health) differs from that of healthy men. Deeming women as healthy when “being more submissive, less independent, less adventurous, more easily excitable in minor crises, having their feelings more easily hurt, being more emotional, more conceited about their appearance, less objective, and disliking mathematics and science” (Burt, 1997, p.101). But later listing the same qualities as the primary symptoms of various pathologies, borderline personality disorder being one of them.
These are a few of the ways in which the field of mental health has sustained a patriarchal viewpoint to which all women have been subjected. It is because of this that an action to move away from these perspectives and move towards one with a more feminist standpoint is encouraged for the fields of mental health (Burt, 1997).

**Patriarchy**

Beginning from the cradle and on, women learn their roles in society by what they see their caregivers do. What I have seen is a world in which men have the final say and even have the right to dictate how women should act. In my culture, I have observed that the father is respected and obeyed without question. This is done so because the father is seen as the protector and provider of the home, a perspective that comes from patriarchal traditions that I have seen still being practiced by the Latin community. This section will elaborate on the definition of patriarchy.

According to Merriam Webster online dictionary, when the word patriarchy is broken down, the root word arch which means ruler/leader, thus the word patriarch is defined “man who dominates something, even if it’s just a family” (www.merriam-webster.com). The Oxford online dictionary highlight that the word patriarch comes from the Greek word patriarkhes meaning “chief or head of a family,” giving the definition that patriarchy is “a system of society or government in which men hold the power and women are largely excluded from it” (Patriarchy, n.d.).

Gonzalez, Sable, Campbell, and Dannerbeck (2010) highlighted that “patriarchy has often been associated with women’s subordination to men” (p. 552). They went on and listed different definitions that they have found of patriarchy.

- Arat (1989) defined patriarchy as “the structure of power that endorses male supremacy.”
Walby (1990) defined patriarchy as a “system of social structures and practices in which men dominate, oppress and exploit women.”

Delphy and Leonard (1992) see patriarchy as the “exploitation of women in household labor.”

Haj-Yahia (2003) highlighted that “in Arab societies, women are expected to be dependent on their husbands and obey them, satisfying their husband’s needs, taking care of their children, while husbands provide economic support for the household.”

All of these definitions attempt to describe that patriarchy is an individual’s problem, and not a societal issue. Kashtan, in her article Why Patriarchy is Not About Men: The Underlying Principles of Patriarchy are Separation and Control, elaborated on how patriarchy is a bigger issue that human kind is faced with. She defined patriarchy as “a system that encompasses a worldview, arrangements about how we live as humans with each other on this planet, implicit blueprints for what kinds of institutions we would create, and guidelines for what to do with our young to prepare them for the system itself” (Kashtan, 2017, pp. 5). She urges the reader to see the bigger picture and to understand that the “underlying principle of patriarchy is separation and control” (pp.5). With inaction on the issue, one is perpetuating dominance and submission. Kashtan stated that “We pride self-control and frown on “emotionality”; we operate, organizationally, in command and control forms” (pp. 6). The author is urging society to have a more feminist stand in the world.

**Feminism**

Throughout the ages, women have been told that their place in society is at home with their children. They are told that they could do anything they want as long as it included being a wife and mother (Horne, Mathews, Detrie, Burke, & Cook, 2001). Meaning that women should
have to balance family and their careers, if they truly wanted a career. On the other hand, most men are praised when they “help out” with the family (Horne et al., 2001). This inequality of the sexes (in particular woman’s rights) is what feminists advocate about (Feminism, n.d.).

Helene Burt (1997) defined feminism as a movement which primary focus is to bring equality between women and men in society. She stated that feminism is “the movement to equalize the position of women in relation to the position of men in our society” (p.98). “It has been feminism which has revealed the power differential between men and women in our society as well as the gender bias in psychological theory and practice” (p. 99). In this section I will discuss feminist therapy, as an alternative approach to traditional form of therapy. I will also discuss the modern-day pushback to feminism.

**Feminist Therapy**

Feminist therapy is defined by “its analysis of the power differential between men and women and how this power differential is evinced socially and politically” (Burt, 1997, p.99). In feminist therapy the therapist plays a more active role in encouraging awareness that the clients’ circumstance is not only due to their actions but also the patriarchal society in some ways are also responsible (Burt, 1997).

Burt (1997) further argued that the therapist should make an emphasis in therapeutic relationship to help the clients understand that society has played a big role in their current predicament. “An understanding of the personal as political involves acknowledging that each woman’s personal experience is also influenced by the position women have in our society. The feminist therapist helps her client to see that some of her problems are socially constructed” (p. 99). With this, Burt is not attempting to remove all responsibility from the client, but attempts to assert an awareness of a bigger picture and in turn help develop a certain level of empowerment.
While reading these statements by Burt, one might think that Feminist Therapies main goal is of having females relinquish personal blame, but in reality, they are attempting to level the playing field and helping the client acknowledge that the systems in place have influenced their life in multiple ways. “The feminist therapist values androgyny, or having the characteristics of both sexes, in that she believes that both men and women are limited by their sex roles and that both sexes can benefit by an assimilation of the characteristics ascribed to the other sex” (Burt, 1997, p. 100).

Crossman (2018) articulated that feminist theory does not attempt to imply that the female gender is better or superior than other genders, on the contrary it attempts to promote equality between genders. “Feminist theory… shifts its assumptions, analytic lens, and topical focus away from the male viewpoint and experience and toward that of women” (Crossman, 2018, pp. 1).

**Modern Push-back on Feminism**

Even though feminism and feminist theory can be very beneficial to women in society, there is a lot of push back in being considered as a feminist. The term feminist is commonly used with a negative connotation, providing the assumption that feminist women are gay and/or hate men (Horne, Mathews, Detrie, Burke, & Cook, 2001).

The authors of *Look it up Under ‘F’: Dialogues of Emerging and Experienced Feminists*, compared two groups of women in order to discover feminist themes within their dialogue (Horne et al., 2001). The women compared are emerging feminists and experienced feminists. The emerging feminist were four women who in the previous two years had begun identifying as feminist. They were doctoral students in a counseling psychology program ranging in age between mid-twenties and mid-forties. The experienced feminists were four women who
discovered feminism between the 1960’s and 1980’s. Their age range was between mid-forties to mid-sixties, and were identified as noteworthy feminist scholars and psychologists.

The data was gathered through group interviews, in which they were divided by either emerging or experienced feminists. The two groups were interviewed separately and asked open ended questions. For the emerging feminist, the highest-order categories in the analysis were: Initiation into Feminism, Integration of Feminist Identity, and Realization of Feminist Subtexts (Horne et al., 2001).

In the category of Initiation into Feminism, the participants described the situation in which they became exposed to feminism which was mainly through exposure in graduate training. They stated that before this exposure they felt intimidated by “feminism” because of media’s negative portrayal of this approach (Horne et al., 2001). In the Integration to Feminist Identity, the participants talked about the process of them integrating their new beliefs into their practices and expressed the difficulty of this due to the “radical” perception most individuals have towards feminism (Horne et al., 2001). They also expressed wanting to connect to likeminded individuals, but not having resources available. Lastly, in the category of Realization of Feminist Subtexts, the participants mentioned the inability to un-see subtle forms of oppression.

For the experienced feminist, the highest-order categories were: Initiation to Feminism, and Gifts of Feminism. In the category of Initiation to Feminism, the participants stated that they were highly influenced to “awaken” into feminism by the Human Rights, Civil Rights, Womanist, and Women’s movement (Horne et al., 2001). The second category was the Gifts of Feminism, and the participants stated that “finding feminism provided them with context and
label that validated the experiences of women in general, as well as each participants’ experiences individually” (Horne et al., 2001, p. 13).

The results of this study indicated that exposure to feminist theory played a large role in the individuals identifying as feminist or not. The experienced feminists were exposed to feminism through big social movements like the women’s movement, the Civil Rights Movement, and the human rights movement. These women found a community with likeminded individuals. While the emerging feminist were introduced to feminist theory in higher education, which means that until that point all they knew about feminism was what the media explained it as. The media has depicted being feminist as something negative, and as a description of someone’s sexual preference (being lesbian). The overall difference came down to exposure to feminism, and the “radicalness” behind the word. Horne, Mathews, Detrie, Burke, and Cook (2001) urged the need for early exposure to feminism, in order to push back the stigmatic lens that media is providing.

In this section, I briefly described reasons for modern day pushbacks on feminism. These pushbacks are due to the lack of resources supporting the cause, and also the negative illustration the media continues to give on the term feminist. I introduced this because I think it is important to understand why the feminist movement has not continued to thrive as it did in 1960’s and 70’s. In the following section I will introduce expressive arts therapy, I will define it and elaborate on the importance of the arts in mental health. This section will serve as a base in the subsequent introduction of feminist expressive arts therapy.

**Expressive Arts Therapy**

In this section, the Expressive Arts Therapies will be introduced and defined. This will lead to supporting evidence as to why the arts are important aspects of recovery against a
patriarchal standpoint. I will introduce how the arts can be used to empower individuals, and how it can also unite communities for collective action.

**What is Expressive Arts Therapy?**

“The art of being with another person and listening to what is said and what is implied becomes an act of “tuning in.” In similar ways artists, musicians, dancers, poets, and actors are trained to open and tune their senses toward an authentic expression of the human condition in order to effect a kind of awakening in the witness, audience, listener, or reader.” (Kossak, 2009, p. 13).

Malchiodi (2003) defined expressive arts therapy as “the therapeutic use of art, music, dance/movement, drama, and poetry/writing”. Donohue (2011) stated that “expressive arts therapy connects the creative arts, the imagination, arts rituals, and the creative process into a therapeutic approach (p. 497). She further stated that, “Expressive arts therapy ignites the creative process in each person or group through the use of creative expressive techniques to facilitate healing and growth” (Donohue, 2011, p. 497).

The expressive arts therapy is sometimes described to be intermodal or multimodal, which means “moving from one art form to another” (Malchiodi, 2003). Estrella (2005) explained, “Expressive therapists use a multimodal approach – at times working with the arts in sequence, at other times using the arts simultaneously, and at still other times carefully transitioning from one art form to another within the therapeutic encounter” (Estrella, 2005, p.183, as cited in Kossak, 2009, p. 13).

A renowned pioneer of expressive arts therapy is Natalie Rogers. She applied her father’s (Carl Rogers), person centered approach to the expressive therapies. The person centered expressive therapy approach affirms the client knows what they need, and as such are active
participants in the therapy process, even deciding what the treatment goals will look like.

Natalie Rogers (1993) believed in the interplay between the arts in therapy, which she coined as “the creative connection.” Rogers believed that “one art form naturally stimulates another; for example, creative movement can affect what we express through drawing, and drawing may activate what we feel or think” (Malchiodi, 2003, p.108)

The whole basis of the creative connection is that “the individual is central to the process and determines, with guidance and facilitation of the therapist, the direction the process takes and the art forms used” (Malchiodi, 2003, p. 108; Roger, 1993). With this, Rogers (1993) highlighted the control that client has in the therapy session, emphasizing the principle that the client should have an important role in the treatment of their mental health.

Rogers (1993) stated that the primary goal of expressive arts therapy is not the aesthetics, how the end product looks like, but the use of the arts are necessary tools for self-expression and insight (Malchiodi, 2003, p. 107; Rogers, 1993). Malchiodi (2003) stated that basis of expressive arts therapy is to “allow people to explore unknown facets of themselves, communicate nonverbally, and achieve insight” (p. 107). Expressive arts therapy is an innovative approach to therapy, in which the participant is cautiously directed to go deep into their subconscious and allowed to explore what it looks like. Donohue (2011) stated that the expressive arts therapy “weaves forms of creative expression into integrative arts processes for therapeutic healing, self-awareness, understanding the psyche/ soul, accessing alternative states of consciousness, individual and collective creative growth, community building, and political action” (Donohue, 2011, p. 497).

Expressive arts therapy focuses its approach to be unique to each individual, and it is cautious to the client’s needs (Kossak, 2009). It is “rooted in the capacity of the human
imagination to reveal creative solutions to complex problems” (Knill, Barba, & Fuchs, 1995; McNiff, 1981; Rogers, 1993; as cited in Kossak, 2009, p.13). Kossak is guided by Natalie Rogers theory that the client already has inside themselves the cure to their suffering.

The job of the therapist in the expressive arts session is one of “understanding, support, deep listening, a willingness to hold and give space, the ability to tolerate chaotic or unpredictable states, and empathy…” (Kossak, 2009, p. 13). In the session, the therapist and client develop a therapeutic connection, that is categorized by staying “centered, aligned, present, and alert to the moment” (Kossak, 2009, p.13). “It is this kind of mutual resonance experienced as connectivity, unity, understanding, support, empathy, and acceptance that can contribute greatly to creating a sense of psychological healing.” (Kossak, 2009, p. 13). It is the client, therapist relationship, along with the interplay of the arts, that supports healing.

Even though the premise of Expressive arts therapy is one that predominantly is focused on the needs of the individual, it continues to maintain a certain level of distance between the therapist and the client. Expressive arts therapist attempts not to impose their world views onto the client. The practices that are followed are ones that focus on the individual and the individual’s needs, yet maintain the therapist always at arm’s length from the client. This approach always leaves the clinician’s experiences out of the therapeutic relationship. The flaw in that model is that the therapist cannot utilize their own lived experience to help the client. Not only that, but the constraints of traditional forms of therapy limit the client-therapist relationship and makes it more difficult to reach deeper and more beneficial levels.

There is movement in the expressive therapies to move away from the traditional and stoic perspectives. Mitchell Kossak (2009), explained the therapeutic encounter between the client and therapist and largely is stemming from feminist perspective. One in which the
boundaries of the session become very much non-existent as the therapeutic attunement is one of authenticity. In some ways, the expressive arts therapies already attempt at a feminist perspective, but is limited by the constraints of the Mental Health Counseling Field.

**Arts to Empower**

Art has been used for centuries as a form of expression, as a form of communication. When one is without words, one can use art as a tool to express what one is feeling. It can be used to understand that which has no words, it is a form of language. This form of language can be a powerful measure for those who are oppressed and cannot openly say their thoughts without fear of repercussion. Art can also be used to tell one’s story to the world. This act alone can bring empowerment to individuals. Not only can it be used to empower, it can also be used as a researching tool and this can help the language of art be legitimized.

In “Researching Creations: Applying Arts-Based Research to Bedouin Women’s Drawings”, the authors inform the readers what art based research is, and how it can be used to understand and empower women from different cultures. Huss and Cwikel (2005) explained that arts-based research is a form of research that uses “the arts as a method, a form of analysis, a subject, or all of the above, within qualitative research” (p. 43). In essence, the art is the data that allows for the researcher to make any claims.

Huss and Cwikel (2005) stated that this form of research can be used to empower women because it allows the women to have a voice and neutralize the power dynamic between the therapist and the client, which, in this case, is also the researcher. The researchers stated that sometimes, when the language practiced in therapy is not in the participants native language, the client would give the answer that they thought the interviewer would want to hear in order to be polite (p. 45). “By handing over creativity (the contents of the research) and its interpretation (an
explanation of the contents) to the research participant, the participant is empowered, the relationship between researcher and research participant is intensified and made more equal, and the contents are more culturally exact and explicit, using emotional as well as cognitive ways of knowing” (Huss & Cwikel, 2005, p. 45).

While original attempts in engaging the women were unsuccessful, Huss and Cwikel (2005) noticed very early on that the women from Bedouin culture would not respond to traditional forms of inquiry. Huss and Cwikel (2005) proceeded to incorporate a new form of communication. They hypothesized that introducing art would equalizing the power in the therapeutic relationship, and help the women be more open about their needs (Huss & Cwikel, 2005). Huss and Cwikel (2015) also noticed that the women, rather than being completely candid, would focus on giving the “right” answer, or being polite. The concern of the researcher was to first use art as a form of “empowerment, enrichment, or self-expression” (Huss, & Cwikel, 2005, p. 48), second was to use art as a research method, “or a way to understand the concerns of the women” (Huss, & Cwikel, 2005, p. 45).

The research was conducted on three ongoing groups of poor Bedouin women living in Negev. The three groups were of: single mothers in a support group, women in a vocational training to open early childhood centers, and women without writing skills wishing to learn arts in order to later make products to sell. Although it was a small sample size, the results indicated that the women opened up more when the art therapy was introduced.

Huss and Cwikel (2005) incorporated the arts as another language that could clearly be understood by both client and clinician. This is important because language can be a detrimental force in successful therapy. For Latinas whose primary language is Spanish, if there is no clinician that can effectively communicate with them, the arts can be used as a communication
tool. In the following section I will introduce how the arts can be used to unite a group of individuals whom have the same goals. I will include this because it is another way in which the arts can aid Latinas in building community and pushing back on patriarchal traditions.

**Art for Collective Action**

Not only can the arts be used as a communication tool in order to better reach a group of individuals, it can be a way of giving individuals a voice, a voice to speak their truth and stand against all that has hindered their spirits. When this speaking of truth happens in a collective manner, it can initiate change. Arts are a powerful tool that can also be used as a form of activism.

Activism and empowerment are very important aspects of a strong and united community. Yet, are very difficult to instill if there is an aspect of fear embedded deeply in the individuals of such communities. Arts can be a way to bypass the fear, and deeply root a form of purpose in each person. “Art as communication (rather than as therapy) can be defined as the association between words, behavior, and drawing created in a group setting” (Huss, & Cwikel, 2005, p. 44). The following study used art as inquiry (art-based research), in order to give communities of individuals a platform to communicate and explore shared experiences. This with the purpose of uniting them and helping them discover the power that they possess.

Kapitan, Litell, and Torres (2011) explored art-based participatory action research (PAR) in the hope to “strengthen individual and cultural identities, and support gender analysis, participatory democracy, and small-scale economies” (p. 65). Their focus was on the collective trauma experienced by the individuals in Nicaragua, whom have experienced a number of natural disasters, long-lasting dictatorships, corruption, and poverty. The efforts of this analysis are
predicated on the theory that “oppressed communities are capable of questioning their reality and collectively solving their own problems” (Kapitan, Litell, & Torres, 2011, p. 64).

The research was conducted in a longitudinal format, in the span of 6 years. An annual 3-day retreat was sponsored by Cantera, a non-governmental organization devoted to community development and education in Managua, Nicaragua. Participants were diverse in age, gender, and socioeconomic status. All participants were affiliated with Cantera, as employees, volunteers, youth leaders, mental health or natural medicine practitioners, teachers, and psychologists.

Facilitators and participants shared in the role of “co-researchers” in order to have an equal voice and power. These retreats “provided spiritual and pragmatic practices that supported individuals in their personal development of wholeness… strengthening of self-identity, leadership, and self-esteem” (Kapitan, Litell, & Torres, 2011, p. 66). As the retreats went on, the researchers were able to dive deeper in the creative arts. They were able to inquire on specific social challenges. While doing so, they observed many recurring images throughout the participants’ artwork. These images were later understood to be archetypes of the Nicaraguan culture and collective trauma. The impact of the creative art therapy was effective in creating awareness, and in facilitating the community’s larger aims of activism.

I incorporated this section because I believe that when a group of likeminded individuals are brought together for a common goal, this can lead to a development of community. It can be a form of solace between individuals that have been mistreated and misunderstood. The arts can be used to build communities like this with Latina’s who may be suffering from the longstanding patriarchal traditions, that in my opinion, are plaguing Latin communities. In the following section I will introduce feminism and feminist theory, and will do so in order to clarify why I mean by feminist theory.
Feminism in Expressive Arts Therapies

In this section, I will elaborate in the incorporation of feminist theory into the Expressive Arts Therapies. I will mainly be using literature that incorporates art therapy and feminism, as further research needs to be conducted on feminism and expressive arts therapy.

Helene Burt (1997) explores the world and interconnection between art therapy and feminism. She stated that what makes art therapy such a healing process is “it’s combination of visibility and witnessing within the context of a therapeutic connection” (Burt, 1997, p. 97). With visibility, she elaborated to be the “production of a visible document of the trauma” (p. 97). Burt (1997) is referencing a client which was able to identify the benefits behind art therapy and the understanding of her childhood trauma, and utilized visual arts to externalize it.

Burt continued on explaining that in a therapeutic context, the traditional role of the therapist is one with neutrality and objectivity (Burt, 1997). It is one in which the therapist needs to maintain personal emotional boundaries in order for there to be clarity of the “client’s pathology”. Burt argues that these traditional boundaries of the therapeutic relationship originates from a male perspective, seeing as most of the theories that the expressive therapies are based on are from a psychoanalysis perspective which was developed by white men (Burt, 1997).

“A closer connection between therapist and client was viewed as disruptive of treatment and an indication of poor boundaries on the part of the therapist. In this case it was suspected that the therapist had been drawn into the client’s pathological dependency” (Burt, 1997, p. 98). Burt argued that these attributes that have been highly regarded in the therapeutic relationship, of autonomy and independence, are derived from traditional male attributes. As such, these
traditional roles that have been highly regarded emphasizes that mental health is equivalent to such attributes.

The dilemma is the contradictory notion that art therapy is based on making the “unspeakable visible to a supportive witness” by also maintaining a strict detachment between the parties in the therapeutic relationship. The is a pull between these two principles, because in order for a therapist to be supportive and aid the client into deep parts of their past, there also has to be a certain level of deep connection between the therapist and client. Burt (2007) further argued this disconnect by stating that “art therapy is essentially a process which encourages engagement between therapist and client” (p. 98). Yet, it is highly emphasized to maintain strict boundaries. These principles contradict themselves in every way and Burt argues that it is “due to the lack of attention to gender issues and feminism in the field of art therapy”.

I argue that the same is true in all Expressive Therapies. In order to be truly effective in pushing back on patriarchal traditions, expressive arts therapist need to be willing to make deep connections with their clients. In order for expressive therapists to push back on gender stereotypes, sexism, and modern day push back on empowerment of women, then they need to approach therapy through a feminist outlook. Expressive arts therapists need to be willing to voice their concerns on societal problems, and stand with their clients when injustices are happening. I think that expressive arts therapist need to have a more proactive stand in therapy, and guide their clients in having a voice and speaking up against injustices that are brought on because of their sex. In this thesis, I have ventured out from traditional norms of academic writing in an effort of speaking out about the injustices that I have lived through. What I have done here is an example of what feminist expressive arts therapy can look like, and my hopes are
to motivate others to do the same. To allow the shackles of their past to crumble by putting the responsibility and the shame back on those who caused it.

**Discussion**

What does being female mean to you? Does it mean a person that is sensitive, empathetic, a rule follower, and an obedient daughter? Does she need to be foremost a mother, a wife, a sister, before she can truly be herself? Does she need to be a man’s submissive, and controlled by such a person? Should society be the one to dictate, at birth, who they are going to be and how they are going to act? Or should it be up to the individual’s preference?

This thesis attempted to vocalize the injustices that I have lived through, because of patriarchal traditions that are perpetuated in my Latin culture. I have used my *testimonio*, the telling of my story, as a form of feminist expressive arts therapy (storytelling). Even though cathartic, this process has not been easy for me. To put into paper a particular event that has haunted me my entire life, has been something that I have second guessed from the moment the idea crossed my mind. The telling of my story through this format means that the event will be immortalized, and anyone can have access to my shame. Even though this shame was given to me by someone who was supposed to protect me, it has lived within me since the day it was given to me.

The telling of my story is an act of feminist expressive arts therapy in that I use storytelling as the arts medium. This story was aided to come out through the use of movement and music to prepare me for such a courageous act. The use of movement allowed for the memory to flow out of me, and the music has allowed me to digest the information, while the words allow others to understand my flow.
The feminist portion came through me speaking out about a “private” family matter. In my culture, we do not share with the world family dynamics, nor we accuse the head of the family as being wrong. Not only that, but the feminist aspect of this storytelling also comes in the courage to speak out my opinion, that the system that we live in is fundamentally flawed and needs to be changed.

One limitation with this form of writing is that it is based on a single case study of my experiences, and thus cannot be generalizable. It can only be used to ignite the flame for future researcher’s interest in ridding the world of patriarchal viewpoints. Another limitation is that since the field of expressive arts therapy is at its early stages, further research needs to be done supporting feminist expressive arts therapy and expressive arts therapy with Latinas.

Another limitation is my bias as a researcher. I have had a complicated childhood and that has influenced who I am in more ways than one. Even though I was raised with a very strict father, I have had the privilege to be better off economically than many in the Dominican Republic. I can only describe my lived experiences. I am fully aware that many other Dominican girls may have not had such a patriarchal upbringing, and as such my viewpoints may be limited and cannot be used to generalize to the entire population. Another important limitation to take into consideration is that given the restraints of page requirements, my literature reviews only briefly discussed the key terms to support my claims.

As long as I can remember, the role of a woman in society has been a pre-determined one. The command that men attempt to place upon women has been one in which they have always attempted to place on them. The truth of the matter is that, until women are helped in seeing the power that they have within themselves, change will not happen. Women will continue to let men have control and the upper hand. Through Feminist Expressive arts therapy,
these gender stereotypes and patriarchal viewpoints can be challenged. I use this thesis to call out to future researchers the need for investigations. I propose community project being done within Latin communities using feminist expressive arts therapy. I propose a weekly event where Latinas can unite, let music and movement overflow them until the truth starts to spill out of them. All of this in a “safe” environment, where self-expression is encouraged and contained to safe limits.
References


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Student's Name: Rosanna J. Alejo

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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: Dr. Elizabeth Kellogg