Erik H. Erikson: A Valuable Resource for the Field of Art Therapy

Erin Kuri

A Research Paper

in

The Department

of

Creative Arts Therapies

Presented in Partial Fulfillment of the Requirements
For the Degree of Masters of Arts
Concordia University
Montreal, Quebec, Canada

December 2006

© Erin Kuri, 2006
NOTICE:
The author has granted a non-exclusive license allowing Library and Archives Canada to reproduce, publish, archive, preserve, conserve, communicate to the public by telecommunication or on the Internet, loan, distribute and sell theses worldwide, for commercial or non-commercial purposes, in microform, paper, electronic and/or any other formats.

The author retains copyright ownership and moral rights in this thesis. Neither the thesis nor substantial extracts from it may be printed or otherwise reproduced without the author's permission.

In compliance with the Canadian Privacy Act some supporting forms may have been removed from this thesis.

While these forms may be included in the document page count, their removal does not represent any loss of content from the thesis.

Canada

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.
ABSTRACT

Erik H. Erikson: A Valuable Resource for the Field of Art Therapy

Erin Kuri

The field of art therapy is still relatively new in comparison to other professional fields of mental health. The profession was influenced and developed by figures in the fields of art education, visual art, and psychoanalysis. Erik H. Erikson is a figure who was trained in all three of these areas; however it seems that contemporary art therapists are unaware of how valuable his life and written contributions are to the field of art therapy.

The aim of this research paper is to demonstrate why the life and work of Erikson remains a useful resource to the current field of art therapy. This paper explores the historical context surrounding the life of Erikson, his training in various fields, his difficult experience trying to choose an identity between being an artist and a psychoanalyst, and the written works that he contributed later in his life. As well, Joan Erikson’s influence on his work has been examined. Following a historical-documentary methodology, this research has been conducted by synthesizing various sources on topics such as: German Expressionism; art education; psychoanalysis; the history of art therapy; the life and work of Erik Erikson; and the life and work of Joan Erikson.

This research demonstrates that Erikson’s training and experiential knowledge in visual art influenced his clinical observations and written works throughout his life. By examining the ways in which he perceived his work through the eyes of an artist, current art therapists may be inspired to utilize his achievements as a model for their own practice.
ACKNOWLEDGEMENTS

The process of researching for this final paper has been comparable to going on a scavenger hunt. Each helpful individual I spoke with, lead me to another benevolent soul. When I started this journey, I had no idea how far I would travel. I want to begin by thanking my fellow students and the faculty in the Department of Creative Arts Therapies, for all the easy-to-follow directions and support. I’d like to thank Melinda Reinhart, one of the hard working librarians at the Webster Library, for showing me how to search for information more extensively. I want to thank Dr. Suzanne Lister for her thoughtfulness in connecting me with Wendy Campbell. A special thanks to Wendy for meeting with me, and sharing her warm and wonderful stories about the Eriksons. I would also like to extend my gratitude to Kai Erikson for taking the time to offer his genuine perspective and valuable wisdom. I would like to extend a great deal of gratitude toward my research advisor, Dr. Josée Leclerc, who has greatly contributed to the success and completion of this expedition. Lastly, I would like to thank my loving partner, Jonathan Parham who has supported me and traveled with me on this journey, metaphorically and literally.
<table>
<thead>
<tr>
<th>Table of Contents</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Research Methodology</td>
<td>2</td>
</tr>
<tr>
<td>Data Collection</td>
<td>4</td>
</tr>
<tr>
<td>Limitation on Truth</td>
<td>6</td>
</tr>
<tr>
<td>Chapter Outline</td>
<td>7</td>
</tr>
<tr>
<td>Chapter One: Historical Context Surrounding the Life of Erik H. Erikson</td>
<td>10</td>
</tr>
<tr>
<td>German Expressionism in the Early Twentieth Century</td>
<td>10</td>
</tr>
<tr>
<td>Art Education in the Time of Erikson</td>
<td>12</td>
</tr>
<tr>
<td>Psychoanalysis in the Time of Erikson</td>
<td>14</td>
</tr>
<tr>
<td>Art Therapy in Britain During Erikson’s Life</td>
<td>22</td>
</tr>
<tr>
<td>Art Therapy in America During Erikson’s Life</td>
<td>25</td>
</tr>
<tr>
<td>Chapter Two: Erikson’s Early Years</td>
<td>27</td>
</tr>
<tr>
<td>Erikson’s Childhood Influences</td>
<td>27</td>
</tr>
<tr>
<td>Erikson’s Training as an Artist and His “Wandershaft” Time</td>
<td>30</td>
</tr>
<tr>
<td>Teaching at the Hietzing School in Vienna</td>
<td>35</td>
</tr>
<tr>
<td>Erikson’s Training in Psychoanalysis</td>
<td>39</td>
</tr>
<tr>
<td>Montessori Education Training</td>
<td>44</td>
</tr>
<tr>
<td>Meeting Joan</td>
<td>45</td>
</tr>
<tr>
<td>Move to America</td>
<td>48</td>
</tr>
<tr>
<td>Chapter Three: Integrating the Art into the Therapy</td>
<td>49</td>
</tr>
<tr>
<td>Children’s Picture Books</td>
<td>49</td>
</tr>
<tr>
<td>Erikson’s Theories on Children’s Play</td>
<td>51</td>
</tr>
<tr>
<td>In the Shoes of a Psychoanalyst: Presented as Short Vignettes, Perceiving the World Through the Eyes of an Artist</td>
<td>60</td>
</tr>
<tr>
<td>Chapter Four: Joan Erikson’s Influence on the Work of Erik Erikson</td>
<td>65</td>
</tr>
<tr>
<td>Joan Erikson’s Influence on Erik Erikson</td>
<td>65</td>
</tr>
<tr>
<td>Joan’s Ideas Regarding Art and Art Therapy</td>
<td>67</td>
</tr>
<tr>
<td>Joan and Erik’s Work Together</td>
<td>73</td>
</tr>
<tr>
<td>The Austen Riggs Centre</td>
<td>75</td>
</tr>
<tr>
<td>Erikson’s Psychosocial Stages of Development, Incorporated in the Riggs Program</td>
<td>77</td>
</tr>
<tr>
<td>The Studio Space at the Riggs</td>
<td>87</td>
</tr>
<tr>
<td>Discussion</td>
<td>93</td>
</tr>
<tr>
<td>References</td>
<td>106</td>
</tr>
</tbody>
</table>
Introduction

Art therapists have looked to a number of psychoanalytic figures to support the value of their therapeutic practice, throughout the development of the established profession of art therapy. Examples of these figures include Sigmund Freud, Gustav Jung, Melanie Klein, and D. W. Winnicott. In contemporary art therapy training, the work of Erik H. Erikson is not emphasized as much as these figures. Many know this theorist as a Freudian analyst, for his life-cycle theory, and his contributions to the ways in which children are perceived and raised in relation to the society they grow up in. What many are not aware of, is the fact that before he became a psychoanalyst, he had been trained as a visual artist and a children’s educator. Many do not know of the struggle he experienced regarding his own identity between the roles of artist and therapist. Paul Roazen (1976), a researcher of Erikson, believed this theorist to be “one of the most creative thinkers to have emerged out of the psychoanalytic movement” (p. ix).

At the time when Erikson was choosing his career path, the professional field of art therapy did not exist. Contemporary clinicians who feel drawn to both the fields of art and psychology, have the opportunity to combine both disciplines by integrating the two into the profession of art therapy. Such was not the case for Erikson. Between the professions of artist and psychoanalyst, he chose to become a psychoanalyst. He was not able to decide this however, until he felt confident that he could apply his visual arts background. He found peace in his search for identity, as an artistic psychoanalyst (Friedman, 1999).

---

1 Throughout this research paper, this figure will be referred to as either Erikson or E. H. Erikson (when he emigrated to America, he changed his surname from Homburger to Erikson. He kept Homburger as a second surname).
As an art therapy student with an experiential background and training in the visual arts and psychology, I have been able to explore Erikson’s written works with a specific sensitivity regarding the ways that he used his background knowledge in the visual arts in his observations and theories. From the perspective of an art therapist, one can find ample evidence of ways his practice as an artist influenced the development of his theories. In the beginning stages of this research, I hypothesized that Erikson’s background training in the visual arts later influenced his observations and theories in the field of psychoanalysis. For this reason, I believed that his work was relevant to the field of art therapy. As the investigation unfolded, I came to understand that Erikson could be a very influential figure for current practitioners in the field of art therapy. The following research paper will display evidence, demonstrating why the life and work of Erik H. Erikson should be viewed as a valuable resource for current art therapists. Erikson’s theories may broaden the perspectives of contemporary clinicians by providing further insight regarding the use of play and art making within the stages of human development. These theories provide further education in regard to how individuals play and make art at different developmental levels. As well, this research reviews how Erik and Joan Erikson applied the life-cycle theory to an arts program within a therapeutic setting. This achievement has the potential to be utilized as a model for practicing art therapists. Overall, the vast amount of written work produced by Erikson could further contribute to, and enrich, the existing literature on human development and art therapy.

Research Methodology

The research methodology used in constructing this research paper followed a historical documentary paradigm. Data relevant to Erikson was collected and synthesized
with historical research on the topic of art therapy. Creswell (1998) states that a biographer must have a solid background of knowledge in regard to the historical context in which he is placing his subject. This has been achieved through the historical presentation of relevant artistic movements, social context, and research into relevant professional fields such as art education, psychoanalysis, and art therapy.

According to Clifford’s (as cited in Smith, 1998) categories of biographical approaches to research, this paper has been written from a scholarly-historical approach. In conformity with Clifford’s description of the scholarly-historical approach, this researcher has relied on factual data with the addition of historical background information on the subject, in order to provide a context that Erikson’s life and work can be viewed within.

In accordance with Hughes’ (1964) definitions of historical approaches to research, a combination of both the neo-positivist and neo-idealist historical approaches to research was used. The neo-positivist approach emphasizes the use of objective proof found in history. This has been done this through the use of factual dates and timelines. The neo-idealistic approach emphasizes the use of subjective, intellectual, and philosophical sources. This has been achieved through combining theoretical ideas (Erikson’s works) with objective facts (historical dates and timelines) and the subjective opinions of others (opinions of Erikson’s biographers and other individuals who personally knew the Eriksons). This researcher has sought to identify internal consistencies within the research, such as information relating to Erikson’s stated opinions and life events, and this combined data has been presented in a manner supporting the hypothesis that
Erikson’s training and experiential background in visual art influenced his psychoanalytic theories and therapeutic practice later in life.

Data Collection

To this researcher’s knowledge, few art therapy sources exist, that emphasize Erikson’s work. Relevant areas of research that were explored included: German Expressionism; Erikson’s life and work; Joan Erikson’s life and work; developmental psychology; the history of psychoanalysis; the history of art therapy; the history of art education; and art and psychoanalysis.

I also had the great opportunity to communicate with Erikson’s son, Kai Erikson, a professor of Sociology at Yale University. Correspondence was made possible through electronic mail. Kai Erikson suggested the written work of his mother, Joan Erikson as a resource. As well, he provided insight on how his father’s work could be read with sensitivity toward artistic content.

Wendy Campbell was another instrumental source that I had the opportunity to communicate with. Campbell had created a film that documented Joan Erikson speaking on the topic of art and healing. After viewing this film, an interview was conducted with Campbell on her personal experiences with Joan and Erik Erikson, among other things. The information obtained from this interview assisted in my further understanding of the importance of Joan Erikson’s influence on the life and work of her husband.

Sources were selected on the basis of relevance to the subjects of Erik Erikson and art therapy. Due to the mass amount of longitudinal data, the selection of sources was further refined. This task presented as a challenge however, because it was difficult to know where important connections and leads to further information could be found.
Primary sources such as Erikson's own writings were obtained, in addition to biographies on Erikson that consisted of direct interviews between Erikson and the authors of the biographies.

Resources that were not explored include a film interview of Erikson, by Davidson Films. This was not viewed due to the lack of public availability of the film, as well as financial constraints on the part of the researcher. As well, the collection of Erikson's woodcuts was not viewed because it had not yet been released to the public. Fortunately, a book on this collection is in the process of being created and published. The original woodcuts are currently in the possession of Erikson's son, Kai Erikson, in Stockbridge, Massachusetts.

Following the research and writing of my first draft of this research paper, I had the opportunity to travel to Europe, where I briefly visited the cities of Vienna, Munich, and the Black Forest region of Germany, in search of information on Erikson's time spent in these areas during his early life. Although no relevant information could be found at the Freud Museum in Vienna, I did find some information at the Haus der Kunst Museum in Munich. I discovered that the Glaspalast gallery, where Erikson held an important exhibition of his artwork, had burned down in 1926. This event may have contributed to the reason why no further information about this exhibit could be found in the literature. Contact information for the Munich Academy of Applied Arts could not be found. This school may be a source of further information regarding Erikson's time as an art student. In the city of Karlsruhe, where Erikson was raised as a child, an inquiry was put forth regarding the possible existence of a museum dedicated to Erikson. Results of the inquiry found that no museum existed. However, a discovery was made that the city of
Karlsruhe was the centre of the arts and cultural scene in the Black Forest Region. This environment may have influenced Erikson as a young boy. I traveled to some of the small towns in the region and hiked trails in the forest, acquiring a sense of Erikson's popular subject matter for many of his woodcut pieces.

From the data collected, I have developed a perspective from which I have presented the life of Erik H. Erikson. Through this research, I have sought internal consistencies within the accounts found through subjective resources. This was accomplished by comparing a number of biographies by different authors, as well as comparing the personal accounts of Erik and Joan Erikson within their written work. These comparisons showed consistencies in the accounts of Erikson's time line and the involvement of his visual arts background in his later work. This method coincides with the neo-idealist *Theory of Coherence* (Hughes, 1994).

**Limitation On Truth**

This research has been conducted with the hypothesis that Erikson's early experience and training in the subject of visual arts had a great impact on his psychoanalytic theories throughout his life. Although some assumptions cannot be verified with Erikson himself, evidence displayed in this paper shows that this researcher's hypothesis is relevant to the field of art therapy. Evidence depicting this relevance is based on the exploration of data such as literature, an interview, correspondence, and inquiries within original cites in Central Europe. Sources that were reviewed provided internal consistency, displaying that Erikson's knowledge in the visual arts greatly influenced his writings and therapeutic practice throughout his life. Based on this data, it is this researcher's belief that readers will discover how truly inspiring and valuable the work of Erik H. Erikson is to the field.
of art therapy.

Chapter Outline

The first chapter will provide the reader with an overview of the influential environment that surrounded Erikson during the early years of his life. The German Expressionist movement emphasized emotional expression in contrast to technical accuracy. Artists within this movement were taught to view their subject matter with their emotions. The historical developments of the fields of art education and psychoanalysis, and influential figures in these fields will be explored. An understanding of these two fields is important, because the field of art therapy developed from these areas. As well, Erikson was trained in these fields. By viewing the philosophies and methods of art education and psychoanalysis at the time when Erikson was a student, it is this researcher’s hope that the reader will grasp how this background influenced his own approaches to therapeutic practice with children later on in his life. As well, the first chapter will show that the field of art therapy was not formally established until the early 1940s, therefore it would have been impossible for Erikson to have chosen the profession of art therapist, or to have known anything about the field.

The second chapter focuses on the early years of Erikson’s life. This section of the research paper displays that Erikson showed an interest and natural ability in visual art from an early age. As an adolescent he struggled considerably with his choice of professional identity. He decided that he wanted to be an artist. The years of his formal art training will be described, along with his years of wandering though Europe. Although he became successful as an artist for a short period of time, he also became discouraged when he compared himself to famous artists like Michelangelo. He decided
that he would rather become an art teacher. In accordance with Erikson’s life path, the reader will then travel to Vienna, where Erikson began teaching children at a school in connection with the Freud family. It was there that he became drawn into the fields of education and psychoanalysis. As a student of psychoanalysis and education, Erikson continued to feel torn between professions. He expressed in his psychoanalysis sessions with Anna Freud that he did not want to abandon the potential to be an artist. He did not want to commit to becoming a teacher or psychoanalyst if he couldn’t include the use of visual art. Chapter two displays his process of how he came to find peace with the various professional identities within himself, creating an identity as an artistic psychoanalyst. I believe that this process is one that many current art therapists would be able to relate to, as the profession of art therapy is hybrid in nature. As well, after viewing Erikson’s process of establishing an identity, one could wonder if he would have chosen the profession of art therapist, had it been available to him at that time.

Chapter three emphasizes ways in which Erikson integrated his knowledge of visual art into his theories and practice of therapy. Erikson began his professional career writing on the subject of children’s picture books in regard to the development of the super-ego. His writings on this subject would be of interest to contemporary art therapists, providing further understanding of the impact of imagery on human development. Erikson also contributed extensively to the literature on the subject of children’s play. Within this literature he writes about the process of play and spontaneous creativity within different stages of child development. He acknowledges the benefits of being able to view the process in a concrete form, as opposed to the verbal process alone. This support is extremely valuable to the field of art therapy because the
process of play could be viewed as a central component of spontaneous art making. By gaining further knowledge of the process of play, art therapists may gain further insight of this process within their own clients. Erikson’s work is regarded very highly as a credible resource within the psychology community. His writings may inspire the practicing art therapist, and affirm the practitioner’s belief in the healing potential of the creative process.

The final chapter of this research paper, chapter four, will examine ways in which Erikson’s wife, Joan Erikson, influenced his professional development and theories regarding visual art and therapy. This chapter demonstrates that Joan Erikson’s influence was very strong throughout her husband’s career. In the early 1950s she and her husband worked at the Austen Riggs Center in Massachusetts, a psychiatric treatment facility, where she developed an extensive activities program including a visual arts studio. Although she never connected the term art therapy to her work at the Riggs, this program does hold the potential to serve as an influential model for contemporary art therapists. By viewing how this pioneer activities program was run, current art therapists may compare their own practice of the ways in which they are using the arts in therapy. Clinicians can benefit from gaining further insight into how the use of art in therapy can enhance human development and assist individuals to work through the normative crises that are experienced throughout the stages of life, as theorized by Joan and Erik Erikson.
Chapter 1: Historical Context Surrounding the Life of Erik H. Erikson

This first chapter will provide the reader with the historical context of relevant events that were taking place in Germany and Vienna before Erikson was born and during the early years of his life. These topics will be explored in order to give a context in which to place Erikson as a historical figure, as well as to show the environment and societal attitudes that may have influenced his development in life.

*German Expressionism in the Early Twentieth Century*

The following section will describe Germany's art scene during the early to mid-twentieth century. This overview will provide the reader with a sense of how Erikson may have fit into Germany's art world during his years as an artist in the early 1920s. As well, the reader will be given a sense of how Erikson may have perceived himself as an artist during this vibrant and conflictual time in art history. Special attention will be given to German Expressionist artists, Max Beckmann and Wilhelm Lehmbruck, whom Erikson later exhibited with.

Within the first three decades of the 1900's, the German Expressionist style of painting, sculpture, and graphic arts dominated Germany's art world. Artists such as Vincent Van Gogh and Edvard Munch were among the Expressionist painters who influenced the German Expressionist movement. Art critics of the early twentieth century defined German Expressionist art, as artwork that concentrated mainly on the artist's inner vision and emotion towards his subject matter as opposed to how the subject appeared in reality (Kuhn, 1957).

Kuhn (1957) compares the artistic style of Impressionism with German Expressionism. Impressionist artists often sought to capture moments in nature by
representing those moments as closely as possible on their canvases. Impressionists aimed at mastering light and colour. Their subject matter often consisted of landscapes filled with natural light. German Expressionist artists were not concerned at all with accurately describing nature. Instead these artists aimed to express their personal experiences and emotions, regarding the subject, through distorted forms and colours, exaggerated brush strokes and dramatic woodcuts. The Expressionists displayed a spirit of rebellion from representational art styles. Instead they appreciated the artistic styles of the medieval era, European folk art, children's artwork, and the artwork of aboriginal cultures. One could view the artistic style of Impressionism to be opposite that of the Expressionistic style; however Kuhn (1957) states that Expressionism could be viewed as a continuation from Impressionism because the Expressionists sought to capture the spontaneous moment on a level one step deeper than the Impressionists.

Following World War I, the work of independent expressionists such as Wilhelm Lehbruck and Max Beckmann continued to grow (Kuhn, 1957). Wilhelm Lehbruck (1881-1919), known as Germany's greatest sculptor (Kuhn, 1957), was trained at the Dusseldorf Academy in Western Germany. His main artistic interests included sculpture and graphic art. Throughout his life as an artist he lived in Italy, Paris, Zurich and Berlin. In 1919 he committed suicide in Berlin. Max Beckmann (1884-1950) was trained at the Weimar Art School (Kuhn, 1957) in central Germany. Throughout his life he was a soldier, worked as a painter, graphic artist and art instructor in Paris, Berlin, Frankfurt, and Holland and later he emigrated to the United States (Kuhn, 1957).

Since 1890, Munich had become the centre of experimental art in Europe. In the years between the two world wars, the art scene was thriving in Germany. While the art world
was growing, so was a political party that would soon come into power and destroy the German Expressionist movement. Beginning in 1933, the Third Reich came into power and began to place shame on German Expressionism, forbidding the practice of Expressionist-style art making. The officially condoned artistic style was realism, often depicting Nazi propaganda. Many artists and art-related professionals began to flee the country ( Arnason, Prather, and Wheeler, 1998; Kuhn, 1957).

In 1937, the Nazi government had the Minister for Culture in Germany (Joseph Goebbels), design an exhibition of "degenerate art". The exhibition was displayed by the head of the Chamber of Fine Art (Adolf Ziegler). It opened on July 19th, 1937, at the Munich Anthropological Museum. The exhibit was titled Entartete Kunst, or Degenerate Art. The exhibition included seven hundred and fifty artworks by Expressionist artists of the early twentieth century, along with artwork created by children, aboriginal groups, and the mentally ill. Hitler declared Expressionist art as "creations of a diseased imagination" (Hogan, 2001, p. 63). “Degenerate” minds were viewed as a mark of genetic inferiority by the Nazi's. For this reason, over the following years, “degenerate art” was stripped from all public art galleries and museums. Thousands of these artworks were burned. The Nazi government created laws against Expressionist artists creating or teaching art. These laws were strictly implemented by the Gestapo who would regularly raid the homes of these artists, searching for evidence of art making (Hogan, 2001; Anson et al. 1998). Over the course of Hitler's reign, under his command, the German Expressionist movement was shamed and defeated.

Art Education in the Time of Erikson

According to Diane Waller, author of Becoming a Profession: The history of art
therapy in Britain: 1940-82 (1991), the profession of art therapy in Britain and in America developed mainly from the fields of Psychoanalysis and Art Education. Waller found that in a number of other European countries such as Italy, Greece and France, art therapy training emphasized the fields of psychology and medicine, including little or no background in art. Not until 1987 has there been a collaborative effort among the art therapy training programs in Europe, to create more similar training standards. Waller (1991) believes that many of the pioneer art therapists in the field, who were trained as art educators, were most-likely influenced in some way by their training.

One could speculate that Erikson too, was influenced by his training as an educator. The majority of the training for educators in mid-twentieth century Europe followed the child-centered approach. Individuals such as John Dewey (1859-1952) and Maria Montessori (1870-1952) inspired child-centered philosophies of education. These philosophies held that children must learn through their own discoveries, the curriculum should reflect the interest of the children, and rules should be governed by a system of democracy as opposed to authority (Callan, 1990). Erikson’s training as an educator also followed this philosophy. The following section will explore two influential figures to the development of art therapy, that were trained in the field art education.

In the late nineteenth century, Frank Cizek coined the term child art (Waller, 1991). Cizek was affiliated with the Vienna Secession movement, that advocated for the tolerance of non-traditional art in the fine arts community (Arnason et al. 1998). He was formally trained in the fine arts and later became a children's art teacher. He held strong convictions regarding how children should be taught. Waller (1991) cites Viola who stated that "Cizek believed the teacher's function was to create an atmosphere conducive
to create work, to gain rapport with the children, and take them seriously, and to provide love, security and significance (1991, p. 223). Waller believes that Cizek's ideologies are akin to the philosophy behind the practice of non-directive art therapy.

Marie Petrie was also an art educator who worked with children. She believed that the art teacher could help a child to work through his or her problems through the use of the artwork as a communicative tool. Waller (1991) quotes Petri's statement regarding the role an art teacher should fulfill:

though she should act with the full support of doctors, parents and colleagues. . .the understanding art teacher, knowing the difficulties facing the individual child compared with his more normal class mates, familiar with child psychology as I assume her to be and with the laws and methods of art, should be able to apply the laws and methods as a well-thought out course of therapeutic treatment. (p. 223)

Petrie's views of how art can be used to restore the mental health of children also parallel views within the practice of art therapy. She later emigrated to the United States.

*Psychoanalysis in the Time of Erikson*

This section will provide the reader with an overview of how the field of psychoanalysis developed and will give a context in which to later understand how Erikson fit into the beginning decades of the field. A number of psychoanalysts who influenced the field of art therapy will be reviewed.

*Freud's school of psychoanalysis.*

Art therapists such as Diane Waller (1991) have shown how the current profession of art therapy in Britain and North America has developed mainly from the fields of art education and psychoanalysis. In the previous section, contributing art educators were
identified. In the following section, the development of psychoanalysis and its connection to art making will be explored, along with influential figures from the field.

Through the last decade of the nineteenth century and the beginning of the twentieth century, Sigmund Freud (1856-1939), an Austrian neurologist, developed the field of psychoanalysis. From the work of others before him in the area of hypnosis, he discovered and began to explore the unconscious aspect of the human mind. Through his own clinical practice with patients who suffered from psychosomatic illnesses, he found that these psychological symptoms were most often relieved when the patient could gradually become aware of the unacceptable thoughts or experience that had become buried in the individual's unconscious level of the mind, causing the symptoms. From this point on, Freud continued to develop many more theories based on the idea that all humans possess an unconscious level of the mind (Mitchell & Black, 1995).

Following his discovery of the unconscious, Freud devised a theory of child development that consisted of five psycho-sexual stages that each child is believed to move through within his or her first five years. In each stage, the child becomes fixated on a specific object that provides a sense of libidinal pleasure to a specific area of the body. As the child develops through the stages, Freud believed that the child learns to repress the desire felt toward the object at each stage due to its taboo nature in the opinion of society. When one or more of these stages has not been successfully negotiated, the individual is said to become fixated, trying to satisfy the source of the libidinal desire. Freud believed that the cause of neurosis in adults was rooted in the unsuccessful negotiation of these developmental stages in childhood (Mitchell & Black, 1995).
Following World War I, psychotherapists began observing mental disturbances in soldiers that had fought in the war. They were said to be suffering from *shell-shock*. This new population of traumatized individuals did not coincide with Freud’s theory that mental disturbances were caused by repressed libidinal drives rooted in childhood. This conflict led to the splitting of psychoanalytic theory in Britain. According to Susan Hogan, art therapist, two approaches developed in Britain:

The first approach supported a dynamic conception of psychological processes using ideas such as the unconscious and repression, but as noted, rejected the Freudian argument for a sexual etiology of mental disturbance, approving instead a theory of multiple conflicting instincts. The second approach emphasized the social significance of minor mental disorders. There was therefore a disjunction in views about the etiology of mental illness between psychiatry and the orthodox psychoanalytic establishment (2001, p. 64).

Freud began sharing his theories with the British medical population in 1914. Ernest Jones, Welsh psychiatrist and strong follower of Freud, founded the British Psychoanalytic Association in 1919. Then, after much controversy and debate, psychoanalysis was confirmed as an authentic form of treatment in Britain in 1926 (Hogan, 2001). Also by this time, Freud’s theories were becoming known internationally, however, groups that praised him still tended to remain discreet (Coles, 1970; Roazen, 1976).

Sigmund Freud and his youngest daughter, Anna, analyzed patients and trained new psychoanalysts in Vienna, Austria. Although Sigmund wrote one case history on a little boy, he mainly analyzed adults. Anna, along with other analysts such as Hermine von
Hug-Hellmuth and Melanie Klein, would begin the specialization of child analysis (Roazen, 1976). Individuals that trained to become psychoanalysts were required to undergo their own analysis as part of their training. Freud adamantly believed that one must truly know psychoanalysis by experiencing it for him or herself. He believed that the irrational side of the mind conceals itself behind its rational counterpart. Therefore, working with the intellectual aspect within training only reaches a fraction of the full experience. Within the training school, the relationships between analysts and analaysands were informal and the atmosphere was relaxed (Coles, 1970).

By 1930, Freudian psychoanalytic societies had become established throughout the world. The theories of Sigmund Freud were being published widely in books and journals. These golden days were about to come to an end however. When the American depression began in 1930, previously wealthy Americans could no longer afford psychoanalysis abroad. Economical depression also affected patrons from Germany and Austria. Many psychoanalysts began to move and practice elsewhere (Coles, 1970).

When Adolf Hitler was granted political reign in Germany in 1933, Austria soon became German territory. Hitler’s political party held strong, anti-Semitic values that increasingly became more threatening to the Jewish population. Along with Freud, Jewish analysts were forced to flee the country. Many of Freud’s writings were sent to Berlin, where they were burned in bonfires (Coles, 1970). Ernest Jones assisted Sigmund and his daughter, Anna, to relocate in England in 1938. Sigmund Freud passed away in 1939 (Hogan, 2001).

Following World War II (1939-1945), a renewed interest submerged regarding the early development of children, personality development, and the formation of
psychopathology. Many analysts who worked with children at this time used art making along side verbal therapy (Hogan, 2001). The following section will identify some influential psychoanalysts who found value in the use of art-making with their patients.

*Analysts connecting to art.*

A number of psychoanalysts over the last century have found a connection to art in some way or another. Some analysts have expressed that making art can promote mental health, and some have expressed the belief that making art is an indicator for mental illness. Some have observed how their patients have used art-making in their lives, and some have found the use of art-making to be beneficial in their own lives. Some analysts believe that art-making can be used in addition to verbal therapy, allowing the analyst a deeper understanding of the patient. Some analysts view the pursuit of art-making to be the healing factor.

According to Read (cited in Hogan, 2001), Sigmund Freud presented his thoughts on psychoanalysis and art in his *Introductory lectures on psychoanalysis*. In these lectures, Freud compared artists to neurotics, and stated that artists lived in a fantasy world to compensate for not being able to satisfy their needs through their own personal characteristics. As Freud associated the Expressionist artists with neurosis, this may have been the reason that Freud resisted and struggled with the threat of being overcome by the artist in himself, taking over the scientific aspect of his self-identity (Roazen, 1976).

Ernst Kris (1900-1957) also found interest in both the world of psychology and the world of art. When he began practicing as an analyst under Freud, he also worked as a museum curator, writing about works of art. In 1953, Yale University Press published a collection of his essays titled *Psychoanalytic Explorations in Art* (Hogan, 2001). Kris did
not explore the therapeutic value in art making. Instead he focused on how
psychoanalytic ideas could be applied to artwork. Like Sigmund Freud, he viewed works
of art as indicators of mental illness in the artist. Later, he theorized that creating art
could serve the ego by letting the ego regress, providing access to id energies, potentially
leading to previously blocked insights (Friedman, 1999). According to Hogan (2001),
Kris was aware of the work that was being done by a Freudian art therapist by the name
of Margaret Naumburg. However, their interests in the same topic came from different
directions; therefore they were not interested in each other’s perspectives.

Oskar Pfister (1873-1956) was the first analyst to publish his findings on the
“psychoanalytic treatment of the artist” (Hogan, 2001, p. 66). His approach to the use of
artwork with patients entailed interpretation of the artwork either while it was being
created or after the patient had finished. These creations were viewed as free association
images that were valued for their expressive ability to further reveal the unconscious
wishes and internal state of the patient. Pfister believed that “symbolic representation of
unconscious material” (Hogan, 2001, p. 67) through art making helped the patient to
project his or her distress outward. He believed this process was healing because it
prevented the patient from having to internalize all of his or her emotions, becoming
consumed with them. He also believed that the pleasure that came from creating art had
the ability to strengthen the “life will or life force of the individual” (Hogan, 2001, p. 67).

In regards to the artwork of the Expressionists, Hogan (2001) found that Pfister
understood that the movement emphasized the “inner self” through art, however he also
stated that it was the artwork of the “diseased.” It would seem that although Pfister
valued art as conducive to one's mental health, he did not necessarily respect the artist as a healthy individual for expressing himself in such a way.

Donald Woods Winnicott (1896-1971) was a psychoanalyst and a pediatrician who worked with children. Winnicott used art-making in his therapy practice and published works on creativity as a path to mental health. He developed the theory of *transitional space/phenomena* which described the theoretical space/objects and attachment between an infant and the infant's primary attachment figure. An example of a *transitional object* would be an infant's blanket or a stuffed toy that the infant has become attached to in the place of his or her primary caregiver. Art therapists have applied this theory to the artwork that is created between the therapist and the client. As a blanket becomes symbolic of the attachment relationship between a caregiver and infant, the artwork is theorized to become symbolic of the attachment relationship between the client and the therapist. Although Winnicott never referred to himself as an art therapist, and never wrote about the practice of art therapy, his work has been extremely influential within the field of art therapy (Waller, 1991).

Melanie Klein (1882-1960), was an Austrian born, British child-psychoanalyst. Within her practice with her young patients, she learned to value the use of art making and play as a means of understanding the internal state of the children. She used these activities as an adjunct to talk therapy. In 1961, she published her first case study on a child using art within the analysis (Hogan, 2001).

W. R. D. Fairbairn (1889-1964) was another well-known child-psychoanalyst who became interested in the use of art-making within his clinical practice. More specifically, he compared artwork with dreams, viewing both as vehicles for repressed, unconscious
material to surface into awareness. He later went on to present his interpretations of modern artworks created by artists such as Salvador Dali (Hogan, 2001).

Psychoanalyst, Marion Milner (born 1900), encouraged her patients to work with images as part of the therapy. According to Hogan (2001), she did not regard herself as an art therapist, but as an analyst who used artwork as an additional support to verbalization. She believed that relying on the image alone created opportunity for over-interpretation. In the year of 1950, she published a book, recording her ideas and personal experiences using art in her own analysis, titled *On Not Being Able to Paint* (Hogan, 2001; Waller, 1991).

In the 1940's, Ralph Pickford, psychoanalyst, and his wife, Miss Romanes, also a psychotherapist, both used art materials in their practice as a bridge to the verbal component of therapy. Pickford encouraged his patients to create art which he then analyzed along with their verbal material. He believed the artwork had the potential to represent unconscious elements of the patient's life. In 1958 he presented this therapeutic approach to the Scottish branch of the British Psychological Society (Hogan, 2001; Waller, 1991).

Hogan (2001) and Waller (1991) have found that in the past, therapists such as the ones mentioned in this section, did not consider themselves to be 'art therapists'. They usually considered themselves to be analysts using art as an adjunct to therapy.

Ben-David and Collins (cited in Waller, 1991) explore the topic of *role-hybridization*. They explore the dilemmas that individuals face when working professionally in two different roles. They state the possibility that if one of the roles holds higher intellectual status and social recognition, the individual may be more inclined to identify himself in
that role as opposed to the role holding the lesser status. The individual may then solve his dilemma either by incorporating his two roles together into the one, higher-status-role, or he may create a new role. In regard to the professionals that have been previously mentioned in this section, individuals may feel more inclined to keep their full identification as psychoanalysts (a highly regarded and recognized profession at the time of their careers) as opposed to art therapists (controversial and not well established as a profession at the time of their careers).

Art Therapy in Britain During Erikson’s Life

In the previous section on psychoanalysis in Erikson’s time, the reader was introduced to a number of analysts who were using art in their practice and identified themselves generally as analysts who use art as an adjunct to verbal therapy. While many of them were identifying themselves in this way, the term art therapy was not yet being used, therefore these individuals would not have had any other name to give to what they were doing. It was not until 1942 that an artist named Adrian Hill coined the formal term art therapy, after he began teaching sanatorium patients how to paint and draw (Hogan, 2001). Hill was not the only artist working with patients in hospitals. The following section will display ways in which artists were using visual art in health care facilities in twentieth-century England.

According to Waller (1991), mental health care practitioners have shown interest in the images created by individuals who suffer from mental illness, since the mid-nineteenth century. This interest opened doors to unemployed individuals who sought jobs during the economic depression of 1930, in Britain and around the world. Individual’s were employed by mental health care facilities to run crafts groups,

In 1938, Adrian Hill was a patient himself in the Sanatorium where he later taught art. As a tuberculosis patient, Hill found that making art helped him by enhancing his quality of life while he healed. After his recovery, he began a quest to enhance the quality of the lives of other patients through art. He began campaigning to magazines, newspapers and hospitals with the message that art can be used as an aid in the process of healing from illness. He devoted years of his life to the development of art therapy as an official profession. In 1945, Hill wrote the book *Art Versus Illness*, publicizing his beliefs of the positive value of the arts (Waller, 1991). Adrian Hill’s approach can be compared to the modern-day *art as therapy* approach, where the art-making process is viewed as the therapeutic factor.

In another area of England, in the year 1941, a couple by the names of Irene Champernowne (Jungian analyst) and Gilbert Champernowne (craftsman) established an experimental centre for the arts and psychotherapy. They named the center Withymead. Patients began treatment there in 1942. By the 1950’s and 1960’s, the center had established an informal training program, assuring that the therapists also had knowledge of the art materials and how they can be applied in therapy. Although the center was fully established by this time, Irene Champernowne did not publish any documents about the treatment program at Withymead until the late 1960’s; therefore the international community may not have known about Withymead. Irene did not identify herself as an “art therapist”, but as a Jungian psychotherapist. She did however, campaign for the use of arts in psychotherapy for most of her life (Waller, 1991). The treatment philosophy at
Withymead can be compared to the modern-day *art psychotherapy* approach, where art is viewed as a tool in psychotherapy.

In 1949, the first conference devoted to the practice of art and music therapy was held in England. As the ideas spread, England’s National Health Service continued to hire more artists and art teachers to run programs within health care facilities. After years of individuals dedicating their careers and efforts to the promotion of art therapy, in 1966 the *British Association of Art Therapy* (BAAT) came together for their first official meeting. The first graduate training program was established three years later (Waller, 1991).

Based on the art programs that were growing in the hospital community, in addition to many psychotherapists who where using art with their patients, a number of common ideas developed, defining the practice of art therapy. Hogan (2001) states that, three approaches to the philosophy and practice of art therapy developed:

i) Psychoanalytically based art therapy, applying the theories of psychoanalysis to the relationship between the client, the artwork, and the therapist.

ii) Art psychotherapy, placing the verbal component of the therapy at an equal level if not higher than the art-making component.

iii) Art as therapy, placing the whole emphasis within the therapy on the art-making process, giving little attention to the verbal component.

These three approaches to the practice of art therapy in Britain became very influential to the practice that developed in America.
Art Therapy in America During Erikson’s Life

Art therapy in America split mainly into the two approaches that could be seen in Britain. These were, *art as therapy* and *art psychotherapy*. America also had its own individuals who strongly influenced the development of the field of art therapy. The contributions of two individuals specifically, Edith Kramer and Margaret Naumburg, will specifically be explored.

In the years preceding the Second World War (1939-1945), many Jewish analysts fled from Europe to America to escape the anti-Semitic Nazi regime. One of these analysts was Edith Kramer who emigrated to the United States in 1938 (Kramer, 2000). As a child and young adult, Kramer grew up in Vienna, surrounded by artists and psychoanalysts. Kramer recalls “and so I became acquainted in my early youth with psychoanalytically informed education and with child analysis as practiced by Anna Freud, Erik Erikson and other early child analysts. I also read the early papers of Ernst Kris” (Kramer, 2000, p. 21). Her diverse training included her own personal Freudian analysis, art, art education, and psychoanalytical psychotherapy (Kramer, 2000).

In 1950, Kramer established an art therapy program at a private school. At this time there were still no formal training programs to become an art therapist. She later went on to teach and write, taking the perspective of “art as therapy”, educating upcoming art therapists and the public about the benefits of creating art (Kramer, 2000). Her first book was published in 1958 (Galbraith, 1978).

Margaret Naumburg (born 1890) was another individual who highly influenced the current field of art therapy. Her academic training consisted of education and psychology. In 1915 she established the Walden School. This was a private school that
provided education based on principles of psychoanalysis. Children that attended the school often came from parents who were artists, professors or psychoanalysts.

Naumburg (1966) recalls:

I directed the spontaneous, free art expression of groups of children. It was then that my deep interest was stirred by the original and amazing images that these young children created from their unconscious. The conviction that such free art expression in children was a symbolic form of speech basic to all education grew stronger as the years passed. I concluded that such spontaneous art expression was also basic to psychotherapeutic treatment. (p. 30)

Naumburg went on to promote the use of art psychotherapy to the field of mental health as well as the general public. In 1958, she began teaching undergraduate courses on the subject of dynamically oriented art therapy (Naumburg, 1966). In 1961, the Bulletin of Art Therapy began to be published. An Art Therapy graduate program was not established until the late 1960’s. Since this time, the profession of art therapy in the United States has grown tremendously.
Chapter 2: Erikson’s Early Years

In this chapter, Erik Erikson’s (referred to as Erikson or E. H. Erikson) early strengths in the visual arts and influences will be examined. Erikson’s years of training as an educator and psychoanalyst will then be described, along with how he integrated his identity as an artist into these fields. The last portion of this chapter will describe how Erik met and married Joan Erikson (referred to as Joan Erikson or J. M. Erikson), and their relocation to America.

*Erikson’s Childhood Influences*

Many individuals who become visual artists, discover early in life that they have an innate talent for hand-eye coordination and visual creativity. If they are fortunate, they may have a supportive mentor in their personal world, who fosters this artistic creativity. As these young individuals grow, they may pursue this strength because it may provide them with a sense of competence, value, and identity. For these reasons, it is important to examine how Erikson’s talents were fostered as a child and adolescent, in order to understand how he may have identified with the artist in himself.

On June 15, 1902, a woman by the name of Karla Abrahamsen gave birth to a son near Frankfurt, Germany. She named him Erik. She was a single mother who came from a respected Jewish family in Copenhagen. She left her home in Denmark to start a new life for herself in Karlsruhe, Germany. She settled there among friends and this is where Erik was raised (Coles, 1970; Friedman, 1999; Welchman, 2000).

When Erikson was two years old, he became ill and his mother had to take him to see a local pediatrician, Dr. Theodore Homburger. This doctor was able to help the young boy, and in the meantime he fell in love with the single mother (Coles, 1970). The doctor
proposed marriage to Ms. Abrahamsen on the condition that her son take Homburger’s surname and be identified as the biological father. Abrahamsen accepted this offer, pleased to move on from her past. On Erikson’s third birthday, his mother married Dr. Theodore Homburger. The little boy traveled with the couple on their honeymoon, back to Copenhagen to meet with Karla’s family (Friedman, 1999). Friedman (1999) describes a woodcut depicting Erikson’s memory of this event that he carved when he was a young man, and later gave as a gift to his psychoanalyst, Anna Freud:

Erik made a woodcut of the honeymoon boat ride to Copenhagen. It was a study of a tense, worried and angry young boy in a sailor’s suit who felt lonely and apart from his parents. They appeared on the ship’s deck, seated and embracing. Erik had turned his back on them and looked up to the ship’s captain on the bridge. One interpretation was that the captain was his real father and he wanted to climb a ladder to join him.

(p. 32)

Before the age of three, when Erikson and his mother had been living on their own, Erikson (1975) recalls:

Then her friends had been artists working in the folk style of Hans Thoma of the Black Forest. They, I believe provided my first male imprinting before I had to come to terms with that intruder, the bearded doctor, with his healing love and mysterious instruments. Later, I enjoyed going back and forth between the painter’s studios and our house. My sense of being ‘different’ took refuge (as it is apt to do even in children without such acute life problems) in fantasies of how I, the son of much better parents, had been altogether a foundling. In the meantime however, my adoptive father was anything but the proverbial stepfather. He had given me his last
name and expected me to become a doctor like himself. (p. 27)

According to Friedman (1999), young Erikson was also attracted to the visual arts at a young age because he believed that the path would lead him to his biological father whom he imagined was also an artist.

Following the marriage of his parents, Erikson and his mother moved into Dr. Homburger's family home in a Jewish community. It was large and provided him abundant space to play in the outdoors. His true paternity was never spoken of in the home. This secret created tension around the subject, especially since he had the strikingly Dutch characteristics of light blonde hair and blue eyes. For reasons unknown, he was not legally adopted by the doctor, changing his name to Homburger, until five years after the marriage. In 1909 and 1912, his two half sisters were born. They were not close to Erikson growing up, and they were unaware that he was a half-sibling until they were adolescents (Friedman, 1999; Welchman, 2000).

From the ages of six to ten, Erikson attended primary school. There were two types of secondary school at that time; one was called a reform, specializing in the areas of science, the second was called classical, specializing in the areas of language and the arts. Erikson attended a classical secondary school from the ages of eleven to eighteen (Coles, 1970). These years were also the years of the First World War. On the day of his bar mitzvah, Karlsruhe was bombed by France. In school, Erikson did not work well within the rigid, methodical environment. He felt that this restricting atmosphere, lacking the focus on the fine arts that he felt he needed was crushing his spirit. The majority of his other classmates intended to enter into professions such as law, medicine and banking. He knew as an adolescent that he desired to focus his life path towards the arts and crafts,
a path that was not well respected within the Jewish community that he belonged to. His stepfather still wished for him to go into medicine, a path that Erikson refused to take. His grades were generally average to poor. He did excel in the subjects of ancient history and art however, and he did graduate (Coles, 1970; Friedman, 1999).

One outlet that Erikson had as a child and adolescent was his friend Peter Blos. The two boys grew up in Karlsruhe and attended school together. Erikson (1987) recalls:

Peter and I grew up in the city of Karlsruhe, the gateway to the Black Forest. We both came from families of mixed regional and religious backgrounds and we are both sons of bearded physicians, a fact which, I believe, gave us a similar professional imprint.

(p. 709)

Erikson often took refuge from the pressures put on him by his own family by spending time with the Blos family. He enjoyed watching Peter’s mother, an artist, create her oil paintings (Friedman, 1999). Erikson knew he was different from his family. As an adult he states: “At the time, like other youths with artistic or literary aspirations, I became intensely alienated from everything my bourgeois family stood for. At that point I set out to be different” (E. H. Erikson, 1975, p. 28).

When graduation day came, Erik found himself in a position of desperation, not knowing what direction to take in life (Coles, 1970).

*Erikson’s Training as an Artist and His "Wanderschaft" Time*

In this section, Erikson’s struggle with his identity as an artist is explored. The reader will be taken through his bumpy road of adolescence when he tries to figure out where he fit into the world and how his skills and interests could be applied. Current art therapists may be able to relate to this process of having felt disoriented between worlds while
trying to find a suitable profession to commit to.

Erikson graduated from secondary school, not quite sure what he wanted to do with his life. He spent a year hiking in the Black Forest, sketching and reflecting. As an adult, he looked back on this time with affection, viewing it as part of a cultural ritual that youth often go through in search of identity. He refers to the phenomena as a time of wandershaft which he describes as a “neurotic driveness as well as deliberate search” (E. H. Erikson, 1975, p. 25). After a year of wandering, he made the conscious decision that he wanted to be an artist, straying completely from his stepfather’s path. He believed that as an artist, he could possess “at least a passing identity” (E. H. Erikson, 1975, p. 28). Erikson recalled, “I had to cultivate not-belonging and keep in contact with the artist in me” (E. H. Erikson, 1975, p. 29). He followed his instinct to become an artist.

In 1921, at the age of 19, Erikson enrolled at an art school in Karlsruhe called the Badische Landeskunstschule. It seemed to be exactly what he needed at that time in his life. The school was run like an open studio by a man named Gustav Wolf. Wolf was also Jewish and the Homburger family was acquainted with him. Wolf became a mentor for Erikson. That year, Wolf published a booklet on how to create and print wood engravings. The booklet was titled Das Zeichen-Buchlein. The majority of the illustrations in his booklet were done by his students. Some students created copies of works previously done by artists such as Albrecht Durer and Vincent Van Gogh. Other students created their own images and made woodcuts from them. Erikson turned one of his sketches into a print that appeared at the beginning of the booklet. Friedman (1999) describes this print as being the most striking of the illustrations. Friedman describes the
image as follows: “It was a full page landscape showing a fierce sun radiating power and facing a vicious snake that was wrapped around a tree atop a mountain.” (p. 45).

The booklet also contained some of the philosophical writings of Gustav Wolf, regarding artistic creation, the mind and the spirit. Wolf asserts that the artist must uncover the spirit in himself and in the society in which he lives, only then will the artist fulfill his destiny (Friedman, 1999). Friedman describes another one of Erikson’s expressive woodcuts: “Erik’s sketch of a mountain top scene with unusually shaped shrubs, a horse, a cow, birds overhead, and a boy sleeping by a tree amid disturbing weather conditions was especially powerful” (p. 46). Wolf’s philosophy may have been very influential for Erikson, regarding the work he would accomplish later in life. According to Friedman (1999), Wolf’s book was one of the very few that Erikson kept with him during his life travels, until his death.

After a year at the Karlsruhe art school, Erikson desired to advance to the Munich Kunst-Akademie, in hopes of furthering his artistic skills. He traveled to Munich in 1922 to continue his art training. He did not find a mentor like Wolf at this school. He continued to create woodcuts and graphite sketches. Friedman (1999) describes Erikson’s work as “extensions of the German naturalist and expressionist rebellion against pseudo classical style” (p. 46). According to Friedman (1999), Erikson viewed himself as an impressionist because of his fondness for nature as subject-matter, however he also compared his work to expressionist painter, Van Gogh, due to his love of vibrant energy that he portrayed in the landscapes that he sketched and carved. Regarding the process of his art-making, Erikson (1975) later stated: “Sketching can be a fundamental exercise in tracing impressions. And I enjoyed making very large woodprints: to cut
stark images of nature on this primary material conveyed an elemental sense of both art and craft” (p. 28).

According to the aims of Impressionism and German Expressionism, which focused on portray ing nature and the artist’s emotional experience of his subject matter, it would seem that Erikson was somewhere between the two. He was observing nature as a subject for his artwork, and he seemed to be increasingly including more of his own personal experience of that subject-matter into his pieces. One could wonder if he was finding his spirit through his creations.

Erikson continued to create brilliant and expressive woodcuts that gained him recognition. According to Friedman (1999), Coles (1970), and Welchman (2000), a number of Erikson’s imaginative woodcuts were chosen to be displayed in Munich’s Glaspalast, alongside the work of now-famous Expressionist artist, Max Beckmann and Germany’s most famous Expressionist sculptor, Wilhelm Lehmbruck. No further information could be found on how this exhibition came to be, or what Erikson’s relationship was to these other artists. This may be due to the unfortunate fact that the Glaspalast burnt down in 1926 (Haus der Kunst, 2006). As well, no further details could be found regarding his growth as an artist following this period of recognition.

In another section of Friedman’s (1999) biography, Erikson speaks about becoming discouraged with the path he was on at that time, in regard to his art-making. He felt that he stood in the shadow of artists like Michelangelo, Courbet, and Van Gogh. He believed that he became very inhibited when it came to the use of the bold colours and paint that other artists were using. Erikson tried to develop past his black and white sketches, woodcuts and prints, but felt that he never learned how to do that. He decided that if he
wanted to make a career out of being an artist, he would have to feel more comfortable with paint and colour. This intense period of discouragement led him to abandon his potential career as an artist.

Much later in life, during a panel discussion with patients at a hospital where he would later work, Erikson asked a patient:

Do you think that sometimes one gives up an activity because one feels obligated to do something very good? When once one had done a few really good things, is it too much taken for granted that one keeps it up? Especially if one came to Riggs in a mood of not wanting to commit oneself so soon to anything? I assume that quite a number of people here— at least I saw that in the past— can’t commit themselves to the shop because it is as if they might be committing themselves to a way of life or even a career before they were ready for it. (J. M. Erikson, 1976, p. 94)

One could wonder, if Erikson felt less pressured to create artwork like other artists, would he then have continued to excel in creating his own pieces, possessing the sense of self-efficacy and motivation needed, to keep on his desired path of life as an artist?

From the month of August in 1923, Erikson began carrying a sketch book with him. However, instead of drawing in it, whenever he opened the pages he desired to write. He filled approximately 140 pages with his writings, believing that perhaps this was to be his new creative medium.

Erikson did not continue on the career path of becoming an artist. Discouraged, he left the Akademie and returned to Karlsruhe at the age of twenty-three. At a loss again for direction in life, Erikson traveled to Florence, Italy to spend some time with his friends, Peter Blos and Oscar Stonorov. He considered himself a “bohemian” (E. H.
Erikson, 1975, p. 28). Erikson and Oscar continued to sketch and carve woodcuts, while Peter wrote poetry. Erikson looked back on this time in his life and believed that he and his friends were experiencing what he would later define as a *psychosocial moratorium*. They were simply living and waiting to find a career to commit their lives to (E. H. Erikson, 1987). Erikson believed Florence to be the perfect place where “one could absorb principles of artistic form and of the human measure” (E. H. Erikson, 1987, p. 711). He later stated, in regard to his wandering years, “I now consider those years an important part of my training” (E. H. Erikson, 1975, p. 75). Erik felt at this point that he no longer wanted to be an artist, but he was unaware of other options.

Erikson then decided to give the artist in him another chance, but this time as a teacher. At the age of 25, he returned to Karlsruhe with the intent to work with Gustav Wolf as a teacher at the art school. He took up studying again, preparing to undertake this new profession (Coles, 1970; Friedman, 1999).

*Teaching at the Hietzing School in Vienna*

Like many art therapists, Erikson was still interested in the practice of his own art making but he also craved to explore working with others through visual art. As the profession of art therapy was undeveloped, the occupation of teaching was the next available option. Erikson began his years teaching without formal training; however he later completed formal training through the Montessori Teacher’s Association. His formal Montessori training will be explored in a following section, in accordance with his timeline.

At the age of twenty-five, Erikson began studying again to become an art teacher. He was not doing this long before a letter arrived for him, from his friend Peter Blos. The
letter requested that Erikson join him in Vienna (Coles, 1970).

According to Coles (1970), while Erikson had traveled back to Karlsruhe, his friend Peter Blos had traveled to Vienna, where he was completing his doctorate in biology. While in Vienna, Blos met an American woman by the name of Dorothy Burlingham, a member of the Tiffany family in New York. Ms. Burlingham traveled to Vienna with her four children to undergo psychoanalysis with Freud and later train under him and his daughter Anna. Blos was hired by Burlingham as a private tutor for her four children. Due to the close proximity of Blos with the Burlingham family, he also became well acquainted with the Freud family. Blos did not intend to continue working as a tutor for an extended period of time however, he desired to move on. When he expressed this desire to Ms. Burlingham, she and Anna Freud proposed that he stay, with the incentive of running his own school for the children who traveled to Vienna with their parents. Blos accepted this offer.

A school was established in the nearby garden of a friend of the Freud family, Mrs. Rosenfeld. Approximately twenty children were expected to attend when the doors opened. Blos realized that he would need another teacher on the premises. He thought of his friend Erikson and proposed the idea to Burlingham and Anna Freud (Friedman, 1999). Blos also informed them that Erikson was an artist who could draw portraits of the Burlingham children (Roazen, 1976). The two women approved the proposal. Blos wrote to Erikson, inviting him to Vienna. Erikson accepted. With the financial assistance of Dorothy Burlingham, Erikson traveled to Vienna in the year 1927, at the age of 25 (Friedman, 1999).
At the time when the Hietzing School opened its doors in Vienna, a wave of new, experimental, progressive philosophies in education were emerging. According to Welchman (2000), Otto Glockel was the Austrian Minister of Education at that time. Glockel promoted the development of a more child-centered system of education whereby individual needs were taken into consideration. Peter Blos was inspired by the educational philosophies of John Dewey. Erikson was inspired by the education approach advocated by Maria Montessori. Both the Dewey and Montessori schools of education were progressive in nature, allowing the children to be involved in how their lessons were taught.

Erikson and Blos were permitted to run the school as they saw fit. It was named the Hietzing School. At the time it could have been compared to a modern-day progressive or experimental school. Erikson had some previous experience working with children; however they were usually his subjects for portraits as opposed to students. Erikson taught the subjects of art, ancient history, and mythology. Blos taught Geography and the sciences. As well, some part-time teachers were brought in to instruct English, Latin and Mathematics (Coles, 1970; Friedman, 1999). The children at the school were taught as individuals. They were not graded or compared to one-another. Their opinions and ideas were included in the organization of the curriculum and how it was to be taught. Erikson greatly promoted creativity in his approach to teaching. He taught the children how to paint and draw. Following his lessons on history or German literature, the children were given the option to make art about what they had learned in their lessons (Friedman, 1999). A Christmas journal from 1929 included the memory of a child: “To illustrate the lessons Herr Erik drew so many posters that by the end of the year they covered all the
walls” (E. H. Erikson, 1987, p. 711). The Christmas journal also included a number of woodcuts that were made by the children, illustrating their personal themes (E. H. Erikson, 1987).

The children at the Hietzing School were a special population. Their ages ranged from approximately eight to fifteen years. Many of the children’s parents were undergoing analysis or were training to become analysts. Approximately seventy percent of the children were undergoing analysis themselves with Anna Freud. Some of the children came from well educated, cultural backgrounds (Friedman, 1999). Many of the parents were very intrigued with the idea of how psychoanalysis and education could be blended together (E. H. Erikson, 1987). Many of the children came from parents who were divorced or had strained marriages. For some of the children, their home life was so detrimental that they were granted room and board at the Rosenfeld home (Friedman, 1999). Many of these children possessed similar lives within the years they shared together at the school. They were sheltered from the economic depression and the growing anti-Semitic atmosphere within Vienna. Erikson believed that by applying the educational approach of letting the children direct themselves towards their interests and express themselves through art, he was able to gain their trust and they became more able to “express to him their inner needs and fears” (Friedman, 1999, p. 64).

As the development of the school continued, both Blos and Erikson were invited to begin their own analysis and training. Anna Freud became Erikson’s analyst. This relationship later became more complicated, as Anna Freud, along with Rosenfeld and Burlingham, in 1929, began to disapprove of the teaching styles of Erikson and Blos. The women believed that the two teachers were being too permissive and protective of
the children, sheltering them from the outside world. Erikson later contested that this was not true (Friedman, 1999).

In the year of 1929, Erikson also met an American woman by the name of Joan Serson; the two married and Joan began teaching English at the school alongside her husband.

By 1932, The Nazi party in Germany was beginning to grow stronger, as was the anti-Semitic atmosphere. Sensing the events on the horizon, Jewish analysts were beginning to flee from Austria. Joan taught English to analysts who were preparing to travel to America (Coles, 1970). The golden age of psychoanalysis in Vienna was coming to an end. The owner of the property where the school was built planned to move to Berlin. Therefore the school closed in the year of 1932. It had been running for a total of five years (Friedman, 1999).

Erikson’s Training in Psychoanalysis

In this section, Erikson’s process of identity integration between the artist and the therapist in himself is explored. One could compare the peace he found from this integration to feelings of harmony experienced by an individual in his position, after discovering the field of art therapy. As well, this section serves as a context for the beginnings of how Erikson would develop his psychoanalytic theories from a visual perspective.

In the days of psychoanalytic training during the time of Sigmund Freud in Vienna, candidates did not apply for the training program, having to go through evaluations and interviews as the process is today. Candidates could simply be observed and chosen to enter into the elite society (Coles, 1970). Anna Freud had begun to develop the branch of
child psychoanalysis by the time Erikson came to Vienna (Friedman, 1999). Through the months of observing his interactions with the children, Anna came to believe that Erikson could be a good analyst (E. H. Erikson, 1975). Erikson did not know very much about psychoanalysis, and upon the start of his own analysis, he had no intent on making a career from it. At that point he was still not able to commit to a profession as a teacher. As much as he tried to resist over the years, his passion still lay in fine arts. He still wished to be an artist (Coles, 1970).

Erikson was accepted into psychoanalytic training on a scholarship. Through his analysis with Anna, many painful themes around the issue of identity emerged, memories and experiences that Erikson had tolerated his whole life, up to that point. According to Friedman (1999), Erikson felt that he spent a great deal of his childhood learning how to navigate through split realms such as “Judaism and Christianity; Denmark and Germany; mother, stepfather, biological father” (p. 42). One could wonder if the fields of art and therapy would also be on his list. In regard to this time in his life, Erik (1975) once stated: “I had to cultivate not-belonging and keep in contact with the artist in me” (p. 29). Erikson’s clinical lectures were taught by August Aichhorn, Edward Bibring, Helene Deutsche, Heinz Hartmann, and Ernst Kris. Under the supervision of Aichhorn, Erikson began seeing his own patients as well (Coles, 1970).

In addition to his psychoanalytic training, he began further training in education at the Lehrerinnen Verein, through the Montessori teacher’s association in Vienna (Coles, 1970). Over the next few years, he also took courses at the University of Vienna in the subjects of psychology, art history and medicine. He had no clear goal in mind however so he did not complete a degree. He continued to teach at the Hietzing School and attend
his psychoanalysis and his various courses (Friedman, 1999). Anna Freud continued to encourage Erikson to commit to the career of child psychoanalyst. Erikson continued to feel torn between that career and his identity as an artist. He was continually wrought with torturous feelings of ambiguity over how he could merge the artist and the psychoanalyst within him. According to Friedman (1999), Erikson often felt that Anna could not grasp the difficulty he experienced, translating his images into words. Erikson states: “I, born to be a painter, tried to say in words what I saw on my inner screen in my training analysis” (Friedman, 1999, p. 79). Anna did support his joining of the two fields however, letting him know that the combination of art and psychoanalysis was not unusual (Friedman, 1999). Many years later, Erikson (1975) recalls one of his sessions with Anna in an autobiography:

> When I declared once more that I could not see a place for my artistic inclinations in such high intellectual endeavors, she said quietly “you might help to make them see”.

As I continued with a conceptual account of my training, this simple mandate must be assumed to shine through the (to me) often obscure attempts to make a science out of the data observed in the psychoanalytic setting. When, several decades later, I wrote my first book (Childhood and Society), I think I found that clinical writing lent itself to artistic as well as theoretical expression. (p. 75)

In addition to this account, Friedman (1999) found a video-taped interview where Erikson recalls a slightly different account of the same event. In the video-tape, Erikson recalls the same declaration to Anna, but then he reports that she did not reply back to him until the following day, after she had spoken with her father. In this second account, it was Sigmund Freud’s advice to Anna to tell Erikson that he could “help us to make
them see” (Friedman, 1999, p. 69). According to Friedman (1999), Erikson appreciated this view very much and began to value himself as an artistic psychoanalyst. In regards to this reply from Sigmund and Anna Freud, Erikson later stated “That kind of thing can decide your identity” (Friedman, 1999, p. 70).

Erikson’s mind soon began to open to the possibilities that his artistic qualities could be of value to the field of psychoanalysis. Perhaps with this open mind he began to see how some of the underlying concepts of the field of visual art were already in existence in the practice of psychoanalysts. In Robert Coles’ (1970) interview with Erikson, he asked him how he first began to conceptually bridge the fields of art and psychoanalysis, Erikson replied:

I began to perceive how important visual configurations were, how they actually preceded words and formulations: certainly dreams are visual data, and so is children’s play, not to speak of the “free associations” which often are a series of images, pure and simple-only later put into words (p. 23).

Erikson soon learned that one of his clinical instructors, Ernst Kris, among other psychoanalysts, also had formal training or interest in the visual arts. According to Friedman (1999), Erikson was influenced very much by Kris’ philosophy of regression in the service of the ego. Friedman explains this concept as follows: “As the ego regressed, Kris argued, it could find direct access to id energies for its own purposes. Kris felt that such regression in the service of the ego was especially evident when an artist made a cultural product” (p. 94). Erik also became sensitive to the artist that he perceived in Sigmund Freud. Erikson (1975) recalls:

I soon detected in Freud’s writings vivid manifestations of an indomitable visual
curiosity, which sent him hurrying to Italy and through her city squares and museums when ever his work permitted. His description of his patient’s memories and dreams also reveal that he deeply empathized with their imagery before he entered what he had heard and seen into the context of verbal nomenclature. (p. 30)

According to Friedman (1999), the sitting room that Erikson would wait in before his appointments with Anna was also shared by Freud’s analysands. Erikson observed Freud’s influence on the room. It contained a large number of statues, sculptures and antiques from the ancient Mediterranean. Erikson he continued to be convinced of Freud’s knowledge that visual imagery was the key to psychoanalysis. This strong conviction kept Erikson on the path of that profession. He would later use Freud’s theories of dream interpretation as a basis for his own theories regarding children’s play.

As Erikson continued to study the works of Sigmund Freud from the perspective of the visual artist, his appreciation for the man grew. He began to compare Freud to the stepfather that he could not relate to. Erikson remembers how Freud “was a doctor like my adoptive father” (Friedman, 1999, p. 73). Freud’s artistic side however became significant as a reparative quality in Erikson’s life, helping to heal the feelings of loss and rejection from his biological father, whom he also fantasized was artistic. Erikson recalls that Freud was “the most creative person I ever met and in whose work circle I also was welcome” (Freidman, 1999, p. 74). As Erikson read through The Question of Lay Analysis, he discovered how Freud truly admired individuals who pursued the quest of finding their way into a child’s mind. Erikson seemed to take this quest to heart, perhaps seeking the recognition and admiration he had desired from his biological father.
In Erikson’s (1975) autobiographical account of his years in Vienna in the early 1930’s, he recounts:

I identified with Freud, then, not so much as the former laboratory worker who insisted on a terminology made for the observation of transformable quantities of drive enlivening inner structures, but as the discerner of verbal and visual configurations which revealed what consciousness wanted to enlarge upon, and what it attempted to disguise- and revealed. (pp. 39-40)

Finally Erikson (1975) concludes that: “Freud’s phenomenological and literary approach, which seemed to reflect the very creativity of the unconscious, held in itself a promise without which psychoanalytic theory would have meant little to me” (p. 40).

By 1933, Erikson had completed the requirements of his psychoanalytic training and was granted membership to the Vienna Psychoanalytic Society, making it possible for him to practice and train others internationally (Coles, 1970).

Montessori Education Training

The following section will examine how Erikson’s formal education training in a child-centered approach influenced his psychoanalytic practice and theories. The reader is requested to keep in mind that many pioneer art therapists were originally trained as educators in a child-centered approach.

When Erikson began teaching at the Heitzing school in 1927, he had no previous teaching experience. After two years of teaching at the school, Anna Freud suggested that he pursue further training in education. In accordance with the approach that came natural to him, he began to study at the Lehrerinnen Verein, the Vienna Montessori Women’s Teacher’s Association (Coles, 1970; Friedman, 1999). He earned a diploma in
this approach to education in 1932, while he was training in psychoanalysis and taking
courses at the University of Vienna. Each field of study influenced his perceptions in the
other fields he was training in.

From his Montessori training, he learned how to observe each child differently. The
Montessori approach was very reality-oriented however, and did not take into account the
symbolic meanings behind children’s play configurations. Erikson began to view for
himself how play could reveal the inner fantasies and experience of the child. He began
to more consciously witness how each child used objects in his or her play space (Coles,
1970). This conscientiousness carried over into his work with the children at the school,
and the children he was seeing in his psychoanalytic practice. Erikson (1975) recalls:

But as I ask myself once more how an artist and teacher could find a place in a clinical
and scientific movement so intensely verbal, three impressions stand out. One is that
my first acquaintance with the psychoanalytic view of childhood coincided with a
period of daily contact with children, and my first study of dreams with the
observation of children’s play. (p. 29)

The Montessori training helped Erikson to bridge the visual language of children’s play
and imagery in the school’s project books, with their social world. Erikson later wrote a
paper as part of his psychoanalytic training titled *The Fate of Drives in School
Composition*. According to Friedman (1999) this paper outlined Erikson’s convictions
that using visual methods of instruction with the Heitizing children “helped him to
discover and free their inner psychological lives” (p. 70).

*Meeting Joan*

This section will briefly introduce the reader to Erikson’s future life partner, Joan
Erikson. He was unaware at this point that she would later become an exceptional influence and collaborator in his life's work.

It was two years after Erikson had been invited into the Vienna circle that he met a woman by the name of Joan Serson. He was twenty-seven years of age and she was twenty-six years of age. Little did he know of the life-changing influence she would have on him.

Sarah Serson was born in the year 1903, in Gananoque, in the Thousand Island region of Eastern Ontario, Canada. Her name was later changed to Joan. By the time she was twenty-six years of age, she had already completed a Bachelors degree in education at Bernard, a Masters degree in sociology at the University of Pennsylvania, and she was currently completing her doctorate in education, specializing in modern dance at Columbia. She traveled to Europe to research the origins of specific schools of dance in Germany following World War One. In addition to her academic experience, she too had undergone psychoanalysis with one of Freud's followers (Friedman, 1999; Coles, 1970).

While Joan was in Vienna, she came across the opportunity to teach at the Heitzing School. When she went for her interview, she met Erik briefly. Soon after that day she attended a Mardi Gras masked ball. Joan and Erik met again at the ball and danced all night. They fell in love and Joan began teaching at the school (Coles, 1970; Roazen, 1976). The following spring, she became pregnant. Erik did not want to marry her at first, feeling that it was too great a commitment, but his friends encouraged him to do so. The two had a very low-key wedding in the autumn of 1930. Although Erik did not practice his Jewish religion, Joan converted to Judaism for him (Friedman, 1999).
Erik and Joan lived in a very small house just outside of Vienna. Joan gave birth to a son that they named Kai. They did not have a lot of money but they both had a great deal of ambition towards the fields of art and science. Friedman (1999) describes a sewing box with a woodcut on the top that Erikson made for his wife:

In the woodcut was a picture of their tiny house on the Kueniglberg hill overlooking Vienna, and Kai on the porch reaching for an apple from a nearby tree. The family dog appeared in the background. A sense of calm and contentment pervaded the picture. The scene echoed the theme of a sketch of Joan nursing Kai that Erik had made some months earlier reflecting joy, peaceful, and close bonding (p. 84).

Three years later Joan Erikson gave birth to another son that they named Jon. Joan continued to teach, however with the full responsibility of two children to care for along with the house chores, she was not able to keep up with the demands of her doctoral studies. Due to her full dedication to her family and Erikson’s growing career, she was no longer able to continue on her academic path. For reasons that Friedman (1999) did not explicitly mention, Joan did not appreciate the field of psychoanalysis or the influence of Sigmund and Anna Freud on her husband. One could speculate that she may have had some feelings of resentment for giving up her own passions in life to support those of her husband’s. Those who knew Erikson well, including Erikson himself, assert that his wife kept him organized and structured, and that her influence on his career was substantial. Erikson (1987) reminisces on how both he and Peter Blos had found their mates: “In Vienna, too, we found our wives, a Swede and a Canadian, respectively. We solemnly approved of each other’s choices and, what is more, we still do, knowing full well that our wives have saved us from our wandering selves and from too much
Move to America

World War II was on the horizon, and like many Jewish artists and psychoanalysts, Erikson and Joan felt the urgent need to move their family far away from the growing turmoil.

The Heitzing school closed in 1932, and in 1933 Erikson finished his training to become a psychoanalyst. He was granted full membership into the Vienna Psychoanalytic Society, giving him the opportunity to practice and train others internationally. Erikson (1975) recalls that around the time Hitler was elected chancellor, he and his wife decided to move their family to Copenhagen.

They lived in Copenhagen for a very brief period of time, and then Erikson met a fellow follower of Freud who was moving to Boston in the United States. The man's name was Hanns Sachs. Sachs assured Erikson that if he moved to Boston, he and his family would have a place to stay (Coles, 1970). With this good fortune, Erikson and his wife moved to Boston, away from the dangers of war. Erik and Joan changed their surnames from Homburger to Erikson. Erik gained a teaching and research position at Harvard. Joan later gave birth to another son named Neil, and a daughter named Susan (Friedman, 1999).
Chapter 3: Integrating the Art into the Therapy

This third chapter will examine how Erikson began to use his strengths as a visual artist to help him to gain insight into the lives of his patients. First the reader will be introduced to one of his early essays on the topic of children’s picture books, then his theories of play will be explored, and finally his ideas on how art should and should not be used with therapy.

*Children's Picture Books*

Erikson created an identity for himself as an artistic psychoanalyst. He begins his academic career with an essay regarding the effects of visual imagery on children’s development.

Before Erikson emigrated to America, he wrote and presented a number of papers in Vienna. In 1930, he presented a paper titled *Children’s Picture Books*. The paper was published in “Zeitschrift Fur Psychoanalytische padagogik”, under the name of Erik Homburger (E. H. Erikson, 1987).

In this paper, Erikson examines the connection between the mind of the artist, regarding the subject matter of the artist’s picture books, and the child viewer. Erikson then questions the emotional impact that sadistic images, found in *Struwelpeter* picture books, a specific series of books that teach children lessons on behavior, have on children and how they relate to the imagery on a psychological level (E. H. Erikson, 1987).

Erikson then examines Medieval images of Mary and the baby Jesus. He points out the adult characteristics of the child’s face and questions why, in a social context, the artists felt the need to make the child’s face look adult. Erikson observes: “One might initially believe that the Christ Child was meant to be depicted as an ‘old infant’, mature
at birth and childlike in death” (p. 32). Erikson builds a case depicting how artists of picture books deny the innocence of childhood. He wonders if the pictures may represent repressed childhood experiences or fantasies of the artist. Erikson also examines how this phenomenon may impact the psychological development of a child. He specifically examines the development of the super-ego with children’s enjoyment of the sadistic picture books, as well as the “excessively childish and saccharine” (E. H. Erikson, 1987, p. 32) picture books. As the child learns what is appropriate and inappropriate behaviour, he develops an inner mechanism to control his own behavior, in accordance with the measures of his society. When children view picture books where one is being punished for behaving inappropriately, or rewarded for behaving appropriately, their inner control mechanism is affirmed, therefore creating a sense of harmony with their inner and outer worlds (E. H. Erikson, 1987).

Erikson observes, in some instances, that children may develop an overly-harsh super-ego. This development may result in the experience of self-directed sadism within the child, which can then result in cruelty toward others. In contrast to the negative aspects of the sadistic picture books, Erikson also examines the ways in which humor is often used in these images along with the punishment. He believes that humor has the potential to relieve the pressure from an overly constraining super-ego. Some of the areas he stated, that he was not able to explore, included the visual symbols, the fairytales the images were depicting, and the style in which the story and characters were depicted. He did not state the reason why he was not able to explore these areas (E. H. Erikson, 1987).

Erikson concludes by stating that even though sadistic picture books can be harmful to the development of a child’s superego, this is not always the case and is not a reason to
ban them from children. He cautions teachers to be aware of children who do become frightened by the images because chances are, such children have already had a negative experience but have not been able to express it until seeing the image. The sensitive educator may then refuse to offer such a book to an already frightened child and question his psychological symptoms (E. H. Erikson, 1987).

Erikson’s Theories on Children’s Play

Before being trained as psychoanalyst, Erikson was trained as an artist. He was born with a natural inclination to vividly see the world that lay before him and he learned to portray what he perceived as visual images on paper. As he became a psychoanalyst, he continued to view the world around him through the eyes of an artist. Through his training in psychoanalysis, he learned the language of psychology and the unconscious. He soon realized that knowing the language of visual imagery was an asset in regard to understanding the unconscious world of the children he worked with. This area of Erikson’s work could be viewed as extremely valuable to practicing art therapist, drama therapist, play therapist, or sandtray therapist. The act of play could be viewed as the core of each of these branches of the creative arts therapies. The play activities that Erikson describes, include the use of art materials, toys, writing, space manipulation, and role experimentation.

In 1937, Erikson’s clinical notes, Configurations in Play were published in volume 6 of the Psychoanalytic Quarterly journal. In these notes, he displays his many records and thoughts on the visual language of children’s play. Erikson (1977) defines play as: “to use objects endowed with special and symbolic meanings for the representation of an imagined scene in a circumscribed sphere” (p. 43). Erikson (1975) recalls: “To Freud, the
via regia to mental life had been the dream. For me, children’s play became the first via regia to an understanding of growing man’s conflicts and triumphs, his repetitive working through of the past, and his creative self renewal in truly playful moments” (p. 39).

Erikson (1987) compares a play act to a dream in the following statement: “A play act—like a dream—is a complicated dynamic product of ‘manifest’ and ‘latent’ themes, of past experience and present task, of the need to express something and the need to suppress something, of clear representation, symbolic indirection, and radical disguise” (p. 283). Children may not be able to reliably tell a therapist about their dreams or free associations, but what they naturally do, that is even more reliable than recollections from adults, is spontaneously create visual, concrete, play spaces (E. H. Erikson, 1987).

Erikson also found that children were able to communicate their life experiences more easily through play than through verbal means.

During Erikson’s practice with children, he would often sketch what they had built during their play and would analyze what he would later call configurations. More specifically, he paid attention to how the objects and the child were spaced within the play configuration. He would record how a child would arrange play objects with the construction of a house, as well as how the child’s body was associated with these objects and the house. He would then compare these three factors with the child’s clinical background (E. H. Erikson, 1987). Erikson valued these play configurations for their “rich interplay of form and meaning” (Welchman, 2000, p. 25). He attributes this method of child analysis to the visual language of communication that he learned in his training as an artist (Welchman, 2000).

Erikson (1987) found the play space itself to be an important factor in the power of
play. He uses the German word, *Spielraum*, to describe the “free movement within prescribed limits” (p. 315) that takes place when children play. In an uninterrupted playspace, the child can safely create the model scenario that he needs to play out. Erikson often found that children will create their spaces in one of two different ways: either as a *microcosm* or a *macrocasm*. In *microcosmic play*, the child will create a miniature world for herself, using toys and small built structures (for example, a family in a doll house). In *macrocasmic play*, the child will create a life-sized world for herself, using life-sized objects to carry out her imaginative dramatization of her inner world (for example, a tea party at a table with stuffed animals).

As Erikson (1987) continued to observe how children used toys in relation to their bodies, he found that toys can become an extension of bodily zones for children and that bodily organs can become interchangeable in play. He uses an example of a child who refuses to defecate so instead the child spits food out of his mouth. Erikson values play in this manner because children have the opportunity to experiment with different organ-modes in a physically and psychologically safe environment. Such observations can tell the trained observer where the child is on a developmental level.

The children that Erikson treated in his sessions used a variety of communication tools such as toys, plasticine, paint, drawing materials and poetry to express themselves. He cautiously states that different visual images and play configurations can have different meanings for all children based on their development, character and presenting problem.

Once the psychoanalyst has observed the child’s play long enough to draw some interpretations regarding the origin/s of the child’s problem, then he may tentatively begin to talk with the child at an age-appropriate level. If the psychoanalyst’s
interpretation is correct, then “the child’s behavior will lead the way as far as it is safe”

In 1940, Volume twenty-two of the *Genetic Psychology Monograms* contained
Erikson’s reports on studies he had carried out with preschoolers, observations, and
interpretations of their play (E. H. Erikson, 1987). Erikson contends that from a
psychoanalytical point of view, the act of playing helps children to learn and helps them
to heal. This can be viewed through a detailed connection between a child’s
psychological problems and the “content and form of individual play creations” (E. H.
Erikson, 1987, p. 140). Erikson (1963; 1987) believes that adults often use their words to
work through their problem, whereas children use play in a way that compensates for
their lack of verbal language. Play can also be very cathartic for children, helping them to
release tension and excess energy.

Children intuitively play to work out their problems. Erikson compares the restorative
functions of uninterrupted children’s play to the effects of a long nap for an adult. In
regards to the purposes of play, Erikson (1987) quotes Piaget’s statement: “In order for a
child to understand something, he must construct it himself, he must re-invent it” (p.
315). However, play can become problematic for a child, when he is no longer practicing
solutions to his problem in play, but is repeatedly projecting his inability to solve his
problem. When this happens, a trained observer can tactfully interpret the situation to the
child, and help the child to figure out what is not working and collaboratively develop a
solution to the problem. Erikson believes that the practice of child psychoanalysis can be
useful to help children who become stuck in their play process (E. H. Erikson, 1987;
1959).
Erikson (1987) describes psychoanalysis as "a method of research, a system of psychological and 'metapsychological' concepts and a social phenomenon. It rests on observation, on speculation, and on professional organization" (p. 144). The psychoanalyst can systematically observe how the child is using the toys, and what symbolic functions specific toys are fulfilling for the child. Children often experiment with organ modes through play. By observing the bodily zones (referring to the developmental stages of Sigmund Freud) that the child is symbolizing through play, the psychoanalyst can detect where the child is on a developmental level. More importantly, if the child has become fixated at one of these theoretical zones, then this problem can be observed in his play. Developmental progression may become compromised if the child is unable to move past that fixation. Sigmund Freud theorized that fixation at one or more of the developmental stages can result in neurosis (Mitchell & Black, 1995).

Erikson (1987) has found that children's defenses are lowered during play, due to the "metaphoric and symbolic use of toys" (p. 229). This helps the analyst to view more clearly into the inner world of the child. He compares the use of metaphor in play to the theory of transference which takes place between the adult patient and the analyst. He defines a symbol found in play as follows: "a symbol, it seems, should be definitely of a higher order, very condensed and abstracted in its form, superindividual in its meaning and treated with a high degree of affectual inhibition and sublimation" (E. H. Erikson, 1987, p. 230):

In 1951, Erikson's (1987) records were published on the topic of sex differences observed in play configurations. In the study he conducted, almost five-hundred pre-adolescent children were individually requested to create a moving picture scene using
the available toys. As the child created his or her scene, the researcher sat at a desk, pretending to write notes. The researcher however, was actually sketching the transitory stages of the child’s play scene. When the child had finished, the researcher asked him or her to describe the scene. The researcher then asked the child to identify his or her favourite part of the scene. The researcher recorded the child’s reflections, and then complimented the child on the scene he or she had created.

Overall, results showed that scenes created by girls took place indoors, whereas scenes created by boys took place outdoors. Erikson (1987) states the interior spaces created by the girls were either “open, simply enclosed, or blocked and intruded upon” (p. 295). In the exterior spaces created by the boys, observations were “height, downfall and motion, and its channelization or arrest” (E. H. Erikson, 1987, p. 295). Erikson takes into account that these children are at a developmental level where they are preparing to become sexual beings. He states: “It is clear that the spatial tendencies governing these constructions closely parallel the morphology of the sex organs: in the male, external organs, erectable and intrusive in character, serving highly mobile sperm cells; internal organs in the female, with vestibular access, leading to statically expectant ova” (E. H. Erikson, p. 295). He also takes into account the societal factor that governs the everyday experience of the children at the time of the scene creation, as well as their perceived sex roles that they were preparing to fill in society. Through the observations of play configurations then, Erikson believes that the analyst has the ability to gain access to the biological, the psychological, and the cultural experience of the child.

In 1972, Erikson wrote a chapter titled *Play and Actuality* that was published in a book titled *Play and Development* (E. H. Erikson, 1987). In this chapter, Erikson records
observations made by Peggy Penn, Joan Erikson, and himself on children's play
constructions. In this study, the researcher requests the child to "build something and to
tell a story about it" (p. 311). The analyst records the data, specifically noting any
atypical aggressive or sexual themes. Recorded observations include a mass variety of
results that included displays of traumatic experience, positive healing and learning,
attempts at mastering life situations, and joyful self-expression.

In mid-twentieth century American culture, Erikson (1959) reflected on adult
opinions of play and its place in child-rearing. He states that adults often considered
children's play, in comparison to work, as senseless and immature; therefore they often
frown upon such childish acts. As children grow older, they possess a need to learn and
become competent at new activities that they do not create on their own. Children at this
stage strive for a sense of what Erikson terms as industry. If a child is not yet able to
master the new skill, he may gain a sense of inferiority. For this reason, children must be
eased into the work world at their own, individual pace. Both work or play, taken to the
extreme, can become unhealthy. Erikson believes that adults must understand the
functions of play in childhood development and a balance must be found between time
spent doing work and time spent at play.

In Erikson's work, he also observed and recorded the play of adolescents and adults.
Erikson (1959) believes that as children grow into adolescents, their play changes from
play with toys in imaginary spaces to social play in real spaces. The task of the
adolescent is to determine an identity for himself. Adolescents do this through daring
behaviors and role-experimentation. Erikson (1959) states:

It is true, of course, that the adolescent, during the final stage of his identity formation,
is apt to suffer more deeply than he ever did before (or ever will again) from a diffusion of roles; and it is also true that such diffusion renders many an adolescent defenseless against the sudden impact of previously latent malignant disturbances. (p. 117)

As adolescents enter into this stage of experimentation, their peer groups become support systems or “presocieties” (E. H. Erikson, 1959, p. 118), in which they can safely play.

As adults, play again can transform into creative activities. Erikson compares children’s play to the work of the adult artist: “we find that in spite of the testimony of language popular opinion tends to evaluate them as antithetical phenomena, finding no ‘sense’ in children’s play, while looking at the artist’s play as a phenomenon burdened—and in modern times, over burdened—with conscious problems and meanings” (E. H. Erikson, 1987, p. 114). Erikson (1987) also compares the play scenarios of a child to the work of a dramatist:

If, in this small boy’s life, the classroom and the home setting are an early equivalent of the sphere of adult actuality with its interplay of persons and institutions, then his solitary constructions in their infantile model of the playwright’s work; he, too, condenses into scenes of unitary place and time, marked by a “set” and populated by a cast, the tragic (and comic) dilemma of representative individuals caught in the role conflicts of their time. (p. 315)

During Erikson’s time in Boston, he conducted a study at Harvard in which he observed the individual play of 22 male college students. In the study, a researcher would bring the student into a room with two tables. One of the tables would be covered with small toys. The toys were not chosen deliberately by Erikson. The researcher
would then tell the participant that an unknown observer needed some new ideas for his movie plays. The student was asked to use the toys to create a dramatic scene on the empty table. The researcher would then leave the room for fifteen minutes and would observe the participant from behind a two-way mirror. Erikson termed the time while the participant was thinking about what to make as the prepatory period. The researcher would record the participant’s behavior during the preparatory period, then he would reenter the room and record the participant’s description of the dramatic scene. The researcher would also make a sketch of the scene. In this study, Erikson determined the dramatic scene as the main focus of analysis. He then determined the participant’s words and behaviors before and after the construction of the scene, as associative material to be analyzed. A number of observers examined the data before any interpretations were drawn. Erikson (1987) reported that in the majority of the play scenarios, “traumatic childhood memories appeared either in the Preparation Time or in the Dramatic Scene—in the form of some characteristic symbolic fantasy, usually of an accident in which the little girl toy, rarely one of the other female figures, was the victim” (p. 116).

In later years, Erikson began to view the act of children’s play on a greater scale. In 1977, Erikson’s book titled Toys and Reasons: Stages in the ritualization of experience was published. This book was based on a series of lectures that Erikson presented at Harvard University in the early nineteen seventies. In these lectures, he explores the relationship between childhood play and political imagination.

Erikson (1977) examines how adults perceive “play” in comparison to “work”, and which behaviors are deemed by Western society as childish behavior in comparison to adult behavior. He contends that throughout history, adults have viewed play to be
useless and therefore impractical in regard to everyday tasks and goals. The adult uses play as a way to relax after accomplishing these everyday tasks. However the act of play is not viewed as the task. Adults choose to divide their work and their play, therefore gaining the sense that they have control over their world.

Within the play space of a child, one can view the child’s perception of his situation in life and any conflicts that the child may be experiencing. These conflicts may be visually played out in a number of ways until the child has mastered the situation. Erikson (1977) compares the child’s ability to visualize possible scenarios and create a meaningful imaginary world, with adults who can visualize possible scenarios of change for real-world conflicts. Erikson then goes on to compare children’s play with universal collective visions; scientific and political world visions. He connects the human abilities to form ideas, to visualize history on a time continuum and to possess wisdom, to the sense of inner vision. Chapters in Toys and Reasons (1977), include titles such as: “A National Dream”, “Shared Nightmares”, and “Visions and Countervisions.” It seems that Erikson may have had very strong visions himself regarding the power of visual imagination.

In the Shoes of a Psychoanalyst: Presented as Short Vignettes, Perceiving the World Through the Eyes of an Artist

The following section explores Erikson’s reflections from an artistic/psychoanalytical point of view, on a variety of topics regarding the visual arts.

On being an artist.

In the time and place that Erikson was raised, he reflects that being an “artist” was viewed by many as a way of living as opposed to an occupational identity. The artist has the ability to tolerate a certain level of creative chaos in life that results in a sense of
“liberated sanity” (E. H. Erikson, 1975, p. 25). It is the task of the psychoanalyst to become systematically and clinically acquainted with the creative unconscious. Erikson states this task may be difficult to comprehend unless one experiences it for himself.

On writing.

Erikson began his own creative writing after his time spent at the Munich Kunst Akademie. He was feeling discouraged with his art making at the time and began using his sketchbook as a writing pad. Many years later, when he wrote his first book, titled Childhood and Society, he experienced that clinical writing could be a wonderful outlet for artistic and theoretical expression. He never gave up his creative pursuits (E. H. Erikson, 1975).

On dreams.

Erikson often compared children’s play to dreams. As dreams were Freud’s royal road to the unconscious, Erikson considered children’s play to provide the same degree of access, to the child psychoanalyst (E. H. Erikson, 1975, p. 39). In 1954, Erikson (1987) published an article titled The Dream Specimen of Psychoanalysis. In this article, he explores some of the factors that may influence the report of a dream. He found that one of the main limitations of dream analysis was that there was a heavy reliance on the patient to report the dream accurately. The accuracy of the reported dream can be skewed by a number of factors. The current emotions of the dreamer may affect his memory of the dream. The patient may or may not have a wide range of vocabulary in which to describe the dream. The patient may or may not be inhibited in regard to sharing the dream with the analyst. The patient may or may not have difficulties
revisualizing the dream in the analyst's office. These may be some of the reasons why Erikson valued the concrete observation of children's play.

Erikson (1977) also makes reference to the term *dream screen*, coined by Bertram Lewis. The dream screen is the background, like a canvas, on which one views his dreams. It is the images on this dream screen that patients describe in analysis.

*On life history and the artist.*

Erikson (1977) cites the influential work of Rene Spitz and his colleagues, regarding the "role of vision in the establishment of a rudimentary sense of reality in the infant" (p. 46). These researchers found that an infant's sense of vision is what helps him to integrate the feedback from all of his other senses. After the infant gains a sense of contact perception, he learns to perceive distance, leading to the understanding of continuum in time and space. By the time the infant has reached the age of three months, his visual perception has developed enough that he is able to associate visual images with pleasurable events such as being held and eating.

Erik Erikson (1987) also cites the work of his wife, Joan Erikson. In Joan Erikson's essay titled *Eye to Eye* (1966), she states that the eyes and face of the mother, or primary caregiver, is the most commonly occurring image that the infant perceives through the day, and is associated with pleasurable sensations. In accordance with the theories of Spitz and Joan Erikson, Erik Erikson believes that the visual interplay between the infant and his primary caregiver displays how vision becomes the infant's primary means of emotionally integrating his senses and his personal space (E. H. Erikson, 1977).

Erikson (1977) believed that humans feel comforted by the image of a maternal face because it evokes the memories of early experiences of attachment. He describes a
painting of the Annunciation, displaying man's search for the mother's face through art. In Erikson's book, *A Way of Looking at Things*, (1987) he describes a very influential seminar he once attended at Harvard University. The seminar explored the life history and artwork of Michelangelo. Erikson was very interested in the lecturer's comparisons between Michelangelo's losses of his mother and wet-nurse at an early age, with the distance that could be portrayed between the Madonna and child sculptures he created later in life.

*Vision and the practice of psychoanalysis.*

In the practice of classical psychoanalysis, the patient lies on a couch, looking away from the analyst. Erikson (1977) believes that the absence of the therapist's face, within the patient's perceptual field, creates a visual void for the patient. This visual void allows images from the patient's past to appear in his mind, "seeking a healing mutuality" (p. 128).

*Erikson's advice to an art therapist.*

Although it seems that Erikson makes a strong case for the benefits of using art with therapy, he and his wife held the opinion that the two should be kept separate from one another.

When art therapist Judith Rubin was in the early stages of her career, she was making art with children at a hospital in the United States. She did not call herself an art therapist at the time because she did not feel that she had the advanced training to do so. One afternoon, she and a number of other hospital workers presented a case study for a grand rounds seminar, in the Department of Child Psychiatry. It was Rubin's task to present slides of the patient's artworks. Erik Erikson was connected with this department and
made annual visits. He happened to attend the presentation that day. Erikson was very

Following the presentation, Rubin and Erikson went out for a drink. She recalls:
I told him, “I don’t know what in the world I’m doing and I really want to get some
more training. What would you advise?” And he told me, “Don’t do a thing! You’ll
spoil what you’ve got and what you’ve got is beautiful, it’s intuitive, it’s right for
those kids. If you get any more training, it’s going to interfere with what’s happening
between you and the children. I strongly advise you against it”. (Warren, 1996, p. 3)

In later years, around 1977, Rubin also met Erikson’s wife, Joan Erikson. Rubin viewed
Joan as the artist and Erik as the therapist. Joan stated her opinion that people in the arts
should not become “junior psychiatrists” (Warren, 1996, p. 3). This discouragement
from further training kept Rubin from pursuing further studies at the time. Despite how
much she respected the opinions of Erik and Joan Erikson, she eventually felt the need to
further her education in the areas of art and psychoanalysis. Rubin went on to finish a
PhD in humanities and completed her training as an analyst.

It is unclear why Erikson, with such seemingly strong affection towards the benefit of
understanding the visual arts in therapy, would seem so adamant about advising not to
blend the two fields. One could question if he and his wife misunderstood the ways in
which art therapy was being practiced at the time. Joan stated her understanding of the
definition of the term “therapy” to be more closely related to giving attention to an
individual’s illness as opposed to healing. This different understanding of semantics and
lack of knowledge in the different ways in which art therapy could be practiced, may
have contributed to their feelings against the blending of art and therapy.
Chapter 4: Joan Erikson’s Influence on the Work of Erik Erikson

This section will review Joan Erikson’s influence and collaboration in regard to the work of Erik Erikson. Her opinions are very important as she had a great deal of influence on the opinions of her husband. Her own ideas regarding the combination of art and therapy will be examined. From the perspective of the art therapist, Joan’s perception of the title and practice of art therapy is very important to understand, in order to differentiate current definitions of art therapy practice from the ways in which she defined art and healing. Finally, the reader will gain an understanding of how the theories of both Joan and Erik Erikson were applied in an activities program, designed by Joan Erikson and supported by her husband.

Joan Erikson’s Influence on Erik Erikson

Throughout Erik Erikson’s career, Joan supported his professional development and tended to their family. Joan was a brilliant individual in her own right and many may not realize that her beliefs and ideas were behind her husband in every step of his career. They developed theories together and cited one another in their own works. Joan translated and edited her husband’s writings and helped him prepare his lectures.

Joan’s opinion of psychoanalysis was examined in the previous section of this research paper regarding Erikson’s years in Vienna. To review, Joan did not appreciate the field of psychoanalysis or the influence of Sigmund and Anna Freud on her husband. Friends and family who knew Erikson well, including Erikson himself, assert that Joan kept him organized and structured and that her influence on his career was substantial (Friedman, 1999).
In the late 1980’s, an occupational therapist and psychotherapist from Toronto, by the name of Wendy Campbell (personal communication, April 3, 2006), had the opportunity to meet Erik and Joan Erikson. Campbell became further acquainted with Joan Erikson. She later created a film that captured an interview with Joan, where she spoke about her work with art in treatment settings. This film was shown at an American Psychological Association film festival in New York. According to Campbell, the Erikson’s were aware of the profession of art therapy. In 1979, Joan Erikson published the lecture she gave as the key-note-speaker for an American Art Therapy Association conference, in the *American Journal of Art Therapy*. The article was titled *The Arts and Healing*.

According to Joan Erikson (J. M. Erikson, 1979; W. Campbell, personal communication, April, 3 2006), art making was her primary focus as a healing factor when used in treatment. Joan believed art to be primary and therapy to be secondary in regards to healing through the arts. Campbell states that Erik Erikson most likely agreed with Joan because their work together was so synonymous. In my interview with Campbell she states that, “When I’m speaking about Erikson, I’m thinking about Joan, although they are almost interchangeable” (W. Campbell, personal communication, April 3, 2006).

In Erik Erikson’s book titled *A Way of Looking at Things* (1987), he cites his wife’s work titled *Eye to Eye*, in which compares the infant’s primary experience of looking into his mother’s eyes, to the ways in which he later perceives and trusts the world. He compares his wife’s concepts regarding visual perception to classical artworks that depict the Madonna and child, and grander images of the world such as the ceiling of the Sistine Chapel.
Joan’s Ideas Regarding Art and Art Therapy

This section will review the work of Joan Erikson. Her use of arts in a therapeutic setting, in the early 1950s, will be described. An essay she wrote, that influenced Erikson greatly will be examined. As well, her personal reflections will be explored, with regards to how the arts should be used with the purpose of helping individuals to emotionally heal and to grow.

As a craftswoman and educator, Joan had her own ideas regarding art and the human experience. In the early 1950’s, she developed and directed an extensive activities program at the Austen Riggs Centre in Stockbridge and, in later years, she worked with the arts in treatment at Mt. Zion Hospital in San Francisco. Over the next three decades, she published a number of books and articles on various subjects related to the arts and human development. Throughout her lifetime she advocated for the use of the arts in promotion of mental health (J. M. Erikson, 1979).

In 1951, Joan Erikson was hired as the new director of patient activities at the Austen Riggs Centre in Stockbridge, Massachusetts. This program included painting, drawing, sculpture, crafts, a drama club, horticulture, and a children’s nursery. The program was based on the theoretical stages of the life cycle that according to Joan (1988) she and Erikson developed together. Joan wanted the activity program to primarily be educational. In her book titled Activity, Recovery, Growth: The communal role of planned activities (1976), she states that the activities in the program at the Riggs were not considered as therapy, however being involved in the activities was naturally therapeutic. Joan Erikson (1976) viewed the benefits of the arts as follows:

the arts have met the needs of human beings for centuries, inspiring, nourishing,
cathartic, a means of searching out truth, of acquiring insight, of experiencing aesthetic delight. They are valid in their own right as bonds between human beings and as the tried values in which we find strength for living. (p. 55)

Joan Erikson did not believe that the arts should be used for the purpose of therapy due to her belief that the end product would be measured, as measurements are taken within the field of medicine. She was adamant that the meaning created through artistic activity could not be measured in dosages, and therefore was incompatible to clinical therapy. She goes on to describe the benefits of making art between the teacher and the student:

The growth nourishing potential of an activity lies surely in the true involvement of the student and the teacher in the process, the experiencing of the basic properties, the essence of the medium. When the focus of the activity is shifted from the medium by either of the participants involved—teacher, student,—the activity, as an activity, loses its growth-nourishing potential. (J. M. Erikson, 1976, p. 56)

Joan Erikson believed that the curative aspect of art making lay in the creative process, with the support of a mentor, knowledgeable in the practice of art making. Although she refused to name the art making that took place in her program as art therapy, her philosophy could be viewed as similar to the philosophy held in the practice of non-directive art therapy.

Two years following the publication of *Activity, Recovery, Growth: The communal role of planned activities* (1976), Nancy Galbraith wrote a review of Joan Erikson’s book for the *American Journal of Art Therapy* (1978). Galbraith expresses her astonishment at the absence of any mention of therapeutic art teaching that was happening in other parts of America in the early 1950s. Galbraith (1978) views the program at the Riggs center to
have been a “collateral development” (p. 153) with other therapeutic arts programs that were running in hospitals and schools at the time.

In 1966, Joan Erikson had an essay published that was very influential to the work of her husband, Erik Erikson. The essay was titled Eye to Eye, in a book titled The Man Made Object, edited by Gyorgy Kepes. In this essay, Joan Erikson (1966) states that human beings live through their eyes, in a spherical world. She views circles, dots, spheres and beads found in art as unconscious symbols of the human eye and the many spheres humans see in the world. She then applies this concept to early childhood development. She states that the very first smile an infant makes is in response to the face of another human being, more specifically the mother. She reviews psychological studies of infant’s reactions to human faces and then to masks (Wolff, cited by J. M. Erikson, 1966; Spitz, cited by J. M. Erikson, 1966). In accordance with her research, the only mandatory aspect of the human face that is required to gain response from the infant is two spherical shapes, placed horizontally across the shape of a face. She states: “The eye, then, is the first round object which drifts over the threshold of conscious perception of the human infant and to which with his first misty, unfocused gaze he finally reacts” (J. M. Erikson, 1966, p. 52). Joan Erikson applies this research to the way in which humans transfer their early perceptions of the eyes of others, to how they perceive and trust the world around them. She then she connects this perception of the world and the unconscious symbol of the eyes to the ways in which humans create art. Toward the end of her essay she interviews a number of painters, describing their relationship to the process of painting.
In the 1970s, Joan Erikson presented as the key-note-speaker at an American Art Therapy conference. Her lecture was later published as an article in the *American Journal of Art Therapy* (1979) under the title, *The Arts and Healing*. In her lecture, she admits that she prefers not to connect the words *art* and *therapy* due to the linguistic meaning of the word, *therapy*. She explains her feelings as follows:

I used the word healing because it derives from whole, hale, health—even holy—and suggests vitality—the essence of being alive. Therapy has for me more the connotation of recovery from illness and is the province of medicine. The Greek word therapist is translated as attendant on the physician, and if I’m sure of anything, it is that that’s not what your goal is. Anyway, making whole and healthy is for everybody and all the time; and that pleases me, for I’m often at a loss to know just who is really healthy and who is ill. (1979, p. 75)

She states ways in which she understands why the profession has embraced the use of the word “therapist”, emphasizing with the need to speak the same language with other staff members and with one another. She questions, however, the focus on illness and human behavior as opposed to the art materials and the creative process. She speaks of her own experience and adamant belief that the laws of the materials themselves and the involvement in the art-making will provide the growth potential that therapists seek for their clients. She states that patients can gain insight into their emotions and experiences and feel a sense of control by viewing their artwork outside of themselves.

Joan Erikson (1979) views the professions of artist and psychotherapist as being in conflict with one another. She perceives the artist as one who searches within oneself for insight into one’s own life, through art making. She perceives the psychotherapist on the
other hand as one who is dedicated to searching for insight within others to help them find insight into their patients' lives. She believes that a professional artist on staff at a hospital could serve as a model for the patient to identify with. This could help prevent the individual from gaining an identity as a patient.

The following year, Linda Gantt (1980) wrote a response article to Joan Erikson's article, *The Arts and Healing* (1979). Gantt agrees with Erikson that taking on the roles of both an artist and a psychotherapist is a challenge; however Gantt does not believe it is impossible. Gantt questioned Erikson's subjective definitions of the professions of artist and psychotherapist, as Gantt believes that a psychotherapist also must practice gaining insight into his or her own personality and personal battles. Gantt challenges Joan Erikson's belief that the artist working with patients in a treatment setting should not have further training in psychotherapy, as art evokes feelings in the patient and the artist/mentor must know what to do when this happens in order to create a positive experience for the patient. Gantt does note the positive observations that Erikson makes in regard to the curative power of the art materials and the art making process; however she does not wholly agree that these aspects should be the only focus of the art making relationship between the client and the artist/mentor. She believes that to focus only on the matter of form in the artwork can lead to separation of the artwork and the individual who created it. Overall, Gantt appreciates Erikson's ideas regarding how the patient identifies with the artist/mentor, as well as ways in which the patient can learn to take the art-making experience with him or her when he leaves the treatment facility. Gantt (1980) supports her own convictions against what she perceived as Joan Erikson's "attacks" (p. 65) with a quote from Elinor Ulman: "The proportions of art and therapy
may vary within a wide range. . . But anything that is to be called art therapy must
genuinely partake of both art and therapy” (Gantt, 1980, p. 66).

In 1988, Joan Erikson’s book titled *Wisdom and the Senses: The way of creativity* was
published. Within this book, Joan Erikson presents the stages of the life-cycle that she
and Erik Erikson had presented in 1950, with a primary focus on the human senses and
the creative process. Joan states that in 1950 she believed that she understood the life-
cycle theory; however it wasn’t until many years later that she created a colourful, woven
version of the chart that she fully understood its meaning. She recalls:

I never really thoroughly grasped all its implications until I rather playfully undertook
the process of setting up a warp of eight colours and began to see the blending of these
colours as my fingers guided threads of identical colour through the warp. The
threads themselves had duplicated the black and white chart- but in colour. For the
first time my mind and senses collaborated and made the idea manifest. (J. M.
Erikson, 1988, pp. 78-79)

Joan Erikson (1988) states that she felt the need to elaborate on the life-cycle theory,
with a focus on the process of creativity. She did this because she felt there was a lack of
emphasis on creativity as a factor in development, in American society. She expresses
her opinions that schools and American society overemphasize the fields of science, in
which everything can be measured. Whereas fields such as the arts and humanities
become underrepresented, therefore these values in individuals become less appreciated.
She declares that: “The resulting under-estimation of playful imagination, inventiveness,
can lead to a regimentation of ‘facts,’ often based on half-truths, which dominate thinking
and planning. Growth, resiliency, and creativity all suffer” (p. 75).
Joan and Erik's Work Together

This section will examine the ways in which Joan and Erik Erikson combined their strengths and put their ideas into practice in the form of an activities program at a blooming psychiatric treatment facility. This portion of the research paper is important as it demonstrates how the Eriksons promoted art making as a means to enhance emotional and psychological development. Current art therapists may gain knowledge and inspiration from the ways in which the Eriksons applied their life-cycle theory to an arts-based activity program.

Joan worked extensively with her husband on their theory of psychosocial development and the life cycle. In Joan Erikson's book titled *Wisdom and the Senses: The way of creativity* (1988), she states: "My husband and I together prepared the chart and the description of the eight stages. The theory was further elaborated and evolved in a number of his books in the following years" (p. 75). In 1950, they presented this theory together at the White House Conference on Infancy and Childhood in Washington, D. C.

In 1951, both Erik and Joan Erikson were invited to join the staff at a psychiatric treatment facility named the Austen Riggs Centre, in Stockbridge, Massachusetts. Erikson's professorship had terminated at Berkeley, University of California, so they accepted the invitation to Stockbridge. Erik Erikson (1987) recalls:

In Stockbridge, we worked together in a strange psychiatric community situated on one of the broadest and most venerable tree-lined Main Streets of America. Robert Knight had taken on the medical directorship, accompanied and followed by a proud contingent from the Menninger (other people). They all sought and found an opportunity for intense and interrelated clinical and theoretical exploration. Joan
Erikson and I joined them in 1951, she as director of patients’ activities, I as therapist, researcher, and training psychoanalyst. (p. 736)

Joan Erikson (1976) describes their new arrival in these words: “My husband, Erik, H. Erikson, and I were newly arrived in Stockbridge. He was pursuing his studies of young people (‘their unique strengths and their spatial vulnerabilities’) by concentrating on the florid symptoms of aggravated identity confusion at Riggs” (p. 40).

Robert Knight was the director of the Austen Riggs Centre when Erik and Joan Erikson joined the staff. He was very flexible in regard to the experimentation of new programs at the site (E. H. Erikson, 1987). This open attitude gave Joan Erikson the opportunity to create one of the most innovative activities programs in America during the 1950’s. Based on the human life-cycle theory that she and her husband had developed, she created a community-based program that included: a multi-media crafts workshop; a drama group; studios for painting and sculpting; a horticulture program; a nursery school; and an activities planning group (Galbraith, 1978). Joan Erikson, along with David & Joan Loveless later wrote a full book about the activities program at the Austen Riggs Centre, titled Activity, Recovery, Growth: The communal role of planned activities (1976). Within this book, Joan Erikson describes the theory behind the activities program. As well, the authors have included interviews with many of the patients, the workshop instructors, psychotherapists, and members of the community. Erik Erikson writes a long post script at the end of the book and a round-table discussion is recorded between Erikson and a number of patients. Erik Erikson considered himself a “participant-observer” (J. M. Erikson, 1976, p. 251) of the activities program that his wife designed. Joan states that above all, she wanted the program to be educational, with the
patients being students and the teachers acting as mentors. In order to create an educational environment, she felt it important to base the program on a theory of development. The program was then cultivated in accordance with Joan and Erik Erikson’s eight psychosocial stages of development, focusing more specifically on the establishment of identity. In the following section, these stages will be briefly presented, along with the ways in which they were incorporated into the activities program.

The Austen Riggs Centre

The following section will provide the reader with a brief overview of the history, philosophy, and patient population at the Austen Riggs Centre.

In the early twentieth century, Dr. Austen Fox Riggs founded the Stockbridge Institute for the Psychoneuroses. In 1919 it was renamed the Austen Riggs Foundation, and then later renamed again as the Austen Riggs Centre. The original philosophy of the Centre was based on a balance between talk therapy and activities. It is and always has been a not-for-profit establishment, getting its funding from patient fees, donations and grants (Austen Riggs Center, 2005, history; about).

In 1940 Dr. Riggs passed away, and Dr. Robert P. Knight became the new director of the center. Dr. Knight later went on to become the President of the American Psychiatric Association and the President of the American Psychoanalytic Association. The Austen Riggs Centre became internationally renowned as the leading treatment center in ego-psychology in America. A number of renowned psychoanalysts contributed to the hospital, including Erik Erikson. In 1954, Joan Erikson introduced a new activities program that included art studios, a drama group, a green house and a Montessori preschool (Austen Riggs Center, 2005, history; J. M. Erikson, 1976).
The Centre is located in Stockbridge, Massachusetts. It is composed of a number of
nineteenth-century buildings, situated along the Main Street of the picturesque, small
town. A green house and a Montessori preschool are located behind the Research and
Treatment building. A studio space and drama group was established in a building
named "The Lavender Door". This building was chosen because it is in the main area of
the town, off of the hospital site (Austen Riggs, 2005, history; Friedman, 1999).

The patients of the Austen Riggs Centre are given the freedom to come and go as they
like. There are no locked facilities, and community involvement is encouraged. For this
reason, only patients who can benefit from this arrangement are admitted to the hospital.
Patients who are not usually admitted include individuals who suffer from addictions,
psychopathic diagnosis, high suicidal risk, or anyone at a high risk of harming others.
Patients must be psychiatrically and physically well enough to care for themselves on the
premises. Individuals under the age of seventeen are not admitted. Individuals with
below average intelligence are not admitted. As well, individuals who suffer from
psychosomatic or medical illness cannot be admitted due to lack of adequate facilities.
Patients who can remain in their homes, if they live in the town, during treatment are
encouraged to do so (J. M. Erikson, 1976).

In the mid twentieth century, the average age of patients was 23. Patients who were
admitted for treatment at the center consisted of individuals who suffered from mental
health problems such as anxiety disorders, depression, feelings of inadequacy, social
incapacities, relationship problems, and problems with perceptions of reality. Treatment
is psychoanalytically based, requiring patients to attend psychotherapy sessions four
times per week, each week (J. M. Erikson, 1976).
Erikson's Psychosocial Stages of Development, Incorporated in the Riggs Program

At the Austin Riggs Centre, Joan and Erik Erikson were given the opportunity to put their life cycle theory into practice, in combination with the arts. The following section will explore the basic tenets of the life cycle theory and how it was applied within the activities program.

In the 1930s and 1940s, Erikson’s research in the areas of the epigenesis of the ego, reality relationships, and Hartmann’s theory of the role of social reality, led to the development of the theory of psychosocial development, also known as the life-cycle theory (E. H. Erikson, 1959). This theory of development is composed of a sequence of eight stages that an individual innately develops through over the course of his or her lifetime. The first three stages coincide with Sigmund Freud’s psychosexual stages of development. Each of Erikson’s eight stages presents itself with a specific developmental task, or crisis, that must be solved by the individual within his given society. As the individual learns to solve the crisis, he integrates that solution into his developing ego, making him more able to integrate into his society.

Ideal outcomes of successfully moving through these stages include: identifying the self as an individual; forming a consistent personality; ego integration; and identifying the individual-self as part of a group whole or society. Erik Erikson states however, that these stages are by no means exclusive of one another and that all tensions are continuously negotiated throughout the life cycle (Mitchell & Black, 1995). Erik Erikson (1959) explains:

The double-lined squares significantly signify both a sequence of stages and a gradual development of component parts; in other words the diagram formalizes a progression
through time of a differentiation of parts. This indicates (1) that each item of the healthy personality to be discussed is systematically related to all others, and that they all depend on the proper development in the proper sequence of each item; and (2) that each item exists in some form before “its” decisive and critical time normally arrives. (p. 54)

At the Austen Riggs Centre, Erik Erikson often treated patients who found themselves struggling to resolve the crises of past developmental stages. Many of these patients were young adults who had not yet been able to establish an identity for themselves due to an inability to synthesize past stages of development, and preventing them from moving onto future stages of development. It was important then, that these patients be in a treatment environment that would not encourage them to create the identity of being a patient. In this place, they needed to learn how to resolve past stages of development in order to move on in their lives (J. M. Erikson, 1976). Erik and Joan Erikson’s background in visual arts, education, and psychoanalysis helped them to create a therapeutic activities program. Joan Erikson (1976) contends that “Therapy offers a kind of rebirth and must come to grips with the earliest phases of human growth. Learning must have to be a basic relearning both as to attitudes and skills” (p. 43).

The following description of Erik Erikson’s psychosocial stages state his definitions of each stage, along with ways in which his theories were incorporated into the Austen Riggs activities program.

Stage I: Basic trust versus basic mistrust (oral-sensory).

Erik Erikson (1959) defines basic trust as “an attitude toward oneself and the world derived from the experiences of the first year of life.” (p. 55). An individual who has not
successfully negotiated this stage expresses mistrust in significant others and in the world around him. Erikson believes that basic trust is the primary foundation of a healthy personality. He believes that the goal of psychotherapy with an individual who has not successfully accomplished this task, would be to convince him that he can be trustful of the world around him and trustful of himself.

This first stage was built on Freud’s first psychosexual phase of development, the oral phase. Erikson (1959) states that infants in this stage willingly “take in” the stimuli within their environment. The infant explores his visual field and experiences his tactile senses. In addition to the basic necessities of life, the caregiver must provide this kind of stimuli to the infant. The caregiver must be sensitive to the timing and intensity of her deliverance. Erikson states that the healthy building of trust depends less on the quantity of time spent in the relationship and more on the quality of the relationship itself. If the child’s needs are not met accordingly the result can be a disturbance of the infant’s perception of, and relationship to the world and those in it.

In the latter portion of this stage, the infant becomes more able to lift and turn the body and grasp objects with her hands. It is also at this time that the primary caregiver begins to separate from the infant, often resulting in the infant creating a transitional object of trust and security. The infant becomes able to trust in the continuity of her needs being filled and in the permanence of the caregiver. As this stage becomes internalized and integrated, the individual comes to experience a sense of faith and realism. Erik Erikson (1959) states that these qualities are expressed later in life through “religion, fellowship, productive work, social action, scientific pursuit, and artistic creation” (p. 64).
The foundation of the activities program at the Austen Riggs Centre was based on the patient’s ability to gain trust in his workshop mentors and in the creative process. Many of the individuals who resided at the Centre lacked the basic ability to trust others and themselves. Joan Erikson (1976) describes that “they had perhaps never known, or at least had forgotten, how to play” (p. 44). Through the activities program, patient’s who suffered from the inability to trust were allowed the opportunity to regress back to their earliest and most vulnerable stages in life, to nurse themselves, and to then relearn their inner potentials, in a safe and supportive environment. By gaining the ability to trust, an individual may gain a sense of hope and then a sense of faith. Joan Erikson (1976) quotes Erik Erikson:

Hope is the fundamental strength of human existence. It is the enduring belief in the attainability of primal wishes, in spite of the early experience of chaotic inner states, of pain, and of frustration, all of which combine in the fear of being abandoned and inactivated. Hope is founded in maternal care which cultivates basic trust and balances the propensity for basic mistrust. (p. 44)

*Stage II: Autonomy versus shame and doubt (muscular-anal).*

Erik Erikson (1959) identifies this stage as being characterized by the development of the muscle system. He builds on Freud’s second psychosexual stage, the anal phase. It is at this time when the child is learning how to control his urinary and bowel movements, in compliance with societal expectations. The child is gaining more dependence and autonomy. If this stage is not negotiated in a healthy manner, the individual may develop overcompulsive behaviors, or on the other hand overly impulsive behaviors. This is the result of feeling shame when in those early years, one is not yet ready to be seen by the
eyes of others. When the child experiences too much shame, he becomes determined to get away with things unseen. The healthy child will experience a sense of autonomy and pride after displaying self-control without loss of self-esteem.

Joan Erikson states that from a sense of autonomy, an individual can gain willpower. Joan Erikson (1976) records the words of her husband:

Willpower has its origins in early childhood. It is the unbroken determination to exercise choice as well as self-control, in spite of the infantile rages over being controlled and the early battles over unacceptable willfulness. Rudimentary willpower arises in an environment that grants an increasing sense of autonomy which outweighs the deep seated human propensity for a sense of shame over visible misteps and a sense of doubt in one’s capacity to learn control over oneself and circumstances. (p. 46)

Various activities in the Riggs program were introduced, in an effort to encourage patients to experiment and strive for a sense of success and autonomy. As patients explore the variety of techniques and media, they begin to gain confidence and determination in the projects they engage themselves in. Through this newly gained sense of confidence, a sense of initiative is reborn. The patient may be reminded of a time in childhood when fantasies were successfully acted out in constructive play (J. M. Erikson, 1976).

Stage III: Initiative versus guilt (locomotor-genital).

According to Erik Erikson (1959) the child now feels that he has an identity as an individual, however the child is still searching for further understanding of the kind of individual he is. The child looks for models who he can compare himself to, leading to a
better understanding of himself. In accordance with Freud's genital phase, Erik Erikson states that the child compares himself to the parent of the same gender. Although the child is feeling strong and confident, he realizes that he is still not as strong as his parent and therefore still not able to take the place of the parent. Erik Erikson (1959) observes that "the child indulges in fantasies of being a giant and a tiger, but in his dreams he runs in terror for dear life" (p. 79). Freud termed this phenomena as the fear of castration.

The child’s unconscious fantasies over wanting to get rid of the same-gender parent leave the child feeling unsuccessful and guilty. Erikson believes that it is this healthy level of guilt that builds morality within a child. With this sense of conscience, the child can gain a sense of initiative within himself and know that he will be able to morally contain himself. Erik Erikson (1959) describes three important developments the child experiences when growing into the world:

i) he learns to move around more freely and more violently and therefore establishes a wider, and so it seems to him, an unlimited radius of goals

ii) his sense of language becomes perfected to the point where he understands and can ask about many things just enough to misunderstand them thoroughly

iii) both languages and locomotion permit him to expand his imagination over so many things that he cannot avoid frightening himself with what he himself has dreamed and thought up. (p. 75)

The healthy child will come out of this stage with a strong sense of initiative and will possess a realistic amount of confidence and ambition. As well, he will be able to concretely create his ideas and work collaboratively with others in planning and constructing these ideas.
Within the activities program at the Austen Riggs Centre, Joan Erikson (1976) expresses that the individual must be given the opportunity to master his process without the fear of being graded or judged on the finished product. By successfully mastering new techniques and activities, the individual is able to relearn a sense of purpose. She quotes Erik Erikson on the importance of purpose:

Purposefulness derives at the height of childhood from the courage to carry playful imagination to dramatic conclusions and to engage in interplay with others who share one’s playful aspirations. Purposefulness is guided by the leeway of playful experimentation with available and manageable materials and by an increasing realism in fantasied goals. This leeway, as defined, limited, and guided by adults and older children, encourages directions for early initiative and helps to contain the fear of punishment for wrong deeds and the human propensity for a cruel sense of guilt over sinful fantasies (such as those summed up in the ‘Oedipus’ complex). (p. 47)

Stage IV: Industry vs Inferiority (latency).

At this stage, children leave their homes and enter into school and the world of peers. Children crave to learn how to play and construct with others. They want to observe and figure out for themselves how to gain new skills and enhance their pre-existing skills. They learn the rules of the materials available to them (J. M. Erikson, 1976). Children begin to explore the “thing world” (E. H. Erikson, 1959, p. 85) that is reality. The child discovers that unlike the play world, the thing world does not bend to his desires. The objects he plays with may belong to other children or may be taken away by adults. If play in the world of reality causes the child a great deal of anxiety, he may experience what Erik Erikson (1959) terms as a disruption of play (p. 85). Erik Erikson explains that
a disruption of play can prevent the child from playing due to the anxiety associated with the previous negative experience. Erikson compares this phenomenon to the anxiety individuals experience when resisting sleep at night after having had a nightmare. The child may then gain a sense of inferiority, lacking confidence to play and master situations in the world of reality. If the child’s first experiences playing in the thing world were successful however, then the child will gain a sense of mastery and therefore a sense of competence in the real world.

Joan Erikson (1976) views the workshop teachers in the activities program as helpful bridges for the patients, between the play world and the world of reality. She attributes this idea to the perception that the teachers were not clinical staff members, with the goal of therapy in mind. Joan Erikson (1976) viewed the teachers as mentors as opposed to “transference figures” (p. 49).

Stage V: Identity vs Role Confusion (puberty and adolescence).

When an individual reaches this stage, a number of tasks must have been accomplished and synthesized in order to develop an ego identity, which is the task of the adolescent individual (E. H. Erikson, 1959). Erikson defines the term identity in a number of ways: “At one time, then, it will appear to refer to a conscious sense of individual identity; at another to an unconscious striving for a continuity of personal character; at a third, as a criterion for the silent doings of ego synthesis; and, finally, as a maintenance of an inner solidarity with a group’s ideals and identity” (p. 102). The developing adolescent socially experiments with a number of roles, provided by his society, in search for the role that he will later identify with. Erik Erikson (1959) then states that: “The final identity, then, as fixed at the end of adolescence is superordinated
to any single identification with individuals of the past: it includes all significant
identifications, but it also alters them in order to make a unique and a reasonably coherent
whole of them" (pp. 112-113). Erikson goes on to explain that although the formation of
the identity is the major crisis that the adolescent must negotiate at this stage, it is also a
task that will continue to be negotiated throughout his whole lifetime. If an adolescent is
unable to establish an identity for himself, Erikson (1959) states that he may be
experiencing a case of identity diffusion.

Joan Erikson (1976) records Erik Erikson’s description of fidelity, the foundation of
one’s sense of identity. He believes that childhood ends when an individual is able to
make a commitment to a specific path in life, despite his doubts of uncertainty. This
solid commitment then, becomes the foundation on which the individual builds his
identity. His sense of identity will be as strong and as solid as his sense of congruency
and commitment. When an individual feels unable to choose and commit to a specific set
of roles, he experiences a sense of identity confusion. A major step in the act of
committing to a specific set of roles, is abandoning the many roles that do not define the
individual. Letting go of these roles may feel difficult because the individual is also
letting go of other potential possibilities that could have been included in his identity.

Erikson has found that this process often occurs during adolescence. At this time, some
individuals become emotionally inverted or behave in an opposite manner by lashing out
and breaking societal norms or laws. These individuals are searching for the potential
paths they wish to keep, as well as mourning deeply for the paths that they must let go of,
in order to gain a sense of congruency and identity within themselves.

Joan Erikson contends that while the searching adolescent is in a position of attaching
to others in order to help themselves to form their identities, the workshop teachers can serve as models in which the young adult can identify with. As well, Joan has observed that many patients gain positive identity through their creative strengths. When focus is placed on their strengths as opposed to their diagnosis, many reach unexpected potentials. This is then consolidated within the community through art exhibitions and theatre productions that community members attend.

*Stage VI: Intimacy vs Isolation (young adulthood); Stage VII: Generativity vs Stagnation (adulthood); and Stage VIII: Ego Integrity vs Despair (maturity).*

Joan Erikson (1976) and Erik Erikson (cited in J. M. Erikson, 1976) group the last three stages together in their description of the development that takes place during the later portion of life and in the ways that the activity program supports these three stages. Erik Erikson contends that the quality of emotional strength, experienced by adults, is based on a solid sense of identity. The ability to experience love, care, and wisdom, is based on a strong foundation of identity. Erikson compares the love and intimacy that individuals experience with their partners, friends, family, and co-workers, with the concept of interplay. If an individual has not established a solid sense of identity, he feels confused and he is less able to experience intimate relationships with the people in his life, leading to a feeling of isolation.

In order to build and create a future, whether it involves a career, family, or business, an individual needs to be able to have intimate relationships with others in order to be successful in his endeavors. Erikson (cited in J. M. Erikson, 1976) defines the concept of *generativity* as “the capacity to jointly care for and take care of what one has helped to produce, and this in spite of the ambivalence adhering to irreversible obligation” (p. 53).
If an individual has not been able to experience intimate relationships with others, leading to a sense of generativity, then Erikson has found that the individual may experience a sense of destructive rejection.

In the final stage of life, an individual experiences what Erikson (cited in J. M. Erikson, 1976) describes as a sense of widow and meaning about life, and the many years the individual has experienced to the point where he currently finds himself. This wisdom also comes with a sense of hope, faith, and acceptance for the future generations, these qualities provide the individual with a sense of integrity. When an individual is not able to experience this sense of wisdom and hope, he concentrates on his failures in life and obsesses on the desire to reverse time. This negative outlook creates a sense of despair for the individual, robbing him of a sense of peace as he struggles with the certain fact that he will eventually no longer exist.

Joan Erikson (1976) compares the value of integrity to the natural materials and tools that are used by the artists in the workshops of the activities program. An individual working with clay, for example, can trust that regardless of his actions, the clay will continue to hold the same un-changing properties. The tools must abide by consistent rules in regards to how they are to be manipulated. The artist learns to work with the stability of his materials and of his tools, he relearns to trust the object.

The Studio Space at the Riggs

This section will describe how the visual arts studio was run, how the patients benefited from the space, and Joan and Erik Erikson’s reflections regarding this portion of the activities program. This section can help the art therapist to understand how Joan Erikson was applying her beliefs of how art could be used in a therapeutic setting, as well
as gain a further understanding of the staff’s knowledge, or lack of knowledge, of the wider-spread practice of the use of the arts in healing, in the early 1950s.

In 1954, Joan Erikson introduced a new activities program to the Austen Riggs Centre. This program included a studio work space that was situated in the business district of the small town of Stockbridge. In Joan Erikson’s book, *Activity, Recovery, Growth: The communal role of planned activities* (1976), the visual arts studio is warmly referred to as “The Shop”. In Joan Erikson’s article titled *The Arts and Healing* (1979), she describes the shop space in more depth. She recalls that the shop was a messy place full of colourful media and an abundance of materials to work with. The shop ran as an open-studio where patients were encouraged to voluntarily explore and experiment, individually or as a group, with the variety of media and materials available to them. Patients were fully trusted with all of the tools and materials that were offered to them. Gaining trust and a sense of reliability from the tools and materials was viewed as a factor in healing. Joan Erikson (1976) expresses the benefits of working with art materials: “Personal relationships may continue to be touchy or even distressing, but with materials and things he can fashion ways of making opposites complement one another and learn that through form, colour, and movement forces and elements can be reconciled and consolidated” (p. 78). Joan compares the artist’s tools to toys that children played with as a child, tools of creation. Another important aspect of the art studio was the sense of autonomy that could be gained by the patient. Joan Erikson (1979) states: “The role of one engaged in arts activities is not out of reach for the old or young adult, and to feel oneself to be a ‘maker’ of some competence rather than mere audience or consumer creates a sense of worth and dignity” (p. 78). Following the art groups, individuals would
informally review the work they had done and perhaps look at art slides or books together (J. M. Erikson, 1976).

Hired artists were on-site at the studio, to teach new techniques and help patients further their skills. They acted in the place of consultants or mentors as opposed to authoritative, clinical staff. The relationship between the artist/mentor and the patient was viewed as a potential source of healing. Trust, respect, and personal support within the relationship were viewed as part of the developmentally reparative process for the patient (J. M. Erikson, 1979). The artist/mentor was encouraged to focus on the artwork, not on the patient’s illness. Peggy Worthington Best and Leo Garel, two of the artists that worked at the studio, contributed a section regarding their experience as art instructors, to Activity, Recovery Growth (J. M. Erikson, 1976). Best admits that she was aware of the work of Margaret Naumburg, but that was not what Robert P. Knight wanted at his center. She did not state what her or Knight’s perceptions were regarding Naumburg’s work. In another section, Garel firmly stated: “I am an art teacher, not an art therapist. If therapy takes place, fine, I’m very glad; but that isn’t the direction of my teaching” (J. M. Erikson, 1976, p. 135). Following that statement Garel confesses: “Despite the fact that therapy was not involved at all at the Center, one student who kept coming back told me he really wasn’t interested in painting, but thought he needed the therapy. So apparently therapy is connected with the way I teach” (J. M. Erikson, 1976, p. 136). Garel stated the importance of patients releasing their feelings into their artwork, however he states that he in not interested at all in knowing their medical backgrounds or communicating with their therapist (J. M. Erikson, 1976).

Perhaps the understanding of what an art therapist was, in the 1950s, remained unclear
and undefined. *The American Art Therapy Bulletin* was not yet being published, and books written by art therapists were scarce. This lack of understanding of the current definition of art therapy may be why artists in the activity program at the Riggs seemed so defensive toward the profession of art therapy.

*Activity, Recovery, Growth* (J. M. Erikson, 1976) also contains a transcript of a panel discussion led by Erik Erikson and twelve patients, regarding their experiences at ‘The Shop’. Erikson questions each patient on how he or she became interested in working at the studio. The patients take turns telling their own stories regarding the studio experience. The patients then comment on their appreciation of the freedom granted to them and the comfort of the open studio concept. They speak of their experiences working with different materials and experimenting with tools they had never used before. Erikson reflects their responses back to them with what seems like genuine understanding. One patient compares his art-making to a friend who will never get angry with you. Erikson agrees with this patient in regard to the benefits of communicating with and through art materials as opposed to through verbal communication, which can be unclear and deceptive at times. Another patient comments on how the shop has been a place for he and others to release their energy in a constructive and positive manner, coinciding with what they are being taught in their therapy sessions. Erik Erikson thanks the patients for their contribution and states that it would be important for other places like the Riggs to have a studio space. Right before the discussion concludes, David Loveless requests Erik Erikson to share his definition of a ‘moratorium’. Erik Erikson explains:

In my book, a moratorium simply means that young people in order to find themselves
often need time to try out things which do not necessarily commit them to what you might call an occupational identity. I think that for some, the whole Riggs experience is a kind of reflective moratorium- and within Riggs they pursue some activities which may or may not become a permanent part of their lives. (J. M. Erikson, 1976, p. 98)

According to Friedman (1999), Erikson “became the strongest advocate of Joan’s program” (p. 258). Friedman (1999) quoted Erik stating that Joan’s program fostered “the ego’s activated adaptability and heightened sense of reality, to the mobilized condition of the whole person” (p. 258). This was accomplished by focusing the strengths of the patients. When Erikson was a young man, he too struggled profusely through his identity crisis and worked his way out while making art. He later looked back on this time and recognized that his adolescent symptoms coincided with the symptoms of someone with a borderline personality disorder. He realizes that he grew out of these symptoms and that perhaps they were part of the normative crisis he developed through. In Erikson’s book, Identity and the Life Cycle (1959), he includes a case study of a patient he had once treated. Erikson describes the case as follows:

A young patient, who had found himself blocked in college, during the initial phase of his treatment in a private hospital nearly read himself blind, apparently in a destructive overidentification with father and therapist both of whom were professors. Guided by a resourceful “painter in residence” he came upon the fact that he had an original and forceful talent to paint, an activity which was prevented by advancing treatment from becoming self-destructive overactivity. As painting proved a help in the patient’s gradual acquisition of a sense of identity of his own, he dreamed one night a different version of a dream which previously had always ended in panicky awakening. Now
he fled, from fire and persecution, into a forest which he had sketched himself; and as he fled into it, the charcoal drawing turned into live woods, with an infinite perspective. (E. H. Erikson, 1959, p.129)

One could wonder how much Erikson related to this patient in regard to his own history of adolescence. One could then speculate that Erik Erikson had personally experienced and witnessed the ways in which art-making could substantially benefit an individual who is experiencing a psychosocial state of crisis in a normal stage of development.
Discussion

The professional field of art therapy has developed from the fields of visual art, art education and psychoanalysis. Influential figures that art therapists have used to support the core philosophy that art making has the potential to promote psychological healing and growth, have come from these fields. It is this researcher’s opinion that Erik H. Erikson, a man who was trained in all three of these fields, has not been given adequate attention as a prominent figure in the field of art therapy, especially in contemporary art therapy practice. The purpose of this research paper has been to demonstrate why the life and work of this historical figure should be viewed as a resource for current art therapists. This figure is an excellent example of how individuals who were interested in the arts and human behavior found suitable professions for themselves, prior to the existence of art therapy. Works written on the life of Erikson have the potential to further enrich the current literature base on the history of art therapy as a profession. The work of Erikson is a resource of knowledge that has the potential to help clinicians to further understand the creative process that they are viewing in their own clients. As well, the work that he and his wife accomplished together, can be used as a model to compare with current art therapy programs within treatment centers. Most importantly, this researcher hopes to create awareness of Erikson’s indirect contributions to the field of art therapy.

The past four chapters have provided an overview of the context in which Erikson was born into, his early life and training as an artist, educator, and psychoanalyst, his theories regarding the use of visual imagery in therapy, and the influence of his wife, Joan Erikson, and her application of their theories put into practice with the inclusion of the arts.
More specifically, chapter one described the environment that surrounded and influenced Erikson during his years as a child, and as a young man. The German Expressionist scene during Erikson’s years in Germany was described, showing that the movement dominated the region where Erikson was raised and trained as an artist. German Expressionism emphasized the emotional expression and depiction of subject matter as opposed to technical accuracy. This information provided a sense of how Erikson was influenced by the philosophies and trends of the movement.

Following the topic of German Expressionism, the early history of the field of art education was described along with influential figures. This research displayed that progressive, child-centred, philosophies were becoming very popular leading up to the time when Erikson began his training in education. As well, findings showed that many pioneer art therapists were trained as art educators. By viewing the philosophies and methods of art education at the time Erikson was a student in the field, one could view how this background influenced Erikson’s own methods of therapeutic practice with children later on in his life.

An overview was provided on the history and practice of psychoanalysis during the time that Erikson was a student in Vienna. This information was given in order to develop the understanding of how Erikson was influenced by the field. Many psychoanalysts, such as Winnicott, Klein, and Kris, used art making in their practice (Hogan, 2001; Waller, 1991). Erikson became aware of the work of some of these individuals and was inspired by them.

The second chapter reviewed Erikson’s childhood and adolescent development. Findings showed that artistic skill came naturally to Erikson. He was drawn to visual art
as a child and excelled in the subject in secondary school (Erikson, 1975). As an adolescent he struggled with identity concerns. He wanted to be an artist, however he felt pressure from his family to choose a more “respectable” profession. Despite the wishes of his family, he continued into post-secondary training in the field of visual art. As an artist, Erikson was trained in Germany during the German Expressionist movement. A great deal of his artwork emphasized emotional expression as opposed to the constraints of ascetic appeal alone. Through this training he may have experienced the benefits of emotional expression through art making. His feelings of incongruence regarding his identity continued however. This research has shown that he became successful as an artist for a period of time. In one exhibit, on which information was found, Erikson’s work was viewed alongside the art of Max Beckmann and Wilhelm Lehmbruck (Friedman, 1999). He eventually became discouraged however, feeling that he would never be able to compete with masters like Michelangelo or Gustav Courbet, and he abandoned his path as an artist. He then made the decision to become an art teacher (Friedman, 1999). The struggle that Erikson experienced in discerning an identity as an artist, may be a phenomenon that many art therapists struggle with. Erikson later describes “an artist” as a way of being, able to tolerate creative-chaos, as opposed to a professional identity (Erikson, 1975). This definition of an artist coincides with how many art therapists perceive the artist. Perhaps the struggle that he experienced as an adolescent contributed to his extensive theories later in life on the topic of the adolescent identity crisis.

This research paper then describes Erikson’s journey to Vienna where he became a teacher in a school that held a child-centred philosophy. He learned how to appreciate
the emotional and psychological growth of children of all ages, as well as the role of play and art in their development. Apart from the subject of art, he included the use of art making and creativity in all of the subjects that he taught (Erikson, 1987). Findings indicate that he highly valued art making as a vehicle for learning, positive development, and self-expression. Art therapists also value art making for these reasons.

The process of how Erikson became drawn into the professional fields of education and psychoanalysis was also explored. Erikson’s tumultuous development was described, depicting how he decided to commit to the profession of psychoanalysis. This research found that Erikson would not commit to this profession however, until he felt secure that he could keep, and use, his artistic inclinations within his practice. During his training experiences within the fields of Montessori education and in psychoanalysis, he learned how to observe the development of children as individuals, along with discovering ways in which he could apply his artistic background. He identified himself as an artistic psychoanalyst (Friedman, 1999). Findings showed that he strongly valued the use of play and art making within therapy as a bridge to the unconscious world of his clients. One could wonder if he would have chosen to become an art therapist at this point if he had the option. Both Anna and Sigmund Freud expressed their full support and encouragement for Erikson to use his background in the visual arts within his psychoanalytic practice (Erikson, 1975; Friedman, 1999). The opinions of Anna and Sigmund Freud in this case, seem to support the use of art making within therapy.

The third chapter of this research paper focused on the theories and written work by Erikson. Throughout his life time, he was a very prolific scholar in regard to his written contributions. This research found ample evidence that Erikson valued and used his
background in visual art to further understand his clients. From the perspective of an individual who possesses academic training in both the fields of visual art and psychology, one can clearly view a conceptual thread throughout his written work that displays his use of experiential knowledge in the field of visual art. The first section of chapter three explored an academic paper Erikson presented regarding children’s picture books and how the images contributed to psychological and psychosocial development. Findings in this section indicated that he understood the impact that images can have on human development. For example, he believed that children who have already developed an overly-harsh super-ego may not benefit from viewing sadistic images of children being punished for misbehaving. He states his reasoning that these children may then experience the need to overly-punish themselves, resulting in a sense of low-self esteem and possibly cruelty towards others. This knowledge remains very valuable to practicing art therapists who wish to further understand the development of their clients in relation to the art work produced or viewed in sessions.

The section that followed examined Erikson’s extensive written work on the topic of children’s play and visual space. Findings showed that his attention toward the visual aspects of children’s play parallel ways in which art therapists view the creative process that occurs in art making. For this reason, art therapists may find value in Erikson’s writings on the topic of play.

In his writings, Erikson describes core beliefs that art therapists hold in their own practice, for example art making promotes healing, personal development, insight and emotional integration. Findings showed that Erikson thoroughly understood the value of art materials, toys, writing, symbolization, space manipulation, role experimentation, and
play configurations within a therapeutic frame. Erikson communicated his beliefs that visual imagery and play have the ability to bypass the defense system of the mind, providing access to the unconscious world of the client. He strongly believed in the benefits of observing concrete, visual imagery within a therapeutic framework, as opposed to verbal language alone (Erikson, 1987). He recognized that verbal therapy relies on the human memory, which is proven to be fallible. His strong opinions support the practice of art making in art therapy as opposed to traditional talk therapy. Erikson also wrote about how he applied the life-cycle theory of development to observations of children’s play.

The content of Erikson’s writings would be valuable to art therapists who are interested in further understanding human development though art making and play. Erikson’s writings could be a positive addition to the pre-existing literature on human development and art therapy. His writings would also benefit this literature base because the majority of the pre-existing knowledge on development and art is based on childhood alone, whereas Erikson’s life stages continue throughout the whole life-cycle. As well, Erikson included the influence of culture in how play and art making was interpreted. Many writings on art therapy and development do not focus extensively on culture and society as an influence to be observed in play and art making.

Erikson’s reflections from his unique perspective as an artist and psychoanalyst were presented on various topics regarding the visual arts. These topics included his definition of an artist; creative writing; dreams and psychoanalysis; life history of the artist; vision and psychoanalysis; and advice to an art therapist. Research displayed in this section found that Erikson personally understood the sense of creative chaos that many artists
often claim to experience. He directly stated that he enjoyed using his clinical writing, in
*Childhood and Society* for example, as a creative outlet for artistic and theoretical
expression (Erikson, 1975). An individual who reads Erikson’s work can gain clarity in
the understanding of his theories when he or she remains conscious of Erikson’s
perspective as an artist.

Erikson’s work is highly respected within the fields of psychology and
psychoanalysis. His written work provides high credibility to the use of concrete
imagery, created by the client, within therapy. This chapter displayed different ideas and
thoughts Erikson recorded about art and psychoanalysis.

The last chapter of this research paper explored the influence of Joan Erikson on the
work and professional development of Erik Erikson, throughout his life. This researcher
found that Joan Erikson was a very bright scholar and artist, who had an extremely strong
influence on her husband’s career path and his written work. It is this researcher’s belief
that he would not have been so prolific in his lifetime had she not been there supporting
him. A brief biographical background of Joan Erikson was provided, including her
academic focus.

Joan Erikson’s written work was explored, demonstrating her ideas and opinions
regarding “art” and “therapy”. Findings from this area of research determined that Joan
Erikson was aware of the profession of art therapy by the 1970s; however she may not
have fully understood how the profession was being practiced. She presented as a key-
note speaker for the American Art Therapy Association conference and published her
lecture in 1979 in the *American Journal of Art Therapy*. Within this article, she stated
that she did not agree with the term *art therapy* because she felt that the word, therapy,
placed emphasis on an individual’s illness. She preferred to pair the words, art and healing, because this combination focused on the positive strengths of people, and their ability to grow through art making and creativity.

Joan Erikson’s opinions instigated some debate over the term, art therapy. Another article was published in the journal issue that followed, contesting Joan’s belief that art therapy focused more on illness than on healing and growth. Author of the article, Linda Gantt (1980), stated her belief that the practice of art therapy did place emphasis on healing and growth, and that regardless of the words used to describe the practice, Joan Erikson and art therapists were portraying the same profession. These findings indicate that Joan Erikson preferred not to use the term “art therapy”, which may be the reason why the term was not mentioned in any of her earlier work, if she had known about the profession.

The work that both Joan and Erik Erikson accomplished together was described in the section that followed. This research found that Joan and Erik Erikson had developed the life-cycle theory together (J. M. Erikson, 1988) Erik Erikson is very well known for this theory that entails a series of developmental stages that each individual is believed to pass through, during his or her life. Contemporary lectures and textbooks in the field of psychology neglect Joan Erikson’s involvement in the development of this theory that made her husband so famous. This lack of fair credit may have been due to gender inequality in 1950s American culture. Societal expectations placed many women in the home to care for their children, while their husbands worked outside of the home.

Women supported their husband’s in their careers, as this was the main source of income
for families. On a number of occasions, Joan sacrificed her own professional growth for
the sake of supporting her husband’s career.

The next section demonstrated how Joan Erikson, with the full support of her husband,
developed and implemented a full activities program that emphasized the use of art in a
therapeutic setting. This program was based on the life-cycle theory that was
conceptualized by Joan and Erik Erikson. Erik Erikson stated that he considered himself
to be a participant-observer within the program. For the convenience of individuals who
may wish to implement a similar program in other treatment facilities, Joan Erikson later
wrote a book about the program titled *Activity, Recovery, Growth: The Communal Role
of Planned Activities* (1976). Based on the accounts found within this book, this research
paper described the development of the activities program, including the description of
the life-cycle theory on which the program was based. Mental health care practitioners
may find this book interesting as it displays the benefits of art making for each phase of
human development. The visual arts component of the activities program was explored
in more detail, including a description of the studio space and ways in which the visual
arts were implemented. The practice of art therapy was not mentioned in this book
however; because the program was implemented in the 1950s, the staff may not have
been aware of art therapy, or may not have understood the profession.

It is this researcher’s belief, that although the program was created over five decades
ago, it could still be used as a valuable model for contemporary art therapists who are
developing treatment programs. In 1988, Joan Erikson published a book on the topic of
creativity and human development. This book outlines each stage of the life-cycle and
provides ways that creativity can be used to assist individuals in their developmental
process. This piece of literature also supports the use of art making to promote healing and growth. Joan Erikson’s written work consistently supports the use of art making to promote human development. The belief that art making has the potential to facilitate healing and growth within individuals, lies at the very core of the current practice of art therapy. Therefore, although Joan and Erik Erikson did not call themselves art therapists, or name what they were doing as art therapy, their underlying goals and intentions do coincide with the current practice of art therapy.

This exploration of Erik Erikson’s life and work as an artist and psychoanalyst consists of many avenues that could not be explored due to the large amount of longitudinal data. As well, not all resources that were found were available to view. As mentioned in the introduction, sources that were not explored include a film interview of Erikson, by Davidson Films. This film was not viewed because it was not accessible to the public, and the researcher was unable to obtain it otherwise, due to financial constraints. Erikson’s art exhibit at the Glaspalast could not be further investigated, as the original gallery burned down in 1926 (Haus der Kunst, 2006). Erikson’s original woodcuts are not yet available for viewing; however a book displaying this collection is currently in the process of being created. Further exploration in the areas of Erikson’s play configurations and cultural components of his work would be of great benefit to this topic of research. Further areas of Joan Erikson’s work would be of interest as well, in regard to the topic of this exploration, such as her theories regarding the life stages and the creative process, as well as the activities program that she was involved in at Mt. Zion hospital in San Francisco.

A historical context has been provided within this research paper in which the subject
has been placed. Areas of research that have been presented include: relevant artistic movements, social context, and information pertaining to the professional fields of art education, psychoanalysis, and art therapy. However it would have exceeded the limits of this Master’s level research paper to cover each of these aspects to the fullest extent.

Through my research, I have sought out internal consistencies regarding time lines, dates, and personal accounts of events, within the subjective resources that were explored. As previously mentioned, this method coincides with the neo-idealist Theory of Coherence (Hughes, 1994). Finally, as I was unable to directly find the answers to my question from Erik Erikson himself, I must state that I am unable to discern absolute truth in my findings. Hughes (1964) states that the historian can rarely discern the truth without a shadow of a doubt. There is a strength however, that historians have found, and that is being able to discern what is not true. It is my hope that after reading this research, individuals in the field of art therapy will be more inclined to further investigate the life and work of Erikson. Based on my positive and negative findings regarding this research topic, I hope that other researchers will be able to continue the expedition, exploring the reasons why Erik Erikson should be viewed as an influential resource for current art therapists.

Despite the stated limitations, the combination of findings displayed throughout this research paper strongly support the hypothesis that Erikson’s early training and experiential knowledge as an artist influenced his observations, theories and clinical practice later in his life. Many of the methods and underlying philosophies he held in regard to his clinical practice, parallel those found within the profession of art therapy. Therefore, this research is relevant to the field of art therapy and his written work could
be viewed as a valuable resource for contemporary art therapists.

As an art therapy student myself, I connected with Erikson’s early conflicts regarding professional identity, feeling torn between the fields of art and psychology. I realize how fortunate I am that the profession of art therapy now exists so that I can identify with one hybrid field as opposed to Erikson, who had to choose one identity over another. I wonder if Erikson would have chosen the profession of art therapist if training had been available to him at the time. I believe he may be an example of many other professionals who have had to choose between the fields of art and psychology, before the field of art therapy came into existence. Although Erikson identified himself as a psychoanalyst, this research demonstrated that he never parted from the artist within himself. He refused to commit to the profession of psychoanalysis until Anna and Sigmund Freud expressed their support that he become an artistic psychoanalyst who “might help to make them see” (Erikson, 1975). He incorporated his artistic and creative strengths into his therapeutic practice and writings throughout his lifetime. He extensively wrote and studied on the topic of creativity and play, including art making. His literature strongly supports the value of art making and play within a therapeutic frame.

This researcher has read through a great deal of Erikson’s written work, consciously keeping in mind his background training, and experience as an artist, and being sensitive to the ways in which this background influenced his observations within his clinical practice. By viewing his work in this way, one can see how he succeeded in using his observational skills and experiential knowledge as a visual artist to enhance his ability to understand the unconscious worlds of his clients. As a whole, this Master’s level research paper contributes to the field of art therapy by identifying Erik H. Erikson as a
major indirect supporter of the profession of art therapy. His written contributions strengthen the credibility of the practice of art therapy in comparison to verbal therapy. This information possesses the potential to broaden insight and to enhance the ways in which contemporary art therapists practice art therapy. Most importantly, this research brings tremendous awareness to an extremely valuable compilation of clinical observations and knowledge that applies to the profession. It is this researcher’s hope that the work of Erikson will be utilized to strengthen the field of art therapy. Art therapist’s may continue Erikson’s life-long quest of helping “to make them see”.
References


