Art Therapy Online: ATOL

That's how the light gets in

Terry Molloy

Abstract: This essay is a mainly visual response to time spent walking the corridors of psychiatric institutions and reflecting upon how certain features of their architecture embody different and often opposing aspects of their original purpose. The formative years of many art therapists' careers have been spent trying to offer some form of therapeutic service in such institutions and I imagine that the issues of compromise referred to will probably strike a few chords.

<u>Key words:</u> Psychiatry, institutional, corridors, light, dark, transitory, balance, compromise, repressive.

During my career as an Art Psychotherapist in the NHS I frequently walked through the long corridors of psychiatric hospitals situated within the walls of 19th century asylums.

The warm colour and decorative patterns of woodblock flooring and the glossy sheen of ceramic brickwork had often been replaced with vinyl tiles and a thick coating of dull antigraffiti paint. What had often been retained intact were the original windows, growing ever smaller down the corridor as if being viewed through a reversed telescope. The windows were the only source of natural light that entered the building in these times before the roof-lights, atriums and the indoor gardens of modern hospital architecture. On days when there was little sun outside, the corridors seemed cold, monotonous and bland and my journeys to various parts of the hospital were experienced as tedious and lengthy.

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Fig 1

One of my responses to this tedium was to take photographs of the corridors, as in Fig 1. I always carry a compact camera in my pocket, resulting in the seemingly random collection of many images. My initial visual interest here was the opportunity the images offered to observe the phenomenon of perspective along a fair distance. I also reflected on how empty these spaces were, considering it was the middle of the day in a building that contained several hundred people.

I collected many of these images and did not do much further work with them until one day I happened to be walking down a corridor when the winter sun was low in the sky and particularly bright. The space was dimly lit overall and I felt a general sense of confinement. However, the darkness was pierced by bright shafts of sunlight coming through the windows and projecting the pattern of the small panes of glass on to the wall and floor opposite. The anti-graffiti paint on the walls seemed to break up the sharpness of the light and lent a rather painterly quality to the shapes formed.

Some of the photographs I took of this phenomenon are illustrated below. (Figs 2,3 & 4). I altered the colour balance and contrast of the images in an attempt to communicate the coldness and emptiness I experienced in these spaces. (Figs 2,3 & 4)





Fig 2 Fig 3

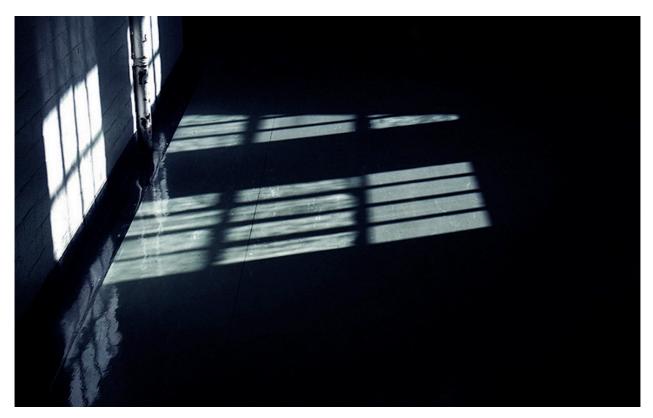


Fig 4

The windows are of a tall sash type, similar to those in many Victorian institutions. The design of the window can also be seen to serve a purpose related to the original use of the building; to admit light but to provide some form of security by setting small panes of glass in a sturdy, locked frame.

As I walked the corridors, these patterns of muted sunlight were to draw me back many times and I amassed a considerable number of photographs of them. There was an attractive simplicity about the images and they seemed to evoke a sense of visual depth far beyond their basic geometrical patterns.

It felt good to find something satisfying and aesthetically pleasing in these dark corridors. It reminded me of the same sort of pleasure that I had found sitting alongside people who had no training or background in art, who were beset with many difficulties in their lives but nevertheless were able to find a strand of creativity with which to produce their art. I began to think of ways in which I could develop the images further.

One of the photographs struck me as encapsulating aspects of both eras of the institution, old and new. The original window shape forms a clear pattern on the modern vinyl floor and then fades into a misty, ghostly image on the original interior brickwork painted over with anti-graffiti paint. (Fig 5)



Fig 5

I took this image to a printmaking course I was attending at the time and the tutor commented that its' qualities seemed potentially suited to the process of photo-etching. The first step in this process is to produce a positive version of the image, as shown below, and to transfer it to film. (Fig 6)

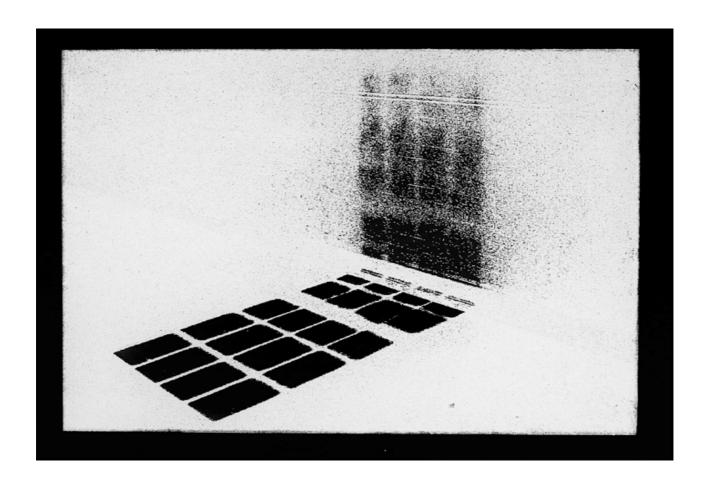


Fig 6

When the positive image is used to produce a photo-etching negative, the previously light areas become opaque and the once dark areas become transparent. When the plate is exposed and then processed, it emerges with the previously light areas as smooth and shiny metal and the previously dark areas pitted and dulled by the acid. The ink sticks in these pitted areas but is wiped away from the shiny surface resulting in, when the plate is printed, the original chiaroscuro of the image being restored.

This process of areas of the image going from light to dark and back again put me in mind of the struggle to reconcile the desire to admit light and a sense of liberty with the darker, repressive requirements of a closed institution.

It also reminded me of the ephemeral and sometimes fleeting nature of the images created by the projected sunlight. On occasion, I would take out the camera to capture an image only for the sun to go behind a cloud and make the shape of the window disappear. I would be left hovering, waiting for it to return when the cloud moved on; sometimes it did, sometimes not.

Or it would return in a diluted, barely discernable form or as a flickering, fleeting image produced by thin wispy clouds blown by high winds passing in front of the sun. Perhaps this is in the very nature of the institution; it is filled with people who are caught in the darkness of depression or psychosis, waiting for the light to return.

These variations in contrast also came into play during the printing process. Prior to printing an etching, the whole surface of the plate is covered in ink, which is then wiped away to gradually reveal the image. Too little wiping results in white areas looking dirty; too much reduces the intensity of dark areas. This somewhat lengthy technical process, requiring the taking of many proof copies and subsequent re-working of the plate, sometimes seemed irksome and demanding and a considerable distance away from the instant capture of a transitory image.

It also emphasized for me one of the principal essential tasks of all visual art processes; learning how to capture, contain and manipulate light. In etching, as with many art-making processes, one is always treading a fine line between light and dark, and between free expression and discipline. Two prints from the plate are illustrated below. (Figs 7 & 8)

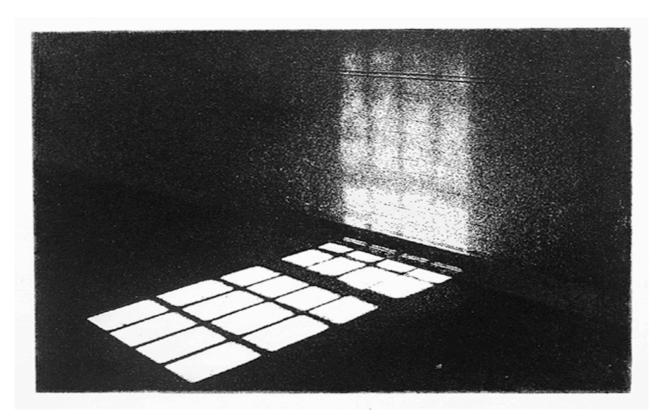


Fig 7



Fig 8

Others on the course expressed interest in the prints, saying they were attracted by the simplicity and strength of the image. Although I eventually revealed the source of the original photograph, some had used words such as 'grim' and 'sinister' even before this information was imparted. I was left wondering if similar feelings were part of my unconscious processes when taking the photographs.

Over the years of my work in psychiatry I had often felt angry and overwhelmed by the way in which some of the more repressive aspects of institutional psychiatry were making it very hard to foster any sort of creativity in those I was working with. In my choice of subject and medium was I deliberately painting a grim picture?

However, as I developed aspects of some of the other original photographs further, I also recalled many other times that I had worked with people who were making real progress in moving towards rebuilding their lives and producing interesting and creative artwork as part of this process. Playing with the light and dark as I worked with the photographs became a way of reconciling opposing thoughts and feelings.

Some images created from the photographs, such as the ones below, (Figs 9, 10, 11 & 12) are directed by more conscious thoughts and memories of the institutions. The dark and emotionally austere disturbed past held in the walls is sometimes emphasized but sometimes balanced with a desire to admit light and colour into the long, narrow and restricted places.



Fig 9



Fig 10



Fig 11



Fig 12

The remaining images (Figs 13, 14, 15 & 16) are driven by a more aesthetic approach where the shapes, colours, light and dark become almost abstract elements in their own right to be considered and manipulated.

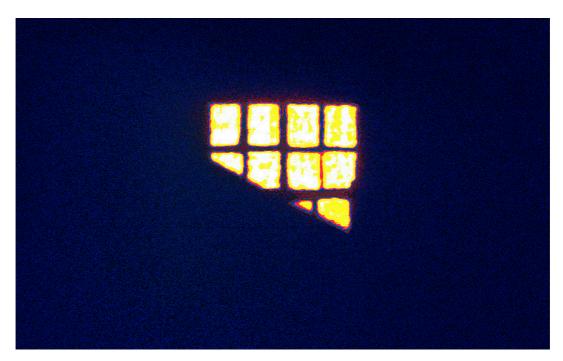


Fig 13



Fig 14

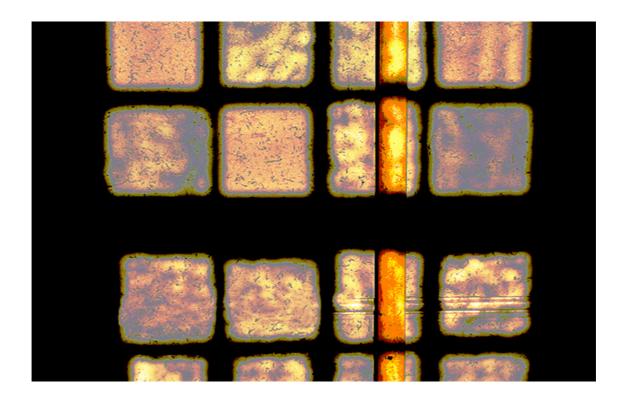


Fig 15



Fig 16

When looking through the images the variations in the use of light, colour and texture and, subsequently, the variations in mood produced by manipulating these elements reminded me of similar variations in mood that I had experienced when working in these institutions.

At times, I had felt like a fraud – working within and for a system of institutional psychiatry to which I felt completely opposed. In turn, trying to do something creative with photographs of an institution with such a dark, repressive past felt, at times, like feeding on the tragedies of others and gave me similar feelings I've had when admiring the photographs of war, death and poverty taken by prize-winning journalists. Taking pictures rather furtively in empty corridors also began to feel rather voyeuristic. On reflection, perhaps this voyeurism is a discomforting but undeniable aspect of wanting to become a therapist in the first place.

I suppose working with the images helped me think more about the issue of compromise. Sometimes compromise can be a way of avoiding discomfort about things that really need urgent attention, or a way of avoiding pain that really needs to be faced. But sometimes compromise is also the only way to create a free space where creative acts can happen, as in practising art psychotherapy in psychiatric institutions.

It put me in mind of the early custodians and psychiatrists who governed these institutions. Many of them, despite their reforming ideals, were still to be counted amongst the executives of a repressive social and political system. Given their elevated and socially powerful positions, it could be argued that their charitable and benevolent thoughts were a typical example of British colonialism transported into a medical setting. On the other hand, perhaps patients would still be manacled in darkened rooms if it were not for some of these individuals persuading others in the system to countenance the idea of change. I was reminded that Art Therapy was also helped, in it's early days, by support from within the psychiatric profession. To this day, successful work in the NHS still requires therapists to perform a juggling act that hovers between compromise and capitulation.

Perhaps the artwork shown here can be seen as a visual representation of coming to terms with compromise and moving forward. I feel it is well expressed in the Leonard Cohen song 'Anthem'.

Don't dwell on what has passed away or what is yet to be......

Ring the bells that still can ring Forget your perfect offering There is a crack in everything That's how the light gets in. (1)

Inside psychiatric institutions life has been and still can be pretty dreadful for many. These places are imperfect, and people have to struggle to both live and work in them. Perhaps it is this struggle that produces cracks where the light can get in.

References

(1) http://www.azlyrics.com/lyrics/leonardcohen/anthem.html

Biography

Terry Molloy has been working in the field of Art Therapy for over thirty-five years. His clinical experience began in Special Education Needs, mainly in EBD schools with some additional work in learning disabilities and physical handicap. Later he worked at a residential unit for severely disturbed adolescents using a therapeutic community model. Following this was appointed Head Art Therapist at a large psychiatric hospital. He was also a core member of staff for Art Psychotherapy training at Goldsmiths College for 15 years. He was actively involved in the British Association of Art Therapists (B.A.A.T.) from its early days, being a council member for several years and vice-chair for two.